

# Invernevis House (Care Home) Care Home Service

Belford Road  
Fort William  
PH33 6ES

Telephone: 01397 702 939

**Type of inspection:**  
Unannounced

**Completed on:**  
20 March 2026

**Service provided by:**  
NHS Highland

**Service provider number:**  
SP2012011802

**Service no:**  
CS2012307238

## About the service

Invernevis House (Care Home) is a care home registered for 32 older people. The provider is National Health Service (NHS) Highland. The home is situated in Fort William.

Invernevis House is a two storey building. The accommodation is provided over two floors which can be accessed via the stairs or passenger lift. There is a large dining room on the ground floor and communal lounges and seating areas on both floors. Six rooms have ensuite facilities, the remainder have wash hand basin facilities. There are shared toilet, bath and shower facilities on each floor. There is a large accessible attractive garden.

## About the inspection

This was an unannounced inspection which took place between 17 and 20 March 2026. This inspection was carried out by one inspector, who was joined for one day by a senior improvement advisor for the Care Inspectorate.

To prepare for this inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service, and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with or engaged with 10 people living in the care home and five of their family members;
- received feedback from questionnaires from five people living in the care home and nine of their family members;
- spoke with 16 members of staff and management;
- spoke with one visiting professional;
- observed practice and daily life; and
- reviewed documents.

**Key messages**

- Staff knew people well and supported them with compassion and kindness.
- People were supported to access a variety of other health and social care professionals.
- People were observed to enjoy a range of nutritious and attractive meals and snacks.
- There were a number of varied activities on offer for people to get involved in.
- Staffing levels were not always at level of assessed need, however the provider was actively seeking to recruit.
- Improvements should be made in the recording of a health need which needs to be monitored.
- Improvements should be made to ensure that the service notifies the Care Inspectorate in the event of incidents as outlined in the Notifications Guidance .

**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

In this part of the inspection report we considered one quality indicator. We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

### 1.3. People's health and wellbeing benefits from their care and support

People should expect to be treated with compassion, dignity, and respect. We observed kind and compassionate care being provided by the staff team. Residents presented as cared for, for instance wearing appropriate clothing and footwear, wearing their spectacles which were clean, and having their walking aids at hand. Residents benefitted from the interaction of the entire staff team including management, care staff, domestic, laundry and kitchen staff. We found the staff team and management to be highly motivated to deliver better outcomes for people living in the service. The residents spoke positively about the care and support they received and where communication was impaired we observed trusting relationships between residents and the staff team. Some of the comments were:

- "staff are kind and thoughtful"
- "all staff very kind, patient and understanding"
- "sometimes have to wait but staff treat me very well"
- "staff are lovely, caring and motivated".

Relatives of people living in the care home were confident and reassured that their loved ones were being cared for by a caring staff team. Some of the comments from the people we spoke with included:

- "staff are brilliant and they are brilliant with mum"
- "the girls are great, they are all so caring"
- "management are very available, would not hesitate to approach them"
- "could do with more of them [staff], particularly on some days where they are very stretched"
- "friendly, committed staff. Hard workers... understaffed often"
- "the management team are always visible and involved in the day to day events"
- "family meetings give us involvement and we get asked what we are happy with and what we would want to improve"
- "staff are friendly and happy to discuss mum when I visit. They are very attentive to mum's health and always advise me when GP has visited and for any changes to medication."

The Health and Care (Staffing) (Scotland) Act 2019 was enacted on 1 April 2024. In terms of the provision of social care services, the legislation placed a duty on service providers to make appropriate staffing arrangements to ensure the health, welfare and safety of people using the service. We found that at times the service operated with fewer staff than had been assessed. The service was actively recruiting domestic and care staff to build resilience within the staff team. Existing staff members covered additional shifts which provided greater consistency in the staff team as it reduced the need to use agency staff. We also highlighted to the management that under the Safer Staffing legislation, there is an expectation for management to assess this by applying a variety of measures, including via a staffing tool, observations at various points of the day and obtaining feedback from staff and other stakeholders. This information should be collated to demonstrate safer staffing has been assessed and provided (see area for improvement 1).

People should be confident they are supported by staff who know their needs and preferences well. The consistency of the staff allowed them to notice and be responsive to any changes in the person's health and wellbeing. We observed that staff were recognising and reporting concerns with other health and social care professionals such as general practitioners, community nurses, the podiatrist and dentist. There were routine visits from professionals and staff accessed relevant professionals as and when the need arose. This provided confidence that staff, families and professionals worked together to support good health and wellbeing outcomes for people.

People benefited from the meaningful activities and connection facilitated by all the staff in the home. We observed residents enjoying a range of activities throughout the inspection and residents and their families shared their positive experience of these. The people in the home benefited from visits from a range of local community groups such as the children from the local nursery and faith groups. We also observed and heard from residents that staff prioritise time to provide 1-2-1 time with people who spend the majority of their time in their bedrooms.

Care plans reflected individuals' health and care needs and preferences and these were regularly evaluated and reviewed. They clearly demonstrated involvement from people and their families. Best practice risks assessment formed part of these care plans and there was also "at a glance" paperwork which provided a brief outline of important things to know about an individual living in the home. This is essential for people to have confidence that staff know their needs and their preferences. These could be improved to reflect the individual's human rights have been considered, in particular, that consent had been obtained where people's freedoms have been restricted (see area for improvement 2).

Where an individual was assessed as requiring additional monitoring for diet and/or fluid intake there should be a clear protocol for monitoring and escalation where necessary. We found this to be unclear and there were large gaps in recordings and an absence of escalation. In addition, we did find large gaps in the recordings of care provision for skin care, application of topical creams and oral care. Therefore this is an area for improvement (see area for improvement 3).

People should be supported with a varied and nutritious diet that is informed by their preferences. People benefited from access to a varied and well-balanced diet. We heard that the home had introduced pre-prepared meals with mixed results. Whilst some modified diet dishes were found to be advantageous, the cook and team have reintroduced home cooked food, something that both residents and their families welcomed. Choices were offered and there were drinks and snacks available during the day.

People should be confident that they are safely supported with their medication needs. We found that there were safe and effective processes in place with appropriate protocols. The management audited this monthly and there were good links with the local pharmacist. However, there is an outstanding area for improvement which relates to recording the outcomes experienced following the use of 'as required' medication (see outstanding areas for improvement for more information).

The care service's conditions of registration needed to be updated to delete outstanding actions and updated to reflect current provision of five respite beds. All registered care services in Scotland are required to notify the Care Inspectorate in line with the Notification Guidance. We found that this was not happening, therefore this will be an area for improvement (see area for improvement 4).

## Areas for improvement

1. To support positive outcomes for people, the provider should ensure that the staffing arrangements across all departments meet the safety, wellbeing and social needs of people. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I am confident that people respond promptly, including when I ask for help' (HSCS 3.17) and 'My needs are met by the right number of people' (HSCS 3.15).

2. To ensure that people's rights are respected and upheld, the provider should ensure that where restrictive measures have been adopted that this is with the individual's consent and/or their legal representative'.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively (HSCS 1.3) and 'I am involved as I can be in agreeing and reviewing any restrictions to my independence, control and choice' (HSCS 2.6).

3. To support positive outcomes for people and keep them safe, the provider should ensure people receive consistent support in line with their assessed care needs. To do this the provider should ensure that where an assessed need needs monitoring including diet and fluids, skin care and application of topical creams, that these records are accurate and there is management oversight of this.

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 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

4. To ensure people are kept safe and well, the provider should report all notifiable events to the relevant regulatory agencies in accordance with the established guidance in: 'Records that all registered care services (except childminding) must keep, and guidance on notification reporting'.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210). This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state 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 setting?

**4 - Good**

In this part of the inspection report we considered one quality indicator. We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

### Quality Indicator: 4.1. People experience high quality facilities

On arrival at the home we noted a warm and welcoming approach from staff. We found the premises to offer a 'homely' environment. There were a range of communal areas and bedrooms were nicely personalised. The hallways were nicely decorated and signage was in place, in order to aid orientation throughout the building. The environment was warm, with good ventilation and good lighting.

We found that the building was cleaned and maintained to a good standard, and was generally free from odours. The laundry room was well organised and efforts were being made to manage risks of cross-infection. However, we did discover that at times the domestic staffing levels were insufficient to enable the environment to be routinely cleaned and also enable deep cleans. We also found some equipment (such as moving and handling equipment and showers) to be soiled and also underneath chairs and beds. Most of the fans needed cleaning and maintenance to ensure that they were effective. We observed some staff members wearing jewelled rings and nail varnish which could cause harm and increase the risk of cross-contamination, therefore this will be an area for improvement (see area for improvement 1).

During the inspection we observed people living in the service benefitting from a range of communal areas within the home. They had a choice of places to sit during the day and when they had visitors. We also observed people sitting or walking around the enclosed garden area with family or with staff. Access to outside activity and fresh air is important for people's wellbeing.

People should have confidence that they are living in an environment that is safe and maintained. The management oversees a range of regular safety checks of the environment and the equipment. There was a lack of ensuite facilities, as this was limited to six bedrooms. An increase in the number of ensuite facilities would enhance the environment for people. The service should continue to look at developing the environment to support people who are able to do things for themselves and include ways to help people have more control and retain their independence where they can.

### Areas for improvement

1. To support positive outcomes for people and reduce the risk of spread of infection or harm, the provider should ensure that staff are aware of, and practice in line with the Care Home National Infection Prevention and Control Manual (NIPCM). In particular, this should include but is not limited to:

- a) There is sufficient domestic staffing arrangements;
- b) All equipment is clean; and
- c) Fans are clean and fit for purpose; and
- d) All staff follow best practice regarding infection prevention and control for nail care and the wearing of jewellery.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11 )

## 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's health is promoted, "as required" medication should be regularly evaluated. If the medication is not having the desired effect, there should be a further medication review. 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 practice and follow their professional and organizational codes.' (HSCS 3.6); 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 7 August 2023.**

#### Action taken since then

The management has taken a number of actions to improve the recording and auditing of medication management within the home. We were able to see that medication reviews are being carried out. This area for improvement highlights the need for staff to record the outcomes of "as required" medication in order that these can be accurately and regularly evaluated. We found a large amount of gaps in the recordings of "as required" medication, therefore this area for improvement is ongoing.

**This area for improvement has not been met**

#### Previous area for improvement 2

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 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).

**This area for improvement was made on 7 August 2023.**

#### Action taken since then

The service continues to recruit for another activities staff member however we were able to establish that there was individual activity planning, there were a range of group and individual activities facilitated by the existing activity worker and staff.

**This area for improvement has been met**

## 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 setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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