

Isobel Rhind Centre Support Service

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Type of inspection:
Unannounced

Completed on:
5 March 2026

Service provided by:
NHS Highland

Service provider number:
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About the service

The service is operated by NHS Highland, an integrated service incorporating adult social care services and health care services across the Scottish Highlands.

The Isobel Rhind Centre is a support service for up to 70 adults with a learning disability, situated in the Black Isle and Mid and East Ross. The service can be provided in people's homes, the community or within the Isobel Rhind Centre. The Isobel Rhind Centre is located on the outskirts of Invergordon. There is an extensive garden where people can get involved in gardening activities.

About the inspection

This was an unannounced inspection which took place on 2, 3 and 4 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 14 people using the service and three of their family;
- spoke with four staff and management;
- observed practice and daily life;
- reviewed documents;
- reviewed completed survey responses.

We received a total of 21 staff responses, 21 professionals responses and one response from people supported by the service.

Key messages

Professionals, relatives and people supported by the service were very happy with the care and support provided.

High levels of staff satisfaction in their role.

The service communicated well with legal guardians and professionals.

Personal plans were person-centred, outcome focused and regularly reviewed.

People benefited from being supported by a staff team who knew them well.

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 staff team?	5 - Very Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	5 - Very 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.

We observed staff treating people with kindness, dignity and respect. The service was welcoming to people they supported and to visitors.

Comments we received included:

"Always comes home with a smile on her face".

"I like the centre, it is amazing, it makes me happy to see all my friends and the staff members, I love them".

"The staff team are always welcoming and friendly offering a hello and a smile. Their approach with the supported people is observed to be caring and professional".

Support plans documented the health and wellbeing needs of people, and the care they required to have good outcomes. People were supported to maintain and develop interests and activities in a way that they liked. People told us about individual support they received from staff who knew them well, and group activities they attended. The service action plan showed plans to continue to increase community involvement. We look forward to hearing about this at the next inspection.

Feedback we received included:

"They offer a good variety of activities...life skills learnt at the centre are transferable".

"Supports quality of life... let's him engage with other people who have become his friends so socially impacts his life positively!"

"Best things is that I can see friends, staff colleagues, that makes me happy and excited".

"Care and support appears to be based around the needs and wishes of supported people and their family as far as possible...leading to the addition of new activities". A good example of this is the shop in Invergordon where community partnership is excellent".

Relatives told us their views were sought and they were involved with reviews. A variety of risk assessments were in place to monitor key aspects of people's care. Advice and support was routinely sought from professionals when people had health related issues. This ensured that people had the right care and support. Professionals told us that communication was "excellent" and "they request support from our or service as they are keen to enhance the person's experience and engagement".

We found that appropriate actions had been undertaken for any incidents, however, notifications had not been made to the Care Inspectorate. We spoke with the management team about the legal requirement to notify the Care Inspectorate of notifiable incidents and guidance provided. **(See area for improvement 1).**

Procedures for administering medication were in place. We found anomalies with the completion of Medication Administration Records (MAR) and spoke with management about strengthening safe medication practice. This is to ensure that people receive safe and effective support with their medication. The service requires to make sure that detailed protocols are in place for 'as and when' (PRN) medication. Protocols should support staff to understand when medication is required and if it is having the desired effect. **(See area for improvement 2).**

Throughout this inspection the management team were receptive to guidance, showing that people

benefitted from a service that was responsive to change and continued to develop.

Areas for improvement

1. The service should ensure that any incidents, accidents, causes for concern and staff absences are notified to the Care Inspectorate as per our notification guidelines: Guidance on records you must keep and notifications you must make (March 2025).

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 use a service and organisation that are well led and managed'. (HSCS 4.23).

2. To protect people's health and wellbeing the service provider must ensure that people experience safe and effective support with medication.

In order to achieve this the provider should, at a minimum:

a) ensure suitably detailed protocols are in place to inform the consistent and appropriate administration of medication that is prescribed on an 'to be taken when required' (PRN) and for topical medication.

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

'Any treatment or intervention that I experience is safe and effective'. (HSCS 1.24).

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Safer recruitment guidance had been followed, and staff were registered with the relevant professional bodies. A staff member had been identified as the Scottish Social Services Council (SSSC) 'Champion', promoting awareness of the SSSC in developing a "trusted, skilled, confident and valued workforce".

All new staff undertook core training ensuring they were trained, competent and skilled to support people. This included shadowing opportunities to facilitate introductions to people who were supported by the service and mentoring from senior staff.

We found that the service provided very good quality care and support. Rotas were well managed and clearly communicated to staff, ensuring responsive care and support was provided.

Staff maintained appropriate records to evidence their support and shared information with their colleagues, ensuring they remained appraised of any significant changes and could respond to change.

Staff had built supportive relationships and provided reliable support for people. It was evident from our observations that staff worked well to build trusting relationships with people.

The service demonstrated strengths in how they supported staff wellbeing. They did this through encouraging good communication and listening to staff. This was done through regular supervision, appraisals and team meetings. This meant staff felt supported, had opportunities to share their views and contribute to how the service was delivered and raise any concerns about people or situations that required additional support or interventions. Feedback from staff included, "I feel supported and included in my role and feel valued and my opinions matter and taken seriously when in discussion with my line managers and colleagues".

We found that people supported by this service had benefitted from a consistent staffing team. This ensured that people experienced stability in their care and support from people who knew their needs, choices and wishes. Feedback from relatives and professionals was overwhelmingly positive about staff, the care and service provided.

A supported person told us, "They are very kind people. They are good to you. They want to help; they are good that way".

Staff were aware of appropriate actions to be undertaken if there were any concerns or wished to make a complaint. This showed that staff had a clear understanding of their responsibilities and people were protected from harm. A professional told us, "My interactions with the staff team have always been positive...any issues identified are dealt with in a timely manner at the time or taken to management/leaders for prompt action".

How good is our setting?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The premises had been designed for high quality care and support. The building was on one level, spacious and had plenty of natural light. The environment was well looked after, clean and tidy.

There was clear signage throughout the building, which reduced causes of confusion and distress for people.

There was a mixture of rooms for various activities, to support people's health and wellbeing, and a communal area, where people could socialise with friends. Additional funding had been provided to upgrade the kitchen, this meant that people had a range of good quality equipment to meet their needs when cooking.

The service had accessible outdoor space, which was well used for supporting outdoor activities. This ensured that people could have an active life and participate in a range of activities, both indoors and outdoors.

Risk assessments for the building and environment had been undertaken, and regular audits were in place. Management had good oversight of any environmental issues and sought additional support and advice, as and when required, ensuring that people were safe and free from harm.

Comments we received included:

"The setting is in large grounds with mature external spaces; the workspaces are bright and welcoming with a positive communal feel to them".

"The impression I received is that the facility is a caring safe place for supported persons and their health and safety is very much looked after".

"Staff provide a positive environment where service users are able to achieve their outcomes".

How well is our care and support planned?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Support plans were reflective of people's outcomes and wishes, setting out their individual care and support needs. People supported by this service told us they were involved in developing and reviewing their support plan.

Reviews were undertaken on a regular basis, and actions to be followed up were clearly documented. Relatives told us they were invited to reviews, and we found evidence of this in review documents. We found that people were supported to share their views about their care and support. A supported person told us, "Before the review my keyworker helps me to give my views. I get help from my key worker or the management at reviews and put things in there".

The service had regular communication with legal guardians, ensuring that when people were unable to make their own decisions, the views of those who know their wishes were sought and were reflective of people's best interests.

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 staff are following current good practice guidance, infection, prevention and control practices should be reviewed.

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)

This area for improvement was made on 2 May 2023.

Action taken since then

Observations showed us staff following current guidance for infection, prevention, and control (IPC). Staff were up to date with IPC training and practice observations were in place on a regular basis by management. This ensured that people received high quality care and support based on relevant evidence, guidance, and best practice.

This area for improvement has been met.

Previous area for improvement 2

To ensure people get the most out of life, where their voices are heard and their views are respected, further evaluation should be undertaken in regard to meaningful and regular opportunities for people to socialise with their friends.

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

'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 out'. (HSCS 1.25);

'I can maintain and develop my interests, activities and what matters to me in the way that I like.' (HSCS 2.22).

This area for improvement was made on 2 May 2023.

Action taken since then

During this inspection, the service were making use of the main area within the building to promote socialisation during lunch and break periods. From our observations, this had provided regular opportunities for people to socialise with their friends and develop friendships.

People we spoke with told us about friendships they had made at the centre and highlighted this as something that was important to them. Supported people told us about their relationships with staff, and value they placed upon these too.

The monthly newsletter provided evidence of planned social events taking place on a regular basis, families were invited to attend some events. The views of supported people had been listened to through meaningful engagement, on a one-to-one basis and through group activities, such as the "Participation group". People were supported to develop their interests and in the planning of recreational events and activities.

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.

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 staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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