Trinity House Care Home
Care Home Service

80 Craighall Road
Edinburgh
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Telephone: 01313 413 444

Type of inspection:
Unannounced

Completed on:
24 November 2025

Service provided by:
Trinity Craighall LLP

Service provider number:
SP2018013171

Service no:
CS2018368961

About the service

Trinity House Care Home is a care home for older adults, situated in a residential area of north Edinburgh, close to main bus routes and local amenities. The home is set within its own well-maintained grounds with private parking.

The home is currently registered to provide a care service to a maximum of 55 older people. The provider is Trinity Craighall LLP and is associated with other care homes across Scotland.

Accommodation is provided over three floors with the upper levels accessed by lifts or stairs. All bedrooms have en-suite facilities, and some are large enough to accommodate twin or double beds. Additional amenities include a cinema, small dining room for fine dining and celebrations, library, central area with café/bar, a hairdresser, and communal lounges with dining areas on each floor.

At the time of the inspection, 52 people were living at Trinity House Care Home.

About the inspection

This was an unannounced inspection which took place on 17 and 18 November between 09:30 and 17:30. The inspection was carried out by three inspectors 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 18 people living in the home
- spoke with people's relatives
- spoke with 16 staff and management
- observed practice and daily life
- reviewed documentation
- spoke with visiting professionals
- considered questionnaire responses from people using the service, relatives, visiting professionals and staff

Key messages

• Staff treated people using the service kindly and with compassion.
• People were offered a variety of stimulating activities which benefitted their health and wellbeing.
• Management staff had good access to external health professions, giving people confident of having the right healthcare from the right person at the right time.
• Medication processes were well organised, and people could be confident that they were supported safely with their medication needs.
• A range of effective methods was used to gather feedback from people and their representatives, meaning people felt listened to.
• The manager had a comprehensive improvement plan in place, with clear and detailed objectives for ongoing service development.
• • Staff were supported well by managers and had the opportunity to work across all areas of the home, building meaningful relationships with people.
• The home provided a warm, homely, and welcoming environment which was well-maintained and enhanced individuals' comfort and wellbeing.

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?	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? 4 - Good

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

We observed good interactions and engagement between people using the service and staff. Staff were described as 'kind,' 'compassionate' and 'helpful' with several relatives saying how welcome they were made to feel. Others commented on the effort made by staff to provide entertainment.

There was a wide variety of interesting activities taking place throughout the home, and people were able to choose which ones they wished to join. As a result, people's health and wellbeing benefited from meaningful stimulation and regular social contact with others.

People always had access to nursing care, which provided reassurance that their healthcare needs would be met promptly. Managers and nurses had a good relationship with the local GP practice, supported by weekly visits to the home to discuss individual cases. External health professionals were complimentary about the service, noting that managers and staff created an environment in which people could thrive. Overall, people could be confident of having the right healthcare from the right person at the right time.

We saw good records to evidence people had support some care needs such as such as oral care, wound care, catheter care, personal care. We saw quite a few gaps in the monitoring for people's changes in position. This had been an area for improvement at a previous inspection. We were not assured the necessary improvements had been made, therefore the area for improvement remains in place. For further information, please see the section: 'What the service has done to meet any areas for improvement we made at or since the last inspection.'

Records of prescribed medication administration were well organised and accurately completed, supported by effective oversight from senior staff to maintain good standards. Although topical medication was administered as prescribed, some instructions lacked clarity and could be confusing for care staff. We advised the manager to ensure guidance on the application of creams was clear, and the manager agreed to address this immediately. Overall, people could be confident that they were supported safely with their medication needs.

The service provided positive mealtime experiences in a calm and unrushed manner, with choice offered and meals served promptly. People could choose where to eat, either sociably with others or on their own. Alternatives to the main menu were available on request. Snacks and drinks were offered throughout the day, and people had access to these in each dining area and in the main reception bar, including fresh fruit. People could be assured of receiving good support around food and drink.

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.

Managers had a high presence within the home and people felt they were approachable. The manager knew people and their representatives well and had a good understanding of each person's unique circumstances.

A range of effective methods was used to gather feedback from people and those important to them. Regular resident meetings focused on topics that mattered to people, and meetings with relatives and friends were well documented, with clear follow through on agreed actions. Quarterly newsletters celebrated successes and shared highlights from people's lives, helping keep everyone informed and involved. People could be confident that their views were listened to and that their needs and wishes were central to shaping improvements within the service.

The management team maintained a comprehensive programme of quality audits and checks covering all aspects of the service. These were carried out regularly and to a high standard, with clear systems in place to track actions and ensure improvements were implemented promptly. The robust processes provided managers with very good oversight of performance and helped sustain consistently high standards across the home.

The manager had a comprehensive improvement plan in place, with clear and detailed objectives for ongoing service development. Specific staff were identified to lead actions, and the plan was regularly reviewed to ensure progress was maintained. We advised the manager of the value of incorporating self-evaluation, which would give people additional confidence in the provider's commitment to continual improvement. We look forward to seeing how the provider further develops their quality assurance processes in future to sustain and build on the high standards already achieved.

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.

People could be confident staff were recruited in line with safer recruitment practices. Necessary checks were completed prior to any new staff member starting in post. The management team invested time in understanding newly recruited staff so they could foster positive relationships between staff and people using the service, based on shared interests.

The registered manager used regular analysis of individuals' needs to guide staffing levels and consistently provided more care hours than assessed. Staffing levels and skill mix were strong across the home, with each floor led by nursing and senior support staff. People benefitted from the effective deployment of staff, enabling responsive and person-centred support.

Staff worked collaboratively across roles, demonstrating effective communication and teamwork. Staff told us they enjoyed working together and had the opportunity to work across all areas of the care home, building meaningful relationships with people. This cohesive approach supported safe, consistent care and enhanced individuals' wellbeing.

Staff induction and training were of a high standard, with strong compliance in the completion of required training courses. Staff told us they felt supported by managers, who were visible and accessible. Regular forums were in place to support staff with evidence of feedback and actions followed up. This meant people could be assured the staff were equipped with the support, skills, and knowledge to carry out their roles.

How good is our setting? 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.

Trinity House was a warm, homely, and welcoming environment which was well-maintained and enhanced people's comfort and wellbeing. A calm and peaceful atmosphere was evident throughout, which encouraged people to feel relaxed and at ease. The layout included a variety of open, communal spaces where people could move around safely and easily. This promoted independence, social interaction, and meaningful engagement.

Bedrooms were personalised and tastefully decorated, with choice of lighting, such as wall, bedside, and ceiling lights. They were clean, tidy bright and included en-suite facilities, giving people privacy.

The accommodation was very clean and in good order throughout. A dedicated housekeeping team maintained the home to a high standard, evidenced by monitored cleaning schedules. Consequently, people experienced clean, tidy, and well-maintained premises, furnishings, and equipment.

We reviewed maintenance records and health and safety certificates, all of which were found to be in good order. This included evidence of regular checks of the full environment, including equipment and water quality. These demonstrated a strong commitment to compliance and risk management, supporting a safe and well-maintained setting for people living, working, and visiting the home.

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.

Personal plans were developed with information and guidance about each person's needs and planned outcomes. Good details about individuals' preferences were documented and people's histories were described, which helped staff make meaningful connections with them. Risks were assessed, giving staff instruction about how to keep people safe. People could be confident that staff had sufficient and accurate guidance to deliver their care and support safely and in line with their wishes.

Maintenance of written records, including daily notes and other documentation used to review people's care and support, demonstrated some inconsistencies. Whilst most records were kept up to date, there were a few gaps in monitoring; however, these were identified through management audits and discussed with staff. The manager took action to address these omissions, which meant people could be confident that any shortfalls were recognised promptly and improvements were put in place to maintain safe, consistent care.

To support the best possible outcomes, people should be empowered to have meaningful involvement in reviewing their own care and support. Regular review meetings took place with individuals, their representatives and, where appropriate, external professionals. We spoke with the manager about ways to strengthen how people's views and preferences are captured and reflected within these reviews. This included exploring more robust methods of evidencing people's input when they are unable to attend meetings in person.

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 support people's health and wellbeing needs, the manager should ensure recordings of people's changes of position is undertaken to evidence good practice. Records should be maintained in line with people's planned care and support needs.

This is to ensure care and support is consistent with the Health and Social Care Standards which state

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 30 September 2024.

Action taken since then
During the inspection, we observed staff practice and reviewed relevant documentation. People's planned care and support needs were clearly assessed and defined, including requirements for positional changes throughout the day and night. However, the recordings intended to evidence that this support was provided were inconsistent.

As a result, we were not assured that the necessary improvements had been made to ensure people's positional relief was being delivered effectively and at the required frequency.

This area for improvement has not been met and remains in place.

Previous area for improvement 2

To promote best outcomes for people, the manager should ensure personal plans contain the necessary information about people's preferences for end-of-life care.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'My future care and support needs are anticipated as part of my assessment.' (HSCS 1.14).

This area for improvement was made on 30 September 2024.

Action taken since then
The registered manager had provided anticipatory care planning documents to people using the service and their representatives, to encourage them to think about and discuss future care needs.

People's views were documented in their care and support plans, reflecting their wishes if they experienced a deterioration in their health.

This area for improvement is met.

Previous area for improvement 3

To ensure people experience high quality care, the provider should ensure that staff have regular opportunities to reflect on their practice through formal supervision with their manager. Discussions should be reflective and incorporate feedback on observations of practice, learning from training and areas for development.

This is in order to comply with the Health and Social Care Standards which state:

"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).

This area for improvement was made on 21 July 2022.

Action taken since then

Since the last inspection, managers had undertaken regular one to one supervision with staff, which ensured they had opportunities to reflect and comment on their practice.

The supervision template encouraged reflective practice so they could discuss situations which may not have worked well and what they could have done differently. This demonstrated a commitment to supporting staff to develop their skills and improve their practice.

This area for improvement is met.

Previous area for improvement 4

People's chosen representative should be informed of any changes in their health and wellbeing and/or any diagnosis as early as reasonably practical.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: 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.

This area for improvement was made on 25 July 2025.

Action taken since then

Records of conversations with people's representatives were well maintained. Discussions were held in person, by phone and via emails. The level of information documented was dependent on people's unique situations and experiences.

We were assured that staff communicated regularly with people's relatives and friends where appropriate to share key information.

This area for improvement is met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - 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 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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