

Caledonian Court Care Home Care Home Service

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Larbert
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Telephone: 01324 556 322

Type of inspection:
Unannounced

Completed on:
15 May 2025

Service provided by:
Care UK Limited

Service provider number:
SP2003002341

Service no:
CS2011300795

About the service

Caledonian Court Care Home is a purpose built care home for up to 72 older people. The service is provided by Care UK. The service was registered with the Care Inspectorate on 31 October 2011.

The home is in a residential area of Larbert and close to a number of local amenities, including a train station, which is on the main Glasgow-Edinburgh line.

The care home is on two floors with lift access to the first floor. The home is split into five units. Each unit has its own pleasantly furnished lounge, dining room and kitchen. There are enclosed garden and patio areas for people to use. There is also a cinema room.

About the inspection

This was an unannounced which took place on 13 and 14 May 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 27 people using the service and 13 of their family members
- Spoke with 12 staff and management
- Observed practice and daily life
- Reviewed documents.

Key messages

- There was a warm and friendly atmosphere in the home.
- Staff worked hard to ensure people were eating and drinking well.
- The service must ensure there is enough staffing to meet people's needs.
- The design and layout of the building had a positive impact on the quality of life of the people who lived there.
- Some areas of flooring needed to be replaced.

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?	3 - Adequate
How good is our setting?	4 - 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 found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

People living in the service benefitted from a holistic health assessment based on good practice and referred to external health professionals when required. Risk assessments and care plans were reviewed regularly and any changes to care and support were recorded. We discussed with the leadership team that a fuller evaluation narrative would make it clearer how effective the planned care had been. The team agreed and we will review this at the next inspection.

There was a robust medication management system in place. Protocols were in place for any 'as required' medicines that described when people might need the medicine and what the desired effect was. The leadership team had oversight of this and the service performed well in their internal audits. The deputy manager followed up any actions from the audits timeously to ensure people safely received their medicines as prescribed and met their identified health needs.

The service could do more to promote people's independent mobility. There were many people in bed or using wheelchairs to move around the home. We asked the leadership team to consider how staffing levels impacted this and made a requirement about staffing arrangements (**see 'How good is our staff team?' for more information**).

People benefitted from a warm and friendly atmosphere. People living in the service were fond of staff and responded well to them. One person said staff were, "Friendly and helpful" and another said; "The staff are good, nice and friendly. I feel safe." and a relative said, "The staff from the office, kitchen, house keeping to the carers and activities staff are 100% amazing with my relative and my family." This meant people experienced warmth, kindness and compassion in how they were supported and cared for.

End of life care was provided sensitively and respectfully. One family member said, "The care and love shown to (name) was outstanding. We were kept up to date at every point....staff looked after us."

People benefitted from a tasty, healthy and well balanced diet. People living in the service were involved in planning the summer menu and alternatives were available when people did not like what was on the menu. Food and fluid charts were in use when someone was at risk of being malnourished and were completed well. The fridges in each unit were well stocked with foods staff could use to fortify people's meals who were at risk of being malnourished and snacks were available in each unit, including fresh fruit. The dining experience was relaxed and unhurried and staff worked hard, in a dignified way, to encourage and enable people to eat and drink.

How good is our staff team?

3 - Adequate

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

Staffing arrangements varied and often reduced at weekends due to high levels of sickness absence. The service was not always able to gain agency staff at short notice so sometimes staff were working under pressure and found it difficult to spend the time they would want to supporting people. Staff were concerned their workload was task orientated during periods of staff absence, and they felt unsupported by

some staff which was negatively affecting their wellbeing. People experiencing care clearly were fond of staff and appreciated how busy they were, one person said, "Sometimes they are short staffed so you don't expect anything." And another said, "Sometimes they are short staffed. If I can get someone to come with me, I can get out." And a relative said, "They are always busy, you try to get them but understand they are dealing with other people." This meant staff did not always have the time needed to support and care for people and spend time speaking with them. We made a requirement about this (**see requirement 1**).

Requirements

1. By 8 August 2025, to ensure people's care and support needs are met, the provider must ensure staffing arrangements are safe and effective. To do this the provider must, as a minimum:

- a) Ensure staff are present in such numbers as to promote the provision of safe and high quality care.
- b) Demonstrate how the outcome of people's assessments are used to inform staffing levels and arrangements; and
- c) Monitor staff wellbeing to promote the health, wellbeing and safety of people living in the service.

This is in order to comply with section 7(1) of the Health and Care (Staffing)(Scotland) Act 2019.

This is to ensure that 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).

How good is our setting?

4 - Good

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

The design and layout of the building had a positive impact on the quality of life of the people who lived there. There was lots of natural light and fresh air. Hallways were wide, well lit and had a handrail, making it easier for people to safely walk along. The large building had been separated into smaller units to promote a homely feel. People benefitted from having a cinema, large activities room and a cafe within the setting as well as 2 lounges and a dining area in each unit, so there were a variety of areas people could choose from to relax with visitors, take part in an activity or spend quiet time alone.

There was clear signage directing people to areas around the home. Handwashing technique signs were displayed close to sinks to remind people of the most effective way to perform hand hygiene. The signage on toilets and bathrooms used an image and text making it easier for people with cognitive decline to locate these facilities. Other signage was text only and we discussed with the leadership team ways to make signage more visible for those living with conditions such as dementia.

The home was generally clean and housekeeping staff kept up to date records of the areas they had cleaned. Some flooring areas had a strong smell or were in disrepair making them difficult to clean thoroughly which was an infection prevention and control risk. The leadership team told us there was a planned rolling refurbishment taking place and agreed to replace the damaged flooring, which we will review at the next inspection.

There was planned monitoring and maintenance of the premises, fixtures and fittings. This was recorded digitally and senior leadership had oversight of this to ensure people's safety.

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 health and wellbeing, the provider should ensure that all people in the service have access to meaningful and stimulating activities. People's engagement with these activities and the activities on offer should be accurately recorded to allow effective reviews to take place.

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

1.25: '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.'

This area for improvement was made in October 2024 as a result of complaint inspection 2024134425.

This area for improvement was made on 30 October 2025.

Action taken since then

The service had introduced a digital app to record how many activities each person participated in. This gave oversight of how many people overall had participated in an activity in the last week, for example, and how many people did not participate. This meant staff could focus attention on those who had not participated or use the information to update people's personal plans.

There were regular, scheduled activities and people had a weekly planner in their bedrooms. We asked the leadership team to consider reviewing how they advertise activities for people living with dementia so that it is in a suitable format to aid understanding.

The service had recruited a new activity worker who had not yet started employment at the time of inspection.

There was an inequity of time people were benefitting from activities. Some people benefitted from attending lots of planned activities whereas others were involved in very few, especially those who were not able to participate in group activities and for many of the sessions they did attend, it was described as a 'chat.' We discussed with the leadership team, encouraging staff to be more creative so that everyone could meaningfully engage in their preferred activities. The leadership team thought the information we saw may be inaccurate and thought staff were not always recording when someone took part.

This area for improvement has not been met and we will review it at the next inspection.

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
1.1 People experience compassion, dignity and respect	5 - Very Good
How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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