

Stormont Lodge Care Home Service

Kirk Wynd
Blairgowrie
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Telephone: 01250 872 853

Type of inspection:
Unannounced

Completed on:
19 June 2025

Service provided by:
Balhousie Care Limited

Service provider number:
SP2010011109

Service no:
CS2010272077

About the service

Stormont Lodge is a care home located in the rural town of Blairgowrie, Perthshire.

The home is registered to provide care for up to 32 older people. Accommodation is located over three floors, with access to the second and third floors by stairs or a lift. All bedrooms have a telephone point, television and a 24-hour call alert system.

The staff team at Stormont Lodge state their prime focus is to create a caring environment based on respect and dignity, and to provide a holistic approach to the care of residents.

Stormont Lodge is owned by the Balhousie Care Group.

About the inspection

This was an unannounced inspection which took place on 13 and 17 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:

- five people using the service and five of their family members
- six members of staff and management
- observed practice and daily life
- reviewed documents
- spoke with one visiting professional.

Key messages

- Staff were friendly, warm and welcoming.
- Staff were visible and available to respond to people's requests and needs promptly.
- People had access to a range of activities and social opportunities.
- The service was well led by a management team that supported good outcomes for people.
- Audits and quality assurance processes were being completed regularly.
- The home was clean, tidy and well maintained.

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 leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	4 - 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?

4 - Good

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

Staff had built positive relationships with people living at Stormont Lodge and we witnessed people being supported with kindness and patience. Staff were attentive to people's needs, they took time to talk to them and offered reassurance when required. This meant that people felt respected and listened to and were being supported to achieve their individual outcomes.

People were consulted about their support and their living environment and contributed to decisions regarding menu planning, activities, décor and furnishings. This empowered people to make choices and take responsibility for their everyday lives. People were complimentary about the food and the choices offered and were offered fluids and snacks regularly throughout the day. Mealtimes were a relaxed affair and where people needed assistance to eat and drink, this was done in a respectful and dignified manner. We observed a culture and practice that was positive and a staff team that worked together for the benefit of those receiving support.

People were encouraged to be independent and to do what they could for themselves and those that were mobile and able, were able to move freely around the home. Although at the time of inspection there was no activity coordinator in post, there was a good range of regular and planned activities taking place and effort was made to ensure people had appropriate stimulation according to their needs and wishes. People's interests and hobbies were promoted and supported, including residents whose preference was for one to one time rather than group activities or those who preferred to spend time in their room. We saw pots of home grown tomatoes and peppers planted by a resident and the manager told us about plans to purchase a poly tunnel. When staff were not providing direct support, they took time to engage in conversation with people. Visitors were made to feel welcome and relatives we spoke with were full of praise for the staff and leadership team and the support their loved ones received. People were encouraged to maintain contact with their friends and family and technology was used to facilitate face to face conversations with friends and family living overseas or unable to visit in person. Relatives were kept up-to-date via the home's Facebook page and the home's own newsletter. They were able to keep track of activities and what their loved ones were doing through a monthly activities planner they were sent. We observed people being supported to get the most out of life in a way that was meaningful to them.

We found that medication was well managed and administered in line with best practice. We were pleased to see clear detail and direction in relation to medication protocols for 'as required' medication. This helped keep people safe. The home was clean and well maintained and staff had plentiful access to Personal Protective Equipment (PPE). We observed appropriate use and disposal of PPE. This meant people could be assured that the risk of infection transmission was minimised.

How good is our leadership?**4 - Good**

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

It is important that care services have effective quality assurance systems and processes in place to audit and evaluate the quality of care and support being provided. This helps to ensure that there is a continuous focus on service development that improves outcomes for people living in the care home. The service benefitted from an effective and responsive management team that led by example. Relatives and staff told us that any issues raised were dealt with promptly and fairly.

We looked at a sample of the service's policies and procedures as well as staff files and quality assurance records. We found that the service had completed the appropriate checks and followed the safer recruitment practice. People could be confident staff had been safely recruited.

Residents' and relatives' meetings were held regularly, and people living at Stormont Lodge and their family members were involved in decisions regarding the service and their support. This meant that people had the opportunity to guide the development of the service. We saw that there were regular audits of areas such as care planning, fluid and hydration, wound management and the environment. Audits were linked to and reflected in the service's development plan which highlighted areas for improvement and appropriate actions for achieving same. We found that the management team were committed to maintaining the expected standards and driving a culture of continuous improvement.

Staff we spoke with told us that they felt valued and that they loved their job. They were supported with a comprehensive training programme and regular supervision meetings that influenced their knowledge, skills and values in a positive manner. We observed a culture of team work and a strong desire to provide individualised and person centred care. This was led by the management team and felt by the staff. Staff roles and responsibilities were clear, they were encouraged to learn and develop and were provided with opportunities to do so.

How good is our staff team?**4 - Good**

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

Staff had a good understanding of people's needs, they had time to provide compassionate care and engage with people in a meaningful way. The atmosphere in the home was calm and welcoming, there were sufficient numbers of staff on duty and people were supported by the correct skill mix and deployment of staff around the home. This meant that people received care according to their individual needs and at the right time. Staff knew that if they were overly busy, the deputy manager or manager would assist on the floor and they appreciated that.

Staff were very clear about their individual roles and they helped and supported each other. They spoke about the benefits of supervision, competency assessments and observed practice, these were viewed as helpful rather than a tick box exercise.

Staff satisfaction was high and their commitment to the residents and their colleagues was evident in their willingness to come to work on their day off to support with the planned summer fete. Staff knew they were appreciated and valued, and this has a positive impact for residents and on the recruitment and retention of staff.

All staff we spoke with were aware of the importance of providing person centred support, the Health and Social Care Standards they worked to, what was expected of them individually and the standard of care people living in a care home should expect and are entitled to.

How good is our setting?

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 should be confident of living in a clean, tidy and well maintained setting. We found that people benefited from a warm, comfortable and welcoming environment with sufficient space and comfort to meet their needs and wishes. We walked around the home and found all areas including bedrooms and communal areas to be clean and well maintained, with no intrusive noises or smells.

There were clear, planned arrangements for the regular monitoring and maintenance of the premises and equipment. This included training and assessing staff competency to safely use and maintain any equipment their role required. Staff carrying out housekeeping and cleaning duties were knowledgeable about infection prevention and control and the safe management of contaminated waste. This helped keep people safe.

People benefited from being able to access outdoor areas of the home as well as a secure patio area. We were told that a ramp was being built in order to make the garden more accessible for all residents. When weather permitted, people were encouraged and supported to spend time outdoors and we saw how residents and staff had been involved in planning a garden fete to which family, friends and local people were all invited. This helps build good relations and enables people to feel and maintain connected to their local community.

People should be able to decide on the decoration, furnishing and layout of their bedroom. We saw examples where residents had personalised their bedrooms according to their preferences and taste. This helps people to feel at home. Communal areas had also been redecorated and people had been involved in making decisions about paint colours and wall displays. There was signage in place to help orientate people to their surroundings and notice boards displayed the correct dates and planned activities for that day. People had access to communal and private sitting areas depending on their needs. This supports people's right to choice and independence.

People had access to equipment that supported their independence, and aids and appliances were subject to regular maintenance checks to help identify and act on any wear and tear. Mattress checks and a deep clean of people's bedrooms were carried out regularly. This ensured corrective action was taken when needed and that items were replaced as required. These checks help to keep people safe.

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 should expect to benefit from personal plans, or care plans, that are reviewed and monitored regularly. Each person's plan contained information and a good level of detail to guide staff on how best to care and support each person's care needs. These included people's preference for how they wished to be supported and how their independence was promoted. Support plans and corresponding risk assessments were person centred and well written, and they contained sufficient detail to reflect the care planned and provided. The electronic care planning system provided evidence of good communication. We saw that advice and guidance was sought when needed, and that appropriate and timely referrals were made to external health professionals. The outcome of any visits and/or advice was recorded; this helped to ensure that any changes to people's health needs were identified and dealt with appropriately.

Personal plans also contained information regarding people's life history, including who and what was important to them. This information helped staff to connect and support people in a meaningful way. Personal plans and risk assessments were reviewed regularly, with documentation updated as people's needs changed. We saw that daily monitoring charts i.e. food/fluid intake, wound management and personal hygiene charts were completed appropriately. Where people were at a high risk of falls, there were processes in place to ensure their health, wellbeing and safety needs continued to be met. These measures help ensure that people's care, support and environment continues to meet their needs.

Residents and their representatives were involved in the assessment, care planning and review process. A review matrix helped keep track of when care reviews were due, and we saw that these had taken place in line with legislation. Where appropriate, do not attempt cardiopulmonary resuscitation (DNACPR) documents were in place and we saw evidence of anticipatory care plans (ACPs) having been completed. This meant that people could be confident that their end of life wishes and choices would be respected.

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?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.1 Staff have been recruited well	4 - Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - 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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