

Key – Highland (Caithness and Sutherland) Support Service

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Type of inspection:
Unannounced

Completed on:
6 November 2025

Service provided by:
Key Housing Association Ltd

Service provider number:
SP2003000173

Service no:
CS2004079342

About the service

Key Community Supports - Highland (Caithness and Sutherland) is operated by Key Housing Association Ltd, a registered social landlord that provides accessible housing and support in 15 local authority areas across Scotland.

The service is managed by the area manager and the staff team includes service development managers, team managers, enhanced support workers and support workers. The staff team offices are based alongside the core and cluster accommodation in Thurso, Wick and Golspie. Support is provided within these tenancies and also in the wider community in the Caithness and Sutherland area.

The aim of the service is to provide services that enhance the quality of life for adults with disabilities and complex care needs. This includes housing support and advice, providing assistance with personal care which can be 24hr care, and supporting individuals to stay connected with their families, activities and the local community.

About the inspection

This was an unannounced inspection which took place between 3 and 6 November 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 engaged with twenty people using the service, four relatives and spoke with staff and management. Feedback was obtained from seven health and social care professionals and we observed interactions between staff and the people they supported.

Key messages

- People were involved and included in developing the care and support they needed.
- People offered very positive feedback about the care and support they receive from the service.
- Trusting relationships have been established between staff and people receiving the service and their families.
- The staff team demonstrated a strong value base and commitment to supporting people to improve outcomes and address the challenges in their lives.
- The staff team were supported with regular opportunities to meet with managers, as a team and discuss any learning and development needs 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?	5 - Very Good
How good is our staff team?	5 - Very 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

In this part of the inspection report we considered one quality indicator. 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.

Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support

People were treated with compassion, dignity, and respect. We visited people in their homes, attended a group activity and obtained feedback from questionnaires. We found that people benefited from positive relationships with the staff team. The care and support that people were experiencing was right for them and based on their needs, abilities and choices. The support and encouragement shown through these visits also promoted the person's independence, dignity, and privacy. Everyone was very complimentary about the care staff and the care and support that they received from the service.

People using the service were supported to stay connected with those important to them, and to keep in touch with the local community. This included having access to different social opportunities to promote physical health and mental stimulation. Support was person-centred and was flexible around changing needs and opportunities. People spoke about their experiences and in addition to the supports with daily life, we saw examples of positive experiences including trips and holidays. We also found that staff had supported people to explore and achieve personal goals.

People were confident they were supported by staff who know their needs and preferences well. This consistency of carer is essential to building trusting relationships. People spoke positively about their experience of consistency of care and if there was a change, they were normally informed of this. We observed meaningful interactions shown through kindness, compassion and a shared sense of humour.

Personal plans help to direct staff about people's support needs and their choices and wishes. Personal plans were developed in partnership with people receiving support and/or their family representatives. These offered good information regarding the individual's needs and preferences. Daily recordings of people's wellbeing and presentation were documented in care records in the home. The service was able to demonstrate a system for ensuring that care reviews were carried out when the individuals circumstances had changed or within a six month period. We shared a concern with the management around the access to these personal plans, as they were extremely large documents. The management confirmed that they recognised this and are currently reviewing how best to address this to ensure that they are easily accessible for all staff and people using the service and their families.

We heard that staff highlighted healthcare concerns and calls were made to health professionals, such as GPs, district nurses and the mental health team. These were recorded in the plans and any actions taken. A collaborative approach helps keep people well. The service should be constantly exploring ways to improve the working relationships with other professionals involved in people's support. We received feedback from seven health and social care professionals, all testified to the person-centred care and support that they have observed and the positive outcomes which have been experienced by people receiving the service.

How good is our staff team?**5 - Very Good**

In this part of the inspection report we considered one quality indicator. 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.

Quality Indicator: 3.3 Staffing arrangements are right and staff work well together

People were confident that they will be supported and cared for sensitively by staff who know them, their needs, strengths and preferences. We found that the staffing arrangements were determined by an assessment of people's support needs. Whilst there are challenges in recruiting new members of staff, the service provided is from a stable team who knew the people well and were able to highlight when there were changes and liaise with other health and care professionals.

Staff were trained, competent and skilled. The service offered a range of training and development opportunities via classroom training, online training programmes and from external professionals. Staff spoke positively about the training opportunities and support from their managers.

We found that the staff team had planned opportunities to discuss aspects of their work, development and wellbeing through team discussions, reflective accounts and formal supervisions. There were also regular opportunities for staff to meet together in their own areas to share practices and discuss care provision.

We concluded that the staff team worked well together. At every level of the staff team, we found that there was a strong commitment to working as a team in order to provide good outcomes for people.

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 ensure that people continue to benefit from good access to local healthcare agencies, the service should ensure there is regular communication with the local GP service.

In order to achieve this the service should:

- a) identify a link person(s) who would be responsible for communication directly with GP practices;
- b) agree a protocol for regular communication to discuss health issues affecting supported people that do not have capacity;
- c) ensure that the results from visits to healthcare professionals including those involving tests for health issues are followed up in a timely manner.

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

'I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services.' (HSCS 1.28).

This area for improvement was made on 19 December 2022.

Action taken since then

We found that the areas for improvement outlined above had been addressed.

This area for improvement has been met.

Previous area for improvement 2

To provide staff with clear information and good guidance about supporting people, their support plans should:

- a) be reviewed, and updated to ensure information is accurate, up to date and relevant to their current needs, preferences and wishes;
- b) develop anticipatory care plans with individuals, particularly those with life limiting or degenerative conditions to ensure support continues to reflect their known wishes and choices.

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

'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.' (HSCS 1.15); and

'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions.' (HSCS 2.11).

This area for improvement was made on 19 December 2022.

Action taken since then

We found that the areas for improvement outlined above had been addressed.

This area for improvement has been met.

Previous area for improvement 3

To keep people safe and promote their wellbeing, the provider should improve prevention, recording and monitoring of accidents and incidents in the service. The service should ensure a complete record of the incident and what changes occurred as a result of the accident or incident. This should include but is not limited to:

- a) the details of the debrief following the incident/accident;
- b) complete or update the risk assessment;
- c) show consideration of actions that could or will be introduced or changes made that would reduce risk of recurrence.

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

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20)

This area for improvement was made on 19 December 2022.

Action taken since then

We found that the areas for improvement outlined above had been addressed.

This area for improvement has been met.

Previous area for improvement 4

To support people, experience high quality care and support, the provider should ensure robust quality assurance processes are rigorously implemented and monitored and actions for improvement are clearly identified with timescales for completion and review. This should include, but is not limited to:

- a) regular and ongoing staff support through 1:1 supervision meetings; team meetings and competence assessments;
- b) reporting on the outcomes from stakeholders surveys;
- c) review of documentation.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

This area for improvement was made on 19 December 2022.

Action taken since then

We found that the areas for improvement outlined above had been addressed.

This area for improvement has been met.

Previous area for improvement 5

When there are difficulties in providing staffing to people due to unplanned absence or an emergency, a contingency plan and risk assessment should be in place for each person. This to ensure people have the right support where possible, and the provider knows they are safe.

This is to ensure care and support is consistent with Health and Social Care Standard 4.14: My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.

This area for improvement was made on 19 December 2022.

Action taken since then

We found that the areas for improvement outlined above had been addressed.

This area for improvement has been 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?	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

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