

Bluebell Cottage Care Home Service

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Type of inspection:
Unannounced

Completed on:
23 June 2025

Service provided by:
Tiphereth Limited

Service provider number:
SP2003002619

Service no:
CS2017355295

About the service

Bluebell Cottage is a care home for adults with learning disabilities which is situated by the Pentland Hills near Edinburgh. It is managed by Tiphereth Ltd, being one part of community of care homes in the local area. It is a member of the Association of Camphill Communities, who have their cultural and spiritual roots in the works of Karl Koenig and Rudolph Steiner. The guiding vision for Tiphereth is 'in living working and growing together we offer a wide variety of services for adults with learning disabilities, where the qualities of openness, respect, trust and care are nurtured'.

Bluebell Cottage supported four people at the time of the inspection and they lived alongside the manager, his family and foundation students. In addition, a deputy worked full time, but did not live in. The cottage is all on one level had ensuite bedroom spaces for people and shared communal lounge, dining areas. A wraparound garden provided outside space, some of which was enclosed. The local bus service into nearby shops and the city was a short walk from the cottage.

About the inspection

This was an unannounced inspection which took place on 23 June 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 four people using the service and family member
- spoke with six staff and management
- observed practice and daily life
- reviewed documents
- spoke with a professional.

Key messages

- People's health and wellbeing needs were being met.
- People enjoyed various activities.
- People had care and support from a staff team they knew well.

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
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 major strengths in aspects of the care provided and how these then supported positive outcomes for people. The evaluation of the service under this key question was very good.

The cottage had a homely, warm and welcoming feel on arrival. It was clear people and staff knew each other well and were comfortable in each others company and had built positive, trusting, relationships. People had their own bedroom which was decorated as they wished. One person had their own pets which they loved and looked after with help from staff. Staff promoted and encouraged people to be independent. This meant people experienced support from a consistent staff team.

Personal plans were in place for people and included information on how to support them. Staff and the managers knew people really well and regularly reviewed their health and wellbeing needs. Routine monthly checks were in place to monitor wellbeing, as well as monthly assessments of need.

Reviews were regular and included family members. Daily routines provided guidance to staff on how people wished to be cared for and included their preferences. Where risk assessments were needed these were in place. This meant people had a plan in place that was right for them.

People and members met each morning at breakfast and staff discussed any updates over the day that were related to members' health and wellbeing. The communication diary added important dates that included follow up about any health related issues or appointments that were organised. As a result, staff were aware of people's plans and how to support them each day.

Health professionals did not routinely visit the home. People were supported to attend health care check ups and other routine appointments to support wellbeing. The plans contained information about people's health and wellbeing and any medical interventions were recorded, including contact with other professionals. Recent health assessments by professionals were included in the plans. Health screening was in place for people. People were supported to maintain their wellbeing, these interventions helped support people's health. These actions meant people had access to health professionals to keep them well.

A medication system was in place. Medication sheets were held in locked cabinets where medications were held securely. Staff received medication training and had competency checks. Medication audits were completed also. This meant people were supported well with their medication needs and their safety and wellbeing.

People all came together for their meals, including choosing the evening meal. We observed people deciding on the pasta they liked. Some took part in meal preparation whilst other people set the table. People made their own drinks and helped themselves to a snack. Alternatives were available. People's likes and dislikes were recorded in their personal plans. This meant people had access to a range of nutritious choices and were included and involved in the day to day domestic work in their home.

People attended a variety of workshops they enjoyed each day. People were encouraged to walk to and from their daily workshops as able, some of which promoted being outdoors in the gardens. Other workshops were in woodwork, or weaving. People had other interests that included potted fruit trees, candle making, photography or going to the pictures or concerts. People kept in touch with family members using their tablets/phones or met them at local garden centres.

The home had the minibus that took people out and about at weekends to places they enjoyed visiting. People connected with the wider Tiphereth community at the festivals, fetes and workshops and were involved in the newsletter publication. Local community connections included the log and compost delivery. This meant that people were well supported in accessing their local and wider community and in building connections.

How good is our staff team?

5 - Very Good

We found major strengths in aspects of the care provided and how these then supported positive outcomes for people. The evaluation of the service under this key question was very good.

People lived in Bluebell Cottage with the manager, his family and staff members. This provided continuity in the staff team. This meant people who lived in the home experienced consistent care and support.

We observed positive relationships between people and staff. Staff had time to be with people over the mornings, evenings and weekends when they did not attend their workshops. They engaged in meaningful activities such as cooking, walking, trips and things people were interested in. We observed staff engaged in meaningful conversations with people during the inspection. For people this meant staff had time to speak with them and provide care and support.

Staff had a period of induction that included on line and face to face training. An employee handbook contained relevant policies and processes for staff to access. Staff we spoke to felt supported with shadow experience when they started, giving them time to get to know people. A rota was in place for them and was flexible when changes were needed. Staff also had the opportunity to engage with the wider Tiphereth community when they attended the workshops with people. This meant people could be confident that staff were trained to care for them.

Staff and people came together each morning over breakfast to socialise and discuss the day ahead. A team meeting was held each month. Staff also had regular supervision where they had time to discuss their learning and any areas for development. As a result of this, people had care and support that was consistent because people worked well together and had time to reflect on their practice with regular supervision.

How good is our setting?

5 - Very Good

We evaluated this key question as very good. The service demonstrated major strengths to support positive outcomes for people.

Bluebell Cottage is a bungalow. It is a home for the family and people and staff. The home was clean and comfortable with no evidence of intrusive noise or odours. People had access to private areas and communal spaces. People had their own bedrooms decorated as they wished with things that were special to them. People lived in a small group with people they knew well.

Some people used a wheelchair for long distances. No other medical equipment was used by people. People were able to move around the home and outdoors as they wished with access to the garden from the lounge.

The home had an improvement plan in place that included recent refurbishment of the laundry room and hallway with new washing machines on order. A maintenance team supported any works to be completed with regular monthly and annual checks in place for boilers and electrical safety checks. Cleaning schedules were in place and staff were aware of the routines with regards to cleaning. Some people had been working on skills for life, related to the laundry. Staff had access to Personal Protective Equipment (PPE) as required and cleaning products were all kept at height in the laundry room. This meant that people's environment was well maintained.

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.

People had a personal plan in place with relevant risk assessments including a plan for any unexpected admission to hospital. Personal plans contained information on people's likes and dislikes and their daily activities they attended on weekdays. Plans were reviewed and updated regularly. Some people liked to keep a diary whilst others spoke with their families using their mobiles or tablets. The home produced an annual photograph book which people enjoyed looking at. Reviews were regular with people and families involved. This meant people had a personal plan that was right for them.

During the inspection we spoke with the manager about recording information about people's longer term wishes as they age. This was an area the service planned to develop and improve. We will monitor this at our next inspection.

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 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
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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