

Aden House (Care Home)

Care Home Service

5 Annfield Road
Inverness
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Type of inspection:
Unannounced

Completed on:
18 December 2025

Service provided by:
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Service provider number:
SP2005007555

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CS2003008467

About the service

Aden House is registered to provide a care home service for up to 24 older people. The home is a large Victorian style house in Inverness which has been converted and extended.

There are 22 bedrooms. All rooms have en-suite toilets and wash hand basin facilities. There are two lounges, a quiet seating area and a dining room on the ground floor. The first floor has four bedrooms. Aden House has a large garden area to the front and a small enclosed 'secret garden' to the rear of the home.

About the inspection

This was an unannounced inspection which took place on 15, 16 and 17 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 11 people using the service and four of their family members/friends
- Spoke with six staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals

Key messages

- People reported they were comfortable and happy at Aden House
- People's health and wellbeing needs were being met well
- There were positive comments about staff
- Staff reported that management were very approachable and helpful
- Communication with families, with external professionals and within the service was good
- The service's quality assurance measures need to be developed

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?	3 - Adequate
How good is our staff team?	4 - Good
How good is our setting?	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 as good. There were a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes. However improvements are still required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

Aden House's staff knew people well. People's wishes and personalities were known. They had attentive and responsive care and support. Staff had a relaxed manner and went at each person's pace. People were respected and treated as individuals.

Family members and friends said it was easy to visit Aden House. They could arrive at different times and felt welcomed. The atmosphere within the home was pleasant. Communication with the service also worked well. Any important information they needed to know about their relative they were told. People were supported to keep up and maintain their relationships with important others.

Meal times were well organised. Table were set nicely and staff were able to assist people in an appropriate and suitable manner. People had time to enjoy their meals.

Staff had guidance and care plan folders about people's health and wellbeing needs. This gave them information about what was important for the person, specific health needs they needed to support and recording forms to complete for key care and support.

Medication and other essential health care support was provided and managed carefully for people. There was guidance in place for 'as required' medications (medications only needed occasionally e.g. for pain). Generally all key health documents were kept up to date. The service had good contact with other agencies, such as the NHS, and always aimed to make sure people got the right support at the right time. The service shared any concerns they had for a person's health with appropriate professionals and also helped to make sure people were able attend health appointments when needed. This all helped people to keep well and content.

Whilst people were having an annual review meetings to check all their care and support was suitable, they were not having a six monthly review as should have been the case. The management team were new this year and were aware of this issue. The service should be making sure people get their review meetings at least six monthly. There is an area for improvement for this. See Area for Improvement 1 below.

We also discussed some other practice issues with management which they should address. People get medicated creams and ointments and we found that to assist staff apply these correctly there were body map diagrams to highlight where to apply on a person (often different areas for each person). The body maps in people's care plan folders did not highlight where to apply. Every so often we found some gaps in people's care notes, for example, the record for their support with keeping their teeth clean. Good practice in these areas helps to ensure people always get the right support for them.

We advised management they should take more steps to ensure the confidentiality of people's private information. An example of this was medication administration records (MARs).

On one occasion we found the MARs folder on top of the locked medication trolley and the responsible staff member was in another area of the care home. Management reported they are able to ensure that in the future confidential information like this can and will be kept in a secure manner.

There was a pleasant atmosphere in the home, but it was quite often quiet and some people found they did not have enough to do. Management reported they were striving to recruit an activities person and they believed this would reduce any feelings of boredom for some individuals.

Areas for improvement

1. To support people's health and wellbeing, the service provider should make sure that people, and/or their representatives, have regular opportunities, including review meetings, to discuss and review the care and support provided to them. This is also to be in accordance with best practice and legislation.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I am recognised as an expert in my own experiences, needs and wishes' (HSCS 1.9), 'I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change' (HSCS 1.12) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me (HSCS 2.17) .

How good is our leadership?

3 – Adequate

We assessed this as adequate. An evaluation of adequate applies where there are some strengths, but these just outweigh weaknesses. Strengths may still have a positive impact but key areas of performance need to improve to ensure consistently positive outcomes and experiences for people.

There was a new management team in place this year and they were getting established in their role. Both the manager and her depute were experienced in health and social care. Staff members reported positively on their managers. It was evident that the management provided leadership and had strong caring values.

The management had an improvement focus. They had ideas and had carried out some of them already, such as improvement to décor in the care home. The lounges and dining areas, for instance, were painted and now were brighter. Residents commented on how they liked it. Also, there was improved communication within the home for the staff team. Team meetings were in place, handovers from one shift to the next were detailed and, each day, carer huddles would take place for staff to share and discuss how people were getting on. The handovers and huddles kept staff informed about what they needed to know, any new concerns or changes for a person supported and generally make sure people were getting good health and wellbeing care. This type of communication helped ensure the quality of the care and support people received.

Management had an active presence and led by example. They were happy to be providing direct care and support to people, supporting the care staff team. They knew what was happening in the care home as they were hands on when needed and seen as approachable by the staff team. People can be assured that management were in touch with what was happening for them.

Management had made good relationships with partner agencies and this, too, was an important factor for ensuring the quality of the care and support.

They also were open to ideas and advice and would share information when needed. People's health and wellbeing benefited as the services and agencies involved in the care and support worked well together.

The management had started a number of audits and monitoring checks to help make sure people's care and support was safe, to a suitable standard and meeting their needs and wishes. Additionally, they had carried out some assessments using best practice guides to consider how well the service was performing e.g. one was for considering the care home's environment was dementia friendly and another considered how pleasant was people's mealtime experience. These type of exercises help management reflect and make decisions about the next steps for the care home.

However, it was not clear what the specific plan for service improvement was. A robust, well laid out and easy to follow service improvement plan was needed. Some of the set quality assurance activities, for example some monthly checks, had stopped in recent months and this meant some poor practice could happen without being picked up on quickly by management. We discussed with management that they could work on a plan for quality assurance and revise and develop Aden House's policy on this. The audit programme, should include the frequency for different audits, with consideration given to what areas or aspects of service provision and care and support need more regular assurance.

Staff practice in moving and assisting people had previously been highlighted as needing further training and competency checks. The service had not undertaken competency checks and we advised this must happen as poor staff practice could place people at risk of pain and harm. We have made a requirement for this. See Requirement 1 below.

The service had not been informing the Care Inspectorate of certain incidents and accidents for people at the care home. We spoke with the management about their responsibility to inform us of certain matters and provided guidance on this for them to follow. This will further help to keep people safe and well. See Area for Improvement 1 below.

Requirements

1. By 30 January 2026, the service provider must make sure that all care staff are fully competent when assisting people to move so that people are helped to keep safe and well.

To do this, the service provider must, at a minimum:

- a) ensure staff receive appropriate training in moving and assisting people,
- b) ensure staff's competency in carrying out moving and assisting and
- c) have a plan in place, including frequency, for staff's training and competency checks.

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

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My care and support meets my needs and is right for me (HSCS 1.19) and '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).

Areas for improvement

1. To promote people's safety and wellbeing, the service provider should ensure that the Care Inspectorate are informed of all notifiable events and incidents in accordance with best working practice and legislation. This is to assist in keeping people safe and well.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18).

How good is our staff team?

4 - Good

We evaluated this key question as good.

The service had some experienced staff members. People said they liked their staff and families reported that they trusted and felt reassured by the staff at Aden House. Communication was good.

Some comments about staff were:

- 'Staff are very nice.'
- 'All staff are kind.'
- 'Not a bad word to say about them.'
- 'She's loved and cared for.'

The service aimed to achieve good and safe recruitment. There was induction for new staff, making sure they understood their responsibilities and assisting them to be supported to learn about people. Overall, people can be confident staff were supported to know their needs and wishes.

Staff came across as enjoying working in the home and supporting people. They expressed positive and caring values. They had established good relationships with people. People can trust that the service strives to ensure staff have good morale. People were respected.

Staff were attentive and responsive to people's health concerns. Staff would pick up on changes for a person, when they didn't seem their usual self and would perhaps have some health or wellbeing matter bothering them. The service was good at identifying this type of thing. People were supported to keep good health and wellbeing.

Staff felt supported by management and seniors. They were approachable and would listen. This made a difference as communication and sharing information is very important in health and social care. Good communication helped people to be safe and well.

Though staff had training, it was difficult to get the full picture for staff training and management were aware of this. We advised on making the training plan more robust. At last year's inspection visit we made an area for improvement regarding training and supervision for staff. It was clear some more attention was needed on this. See Area for Improvement 1.

During our visit, after some discussion, the manager took some actions to monitor more closely staff's 'Scottish Social Services Council's (SSSC) registrations. This was to make sure all staff were suitably registered for health and social care work role.

The service had to use agency staff quite often. Whilst agency staff worked well in the service, and often it was the same agency staff members, the use of agency did show that the service had some staff shortages. This was a challenge for the service. The service continues to focus on recruitment. People can have confidence the service aim to have a steady staff team and staff members they know well and were comfortable with.

The accuracy of staff members' recording in people's care notes and documents could, at times, be more detailed and accurate. We gave an example of where staff only recorded a visiting professional's first name in a person's care notes and why over time this could cause confusion or some mistake being made. Staff are expected to complete notes a detailed and accurate standards. Good recording assists people to get the right care and support.

Areas for improvement

1. To support good experiences, health and outcomes for people, the service provider should make sure staff have opportunities to develop and learn as social care workers.

This should include, but is not limited to, making sure staff training is up to date, and supervision meetings take place on a suitable regular basis. The service would benefit from reviewing and identifying staff's training needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a positive impact on people's experiences.

Aden House was homely and comfortable. It was an older property and had been adapted to help to have better access to various areas.

People had personalised their own rooms to suit their taste and wishes. People could choose how they wished their rooms to look. People were comfortable and relaxed here.

Housekeeping staff ensured that the main areas of the care home were kept to a satisfactory standard. Cleaning schedules and routines were in place. This meant people had a pleasant home to live in and infection risk was kept to a minimum. People were happy and helped to keep safe in Aden House.

This year the management had started carrying out improvement to the décor, making communal areas look brighter and more pleasant for people. Management also saw other aspects of the environment that could be improved. Options for improved, and more convenient, shower/bath room facilities were being explored. This was good as it showed the service management had a focus on what would make the home better for people. We made an area for improvement regarding this at a previous inspection visit and will repeat this. See Area for Improvement 1.

Outside areas and the garden, had largely been cleared of unnecessary items. This was an improvement and again helped to ensure people's garden and outside spaces were respected and looked after to an acceptable standard. The ramp access was discussed and possible improvements mentioned.

Areas for improvement

1. To support people's positive experience of living in a care home, the service provider should make sure that the shower/bath facilities, including location, are reviewed and improved.

This is to make sure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'The premises have been adapted, equipped and furnished to meet my needs and wishes'

(HSCS 5.18)

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 good experiences, health and outcomes for people, the service provider should make sure staff have opportunities to develop and learn as social care workers.

This should include, but is not limited to, making sure staff training is up to date, and supervision and team meetings take place on a suitable regular basis. The service would benefit from reviewing and identifying staff's training needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

This area for improvement was made on 5 December 2024.

Action taken since then

This was not met. We noted that team meetings and opportunities for staff to discuss and consider support matters in the care home had improved. However, there was still improvement to be made for training and supervisions. Therefore we have made a revised area for improvement for this. See under Key Question 3.

Previous area for improvement 2

To support people's positive experience of living in a care home, the service provider should make sure that the environment and facilities are as accessible, well looked after and as suitable as possible. Storage, bath and shower facilities should be reviewed and improved.

This is to make sure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.18).

This area for improvement was made on 5 December 2024.

Action taken since then

This was not met. We did see that some improvements were made to both the internal and external environment at Aden House. However, shower/bathroom facilities had not changed and it was recognised that this would be a very beneficial change if improvement in this was made. Therefore we have made a revised area for improvement for this. See under Key Question 4.

Previous area for improvement 3

The provider should implement a robust system that aligns with the Disclosure (Scotland) Act 2020 and adheres to best practices in safer recruitment.

This is to make sure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

This area for improvement was made on 19 December 2024.

Action taken since then

This was met. Staff recruitment procedures were safe. Staff went through the necessary checks for working in a health and social care setting. New staff were provided with an induction pack which informed them of their responsibilities and the service. New staff had an induction period during which they were able to shadow other staff, receive guidance and training and help them to be confident and knowledgeable in their role. This helped to keep people safe and well.

Previous area for improvement 4

The service should ensure that all staff are trained and competent in safe moving and assistance practices to protect the health, safety, and dignity of people experiencing care.

This is to make sure 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).

This area for improvement was made on 19 June 2025.

Action taken since then

This was not met. The service confirmed that staff had previously receive training in moving and assisting people. However, there was not a system in place for checking their competency, making sure that staff, when supporting people, were using suitable moving and assisting techniques. This meant people were at risk of harm. The service provider should all staff use recognised and safe technique for assisting people. We decided to make this a requirement as this will help ensure people's safety, health and wellbeing. See Requirement 1 under Key Question 2.

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?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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