

Moyness Nursing Home Care Home Service

76 Grove Road
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Telephone: 01382 480 899

Type of inspection:
Unannounced

Completed on:
15 July 2025

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2010272061

About the service

Moyness care home for older people situated in a residential area of Broughty Ferry in Dundee. The service provides nursing care for up to 30 people.

The service provides accommodation over two floors in single bedrooms and one double bedroom, each with an ensuite toilet and wash hand basin. There is one sitting room and a dining room as well as a conservatory and access to a well-tended garden.

About the inspection

This was a follow up inspection which took place on 15 July 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. In making our evaluations of the service we: spoke with Three staff and management • observed practice and daily life • reviewed documents.

Key messages

The service had made good progress in assessing safe staffing levels. This had resulted in an additional member of the care team for busy times of the day.

There was positive feedback from both staff and service users in relation to the additional member of the care team.

Further work was required to ensure safe fall prevention and fall management procedures.

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

Requirements

Requirement 1

By 22 June 2025, the provider must make proper provision for the health, welfare and safety of people using the service. In particular, the provider must:

- a) Undertake a full and multifactorial assessment of the risk of each resident experiencing a fall.
- b) Ensure detailed care planning which recognises the risks and how the risks should be reduced.
- c) Ensure preventative measures are reviewed monthly, following each fall and should the individual's needs change.
- d) Ensure alternative measures are considered where existing measures are ineffective in preventing falls.
- e) Ensure fall data and analysis is used to improve the safety and experience of residents.
- f) Ensure at all times residents have access to equipment required to summon assistance.

To be completed by: 22 June 2025

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 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 requirement was made on 1 April 2025.

Action taken on previous requirement

The service had begun to review personal support plans to ensure individuals' needs in relation to fall prevention were effectively assessed and planned for however, a considerable level of work was still required to ensure that each individual's risk of falling was fully assessed and effectively planned for. We noted some residents at risk of falling did not have their preventative needs planned for. It is essential that all individuals at risk of falling have a stand alone fall prevention and fall management care plan in place. This ensures all staff are fully appraised of residents' needs and how to reduce the risk of falls.

Work had been undertaken to ensure that all call alarm equipment was available and regularly audited. The service must continue to further develop fall prevention and fall management processes in order to meet the requirement.

In addition, work continues to be required to demonstrate effective fall auditing with the outcomes used to improve the service and safety for those at risk.

This requirement has been extended to 18 August 2025

Not met**Requirement 2**

By 22 June 2025, the provider must make proper provision for the care and support needs of service users. In particular, the provider must:

- a) Ensure the regular assessment of need and associated risks.
- b) Ensure care planning which fully directs the care team as to how individual's needs should be met.
- c) Ensure the regular review of the care plan to ensure it remains reflective of the individual's needs.
- d) Ensure regular audit of care records to confirm care is provided in accordance with the care plan.
- e) Ensure changes in the individual's condition, such as significant weight loss, prompts a review and change to the delivery of care.

To be completed by: 22 June 2025

This is in order to comply with:

Regulation 5(2)(b)(ii) of The Social Care and Social Work Improvement Scotland(Requirements for Care Services) Regulations 2011(SSI 2011 / 210)

This is to ensure care and support is consistent with Health and Social Care Standard 1.12: I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change.

This requirement was made on 1 April 2025.

Action taken on previous requirement

As previously reported, we did not find that all care plans were always fully reflective of individual resident's needs. It is essential that there is adequate and consistent oversight of the care planning process in order to ensure information and guidance is reflective of residents needs and is subject to consistent review.

Further work is required to ensure associated risks such as weight loss, falls and skin integrity are consistently assessed and are subject to consistent oversight and audit to improve outcomes for individuals.

This requirement has been extended to 18 August 2025.

Not met

Complaints

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

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