

Castlehill Care Home Care Home Service

Caulfield Road North
Cradlehall
Inverness
IV2 5JU

Telephone: 01463247050

Type of inspection:
Unannounced

Completed on:
2 October 2025

Service provided by:
Simply Inverness Ltd

Service provider number:
SP2019013321

Service no:
CS2019375425

About the service

Castlehill Care Home is a purpose-built facility for older people, located on the south-east outskirts of Inverness, approximately five miles from the city centre. The three-storey building is set within its own grounds, which include an enclosed inner courtyard. There are balconies on the upper floors of the home, and some ground floor rooms open directly onto a patio within the courtyard. All bedrooms include ensuite facilities.

At the time of inspection the ground floor was closed for refurbishment and all residents were living on the middle and top floors of the home. A lift is in place to enable access between floors. Each floor has communal lounge and dining areas, and separate kitchenettes for preparation of snacks and hot drinks. The home has a salon and cinema room available for use. The home includes on-site laundry and kitchen facilities, with most meals prepared in house.

The provider is Simply Inverness Ltd, part of the Morar Living group.

About the inspection

This was an unannounced follow up inspection which took place between 28 and 30 September 2025. The inspection was carried out by four 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, interacted, or spent time with all people using the service and seven of their family/representatives
- spoke with 10 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Our inspection raised significant concerns in relation to how people's health, welfare and safety needs were met. As a result, we issued the service with an Improvement Notice on 7 October 2025. For further details of this enforcement see the service's page on our website at www.careinspectorate.com.

Key messages

- We could not be assured that people's information was being secured appropriately.
- Improvements previously made by the service had not been sustained.
- Staff were not well led, and their roles and responsibilities were not clear.
- Quality assurance processes were not being used effectively to identify and action issues.
- We had serious concerns about people's health and wellbeing during the inspection.

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?	1 - Unsatisfactory
How good is our leadership?	1 - Unsatisfactory
How good is our staff team?	2 - Weak

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

1 - Unsatisfactory

We evaluated this key question as unsatisfactory. This was because we found major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for people.

On regular occasions staff did not recognise when people needed assistance, for example, with hand hygiene or continence support, and inspectors had to prompt staff to provide aspects of basic care and support during the inspection.

People were not consistently or adequately supported to eat or drink. Some people who were provided with their meal while in their bed were left to eat in an undignified way. This meant they did not receive respectful or person centred support, and their dignity and comfort were compromised. Drinks were available to people in communal areas and their bedrooms but many people were not able to access these independently, and were not provided with appropriate support to drink regularly. This meant people were thirsty and at higher risk of inadequate hydration, which can impact negatively on their health and wellbeing. We sampled fluid intake records, used to monitor if people have consumed enough fluids, and found these were inconsistent or inaccurate which meant it was difficult to assess if people were adequately hydrated.

Assessments for equipment or techniques to move or position people safely were not always completed or available promptly after changes in their health. This meant people were supported by staff who did not have the information needed to be confident in how to move them safely, this increased the risk of injury from inappropriate moving and assisting.

People were not being supported with adequate pain management through pain relief medication, and regular assessments of people's pain were not being completed. Where people were prescribed PRN ('as required') pain relief, its effectiveness was not always being checked after administration which increased the risk of people being left in pain or discomfort.

We directed the provider to ensure safe and compassionate care is provided within the improvement notice issued 7 October 2025. For further details of this enforcement see the service's page on our website at www.careinspectorate.com

How good is our leadership?

1 - Unsatisfactory

We evaluated this key question as unsatisfactory. This was because we found major weaknesses in critical aspects of performance which require immediate remedial action to improve experiences and outcomes for people.

Leadership and management in the service failed to provide appropriate oversight and placed people's health and wellbeing at risk. Communication from the management team to staff was ineffective, it was not clear how responsibilities were being delegated amongst the staff team during each shift and this meant essential care was being missed or was inconsistent.

Important information about how to support people following changes in their health had not been sought or communicated by leaders to staff, this meant staff did not have access to the essential information they needed to provide safe care and support.

Systems in place to provide oversight and quality assurance of care and practice were ineffective. Managers were present in the service but were not actively noticing concerns, such as issues with the administration of medication and effective pain relief, this placed people's health and comfort at risk. Where practice concerns were identified and raised by inspectors these were often met with defensiveness, rather than a strategy to move forward.

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How good is our staff team?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

There was an adequate number of staff on shift during the inspection, and at the time of inspection the service had not used agency staff for over one month. The provider had organised staff usually based in their other services to support the home.

We found that despite having adequate numbers of staff on shift, they were not working together effectively to meet people's basic care and support needs. There was a lack of organisation on the first floor and it was not clear which staff were responsible for tending to certain aspects of care, such as checking people's continence aids, this meant at times people were left in wet or soiled continence aids because support had not been provided.

Staff did not show initiative and were often focused on specific tasks instead of providing compassionate and responsive care, this meant risks and important opportunities were missed, such as encouraging and supporting people to drink fluids to prevent dehydration.

Whilst some staff showed dedication and commitment, morale was low and staff told us they felt under pressure.

We directed the provider to ensure safe and compassionate care is provided within the improvement notice issued 7 October 2025. For further details of this enforcement see the service's page on our website at www.careinspectorate.com

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 12 September 2025, the provider must ensure that all data, including people experiencing care and staff personal data, is appropriately stored and protected.

In particular, but not exclusively, you must ensure that:

- a) There is a review of the current practices, policies and processes relating to the management of personal data and GDPR; and ensure these are fully implemented and monitored in line with current best practice.
- b) That all staff who have responsibility for the management of personal data and have the necessary skills and knowledge to be practicing safely at all times and that they have a clear understanding of their role and responsibilities.

This is to comply with Regulation 4(1)(a) and (b) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which states: 'I receive an apology if things go wrong with my care and support or my human rights are not respected, and the organisation takes responsibility for its actions'. (HSCS 4.4).

This requirement was made on 24 June 2025.

Action taken on previous requirement

We noted that sensitive and confidential information was kept in nursing stations which remained easily accessible to residents and visitors during periods of the day.

We found staff log in details to be saved on the digital medication system which meant people's sensitive information could be accessed to any system user.

We found care notes accessible to people's representatives to contain information relating to other people.

The requirement is **NOT MET**. We have agreed to extend the timescale for meet this until 31 October 2025.

Not 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?	1 - Unsatisfactory
1.1 People experience compassion, dignity and respect	2 - Weak
1.2 People get the most out of life	2 - Weak
1.3 People's health and wellbeing benefits from their care and support	1 - Unsatisfactory
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	2 - Weak

How good is our leadership?	1 - Unsatisfactory
2.4 Staff are led well	1 - Unsatisfactory

How good is our staff team?	2 - Weak
3.3 Staffing arrangements are right and staff work well together	2 - Weak

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