

Care at Home and Enablement Service Inverness Support Service

NHS Highland
The Corbett Centre
Coronation Park
Inverness
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Telephone: 01463 706 777

Type of inspection:
Unannounced

Completed on:
18 December 2025

Service provided by:
NHS Highland

Service provider number:
SP2012011802

Service no:
CS2012307268

About the service

Care at Home and Enablement Inverness is registered to provide support to people with an assessed need living in their own home. The service has an office base within Inverness and provides care and support across Inverness city and rural areas of Inverness-shire.

The service provides support which enables a person to safely remain in their own home and community by maximising their abilities to develop confidence, skills and independence. It offers a service which is limited in time to facilitate discharge from hospital as early as possible and avoid unnecessary admission to hospital or a care home. The service provides continued support for people who have been assessed as requiring ongoing care whilst an alternative long-term service is arranged.

The provider of the service is NHS Highland.

About the inspection

This was an unannounced follow-up inspection which took place on 16 to 18 December 2025. The inspection was carried out by two 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 with one person using the service and three of their family
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- Staff supervisions and practice observations had started but needed to be evidenced as sustained, consistent and regular for staff within the service.
- We heard about service pressures and changes which were having a negative impact on the morale of some staff.
- People's health, wellbeing and preferences were not consistently detailed, risk assessed or updated in a person-centred plan.

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

Requirements

Requirement 1

By 30 November 2025, to promote staff support, competence and professional development, the provider must ensure staff receive regular and effective supervision.

To do this the provider must at a minimum:

- a) Ensure staff supervision is held in line with organisational guidelines and best practice to promote individual learning and identify and review staff training needs. This includes person-specific moving and assisting training.
- b) Ensure staff benefit from practice observations with detailed feedback to support their continuous learning and professional development.
- c) Ensure staff have sufficient time in scheduled visits to access accurate and up to date information about people's care and support needs.

This is in order 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 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 because people have the necessary information and resources' (HSCS 4.27).

This requirement was made on 2 September 2025.

Action taken on previous requirement

We reviewed evidence of staff supervisions and practice observations starting within the service. This was in the process of being implemented within the organisation's guidelines for all staff but not yet completed. Managers had sourced additional training for moving and handling which was more accessible for staff. We heard from staff that sufficient time to access accurate up to date information about people's care and support needs remained an issue.

Therefore, the requirement has not been met and will be extended to 31/03/26.

Not met

Requirement 2

By 30 November 2025, the provider must ensure people's safety and wellbeing by meeting their individual care and support needs.

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

- a) Ensure a holistic, person-centred plan is developed which is detailed, specific for the person's health conditions and reflects their individual outcomes and wishes.
- b) Ensure the plan has been assessed by relevant professionals with detailed risk assessments and reviewed as the person's needs change.
- c) Ensure staff are trained in anything specific to the person and that communication between staff is accurate, prompt, updated and shared appropriately.

This is in order to comply with Regulation 4(1)(a) and 5(1)(b) 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 Health and Social Care Standards (HSCS) 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

'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm' (HSCS 3.21).

This requirement was made on 2 September 2025.

Action taken on previous requirement

We reviewed evidence from the plans sampled that new person-centred paperwork was being implemented but this was not complete or consistently used for people receiving support. People's health and social care needs lacked necessary detail, clarity and guidance on how to support people with specific conditions in achieving their outcomes. There was insufficient detail within risk assessments and a lack of evidence for follow up actions for changes in people's health. Staff training for supporting people with varying and complex needs and chronic health conditions was required and staff training had not been updated across the service.

Therefore, the requirement has not been met and will be extended to 31/03/26.

Not met

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 people are fully involved in decisions about their care and support, the provider should ensure that communication in the service is improved so that information about changes to staffing and support arrangements is provided to people or their representative, as needed.

This should include but is not limited to, discussions about the consistency of support with people and staff.

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

'I know who provides my care and support on a day-to-day basis and what they are expected to do. If possible, I can have a say on who provides my care and support' (HSCS 3.11); and

'If I need or want to move on and start using another service, I will be fully involved in this decision and properly supported throughout this change' (HSCS 2.20).

This area for improvement was made on 2 September 2025.

Action taken since then

This was not assessed and will be evaluated at the next inspection.

Previous area for improvement 2

To ensure people experience high quality care and support that is right for them, the provider should ensure that a clear protocol is in place for 'as needed' medication, as necessary to the level of support provided.

This should include but is not limited to, recording the outcomes of the medication and reviewing these regularly to ensure they are being effective in achieving the desired health outcome.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 2 September 2025.

Action taken since then

This was not assessed and will be evaluated at the next inspection.

Previous area for improvement 3

To ensure people have confidence in the organisation providing their care and support, the provider should ensure that the service improvement plan continues to be reviewed and updated.

This should include but is not limited to:

- a) Evidence of self-evaluation that encourages and includes people using the service, their families, staff and other professionals to provide feedback.
- b) Implementing and embedding service audits to monitor the effectiveness of improvements and evaluate performance. This should include auditing the quality of medication support, care plans, reviews, staff supervisions and staff training.
- c) Notifications submitted to the Care Inspectorate promptly and as appropriate.

This is to ensure that care and support is consistent with 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).

This area for improvement was made on 2 September 2025.

Action taken since then

This was not assessed and will be evaluated at the next inspection.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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