

Balmoral Health and Social Care East Dunbarton Support Service

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Type of inspection:
Unannounced

Completed on:
7 August 2025

Service provided by:
Balmoral Homecare Ltd

Service provider number:
SP2005007958

Service no:
CS2020379230

About the service

Balmoral Health and Social Care East Dunbarton was registered with the Care Inspectorate on 2 July 2020 and is registered to provide a care service to adults aged 60 or over living in their own homes.

Balmoral Health and Social Care is part of the Grosvenor Health and Social Care group. The office is based in Bearsden and covers Bearsden, Milngavie, Bishopbriggs and outlying areas.

At the time of inspection there were 113 people experiencing care.

About the inspection

This was an unannounced full inspection which took place on 5, 6, 7 August 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 six people using the service and three of their relatives
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People we spoke to benefitted from very good care and support from a dedicated staff team familiar with their needs and preferences.
- People and their relatives we spoke to advised they were very satisfied with the service.
- The service was led by a very approachable and responsive management team who were committed to making improvements.
- Personal plans had improved and were reflective of people's current support needs and preferences.
- A new management system in place had improved the scheduling visits and created reports for the service relating to times of visits and the duration of support.

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 leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	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 people; therefore, we evaluated this key question as very good.

People's health and safety needs had been well assessed and managed by very skilled and knowledgeable staff. The significant and positive relationships staff had developed with people ensured they benefitted from safe and effective support. People, and a few of their relatives, expressed to us how staff had boosted their confidence due to the care they received.

People told us that they felt respected and very much listened to by staff, seniors, and the manager. This included times where people declined support for personal reasons. People described how they valued their independence which was greatly encouraged and promoted by staff.

Staff were mostly punctual and advised that any delays were communicated to them as much as possible. People reiterated how much the service, the timings of visits and communication from the office had improved since the new manager was in post. Furthermore, they spoke very fondly of the seniors in the office who had previously supported them in their carer roles. As a result, people felt confident to call the office with any issues they had.

Some quotes from people we spoke to were:

"Staff were heaven sent."

"Staff are brilliant."

"They treat us as one of their family."

"I have had the same carer for four years, this means so much to me, when she is off on annual leave, she is replaced by staff I know and really like."

Staff contacted relevant professionals promptly when necessary and when changes happened to people's health. These included GP's, equipment departments, district nurse and the Health and Social Care Partnership. This resulted in people receiving the right treatment at the right time.

Individuals were actively encouraged and supported to engage in physical activity as part of promoting their overall wellbeing. We observed staff assisting a person with walking exercises along the corridor, providing targeted physical therapy to improve leg function.

Staff employed a range of effective communication methods, including daily notes and telephone contact and the new management system to ensure effective information sharing. This proactive approach supported the delivery of consistent and responsive care, helping to maintain accurate and up-to-date records of individuals' outcomes and support needs.

Where individuals required specialist equipment, appropriate provisions were in place, such as alarm systems and stand aids, to promote safety, security, wellbeing, and confidence. These measures reflected a proactive approach to risk management and person-centred care.

Medication was administered competently and in accordance with person-centred principles. Staff demonstrated a respectful and dignified approach, supporting individuals' independence while ensuring safe and effective practice.

Individuals received enough nutrition and hydration. Feedback indicated that mealtime support was unhurried and respectful of personal preferences. People were also supported to enjoy refreshments and meals outside the home when desired, enhancing their social engagement and autonomy.

Accident and incidents were recorded with follow up documents to assess any learning outcomes to limit the situation occurring again. This allowed for any safety measures to be put in place and risk assessments to be completed or updated.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people; therefore, we evaluated this key question as very good.

Spot checks conducted by senior and management staff provided valuable insight into staff performance, including punctuality, task completion, and Infection Prevention and Control practices. These observations are an essential tool for assessing competency and development areas. Team leaders provided effective constructive feedback on staff practice observations, which contributed to a supportive and developmental work environment.

Where practice fell below expectations, staff were supported through supervision and reflective discussions. These interventions were especially effective in addressing performance gaps and promoting continuous improvement.

Staff supervisions were completed, ensuring that all team members were supported and operational standards were maintained. Staff reported that they found these sessions beneficial, gaining insight into areas for development. However, a few recording aspects of supervision could be enhanced to demonstrate the depth of discussions and evidence line manager responses to staff challenges (see area for improvement 1).

Accidents and incidents were documented and recorded well and involved follow up actions and learning from the situations. Staff are supported to reflect on approaches that could be different in future.

Team meetings were held to review current issues, address any operational concerns, and ensure consistent practices. Key discussion points included people's outcomes, risks, communication improvements, and updates on departmental goals. The meeting concluded with agreed actions to improve service delivery.

The manager introduced a 'Productive Wellbeing Kit', designed to help team leaders foster a positive start to the day and promote motivation. Team members reported that this initiative has had a positive impact on their overall wellbeing, contributing to a more uplifting and focused work environment.

Relative survey responses received by the Care Inspectorate were mostly positive, such as: "The staff are very caring, considerate and kind they know my mother;" "I complained and they listen sometimes but and they change for a while;" and "We see the same carers most of the time."

Complaints were documented and reviewed. We observed a clear process from receipt to resolution, demonstrating the manager's responsiveness and commitment to continuous improvement."

Areas for improvement

1. The service should ensure staff supervision is consistent in promoting reflective practice. Furthermore, concerns raised by staff during supervision should be responded with clear recording and actions.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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' (HSCS 3.14).

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people; therefore, we evaluated this key question as very good.

The implementation of a new scheduling system significantly improved the coordination of support visits. Individuals reported that staff usually arrived punctually and were familiar to them, fostering consistency and trust in service delivery. In instances of delay, people were promptly informed via telephone, reflecting a respectful and transparent approach. Staff confirmed they had sufficient time to complete tasks effectively, enabling them to support individuals in achieving their personal outcomes.

At the time of inspection, no agency staff were being used, which reduced the risk of unfamiliar staff supporting individuals and contributed to continuity of care.

Staff were well-trained and spoke positively about the quality and relevance of their training, describing it as both helpful and enlightening. This contributed to a workforce that was knowledgeable, confident, and competent in delivering person-centred care. Induction processes were reported to be thorough, further supporting staff in understanding their roles and responsibilities.

Staff worked collaboratively and demonstrated strong teamwork. They valued the opportunity to learn from one another's practice, which contributed to a culture of continuous improvement. Discussions with staff indicated that the skill mix within teams was appropriate, enabling effective care delivery and positive outcomes for individuals.

Team leaders and the manager had previously held direct support roles within the East Dunbartonshire team. This experience contributed to their approachability and understanding of frontline practice. Individuals reported feeling comfortable, contacting the office and spoke positively about their interactions with senior staff.

The manager had introduced a staff-matching approach based on experience and compatibility, ensuring that individuals' preferences were respected. This initiative supported the delivery of personalised care and enhanced the quality of relationships between staff and those they supported.

A 'Productive Wellbeing Kit' was implemented by the manager with the team leaders to promote motivation

and a positive start to the day. Staff reported that this initiative had a beneficial impact on their wellbeing, contributing to a supportive and engaged working environment.

How well is our care and support planned?

4 - Good

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

Care plans had recently moved to a new system which offered various improvements such as effective staff communication and recording in real time. Any updates or changes were immediately received by staff when uploaded to the system. Senior staff and care staff found the system to be beneficial in accessing and updating key information in meeting people's outcomes. As a result of this improvement, the requirement for care planning was met.

Care plans appeared to be written by staff who had a strong understanding of the individuals they supported. However, plans continued to be in the process of transitioning to the new system and needed a few updates to be added. Plans captured daily routines and highlighted what matters most to each person.

While reviews acknowledged individual and family perspectives, there is limited narrative detailing progress against each personal outcome. Enhancing this section would provide a clearer picture of how effectively the service is supporting individuals in achieving their goals (see area for improvement 1).

Areas for improvement

1. In order to demonstrate that people's care plans are being effectively reviewed, the service should incorporate outcome-specific commentary into each outcome to better reflect individual progress and support needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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' (HSCS 1.15).

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

Requirements

Requirement 1

By 1 August 2025, the provider must support people's health and wellbeing by ensuring a personal plan is in place that reflects people's outcomes and wishes. To do this, the provider must at a minimum ensure:

(a) Personal plans set out how people's health, welfare and safety needs are to be met.

(b) Personal plans are subject to regular evaluation and audit to monitor quality and effectiveness.

This is to comply with Regulation 5 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

This requirement was made on 19 May 2025.

Action taken on previous requirement

Plans had much improved since the Birdie system was put in place. People's history, people who were important to them, and places that meant something to them were recorded. Guidance on how to communicate with staff was in place. Staff had handsets to access care plans when they needed information or updates. Reviews are being completed; however, could be more meaningful with more narrative.

Met - within timescales

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

The provider should ensure that people's health, welfare and safety is supported by the effective delivery of visit schedules. To do this, the provider must at a minimum:

- a) Plan visit schedules in advance and review these regularly to ensure they reflect people's care and support needs.
- b) Any changes to agreed schedules are to be communicated with people receiving care or their representative.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 19 May 2025.

Action taken since then

Since the new implementation of the 'Birdie' system which supports the overview and management of scheduling, team leaders and the manager have found that planning visits have improved. In interviews with people and their relatives, they told us that staff were very good and mostly turned up on time unless there was an incident or situation which delayed them. People and their relatives also advised that any

delays were communicated to them. They advised that they felt comfortable phoning the office if they had any issues.

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.

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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	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
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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