

Gilmerton Neurological Care Centre Care Home Service

Gilmerton Nursing Home
9 Moredunvale Road
Edinburgh
EH17 7QU

Telephone: 01316723337

Type of inspection:
Unannounced

Completed on:
31 March 2026

Service provided by:
Gilmerton Care Limited

Service provider number:
SP2024000322

Service no:
CS2025000185

About the service

Gilmerton Neurological Care Centre is in a residential area of south Edinburgh, close to local shops, services and bus routes.

The service is provided by Alor Healthcare Limited and aims to 'provide specialist care and rehabilitation for adults with neurological conditions and acquired brain injuries, helping each individual regain independence and live a fulfilling life'.

The neurological unit is stand-alone within a larger care facility, with access to its own staff and shares the catering and laundry facilities with Gilmerton care home.

The centre has a shared reception area, with 15 ensuite bedrooms, communal shower and bathing facilities, communal lounge and dining room. There is also an enclosed garden, sensory room and multi-purpose gym space.

At the time of the inspection, 15 people were living in the home.

About the inspection

We carried out an unannounced inspection from 24-26 March 2026 from 0830-1900 hours. The inspection was carried out by two inspectors from the Care Inspectorate.

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

In making our evaluations of the service we:

- spoke with six people and received feedback in four questionnaires for people living in the home;
- spoke with seven relatives and received feedback from five relatives via questionnaires;
- spoke with 11 staff and management and received feedback in questionnaires from 17 staff;
- spoke with or received feedback from four external professionals;
- observed practice and daily life; and
- reviewed a wide range of documentation including care plans, quality assurance records and medication records.

Key messages

- People experienced a person-led service tailored to their needs with a strong focus on recovery, strengths and outcomes focussed partnership working and "making better days for people living at the home".
- Clinical oversight was exceptionally robust and effective ensuring positive outcomes for people, with a highly responsive leadership.
- People described staff as compassionate, skilled and supportive.
- The home was welcoming, homely, clean and well maintained with recent refurbishments.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

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|--|---------------|
| How well do we support people's wellbeing? | 6 - Excellent |
| How good is our leadership? | 6 - Excellent |
| How good is our staff team? | 6 - Excellent |
| How good is our setting? | 5 - Very Good |
| How well is our care and support planned? | 5 - Very Good |

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

6 - Excellent

We evaluated this key question as excellent, where we found exceptional strengths in aspects of the care provided and how these supported positive outcomes for people.

People experiencing care told us they felt safe, listened to and well supported and that staff treated them well. One person commented the team "work well with me helping me achieve my goal to go home".

Feedback from relatives was wholly positive, describing their relations as "receiving the best care available to them" and confirmed "everything is in place for our relative to keep them happy and content."

There was consistently strong nursing leadership within the home, and we observed exemplary collaboration with external professionals, including GPs, social workers and allied health professionals. This ensured people experienced the highest standard of coordinated healthcare. Clinical care and key areas of risk, such as nutrition and skin integrity, were monitored rigorously using a range of assessment tools and audits. Monthly clinical risk meetings provided robust oversight, enabling the team to review people's progress in detail and respond promptly to any emerging needs. As a result, people benefited from timely, well-informed interventions delivered by the right professionals, underpinned by a thorough and holistic understanding of their health and wellbeing.

We saw robust evidence that medication management was safe and effective. Staff adhered to prescriber guidance and daily nursing presence, audits, protocols and regular competency assessments ensured staff administering medication were skilled and confident in their practice. This meant people could be assured necessary systems were in place to help them take their prescribed medication safely.

We observed an exceptionally positive and well-coordinated dining experience that promoted dignity, choice and enjoyment. Seating arrangements were thoughtfully planned and respected people's preferences, helping create a relaxed and inclusive atmosphere. Staff offered people freshly prepared meals with a wide range of options that reflected individual tastes, cultural backgrounds and dietary needs. Kitchen staff demonstrated excellent knowledge of each person's dietary requirements and ensured that all specialised diets were catered for appropriately. People told us they thoroughly enjoyed the food and we saw staff offering snacks and drinks regularly throughout the day. Fresh, chilled drinks were readily available in bedrooms and communal areas, ensuring people's hydration and nutritional needs were consistently and proactively met.

The service offered an extensive rehabilitation programme delivered by a dedicated and enthusiastic team from Monday to Saturday. People had individualised programmes that promoted their strengths and supported recovery. This enabled people to get the most out of life with opportunities to maintain, develop and explore their interests, strengths and skills. We saw strong links with community resources such as libraries, gyms, hydrotherapy, adapted cycling as well as everyday activities like going for coffee and shopping. As a result, almost all people's health and wellbeing benefited from meaningful stimulation, social contact with others and consistently positive outcomes.

People could choose how to spend their day, including spending quieter time in their bedrooms. One person told us "there are always things going on, I only go to activities that interest me. I prefer to go out and about" meaning they felt listened to and treated respectfully.

Visitors and families were welcomed warmly into the home, which helped ensure people could connect with those who were important to them.

We heard positive stories where staff supported people's transitions from the unit into alternative accommodation. A staff member told us "the team give our resident the best... so they can go back to the community".

How good is our leadership?

6 - Excellent

We made an evaluation of excellent for this key question, where exemplary leadership practices supported positive experiences and outcomes for people which were of a high quality.

A range of comprehensive, well maintained quality assurance processes were in place which ensured the management team had excellent oversight of the care delivered to people. This enabled people to have confidence that their care was being monitored and managed effectively.

The leadership team demonstrated a clear and consistent commitment to making improvements and maintaining the safety and wellbeing of people experiencing care. There were regular meetings across various departments with high standards of documentation and well-structured action plans.

There was a positive culture of continuous learning and improvement within the service. We saw evidence of reflections on feedback, any complaints, incidents and accidents and involving people and staff as much as possible. The service routinely sought feedback from people living at the home, their relatives and staff and there were numerous examples of compliments received from relatives and carers.

The service's self-evaluation alongside the extensive internal quality audits informed a well written and comprehensive service development and improvement plan. The manager showed passion and commitment to ongoing development of the service.

Leadership was described as approachable, supportive, responsive, and highly visible. This supported staff to voice their concerns, share ideas and promoted resilience-building discussions. Staff told us they felt valued and recognised by the management team, which contributed to high levels of job satisfaction and a positive working atmosphere. The manager and leadership team were highly visible in the service, modelled the practice they expected, and this supported excellent outcomes for people using the service. Health professionals told us that "leadership responds appropriately to concerns and engages effectively" and communication was continuous and responsive.

The manager and senior staff team were proactive and responsive to feedback offered during the inspection, readily acting on any ideas for improvement where suggested.

How good is our staff team?

6 - Excellent

We evaluated this key question as excellent where staff supported excellent outcomes for people's health and wellbeing.

The atmosphere in the home was calm and positive, and we saw exceptionally warm, dignified and good-humoured interactions between staff and people. People told us that they had positive relationships with the staff who supported them with genuine care and empathy. One person told us, "I feel I can speak about anything to staff" and another person noted "I get on well with the staff." This meant people benefited from

building trusting relationships with the people supporting them and contributed to the highly positive atmosphere within the home.

Relatives shared exceptionally positive feedback, with many strongly agreeing that their family member was safe, valued and receiving high-quality, dignified care. Comments highlighted the consistently compassionate approach from the team, with one relative noting that all staff "all care and nothing is too much trouble." This reflected a deeply embedded culture of kindness, professionalism, and continuity within the service, where strong relationships and a genuine commitment to people's wellbeing were clearly evident.

There was a vibrant spirit of teamwork across the service. The atmosphere was welcoming and supportive, where everyone's strengths were valued. We saw clear evidence that staff supported one another and worked well together. This supported a positive environment and contributed to positive outcomes for people experiencing care. A staff member told us "Gilmerton Neurological Care Centre is a wonderful place to work" and "the care given to residents comes from a place of kindness and a genuine desire to make a positive impact."

There were robust and well managed recruitment processes in place, meaning people could be confident that staff were recruited in line with safer recruitment guidance. The processes were well organised and demonstrated procedures were followed consistently. To ensure people's safety, staff did not start work until all pre-employment checks had been concluded. Staff told us they felt well supported by a comprehensive induction programme.

We saw a highly motivated, dedicated and well-trained multi-professional staff team. There was a strong ethos of support, supervision and ongoing development for staff with high levels of specialist training aligned to people's needs, for example understanding acquired brain injury, Namaste and cognitive rehabilitation. Staff reported feeling well equipped for their roles which meant people could be confident a competent and skilled staff team supported them.

The service made excellent use of dependency assessments that looked at a wide range of meaningful factors to understand each person's level of support. This meant staffing levels were always planned in a way that matched people's needs and could be adjusted when required.

During our inspection, we saw there were always enough staff available, and they were deployed in a way that allowed them to provide compassionate and timely care as well as spend quality time engaging meaningfully with people.

We also saw a strong commitment to helping people stay connected with their local community, and this was only possible because staffing levels were consistently well managed. Overall, people benefited from a safe, responsive service where staff had the time and capacity to support them well.

There was a very strong and well-structured supervision system in place for all staff. This included regular observations of practice, annual appraisals and frequent supervision sessions, all supported by high-quality records. The manager told us that the current supervision template is under review to ensure reflective discussions were captured even more effectively. This demonstrated a commitment to continuous improvement and supporting staff to deliver excellent care.

How good is our setting?**5 - Very Good**

We evaluated this key question as very good, where there were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

The care home was welcoming, very clean and free from intrusive smells. Furnishings and décor contributed to a comfortable, homely and personalised living space. People strongly agreed they lived in a clean and comfortable, homely environment and had their room the way they liked it. Visitors consistently described the home as "Always spotless", "Always fresh smelling" and "Well maintained".

The hallways were bright, spacious enough and clear of trip hazards, meaning they were safe for people to move around freely. During inspection we saw people choosing where to spend their time in both lounge areas as well as their bedrooms, in line with their preferences for quiet activity, social interactions or meaningful engagement.

Bedrooms were warm, welcoming and highly personalised; decorated to reflect people's individual tastes and preferences. They provided enough space for any equipment people needed and were clean, bright, and comfortable. En-suite toilet facilities supported people's privacy and dignity and individuals could choose when they wished to shower or bathe, in line with their preferences and daily routines. In some bedrooms, specialist equipment to assist moving and handling and environmental control systems were available. This helped promote people's independence and ensured they received support in a safe and dignified way.

People had access to a secure garden from the lounge area. The garden had lawn and patio areas with planters. There were seasonal themed events planned and the manager confirmed further improvements were underway.

The dedicated housekeeping team maintained an exceptionally high standard of cleanliness throughout the home. This was supported by monitored cleaning schedules and robust infection prevention and control practices. As a result, people experienced positive outcomes from clean, tidy, and well-maintained premises, furnishings, and equipment.

We reviewed maintenance records and health and safety certificates and found these to be in very good order. The maintenance team completed regular facilities-based checks and kept records of works required and completed with clear management oversight and review. This included evidence of regular equipment, amenities and appliances safety checks, legionella and water sampling, fire safety action plans and drills. These demonstrated a strong commitment to compliance and proactive risk management.

How well is our care and support planned?**5 - Very Good**

We evaluated this key question as very good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People told us they felt listened to, had strong involvement in personal decisions about their care and could choose who else is involved. A relative told us they "Have always been involved in what's happening in the home" and external professionals noted that staff "have extensive knowledge regarding the people they have", which reflected a confidence in the team's understanding of individual needs.

Personal plans were detailed, person-centred and outcomes focussed. They placed the person at the centre and offered a high level of detail about their individual needs, abilities and preferences, alongside clear guidance for staff on how best to support them. This meant people could feel confident that staff had the necessary information to deliver safe and personalised care and in accordance with their preferences.

People told us they felt their goals were understood and supported by staff. We saw clear evidence where staff advocated strongly for people, requesting multi professional input. We saw several examples of collaborative partnerships where people, their families, the dedicated care home team and outside professionals all came together to support positive and personalised outcomes.

Staff had completed a range of risk assessments, with robust systems in place for monitoring people's health where needed. This ensured staff knew how to keep people safe with a proactive response to changing needs. It was positive to see staff used various risk assessments to support positive risk taking for some people. This helped people get the most out of life because staff believed in people's potential and demonstrated an enabling attitude. Where equipment was required for people's safety, we saw clear records of the discussions and decision making with appropriate measures in place to review this.

Staff had completed do not attempt cardiopulmonary resuscitation (DNACPR) documents where this was appropriate and these were clearly recorded. We noted that not everyone had an anticipatory care plan (ACP) in place. We discussed with the manager the importance of recording when an ACP is not felt suitable, so that this decision is clearly documented and reflects best practice. This will help ensure people's future care wishes are understood and respected.

We observed staff had completed formal reviews with people, their representatives and multi professional input where appropriate. These were clearly recorded, with a firm focus on progress and achievements and any changing needs. This ensured the personal plans remained current and continued to support positive health and wellbeing outcomes. Where individuals were not fully able to express their wishes and preferences, the appropriate legal documentation was in place to safeguard their rights. However, we discussed with the manager the need to strengthen how people's involvement is evidenced when they are unable to attend in person. We will check progress with this at the next inspection.

The quality of daily written records and some supporting documentation used to evaluate care, showed some inconsistencies. While staff kept handwritten full day entries up to date, these could be more detailed and comprehensive. We spoke with the manager who confirmed training was planned to improve accuracy and completeness of daily notes; this will support better continuity of care and provide a more reliable record for audit and regulatory compliance. This will also support the service's planned transition to a digital care management system. We will check progress in this area at our next inspection of the service.

Complaints

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

Detailed evaluations

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| How well do we support people's wellbeing? | 6 - Excellent |
| 1.3 People's health and wellbeing benefits from their care and support | 6 - Excellent |
| How good is our leadership? | 6 - Excellent |
| 2.2 Quality assurance and improvement is led well | 6 - Excellent |
| How good is our staff team? | 6 - Excellent |
| 3.3 Staffing arrangements are right and staff work well together | 6 - Excellent |
| How good is our setting? | 5 - Very Good |
| 4.1 People experience high quality facilities | 5 - Very Good |
| How well is our care and support planned? | 5 - Very Good |
| 5.1 Assessment and personal planning reflects people's outcomes and wishes | 5 - Very Good |

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