

Balnacarron Care Home Service

116 Hepburn Gardens
St. Andrews
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Telephone: 01334 474 221

Type of inspection:
Unannounced

Completed on:
14 March 2025

Service provided by:
HC-One No. 1 Limited

Service provider number:
SP2016012770

Service no:
CS2016349811

About the service

Balnacarron is a well-established care home that is situated in a residential area of St. Andrews. The home is registered to provide care for a maximum of 34 older people.

The service comprises of a large Victorian villa with an added extension. Well-kept, landscaped gardens surround the home and there are outside seating areas for people and their visitors to enjoy. The home benefits from a large dining room, a lounge, a small cafe and a hairdressing salon. There were 32 people living there at the time of our inspection.

Balnacarron is operated by the HC-One group of care homes.

About the inspection

This was an unannounced inspection which took place on 10 and 11 March 2025. The inspection was carried out by one inspector 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 nine people using the service and six of their family and friends
- spoke with ten staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

People were cared for with warmth and compassion.
Clinical oversight was strong and people's health needs well considered.
Staffing arrangements were right and staff worked well together.
Staff were well led with a strong focus on audit and oversight.

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?	5 - Very Good
How good is our staff team?	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?

5 - Very Good

We evaluated this key question as 'very good', where performance demonstrates major strengths in supporting positive outcomes for people.

Warm relationships existed between staff and people living in the home. Many people mentioned staff by name and talked about how they contributed to them having a positive day. One person said, 'if you want anything done, morning noon or night they will do it for you, I'm very happy here.' Another said, 'nowhere is like home but I'm very well looked after.'

Relatives were also very happy with the care and support that the home provided. Comments included, 'they really seem to care' and 'I'm absolutely delighted.' Relatives commented on the patience which they observed in the care staff and there were multiple staff complimented by name during feedback. People were observed during the inspection to be made very welcome to the home, with a warm reception, cups of tea and friendly conversation. Families appreciated the support which they received and reflected that this gave them confidence in the care and support that their loved one would experience in the home.

Clinical oversight of people's health needs was strong, with multiple checks and assurances by the management team to ensure that actions from audits were completed and information analysed for improvement. There was a good focus on finding solutions to health issues which arose, even during end of life care. Referrals to other professionals were prompt and good links existed with the serving GP practice. People could be confident that the service would remain attentive to their comfort and wellbeing at all times.

Mealtimes were quiet and calm and people were happy with the meals offered to them. Adapted diets were provided discretely as was any adaptive crockery or cutlery. Some further work on the organisation and delivery of meals would enable staff to fully focus on the needs of the diners. This was brought to the attention of the manager at the time of the inspection.

People could be actively involved in decisions which affected them. Regular meetings and consultations were held about meals, activities and events. People spoke positively about recent trips and activities which they had taken part in. One person said, 'we're not just sitting doing nothing you know.' The service had good connections with the local community and people were able to continue to lead a meaningful life. The service had recently re-purposed a room into a small cafe area and created a useable, accessible outdoor space. A redecoration of the hairdressing room had made it more attractive to both men and women within the service. This ongoing focus on creating attractive spaces meant that people had an increased choice about where and how to spend their time.

How good is our staff team?

5 - Very Good

We evaluated this key question as 'very good', where performance demonstrates major strengths in supporting positive outcomes for people.

Staffing arrangements should be right and staff should work well together. We found that staff deployment and allocation were well considered. Staff from all departments were visible and available throughout the course of the inspection. We observed members from the whole staff team taking time to engage with people living in the service as they went about their roles.

Staff reported a strong sense of team working and appreciated the flexibility and reliability of their team mates.

Staff were very well supported by their senior and management team. Leaders were well respected and, in turn, staff members felt respected and valued. One staff member said, 'the office door is always open, we could not ask for a better management to run Balnacarron,' another said, 'the manager has no ego or arrogance, you want to do your best for her.' The culture of valuing individuals and appreciating their unique skills and personalities ran through the whole home. People could be confident that a strong value base underpinned their care.

Staff training completion was at a good level and specific training could be sought for particular development needs. There had been a focus on issues which had emerged through previous inspection feedback. This gave confidence that when constructive feedback was given it would be taken on board and contribute to the development of the service.

Staff meetings were regular and had a clear focus on change and improvement. Meetings were often held after audits and overviews in order to share findings and information. This created a transparent process of data collection, decision making and change, with which staff were fully involved.

People living in the home and their families were encouraged to give feedback about staff members. Visitors could complete feedback sheets about acts of kindness which they had noticed, and a staff awards ceremony had celebrated the positive feedback which staff had received. Staff reported feeling proud of these times of positive feedback. People could be confident that they were being cared for within a culture that celebrated kindness, warmth and compassion.

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 promote people's nutritional health, the provider should ensure that staff provide person centred support during mealtimes. This should include any specialist equipment or aids if required and information fully documented in their support plans.

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 area for improvement was made on 23 February 2023.

Action taken since then

Specialist aids were available and evident for those who needed them during mealtimes. Meals were catered to the individual and, where adapted meals were required, these were plated for the named individuals at the point of service. Staff were observed checking that food was suitable for vegetarian diets and otherwise ensuring that people were given choice at each stage.

This area for improvement is met.

Previous area for improvement 2

In order to support people's health, wellbeing and quality of life, the manager should ensure there are adequate supports in place for people experiencing stress and distress. Care plans should reflect any unmet needs, identify 4 of 5 proactive strategies to meet those needs and be regularly evaluated for effectiveness. The manager should ensure that any agreed strategies are being carried out in practice.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices'.

This area for improvement was made on 23 February 2023.

Action taken since then

Although there were limited individuals requiring stress and distress care planning at the time of the inspection the service were well aware of the need for detailed plans. Care plans moving to the new electronic system were due to be checked by the management team for accuracy and detail.

This area for improvement could not be fully assessed at this inspection.

This area for improvement remains in place.

Previous area for improvement 3

In order that people experience good outcomes and quality of life, the provider should continue to develop their dementia service. This should continue to include the setting, record keeping and, staff training and development.

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 1.9)

This area for improvement was made on 24 May 2022.

This area for improvement was made on 24 May 2022.

Action taken since then

Staff training and development in dementia care had been ongoing. One staff member had become a trainer in the 'Promoting Excellence' framework and was delivering in house training to other staff on a regular basis. This complemented online training resources which were also promoted. Staff training completion was at a good level and staff were able to reflect on their own learning and development.

This area for improvement is met.

Previous area for improvement 4

In order to support good outcomes for people experiencing care, the manager should ensure that there are adequate systems in place to carry out observations of staff infection prevention and control practice. Any identified issued should be used as an opportunity for learning and development.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes'.

This area for improvement was made on 15 January 2025.

Action taken since then

Observations of practice were in place and being completed regularly. The topic of infection prevention and control was raised at staff meetings and there had been team meetings to promote certain aspects of IPC practice. These meetings involved both the care and domestic staff teams. A consistent expectation of high standards was being delivered.

This area for improvement is met.

Previous area for improvement 5

In order to support good outcomes for people experiencing care, the manager should ensure that all concerns are listened to, taken seriously and acted upon when appropriate. Records of concerns and how they are acted upon should be kept to help identify any patterns of concerns, and to measure improvement over time. This is to ensure care and support is consistent with Health and Social Care Standard 4.21: 'If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me'.

This area for improvement was made on 15 January 2025.

Action taken since then

A system to track and document any concerns had been developed. Paperwork was in place to monitor progress and action following any concerns. These had been no new concerns with which to trial the new process therefore this area for improvement could not be assessed.

This area for improvement remains in place.

Previous area for improvement 6

In order to support people's health and wellbeing, the manager should ensure that all staff with the responsibility for administering medication, fully understand their role and responsibilities. Adequate systems should be in place to carry out regular observations of staff practice.

This is to ensure care and support is consistent with Health and Social Care Standard 3.14: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

This area for improvement was made on 15 January 2025.

Action taken since then

Observations of practice had been undertaken and a schedule of future observations developed. Staff had completed competency checks and workbooks according to their role and responsibilities. Audit and oversight of medication management was in place and any errors or omissions were acted on promptly. This area for improvement is met.

Previous area for improvement 7

In order to support good outcomes for people experiencing care, the manager should carry out a review of the menus, gathering feedback on people's mealtime preferences. The menu should reflect the meals people want to eat.

This is to ensure care and support is consistent with Health and Social Care Standard 1.9: 'I am recognised as an expert in my own experiences, needs and wishes'.

This area for improvement was made on 15 January 2025.

Action taken since then

People had been involved in giving feedback about their likes and preferences with the menu and changes had been made accordingly. People continued to be given the opportunity to feedback with the kitchen team collecting regular direct feedback about the meals. People spoken to during the inspection were happy with the food provided and relatives felt that the quality and choice of the meals they had observed were good. This area for improvement is met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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