

## Erskine Edinburgh Home Care Home Service

468 Gilmerton Road  
Edinburgh  
EH17 7SA

Telephone: 01316 722 558

**Type of inspection:**  
Unannounced

**Completed on:**  
1 August 2025

**Service provided by:**  
Erskine Veterans Charity

**Service provider number:**  
SP2003000260

**Service no:**  
CS2003010632

## About the service

Erskine Edinburgh Home is a care home for former servicemen, servicewoman and their spouses. The home provides 24 hour nursing and dementia care to a maximum of 40 older people, accommodated across three units known as "houses."

Each unit has a different layout, with its own dining and living spaces and smaller quiet rooms. There are a variety of specialised rooms available for people to use. These include a library, gym, cinema room, quiet rooms and spaces for activities.

The home is situated in the residential area of Gilmerton, Edinburgh, and benefits from easy access to the local area and good transport links.

The home has use of their own minibus for trips and outings. Garden grounds extend around the whole home and provide a variety of outdoor facilities, including allotments, summerhouse, artist's hut and seating areas. The garden is easily accessible at various points throughout the home.

This was an full inspection which took place between 23-29 July 2025. The inspection was carried out by one inspector from the Care Inspectorate.

## About the inspection

This was an full inspection which took place between 23-29 July 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 ten people using the service and six of their family representatives. We also spoke with ten staff and management, observed practice and daily life, and reviewed documents. We spoke with one allied health professional.

## Key messages

Staff were consistently described as being kind, respectful and good at their work. It was evident that people experiencing care valued the quality of support provided by staff.

People's views on the quality of the meal provision was variable.

There were areas for improvement around 1:1 support and meaningful engagement.

The service environment was clean and well maintained. This helped make Erskine Edinburgh a comfortable and homely place to live.

Staff were well trained in areas relevant to the work they undertook. There was a strong learning culture within the service, with a focus on staff development.

## 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?	4 - Good
How good is our staff team?	5 - Very Good
How good is our setting?	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?

4 - Good

We evaluated the provider's performance across this key question as good. Positive outcomes outweighed areas for improvement.

People were supported to attain positive outcomes across a wide range of care and support needs. The service was pro-active at identifying when changes a person's presentation necessitated intervention from medical practitioners or when they needed assessment for additional aids or equipment.

Access to in-house physiotherapy was important for some people. There was a strong culture of promoting positive change through exercise, associated with recovering mobility and maintaining independent movement. This focus contributed to a range of positive well-being outcomes.

Medication was generally administered in accordance with the prescriber's instruction. Errors were rare. When they did occur, the service always consulted with relevant professionals for guidance.

The service had developed documentation around the use of as required medication. This was an area for improvement at our previous inspection. There were robust protocols to guide staff around de-escalating stress and distress before resorting to medication administration.

The home have enhanced approaches to medication and well-being through the provision of an advanced nurse practitioner. This new role promoted effective communication with involved medical services and allowed for adjustments to people's medication provision, with a focus on improved health outcomes.

Whilst we heard some mixed views on the quality of the food, it was clear from discussion with the head chef that menus were designed to promote a balanced and nutritious diet. Food was freshly prepared and people were routinely offered alternatives if the meals were not to their taste. We observed two mealtime experiences, noting that staff were attentive and good at offering people choices. This helped attain good nutritional outcomes.

Positive outcomes were supported by the provision of detailed personal plans. Documentation routinely outlined people's likes and routines, with detailed guidance around complex aspects of support. Personal plans were reviewed and updated at regular intervals. This ensured information in personal plans remained relevant. People were supported to participate in service reviews and contributed to how their care and support was provided.

There were areas for development around aspects of maintaining skin integrity and prevention of pressure ulcers. During our inspection we saw some air flow mattresses were incorrectly set in relation to the weight of the person experiencing care. This equipment plays a significant preventative role in ensuring people's skin remains intact.

We highlighted these issues to staff and were concerned during our follow-up checks that some mattress settings had not been adjusted appropriately. Whilst we took into account the service's views that air flow mattress settings sometimes reflected people's views on comfort, we considered this did not account for the level of variation we saw. We made an area for improvement around air flow mattresses.

We considered an area for improvement we made at our previous inspection, focusing on the provision of activities and meaningful engagement associated with people getting the most from life.

Whilst there was a good range of planned events taking place, there were still aspects of this that needed further development. We observed gaps around the frequency of planned activity provision

People and their families consistently raised the provision of activities and the need for more dedicated one-to-one interactions as an area for improvement. We checked people's care records and verified this view, particularly round provision of meaningful engagement for people who spent time in their rooms. We repeated the area for improvement from our inspection of 23 November 2023 (see area for improvement 2 below).

### Areas for improvement

1. In order to maintain people's skin integrity the service should ensure that staff understand the importance of setting air flow mattresses in line with manufacturer instructions.

Personal plans should clearly and consistently indicate appropriate mattress settings.

Regular audits of mattress conditions should be augmented by routine checks on air flow settings.

Health and Social Care Standards-My Support-My Life, 2018

1.24 Any treatment or intervention that I experience is safe and effective.

4.11- I experience high quality care and support based on relevant evidence, guidance and best practice.

2. In order to ensure that people get the most out of life, the Provider should ensure that people are able to regularly engage in meaningful activities within and outside the home as appropriate to their preferences, needs and abilities. This should include, but not be limited to, people who spend much of their day in their rooms.

Health and Social Care Standards-My Support-My Life, 2018

-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.

- 2.22 I can maintain and develop my interests, activities and what matters to me in the way that I like.

-3.16 People have time to support and care for me and to speak with me.

-5.9 I experience care and support free from isolation because the location and type of premises enable me to be an active member of the local community if this is appropriate.

### How good is our staff team?

**5 - Very Good**

We evaluated this key question as very good. Key strengths impacted positively on outcomes for people experiencing care and clearly outweighed areas for improvement.

Staff were safely recruited, with appropriate checks taking place prior to new workers commencing employment. This meant staff were suitably vetted for work in a care setting.

People and their families consistently highlighted staff as a significant asset to the home. We heard, "they are always polite and helpful, staff know me well and provide very good care. I never feel rushed". A family member said, "staff are knowledgeable and informed, they know XXXX well and understand how to provide effective care".

It was evident from our discussions with people that they were able to form positive relationships with staff. This helped them get the most from support and contributed to the delivery of positive care outcomes.

Some people experiencing care told us they felt the home would benefit from additional staffing provision. We checked staffing levels, observing the use of a dependency tool which informed staffing levels. When we considered staffing across the home we consistently found the levels which reconciled with those indicated by the dependency tool.

There was a strong and effective learning culture in the service. Analysis of the relevant records confirmed staff were supported to undertake a wide range of training relevant to the needs of the people they cared for.

We were particularly impressed by the way staff were encouraged to develop their knowledge, skills and experience. Some workers had undertaken professional studies which they were then able to put into practice in the workplace.

All the staff we spoke with identified core values commensurate with the Health and Social Care Standards. When we observed staff practice, we noted they could bring these values to bear in the way they engaged with people and delivered care. It was evident people's care and support benefitted from staff skills and experience.

## How good is our setting?

## 5 - Very Good

We evaluated this key question as very good. Several key strengths impacted positively on outcomes for people and clearly outweighed areas for development.

The care home setting was clean and well maintained. There was a strong focus on infection prevention and control. Domestic staff undertook regular cleaning of facilities and understood key principles associated with maintaining a safe service environment.

Fixtures and furnishings were in good condition. Facilities and equipment were maintained in accordance with best practice and manufacturers guidance. This helped ensure Erskine Edinburgh provided a safe care setting.

The home had a gym with a range of exercise equipment. This encouraged people to engage in activities which promoted physical well-being. In addition, we noted the development of several sensory spaces, based upon Namaste Care principles and used for relaxation. The provision of these "quiet" spaces enhanced the range of facilities available at the home.

People were encouraged to personalise their rooms. It was evident from discussion this added significantly

to their sense of well-being. We heard, "my room is a haven for me, It's quiet and nicely furnished. I like having my things around me".

Health and well-being benefitted significantly from access to a safe, well maintained, level access gardens. The service had recently undertaken a significant development of the garden area associated with the specialist Dementia unit in the home. We saw people enjoying the garden facilities throughout our visits to the home.

We heard, "I love the garden area, it's a place where I go to relax, sometimes to chat other times I like to sit and drink a cup of tea there". This view was endorsed by family members, "the garden is such an asset, XXXX loves to sit there, it's a great space for family visits".

## 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

In order to ensure that people get the most out of life, the Provider should ensure that people are able to regularly engage in meaningful activities within and outside the home as appropriate to their preferences, needs and abilities. This should include, but not be limited to, people who spend much of their day in their rooms.

Health and Social Care Standards-My Support-My Life, 2018

- 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.
- 2.22 I can maintain and develop my interests, activities and what matters to me in the way that I like.
- 3.16 People have time to support and care for me and to speak with me.
- 5.9 I experience care and support free from isolation because the location and type of premises enable me to be an active member of the local community if this is appropriate.

**This area for improvement was made on 23 November 2023.**

#### Action taken since then

The service facilitate a range of planned activities, complimented by a series of events and outings. However, there were still areas for improvement around the frequency of activities, with a need to offer more in the evenings and at weekends.

We considered one-to-one support provision, observing that this remained as an area for improvement.

#### Previous area for improvement 2

In order to ensure that people get the care and support required to ensure on-going positive health and well-being outcomes, the Provider should ensure that systems used for monitoring and evidencing care delivery are robustly documented and recorded.

Health and Social Care Standards-My Support-My Life, 2018

- 1.19 My care and support meets my needs and is right for me.
- 1.24 Any treatment or intervention that I experience is safe and effective.



-3.21 I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm.

**This area for improvement was made on 23 November 2023.**

#### Action taken since then

Management undertook wide ranging audits of care delivery. This helped ensure they had oversight of the care delivery. This area for improvement was met.

#### Previous area for improvement 3

In order to ensure positive health and well-being outcomes, the Provider should ensure that personal plans fully document approaches to stressed/distressed presentation, including but not limited to, any staff intervention which necessitates the application of restraint.

Health and Social Care Standards-My Support-My Life, 2018,

-3.18 I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.

-3.24 If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies.

-4.11 I experience high quality care and support based on relevant evidence, guidance and best practice.

**This area for improvement was made on 23 November 2023.**

#### Action taken since then

Personal plans and as required medication protocols associated with managing stress/distressed presentation were regularly updated. Documentation was detailed, with good information around the provision of effective care. This area for improvement was met.

#### Previous area for improvement 4

In order to ensure that interventions are safe, effective and comply with regulatory guidance and associated best practice, the Provider should ensure that all applicable accidents and incidents are shared with relevant agencies.

Health and Social Care Standards-My Support-My Life, 2018

-3.24 If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies.

-4.18 I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected.

-4.23 I use a service and organisation that are well led and managed.

See also "Records that all registered care services (except childminding) must keep and guidance on notification reporting" - Care Inspectorate, 2015.

This area for improvement was made on 23 November 2023.

## Action taken since then

Accidents and incidents were well managed, with a clear outline of the nature of events and well defined rationale for how the service responded.

The service knew when to escalate concerns and contacted relevant agencies appropriately when addressing protection concerns.

We noted some events were notified out with regulatory guidance, but on balance this area for improvement was met.

## 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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.