

# Cale House Housing Support Service

Millburn Road  
Inverness  
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Telephone: 01463 718 616

**Type of inspection:**  
Unannounced

**Completed on:**  
11 December 2025

**Service provided by:**  
Church of Scotland Trading as  
Crossreach

**Service provider number:**  
SP2004005785

**Service no:**  
CS2014331596

## About the service

Cale House is operated by CrossReach, the Church of Scotland's Social Care Council, which provides social care services across Scotland. The service provides furnished accommodation for up to 22 vulnerable homeless people with addictions. Service users are offered occupancy agreements for a maximum of two years and are supported to move on into their own tenancies.

Cale House is situated in the centre of Inverness, next to the main shopping centre and is convenient for local amenities including public transport. It is registered to provide a housing support service to adults aged 16 and over with substance misuse and addiction problems.

## About the inspection

This was an unannounced inspection. It took place between 8 and 11 December 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 six people using the service;
- considered feedback from three partnership agencies;
- spoke with staff and management, and
- reviewed documents and relevant paperwork.

## Key messages

People felt safe living in Cale House.

Staff were non judgemental, respectful, kind and caring when supporting people.

Staff took time to listen to people and helped them with any issues they had.

People had grown in confidence and life skills with the support of staff.

People were fully involved in their care and support.

There needed to be more robust quality assurance systems in place.

## 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 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 made an evaluation of good for this key question. This means there are a number of important strengths which, taken together, clearly outweigh areas for improvement.

People spoke very highly of the care and support they received from staff. Staff were non-judgemental, kind and caring. Staff took time to listen to people and helped them solve any problems they had. A number of people living in Cale House had experienced trauma in their lives. They told us they did not think they would be alive, were it not for the support of staff. They felt safe at Cale House and had grown in confidence and learnt new skills. Staff took time to reassure people when they were feeling stressed and anxious. People were very appreciative of all the help and support they got, they felt Cale House offered them the chance to get their life back on track. Some of the comments from people we spoke with included:

"The staff don't judge you, they look at you like a person and not a criminal."

"It is really quiet and well run and we feel safe here. We would speak to staff if we have any worries."

"Without the staff I am sure I would have died. I never feel alone here and staff have helped me get work."

People were supported to register with local health agencies. Where appropriate, partnership agencies were kept up to date with changes to their clients' physical and emotional well-being. Feedback from partnership agencies, was that staff were professional and worked in a person centred manner. Staff were knowledgeable about support groups in the community and signposted people living in Cale House to these. The groups supported people with their recovery, and to establish themselves in the local community. Some of the comments from people we spoke with included:

"Cale House provides clients with a high level of input, and support and feedback from my clients is always positive. Communication has always been fluid and prompt. It's a 5 star rating from me."

"My clients gain essential life skills that are critical for maintaining and sustaining independence, including support into returning to work, volunteering. These skills set them up for long-term success in securing and managing a tenancy."

"The service excels in providing a safe, supportive environment for those with vulnerabilities, providing a person centred approach with all individuals."

## How good is our leadership?

4 - Good

We made an evaluation of good for this key question. This means there are a number of important strengths which, taken together, clearly outweigh areas for improvement.

People felt the service was well run and more professional since the start of the new manager. This made them feel safe and reassured.

Staff were friendly and approachable, therefore people felt confident raising any concerns. They were assured they would be listened to and a satisfactory way forward would be identified. It was apparent the staff culture was open and transparent and willing to learn from adverse situations. This way of working ensures a good quality service is provided and that people's rights are promoted. Some of the comments from people we spoke with included:

"We would speak with staff if we had any worries, they look out for your well-being."

"Things are better since the new manager has started. There is attention to detail and she is very positive, but she is also professional and compassionate."

Although there were limited, formal quality assurance systems in place (see area for improvement 1) it was apparent that people's views were regularly sought formally and informally. Where possible suggestions were acted upon. This resulted in improved outcomes for people.

The provider identified that they needed to develop more formal quality assurance systems and start a process of self evaluation. Current quality assurance processes needed to be formalised, resulting in an ongoing improvement plan that detailed the future direction of the service (see area for improvement 1).

The Care Inspectorate expects providers to notify them of certain events, for example accidents and incidents and changes of managers. This allows the Care Inspectorate to check providers are working within legal frameworks and following good practice guidance. This had not been happening (see area for improvement 2).

### Areas for improvement

1. To ensure there is a culture of continuous improvement, the provider should formalise quality assurance systems and start a process of self evaluation. This should result in an ongoing improvement plan that details the future direction of the service.

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

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

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

2. The provider should improve their practice of informing the Care Inspectorate of any notifiable events as detailed in 'Records that all registered care services (except childminding) must keep and guidance on notification reporting'.

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

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

## How good is our staff team?

4 - Good

We made an evaluation of good for this key question. This means there are a number of important strengths which, taken together, clearly outweigh areas for improvement.

People were allocated set hours for key working and general support. People found key working sessions beneficial as it helped them develop their life skills and confidence. Staff had time to provide care and support with compassion and engage in meaningful conversations and interactions with people. Staff were good at listening and taking direction from people as to what emotional and practical support they required.

Staff worked well together and were confident in building positive relationships with people. They worked flexibly to ensure there was always someone available for emotional support should people need this. People told us this was really important as it helped reduce their stress. Some of the comments from people we spoke with included:

"The staff talk me down if I am feeling anxious."

"We feel less isolated when we talk with staff."

"My key worker is easy to talk with and supports me with everything."

The provider had identified that they needed to make sure all staff received regular supervision. To further promote staff competence and roles and responsibilities, we are making an area for improvement (see area for improvement 1).

## Areas for improvement

1. To ensure staff are confident and competent in their roles, the provider should continue with formal supervision of staff. This should include discussion about the SSSC code of practice.

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

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

## How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question. This means there are a number of important strengths which, taken together, clearly outweigh areas for improvement.

People in Cale House used the "star" model for care planning. This helped them identify how they were feeling emotionally and what supports they needed so they could manage a tenancy independently. They were fully involved and central to this. There were regular reviews, and risk assessments were updated to ensure people were getting the support they needed.

It was clear that people had made progress with their goals with the support from staff. People found the "star" model very helpful as it let them see how much they had progressed. They were proud of this. Some of the comments from people we spoke with included:

"I like the star as you can see your progress and it helps you keep focused."

## 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

The service should further develop risk assessments to ensure all areas of risk had been considered and appropriate strategies put in place to minimise the likelihood of any harms occurring. Risk assessment should be reviewed each time there was a change in people's circumstances and at every review.

National Care Standards, Housing Support Services: Standard 3 - Management and staffing arrangements.

**This area for improvement was made on 13 February 2018.**

#### Action taken since then

The area for improvement has been met. Please see key question 5 for further information.

#### Previous area for improvement 2

The provider must ensure that a training needs analysis for each member of staff is completed to identify gaps in skills and knowledge of the staff group. This information should inform the development of an annual training plan for the service. This will help to ensure that people who use the service are supported by knowledgeable and skilled staff.

National Care Standards, Housing Support Services: Standard 3 - Management and staffing arrangements.

**This area for improvement was made on 13 February 2018.**

#### Action taken since then

The area for improvement has been met. All staff had undertaken relevant training to their job. There is a system in place that alerts the provider if staff training is overdue.

### Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## 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?  | 4 - Good |
| 2.2 Quality assurance and improvement is led well                          | 4 - Good |
| How good is our staff team?  | 4 - Good |
| 3.3 Staffing arrangements are right and staff work well together           | 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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