

Balhousie Ruthven Towers Care Home Service

Abbey Road Auchterarder PH3 1DN

Telephone: 01764 664 192

Type of inspection:

Unannounced

Completed on: 10 March 2025

Service provided by:Balhousie Care Limited

Service no: CS2010272073

Service provider number:

SP2010011109



Inspection report

About the service

Balhousie Ruthven Towers nursing home is centrally located in the town of Auchterarder, Perthshire. The service is owned by Balhousie Care Group and it provides residential and nursing care on both 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 is located in its own grounds and is well maintained and accessible.

The home is close to the town centre and is near to 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 follow up inspection which took place on 10 March 2025. 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.

This report should be read in conjunction with the previous reports dated 26 June, 26 August, 2 October, 26 November and 12 December 2024.

In making our evaluations of the service we:

- spoke with several people using the service and their relatives
- spoke with five staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People experienced warm and compassionate care.
- Staff said they now felt well supported, confident and competent in their roles.
- People told us that communication had improved and that the service listened to them.
- Quality assurance systems were now being used more effectively to provide oversight of the service.

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 good is our leadership?	3 - Adequate

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

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How good is our leadership?

3 - Adequate

This inspection focussed on improvements required from the inspection on 12 December 2024.

We have detailed the progress in these areas under the following section of this report:

- what the service has done to meet any requirements we made at or since the last inspection.

We have re-graded the service in recognition of the requirement met. Grades have been moved upward, as we evidenced that the previous grade of 'weak' is now 'adequate'.

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

Requirements

Requirement 1

By 14 February 2025, the provider must demonstrate that people living in the home are safeguarded and experience consistently good outcomes, and that quality assurance and improvement is well led. To do this, the provider must, at a minimum:

- a) ensure the implementation of quality assurance systems that continually evaluate and monitor service provision to inform improvement and development of the service
- b) continue to review the service improvement plan to ensure that actions detailed are effectively sustaining improved outcomes for people living in the home.

This is to comply with Regulation 4(1)(d) 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 12 December 2024.

Action taken on previous requirement

Our inspection concluded that there had been improvements made with this requirement.

As detailed in the previous inspection report, there were several quality assurance systems in place to support a culture of continuous improvement. This system covers all aspects of service delivery including infection prevention and control, medication, clinical governance and care practice. These are now being used more effectively to improve outcomes for people. Action plans were seen to have been developed with timescales in place for any identified deficits to be addressed by.

Regular meetings with relatives were now in place and the manager was meeting with people using the service on a daily basis. People were encouraged to provide feedback on the quality of their meals and preferences, staffing and activities. People and their relatives told us that they now generally enjoyed their meals and welcomed being asked for their views. People also said they were enjoying getting things to do throughout the day.

People said they felt they were starting to feel more comfortable speaking up and that management were listening to them.

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Since the last inspection a new manager had been appointed. The manager had reviewed and updated quality assurance systems and updated the service improvement plan.

We will continue to monitor the quality assurance systems at future inspections.

Met - within timescales

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

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

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