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Simply Inverness Ltd
Stewart House
Pochard Way
Strathclyde Business Park
Bellshill
ML4 3HB

27 November 2025
2025383382
CS2019375425

Dear Simply Inverness Ltd

COMPLIANCE WITH IMPROVEMENT NOTICE

On 07 October 2025 you were served with an Improvement Notice in relation to Castlehill Care Home, Caulfield Road North, Cradlehall, Inverness, IV2 5J in terms of section 62 of the Public Services Reform (Scotland) Act 2010 ("the Act"). The Improvement Notice stated that unless there was a significant improvement in provision of the service, Social Care and Social Work Improvement Scotland (hereinafter referred to as "the Care Inspectorate") intended to make a proposal to cancel your registration. The Improvement Notice specified the nature of the improvements to be made, and the period within which they were to be made.

As there has been a significant improvement in the service, the Care Inspectorate has decided not to proceed to make a proposal to cancel the registration of the service. Our conclusions about the improvements made are noted below.

Improvements

1. **By 17 November 2025 extended from 20 October 2025**, you must ensure that people's health, safety, and wellbeing needs are being accurately assessed, documented, and met.

To do this, you must as a minimum:

a) assess and record people's health, safety, and wellbeing needs within their care plan, taking account of their choices and preferences;

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Page 1 of 5

- b) demonstrate that any risks to people's health, safety, or wellbeing are identified, managed, and clearly recorded as part of the care planning process;
- c) demonstrate that each person's health and wellbeing needs are consistently monitored and evaluated to inform the level of care that they require; and
- d) implement a system whereby continence care, skin care, and pain management are regularly undertaken and monitored, and the results are accurately recorded. Where risk is identified, action must be taken promptly to address this, and a record must be maintained detailing the action taken.

This is in order to comply with Regulation 4(1)(a) and Regulation 5 (1) and (2) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

Action taken:

The care plans of people living in Castlehill Care Home had been recently updated and better reflected people's outcomes, choices, and preferences. Where risks to people had been identified, such as in relation to falls or fluid intake, there was oversight and monitoring in place to sufficiently identify and reduce the risk.

Support with continence care had improved, and both feedback and care notes reflected an increase in the level of continence checks provided. We observed staff being responsive to people's requests for continence care during visits on 20 and 21 November 2025. An analysis of call bell response times between 19 and 22 November 2025 showed responses to calls were usually prompt, however we received feedback from people that they felt they had to wait for long periods of time. Call bell responses must continue to be monitored by the service to ensure call bells are working and that staff receive and respond to calls promptly.

The management of people's pain was appropriate, and pain relief was being administered to ensure people remained comfortable. We noted some inconsistencies in medication notes at times, and the management team were prompt to investigate these. Medication audits should continue to be used to ensure the management team have full oversight of medication management in the service.

Regular wound and skin care was being provided, and improvements were noted in people's skin condition. There were no new pressure wounds within the service which evidenced people's skin was being cared for appropriately. The wound assessments and documentation used within the service required more detail, and better quality photographs should be included within these, this feedback was acknowledged by the management team.

We concluded that this required improvement was met.

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2. **By 31 October 2025**, you must ensure that there is knowledgeable, skilled and compassionate leadership at all levels in your organisation to meet people's health, welfare and safety needs. To do this, you must, at a minimum:

a) Undertake (and be able to demonstrate) an assessment of the knowledge, skills and experience of all staff in leadership roles.

b) Take action to ensure that leaders:

- i. have the necessary knowledge and skills required for their roles,
- ii. direct staff to deliver safe and compassionate care,
- iii. transparently communicate and work with other professionals to support safe care and good outcomes for people.

c) Put in place and implement robust systems with clear lines of responsibility and professional accountability. This must include health and care governance and arrangements to intervene and provide direction, guidance and support for staff when there are indications that people's needs and outcomes are not being met.

This is in order to comply with Regulations 4(1)(a) and 7(2)(c) and 9 (2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), and section 8(1)(a) of the Health and Care (Staffing)(Scotland) Act 2019

Action taken:

An assessment of the management team within the home had been undertaken, this identified strengths and areas for professional development. We observed signs of good quality leadership and professional knowledge from the management team during visits, and saw the new leadership team had begun to grow in confidence as they established their roles and responsibilities.

Handover and 'flash' meetings between staff and shifts were thorough and well led. Communication of important information, such as changes to medication, to the wider staff team were not always carried out well. Going forward the service should ensure that information is shared with staff clearly, so they have the information needed to effectively care and support people.

Information sharing from the service to professionals had improved, however the consistency and quality of information was variable at times and should continue to be an area closely monitored by the management team.

Staff working within the service felt better supported in their roles. Shifts within the service were led more efficiently, and expectations of staff were clearer. Where

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concerns relating to staff practice had been identified, these were actioned promptly to provide support, reassurance, and accountability.

We concluded that this required improvement was met.

3. By 31 October 2025, you must ensure that people are supported at all times by sufficient numbers of suitably skilled and compassionate staff to meet their health, safety and wellbeing needs. In particular, you must ensure that:

- a) Staffing levels and skill mix are informed by an effective process for assessing each person's care and support needs and how many staff hours are needed to meet their needs, including when there is a significant change in those needs.
- b) There are enough suitably qualified, knowledgeable and skilled staff, who are familiar with and able to meet people's care needs and preferences, on shift at all times.
- c) That staff have the right knowledge, competence, skills and compassion to safely care for and support people within the service.

This is in order to comply with Regulations 4(1)(a) and 9(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), and sections 7 and 8 of the Health and Care (Staffing)(Scotland) Act 2019

Action taken:

Since the improvement notice was issued on 07 October 2025 we carried out visits to the service on 15 separate occasions and found staffing levels to be consistent and appropriate during visits, with female care staff always on shift. There remains pressure points through the day during which supernumerary staff should ensure they are supporting with, particularly when time critical medication is due to be administered, as there were occasions when this was delayed, such as on the morning of 20 November 2025.

The service's staffing arrangements were informed by a monthly dependency analysis which included consideration of how to manage risks, such as mobility and falls, this included a buffer for holidays, training and staff absences. Previous months analyses concluded you were providing above the direct hour required based on people's assessed dependency and care needs.

We observed some kind and caring interactions by staff during visits, and also highlighted some missed opportunities by staff to make meaningful connections with people when supporting them, such as during mealtimes. There is a need for formal

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observations of staff practice to ensure care is not task focused and staff are aware of, and supported with, their professional development needs.

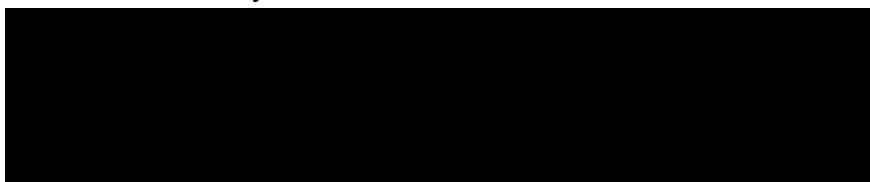
Staff spoke of their continued commitment to the service, and how recent improvements made them feel happier at work, this was reflected in feedback from some relatives who felt staff were trying very hard to provide the care people required.

We concluded that this required improvement was met.

A copy of this notice has been sent to the local authority within whose area the service is provided.

The Improvement Notice dated 07 October 2025 is no longer in force.

Yours sincerely



Debbie MacKinnon

Team Manager

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cc:

Lead Agency – [REDACTED] - NHS Highland

[REDACTED]

Local Authority – [REDACTED] – Highland Council

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