

Braehill Lodge Care Home Service

2 Balmachie Road
Carnoustie
DD7 7SR

Telephone: 01241 852 534

Type of inspection:
Unannounced

Completed on:
21 January 2026

Service provided by:
Braehill Limited

Service provider number:
SP2003000045

Service no:
CS2003000384

About the service

Braehill Lodge is a care home for older people situated in a residential area of Carnoustie. It is close to local transport, shops, and community services. The service provides residential care for up to 24 people. There were 19 people living at the service at the time of this inspection.

Accommodation is arranged over two floors, in single bedrooms with en-suite facilities. There are two lounges, bathroom, dining room, and activity room for people to use. The service has an accessible landscaped garden to provide outdoor space for people to enjoy.

About the inspection

This was an unannounced inspection which took place on 14 January 2026, 15 January 2026 and 16 January 2026. The inspection was carried out by two inspectors from the Care Inspectorate.

Our inspection on 23 October 2025 raised significant concerns in relation to how people's health, welfare and safety needs were met and we issued an Improvement Notice on 28 October 2025. For further details of this enforcement see the service's page on our website at www.careinspectorate.com.

The purpose of this inspection was to assess what improvements the provider had made in response to the Improvement Notice, and to follow up on one outstanding requirement and one area for improvement made at our previous inspection.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- Spoke with 10 people using the service.
- Spoke with four families.
- Spoke with staff and management.
- Walked round the building.
- Observed practice and daily life.
- Reviewed documentation.

Key messages

- We issued the service with an Improvement Notice on the 28 October 2025, following concerns identified at our inspection in October 2025. For further details of this enforcement see the service's page on our website at www.care.inspectorate.com.
- We followed up on a requirement we made at our last inspection and found the service had not made sufficient or sustained progress to ensure people experience care in a safe environment. We had significant concerns about infection control practices within the home.
- We followed up on an area for improvement made at a previous inspection and found the improvement plan lacked evidence that people had been meaningfully involved in contributing their views. It also did not reflect recent inspection findings.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 5 January 2026, the provider must ensure people experience care in an environment that is safe.

In order to achieve this, the provider must as a minimum:

- (a) Ensure people do not have access to high-risk areas of the home that could put people at risk of harm, such as the kitchen unsupervised.
- (b) Undertake a risk assessment regarding the stairs and take appropriate actions to keep people safe.
- (c) Carry out a review of people's bed rails to ensure people are not at risk of entrapment.
- (d) Ensure all pieces of large furniture are secured to prevent them falling.
- (e) Review all notice boards to ensure information is current and accurate.

This is in order to comply with Regulation 3, Regulation 4(1)(a), Regulation 4(1)(d) and Regulation 10 (b) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My environment is safe and secure'. (HSCS 5.19).

This requirement was made on 23 October 2025.

Action taken on previous requirement

At the time of the inspection the home was in an active outbreak of infectious illness. There had been people with respiratory symptoms and people with vomiting and diarrhoea.

Environmental safety was compromised by inadequate infection prevention practices. Staff were frequently observed entering isolation rooms without wearing appropriate personal protective equipment (PPE) and breaching basic hand hygiene procedures.

There was no evidence of regular cleaning of regularly-touched surfaces or rooms where people were isolated during an active outbreak. Appropriate cleaning products were not being used to reduce transmission. This exposed people to increased infection risk.

People did not have access to high-risk areas such as the stairs and kitchen. However, staff lacked

awareness of who was isolating and what precautions were required. This meant people and staff were at higher risk because appropriate controls to reduce the risk of infection were not in place

A stair gate had been installed to keep people safe, and a risk assessment regarding the stairs had been undertaken.

We found that large pieces of furniture had been secured to prevent them from falling. This helped to keep people safe.

We observed bedrails and bumpers incorrectly positioned for one person, creating a risk of entrapment. Staff had not identified or addressed this risk.

The activity board was outdated and inaccurate. Isolation signage was inappropriate, undignified, and revealed confidential health information before being changed following inspector feedback. These breached people's dignity and privacy.

The service had not demonstrated sufficient or sustained progress towards ensuring people experience care in a safe environment.

This requirement has not been met and will be extended to 4 March 2026.

Not met

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To ensure people benefit from a culture of continuous improvement, the provider should develop a service improvement plan, this should be created with input from the people who live in the home, their families/representatives, staff, and stakeholders.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19).

This area for improvement was made on 2 September 2024.

Action taken since then

An improvement plan has been developed, however, it was not reflective of our findings during the inspection, and there was limited evidence of consultation with people or their families who use the service.

This area for improvement has not been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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