

# Balhousie Ruthven Towers Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
2 October 2024

**Service provided by:**  
Balhousie Care Limited

**Service provider number:**  
SP2010011109

**Service no:**  
CS2010272073

## About the service

Balhousesie Ruthven Towers nursing home is centrally located in the town of Auchterarder, Perthshire. The service is owned by Balhousesie Care Group and provides residential and nursing care on a permanent and short-term respite basis.

The home is registered to provide care for 51 people. The service is based over five floors in a substantial Victorian mansion house, which has been extended and adapted to provide accommodation for people requiring nursing and residential care. The building sits in its own grounds and is well maintained and accessible.

The home is close to the town centre, local shops and bus routes. The service brochure states: "We understand that each individual is unique, with personal likes, dislikes, needs and wants. We therefore tailor our approach and service based entirely on each individual."

## About the inspection

This was an unannounced inspection which took place on 2 October 2024. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about the service. This included previous inspection findings, registration information, information submitted by the service, and intelligence gathered since the last inspection.

The inspection focussed on management arrangements following the recent departure of the service manager and deputy manager. We also examined the service's procedures and practice related to:

- Medication administration and timing of medication.
- Food and nutrition, including textured diets.
- Positional changes for people at risk of developing pressure wounds.

This report should be read in conjunction with the previous report dated 26 August 2024.

In making our evaluations of the service we:

- Spoke informally with four people using the service.
- Attended a relatives' meeting that had been arranged by the home's interim manager.
- Spoke with six staff and management.
- Observed practice and daily life.
- Reviewed care plans and documents.

## Key messages

- The service's manager and deputy manager had recently left, and interim management arrangements had been put in place. The service was actively recruiting for the vacant posts.
- Staff were generally positive about the service and the support provided by the interim management team.
- Improvements had been made around the safe management of time critical medication, people's nutritional needs, and positional changes to prevent the development of pressure wounds. Improvements had, however, only recently been made and further review will be needed at the next inspection.

## 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

How well do we support people's wellbeing?	3 - Adequate
How good is our leadership?	3 - Adequate

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

## How well do we support people's wellbeing?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

People we spoke with were mostly positive about staff who supported them. They told us that staff were generally kind, friendly and worked hard. Staff interacted with people in a respectful manner. A carer was observed supporting someone to have a drink. They did not rush the person and spoke quietly and kindly throughout the interaction.

Family members told us that staff supported people well and said, "The staff are all lovely, they are all very kind, although there's been quite a few changes recently"; "Dad's always clean and tidy when I come in". This helped demonstrate that, overall, people were being cared for in a compassionate and dignified way. However, we observed that some staff could be more discreet when supporting people, such as ensuring that bedroom doors are always fully closed when tending to people's personal care.

At an inspection on 26 June 2024, we made a requirement around the safe management of time critical medication. This was followed up on 26 August 2024 and the requirement was extended to 1 November 2024. Whilst we saw that improvements had been made, there continued to be some gaps and inconsistencies in the recording of these medications. This had the potential to impact negatively on people's health and wellbeing and will be examined at the next inspection.

The service had recently reviewed and updated people's care plans to ensure that their care and support needs were being consistently met. We saw that updated information, specifically around people's nutritional needs, was in place. This gave us some confidence that staff were aware of people's nutritional needs, had good nutritional practice guidance to hand, and could make timely referrals to specialist services when people's needs changed. However, most of the information we saw had only recently been put in place. It will be important to ensure that the positive changes in the quality of information and staff practice around nutrition and dietary needs is continued. This will be reviewed at the next inspection.

People living in the care home had a range of postural and mobility care needs. We found gaps in recording people's positional changes; however, the manager had taken prompt action to ensure that these were addressed. This will be examined at the next inspection.

We noted that the service was readily accepting support from local health and social work professionals to help make improvements to service provision and achieve better outcomes for people.

## How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

The service had recently experienced challenges within the management team, with senior staff and administrative support leaving. The service was actively recruiting to fill the vacancies, and interim support had been put in place by the service provider's senior management team whilst recruitment was ongoing. This included daytime management and out of hours cover.

Due to the potential impact on people, their families/visitors and staff, the interim management team identified the importance of providing them with support and communication.

We saw that there had been a recent staff meeting and a relatives meeting was held on the day of this inspection. Both meetings allowed for discussion around service provision, recruitment, and changes needed to improve the quality of care and support.

Staff were mainly positive about the service and the support provided by the interim management team. Staffing levels were generally acceptable; however, shortages could occur due to short-notice absences. We understood that managers made every effort to cover these shortages.

Given the importance of having a stable and effective management team in ensuring that the service is led well and operates effectively, this will be reviewed at the next inspection.

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

### Requirements

#### Requirement 1

This requirement was not assessed at this inspection. The information detailed below has been carried forward from the last inspection report. The requirement was extended to 1 November 2024 at the last inspection.

By 19 August 2024 the provider must have developed and implemented a plan of how they ensure adequate staff are on duty to care and support residents in a person-centred and responsive manner. In particular you must ensure that:

- a) There are sufficient staff on every shift to ensure that people's basic health, safety and wellbeing needs are met.
- b) staff are deployed appropriately to ensure that service users receive assistance with their care needs at the time they need it.

This is in order to comply with section 7 of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that 'My needs are met by the right number of people' (HSCS 3.15) and 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25)

**This requirement was made on 26 June 2024.**

#### Action taken on previous requirement

This requirement was not assessed at this inspection.

#### Not assessed at this inspection

#### Requirement 2

By 1 November 2024, you must ensure that service users are provided with nutritious meals, snacks and drinks in accordance with their nutritional preferences.

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

This is in order to ensure that care and support is consistent with the Health and Social Care Standards

(HSCS) which state: 'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetable, and participate in menu planning.' (HSCS 1.33)

**This requirement was made on 29 August 2024.**

#### Action taken on previous requirement

This requirement was not assessed at this inspection.

#### Not assessed at this inspection

### Requirement 3

By 1 November 2024, the provider must ensure that service users are safe from harm by administering medication safely and effectively. To do this, the provider must, at a minimum:

- a) Ensure that people receive their time critical medications, at the prescribed time.
- b) Ensure that medication administration records are completed accurately.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 care and support meets my needs and is right for me.' (HSCS 1.19)

**This requirement was made on 29 August 2024.**

#### Action taken on previous requirement

This requirement was not assessed at this inspection.

#### Not assessed at this inspection

### Requirement 4

By 1 November 2024, you must ensure that service users experience a service which is well led and managed and which results in better outcomes for people through a culture of continuous improvement, with robust and transparent quality assurance processes.

This must include but is not limited to ensuring that:

- a) There is a quality assurance system in place to support a culture of continuous improvement.
- b) Effective action planning takes place within reasonable timescales which addresses identified areas for improvement.
- c) Ensure the quality assurance systems and processes in relation to medication management are further enhanced. To do this, the provider must ensure that senior management clearly identify areas for improvement, take prompt action to address indications of poor care provision, and ensure improvements are sustained.
- d) Ensure that people's choices are accessed, the quality of food being served is acceptable and mealtime

experience audits are carried out.

This is in order to comply with regulations 3 and 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

**This requirement was made on 29 August 2024.**

#### **Action taken on previous requirement**

This requirement was not assessed at this inspection.

#### **Not assessed at this inspection**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).



Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
How good is our leadership?	3 - Adequate
2.4 Staff are led well	3 - Adequate

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