

# Turriff House Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
9 July 2025

**Service provided by:**  
Dundee City Council

**Service provider number:**  
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**Service no:**  
CS2003000479

## About the service

Turriff House is a care home for older people situated in a residential area of Dundee. It is close to local transport links, shops, and community services. The service provides residential care for up to 32 people.

The service provides ground floor accommodation across four units, in single bedrooms each with an en suite shower room. There are four sitting/dining rooms. There is also a large communal seating/dining area in the centre of the home and access to well tended gardens.

Two of the units are for people living there on a permanent basis. One unit has been developed as an intermediate care resource and the remaining unit is dedicated to respite use. At the time of the inspection there were 15 people living at the service.

## About the inspection

This was an unannounced inspection which took place on 4 and 5 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 seven people using the service and eight of their family
- spoke with 10 staff and management
- observed practice and daily life
- reviewed documents
- spoke with two visiting professionals.

## Key messages

- Leaders of the service had very good oversight of performance and were improvement-focussed.
- Staff were very good at developing meaningful relationships with people experiencing care and their families.
- The service had developed strong partnerships with external health professionals.
- People were supported to maintain links with the local community.
- The provider was very good at communicating, engaging, and involving all stakeholders in service development.
- Continued investment in environmental improvements would benefit people experiencing care.

## 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
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?

## 5 - Very Good

The service demonstrated a number of major strengths in supporting positive outcomes for people's health and wellbeing. Therefore, we have evaluated performance as very good. Opportunities were being taken to strive for excellence within a culture of continuous improvement.

We received overwhelmingly positive feedback from everyone we spoke with. This included people experiencing care, their families, friends, and visiting professionals. One person told us that the service was "exemplary" and another said, "they give everything to make sure I am happy". We saw that people were happy, we heard lots of laughter and good humoured exchanges, and staff regularly engaged in meaningful ways. This contributed positively to people's overall feelings of wellbeing.

The service worked hard to ensure that people's voices were heard. People experiencing care told us that they were included in conversations about changes to their care, as well as wider service improvements. People told us that they felt "valued" and "respected".

Holistic assessments of people's needs were detailed within their personal plans. Plans promoted wellbeing and gave a good account of what was important to individuals. We saw that the care and support that people received was in line with what was described in their personal plans. This meant that people would continue to experience care that met their changing needs.

Staff knew people well. They were vigilant to changes in people's presentation and potential decline in health. As a result, people were referred quickly to appropriate external health practitioners for further assessment and treatment, if necessary.

The service had built strong relationships with GPs and district nurses. They told us that staff were very good at engaging with their service and followed care guidance given. As a result, people's health needs were managed well.

People were enabled rather than restricted by the risk assessment and management process. For example, we saw someone who was at risk of falls who also found comfort in wandering. Rather than prevent the person from mobilising, staff wandered with them. This contributed positively to the maintenance of good physical and mental health.

We received very positive feedback about the food. The service completed ongoing improvement work engaging with people to update the menu ensuring that people's preferences were catered for. People told us that they enjoyed a wide variety of foods and alternatives were made available when people requested this.

Mealtimes were relaxed and people chose where they wished to have their meals. Some people sat in the large dining room, while others chose smaller dining areas and others liked to receive their meals in their rooms. Staff discretely supported people who needed help to eat and drink and those who required textured diets or fortified meals received this in line with guidance. Kitchen staff and care staff had a good oversight of people's dietary requirements and regularly communicated changes as necessary.

The service provided a wide range of activities which enhanced people's physical and mental health. The activities encouraged movement and connection with others. People were able to join group activities but

were also supported to pursue their individual interests. Some people preferred to spend time alone, the service recognised and respected people's individuality. The service was very good at engaging with the local community helping people to continue to feel connected to their local area.

People were being supported to receive their medication safely and in line with the prescriber's instructions. Staff demonstrated good knowledge about medication administration procedures and documentation met with best practice guidance.

The service had a meaningful connection policy with individual plans outlining how people and their visits would be supported. This included supporting in-person visits as well as video calls. While there were some difficulties with wi-fi in the building, the service had put in place interim measures to support the use of technology for individuals requiring it. This meant that people would be able to remain connected to people who were important during periods of restrictions.

Quality assurance and audit processes regularly assessed and reviewed performance across all aspects of people's experiences. People could be confident that where issues were identified, leaders in the service took action to improve outcomes for them.

### How good is our staff team?

### 5 - Very Good

We have evaluated performance for this key question as being very good. Leaders had a very good understanding and application of legislation that supports staffing arrangements. This contributed positively to people's experiences and outcomes.

Regular assessments took place to assess the number and skill of staff required to support people's outcomes. This included leaders completing audits overnight to ensure that all functions of the service were effective in meeting people's needs.

Detailed information from people's personal plans informed staffing arrangements, ensuring that people received the level of support they needed to continue to enjoy their preferred routines and activities.

Staff were visible throughout the service, responding quickly to people's requests for assistance. Visitors to the service were able to confirm that staff were accessible to them when they visited. This gave them confidence that their loved ones were safe and did not have to wait for care and support.

Staff engaged with people in a friendly, respectful way and spent time meaningfully engaging with them. People told us that they felt staff genuinely cared about them and that they felt "part of a big family".

We observed good communication between staff about people's experiences and tasks that support the function of the service. Staff worked around people's preferred routines. For example, people could have a long lie and they were supported with personal care and room clean at a time that suited them. The service provided a very good example of 24-hour care where staff prioritised people's experiences rather than routine tasks.

When we spoke with staff they provided very positive feedback about the team and their leadership. They told us that they felt supported by leaders and that their wellbeing was considered. Staff told us that their opinions were valued and that they were involved in service improvement discussions. Staff received regular professional supervision and were supported with professional development. There were opportunities to

complete courses of interest alongside core training. Together this supported their resilience and contributed to a positive workplace culture.

## How good is our setting?

## 5 - Very Good

We found significant strengths in aspects of the environment and how it supported positive outcomes for people. Therefore, we evaluated this key question as very good.

The home was clean and odour free with plenty of light and fresh air. It was purpose-built, offering a variety of communal spaces where people could choose to spend their time.

Consideration had been given to the layout and decoration of the lounges in the units to ensure a homely feel for people experiencing care. The atmosphere was relaxed and people looked comfortable in their surroundings. People told us that they had been involved in decisions about improving their surroundings.

People benefitted from spacious bedrooms with en suite toilets and shower rooms which were cleaned and maintained to a very good standard. Bedrooms were tastefully decorated and personalised, people were able to have items that were important to them in their rooms. This supported people to have a sense of belonging. One person said, "It's a home from home, I feel settled here".

People had access to care equipment that supported them to live as independently as they could. Care equipment was kept clean and underwent regular maintenance checks.

Lighting was sufficient to meet the needs of people experiencing a decline in visual acuity and cognitive abilities. This meant that people could continue to safely mobilise independently for longer.

At our last inspection we identified that wi-fi connectivity was poor, causing issues for people to become connected to the internet. The provider had put in place some interim measures which had supported people to be able to make use of smart technology while a more permanent solution is established. Without a more robust system, future development in using smart technology for care management would be impacted. We will follow this up at our next inspection.

Some of the external presentation of the building would benefit from attention. Fascias required to be painted and some parts of the roof were heavily covered in moss. While this did not impact on people's experiences or outcomes at the time of inspection, without attention the future impact may be negative.

People had unrestricted access to a safe outdoor space. There were different seated areas for people to choose from. Opportunities were provided for people to become involved in growing flowers and vegetables if this was something they were interested in, and we heard how vegetables from the garden had been used in meal preparation.

Kitchen, laundry, and domestic service areas were kept well organised and very clean and staff had completed training appropriate to their roles for food preparation and infection prevention and control. Staff were observed throughout the visit to be compliant with best practice guidance for maintaining a safe environment for people living, working, and visiting the service.

Health and safety standards were very good. Leaders completed regular checks and audits to ensure that the service operated in line with legislation. Where issues were identified, leaders took appropriate actions to address these.



## 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 assure the health, safety, and wellbeing of people living in Turriff House, the provider should use all quality assurance systems that are in place to identify and rectify areas for improvement.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This area for improvement was made on 25 January 2024.**

#### Action taken since then

The provider had comprehensive quality assurance and audit processes and staff made an honest appraisal of their findings when completing these. From records sampled we saw that actions identified from these processes had been acted upon and measures taken to improve performance and outcomes for people experiencing care.

**This area for improvement has been 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?	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
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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