

Telford Centre (Care Home) Care Home Service

Abertarff Place
Fort Augustus
PH32 4DR

Telephone: 01320 366 511

Type of inspection:
Unannounced

Completed on:
28 January 2026

Service provided by:
NHS Highland

Service provider number:
SP2012011802

Service no:
CS2012307272

About the service

The Telford Centre (Care Home) is registered to provide a care service to a maximum of 10 older people, including respite care for adults with sensory and physical impairments. The service is provided by NHS Highland.

The Telford Centre is in Fort Augustus, within a two storey, purpose-built building in a quiet, residential area, close to local amenities and transport links. The care home has 10 en-suite rooms with communal seating and an open-plan dining area. There are a smaller kitchen area and lounge for people to use and a spacious bathroom, equipped to support people with their needs. The first floor can be accessed using the stairs or passenger lift. There is a large, well-maintained garden to the rear of the building.

At the time of inspection, the service was caring for nine people.

About the inspection

This was an unannounced follow-up inspection which took place on 25 to 27 January 2026. 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 six people using the service and five of their family
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- Managers were assessing staffing levels as people's care and support needs changed.
- Staff were benefitting from regular supervision.
- Agency staff felt supported and part of the team.
- Meaningful activities for people continues to need improvement.
- People and families were involved in reviewing care and support on a regular basis.

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 good is our staff team?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How good is our staff team?

3 - Adequate

We reviewed the requirement from the previous inspection, which was met.

However, we discussed with the provider that a longer period of time was necessary to ensure that progress was sustained within the service. Managers were responding to continued high levels of sickness within the staff team and regular use of agency staff. This was being managed well. People's needs were being assessed to ensure safe levels of staffing and consistency of support but needed to be completed on a monthly basis. We identified where this should improve. (See Area for improvement 1)

Further details of the actions taken can be found in the section, 'What the service has done to meet any requirements we made at or since the last inspection?'

Areas for improvement

1. To ensure that people's care and support outcomes are met, the provider should ensure their assessments of need are completed monthly.

This should include but is not limited to, clearly evidencing how assessments have enabled additional staff resource which accurately reflects the needs of the service.

This is in order to comply with section 7(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My needs are met by the right number of people' (HSCS 3.15).

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

Requirements

Requirement 1

By 30 September 2025, to ensure that people's care and support needs are met and staff benefit from a culture of reflective practice and continuous learning, the provider must review staffing arrangements and support staff development.

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

- a) Ensure they use, review and update appropriate assessments of the staffing levels so people benefit from care and support responsive to their changing needs throughout the day and night.
- b) Ensure managers have time and capacity to perform their leadership and management responsibilities. This includes reviewing management support for the service.
- c) Regularly assess and review people's care and support needs, demonstrating how this is used to inform staffing arrangements.
- d) 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 practice observations to support staff with feedback as part of their continuous professional development.
- e) Re-instate regular team meetings which are used for effective communication and consistency of approach in supporting people. This includes, involving staff in service developments and sharing ideas to further improve people's experiences of care.

This is in order to comply with section 7(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019 and 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:

'My needs are met by the right number of people' (HSCS 3.15); 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).

This requirement was made on 4 June 2025.

Action taken on previous requirement

Managers were reviewing staffing levels in responding to people's changing needs. We heard positive feedback about the manager's increased capacity and support to fulfil the responsibilities of their role. We saw evidence of a proactive approach in assessing each residents needs and identifying necessary staffing support. Staff were receiving regular supervision and team meetings had been reinstated.

This requirement was met.

We discussed with the provider that due to agency use and high levels of sickness, there will be an area for improvement focused on sustaining monthly assessments of people's needs which clearly identifies the level of staffing required for the service. The evaluation for this key question will be reviewed at the next inspection, to allow assessment of sustaining the improvements.

Met - within timescales

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 experience high quality care and support that is right for them and have confidence in their staff, managers should monitor the quality and consistency of care at weekends.

This should include but is not limited to, ensuring any temporary staff are fully informed of people's care needs and supported in their practice by the regular staff as part of their induction into the service.

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

'My care and support meets my needs and is right for me' (HSCS 1.19); and

'My care and support is consistent and stable because people work together well' (HSCS 3.19).

This area for improvement was made on 16 October 2025.

Action taken since then

We saw evidence of sufficient staff while inspecting during the weekend and that the manager had been within the service at weekends. Temporary staff were informed about people's care needs and felt supported by the regular staff. To ensure this is sustained and evidenced over a longer period of time, this will be reviewed at the next inspection.

This area for improvement has not been met.

Previous area for improvement 2

To ensure people living in the care home experience high quality care and support that is right for them, people should have more opportunities to engage in meaningful activities that promote their wellbeing.

This should include but is not limited to, accessing community groups and resources, taking into consideration both individual and group interests.

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

'I am supported to participate fully as a citizen in my local community in the way that I want' (HSCS 1.10); and

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25).

This area for improvement was made on 4 June 2025.

Action taken since then

The service continues to review and identify opportunities to provide meaningful activities for people. However, we heard feedback from people and observed that this is an area where more improvement is necessary.

This area for improvement has not been met and will be reviewed at the next inspection.

Previous area for improvement 3

To ensure people experience high quality care and support that is right for them, and they are as fully involved as possible in decisions about their care and support, the provider should ensure that review meetings are held a minimum of every six months.

This should include but is not limited to:

- a) A summary of the discussion with details of any decisions and actions taken to support positive outcomes for people.
- b) Involvement of people and their family or legal representatives where appropriate.
- c) Reviewing health changes and people's goals for getting the most out of life. This includes discussion for future planning that reflects people's wishes.
- d) Reviewing communications and involvement of other professionals to ensure clarity of information and timeous responses to assist in health assessments.

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

'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).

This area for improvement was made on 4 June 2025.

Action taken since then

Reviews were taking place on a regular basis, with a summary of the discussion, family and professional involvement. Details of people's goals were recorded and changes to people's health and wellbeing discussed with any relevant follow-up actions.

This area for improvement has been met.

Previous area for improvement 4

People experiencing care should have their needs assessed and met through a comprehensive person-centred plan. This is to ensure people's plans are personalised, meets their assessed needs and they are supported in a consistent manner.

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

This area for improvement was made on 10 December 2025.

Action taken since then

We discussed progress with person-centred care planning and the actions that had been followed up with relevant professionals.

As this is a recent area for improvement, it will be reviewed at the next inspection. This area for improvement has not 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 good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

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