

# Maple Ridge Care Home Care Home Service

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Inverness  
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**Type of inspection:**  
Unannounced

**Completed on:**  
5 March 2026

**Service provided by:**  
Maple Ridge Care Home Limited

**Service provider number:**  
SP2018013131

**Service no:**  
CS2018367220

## About the service

Maple Ridge is registered to provide a care home service to a maximum of 18 adults with learning disabilities.

The service is situated in the suburbs of Inverness within easy reach of community amenities. Accommodation consists of three inter-connected houses within the same building.

Each house has a kitchen, dining area and sitting room. Five bedrooms on the ground floor have en suite toilets and wet rooms, and there are communal bathrooms throughout the building. There is a garden laid to lawn at the rear, a conservatory, and a car park at the front of the building.

The provider is Maple Ridge Care Home Limited.

## About the inspection

This was an unannounced inspection which took place between 23 February and 04 March 2026. 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, and observed or interacted with the majority of people in the home during the inspection
- spoke with six staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

**Key messages**

- Staff treated people with warmth and kindness.
- Incident recording and reporting was improving.
- The building was clean, tidy, and comfortable.
- Care planning had improved, and a digital system had been introduced.
- People were supported to access a variety of activities indoors and in the local community.

**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 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 key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Staff at Maple Ridge were seen to be respectful, friendly, and caring in their approaches towards people. The staff team were knowledgeable about people's likes and dislikes and demonstrated that they knew them well.

People were supported with timely referrals or appointments to support their healthcare needs, and these were recorded and monitored appropriately. Visiting professionals noted improvements in the service since the last inspection and felt confident that communication of important information had become more regular; continued communication will provide assurances that has become effectively embedded in the culture of the service.

Activity provision in the service was growing, and included visits from local musicians, and outings to clubs and groups in the area. Some people had been supported to go on holiday or on a trip away and this had been a positive and enjoyable experience for them.

There was a stable staff team in place, and safer recruitment processes were being followed, this meant people were being supported by staff who were considered competent and suited to their roles. Staff were dedicated to supporting people, and spoke positively of their time at work. Staff felt well supported by the management team, but highlighted they felt developing clearer and more consistent guidance for roles would further benefit support provided.

Mealtime experiences were homely, and people had the choice of eating in the communal areas of the house or in the privacy of their rooms. People were supported to prepare food independently where possible, and this enabled people to develop and maintain their skills. The service was mindful of dietary preferences and allergies, and ensured these were common knowledge throughout the house.

People and their relatives spoke positively about the care and support they experienced at Maple Ridge. Some people told us:

"The staff are all lovely. They're all kind."

and

"I like living here, I like it here."

## How good is our setting?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Maple Ridge had a homely atmosphere. The environment was kept clean by care staff as part of their role, and supplies of personal protective equipment (PPE) were readily available.

People's rooms were meaningfully decorated to their taste, and they had been actively involved in selecting paint colours and décor. People told us they were proud of their rooms, and comfortable when choosing to spend time in them. Five bedrooms had en suite toilet and shower facilities, and all other rooms had a sink. There are two communal bathrooms and three shower rooms in the house, which were shared by those without access to en suite facilities.

Some communal areas within the house could become busy at peak times, and due to the limitations of the building staff needed to manage busier times pro-actively to try and reduce the risk of people experiencing stress or distress.

The second floor of the property was accessed by stairs. The service were considering whether a lift could be installed to enable the second floor to become more accessible for people, and to enable planning for people's future mobility needs. Environmental assessment tools, good practice guidance, and self-evaluation should be used to identify and plan future environmental improvements.

## 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 all medication is safely administered, the provider should check all staff are following the care home's medication policy and good practice guidance. There should be systems in place to regularly evaluate that staff are competent when administering medication.

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).

**This area for improvement was made on 12 October 2023.**

#### Action taken since then

Medication storage and documentation, such as medication administration record (MAR) charts were sampled and found to be of good quality. There were detailed protocols in place to guide staff in the administration of PRN ('as required') medication. Staff appeared confident and knowledgeable in how to safely administer medication.

Oral medication was being supplied in pharmacy issued dosette boxes, and there were clear documents in place to ensure staff could identify medication. The use of dosette boxes was not consistent with the provider's medication policy and updating this policy to reflect the current system in place should be considered.

This area for improvement had been met.

#### Previous area for improvement 2

There should be a range of methods used to ensure that people are able to lead and direct the development and review of their personal plans in a meaningful way.

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 developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

**This area for improvement was made on 6 October 2022.**

**Action taken since then**

The quality of care plan reviews had improved since the last inspection. It was clear that people had been involved throughout the review process using tools to support communication and choose who they wished to invite to review meetings.

A digital care planning system had been introduced since the last inspection which tracked reviews, and people's wishes were being clearly documented by the service as part of the review process.

This area for improvement had been met.

**Previous area for improvement 3**

To further promote the safety and wellbeing of people, staff should have a good understanding of the purpose of incident reports. These should be completed in line with the provider's policy and procedures. The provider should have oversight of these to ensure the safety and well being of people is being promoted.

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).

**This area for improvement was made on 12 October 2023.**

**Action taken since then**

Staff appeared to be more confident in how to report accidents and incidents, and record these appropriately. Incident records were being audited as part of monthly quality assurance checks.

In accordance with the Public Services Reform (Scotland) Act 2010, all services are legally required to notify the Care Inspectorate, within required timescales, of certain events or changes. There had been some occasions during which notifications had not been made by the service.

This area for improvement has not been fully met. There had been progress made towards meeting this area for improvement and it will remain in place.

**Previous area for improvement 4**

So as improving outcomes for individuals remains a focus, the provider should identify and prioritise improvement activities that will enhance person-centred care and support. This improvement plan should include timescales and roles and responsibilities of staff involved in this. Central to this should be stakeholders' views.

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

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

'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7).

**This area for improvement was made on 12 October 2023.**

### Action taken since then

There was a service improvement plan in place which identified and tracked improvements. It was focused and clearly showed who was responsible for ongoing actions and when they were expected to be completed. The service should ensure outstanding areas for improvement identified by the Care Inspectorate are included in the service improvement plan.

This area for improvement had been met.

### Previous area for improvement 5

To promote positive outcomes for people who experience pain, the provider should improve how they identify and detect when someone is in pain. For example, by using well established pain assessment tools, like the Abbey Pain Scale tool, which is a form of non-verbal pain assessment tool.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

**This area for improvement was made on 20 January 2026.**

### Action taken since then

This area for improvement was made following an upheld complaint and will be considered during the next inspection when enough time has passed to enable sufficient supporting evidence to be sampled.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://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 setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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