

## Catalina Care Home Care Home Service

Teaninich  
Alness Point  
Alness  
IV17 0UY

Telephone: 01349 883 132

**Type of inspection:**  
Unannounced

**Completed on:**  
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**Service provided by:**  
St Philips Care Limited

**Service provider number:**  
SP2003003516

**Service no:**  
CS2004074211

## About the service

Catalina Care Home is registered to provide a care service to a maximum of 28 adults with mental health problems of which up to four places may be used for short break or respite care.

The home is located near the village of Alness, in Easter Ross, which has a range of local amenities, shops and links to train and bus routes. Catalina has accommodation on ground and first floor levels. The service has 28 bedrooms with en-suite facilities. The premises include lounge areas, a large dining area and a central kitchen. Another kitchen is available for those residents who wish to prepare their own meals. Catalina has large, attractive grounds that people enjoyed and helped to maintain.

## About the inspection

This was an unannounced inspection which took place between 8 and 14 April 2025. 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 nine people using the service and 8 family members
- Spoke with five staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals

## Key messages

- People usually felt respected, listened to and valued living here.
- People had made friends with others living at Catalina.
- Whenever possible, people were supported to keep in contact and maintain their relationships with important others e.g. family or friends.
- Staff were good at forming trusting and meaningful relationships with people.
- The manager and depute manager were committed to people enjoying and benefitting from living at Catalina.
- The service provider's quality assurance showed that important improvements to care and support was still needed.
- The service could respond to some of the protection concerns for people more effectively.
- The environment was well looked after, with only a few improvements still to be completed.

## 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 leadership?	3 - Adequate
How good is our staff team?	4 - Good
How good is our setting?	4 - Good
How well is our care and support planned?	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 the service as good at supporting people's health and wellbeing. There were a number of strengths within the service's support to people. However, some improvements could still be made to further ensure the most positive experiences and outcomes for people.

Many people reported that they got on well with staff and they like the service. They felt comfortable and safe at Catalina. They trusted the service to have the right care and support arrangements in place for them. The support they experienced had made a positive impact on their health and wellbeing.

Family members also reported that their relative was being well supported. Importantly, they had 'peace of mind' and they saw the service was responsive to concerns that arose for their relative. People were helped to keep safe and well at Catalina.

People were able to keep active in their local community in ways that were suitable for them. Also, where able to, people also kept up with family or important friends in their life. Having trips away to look forward to were also seen as a positive by people. There were some very good examples of picking up on what was most important to people, what their wishes were and what would boost their mood. To gain insight into what people wished, the service used a 'you said, we did' approach and this proved effective. People were supported to get the most out of their days and weeks.

Within Catalina and its gardens, people had opportunities to take part in leisure or social events they liked. In good weather being out in the grounds was enjoyable for many. Some also mentioned other activities, for example, a dog walking group and the pleasure they got from this. Generally, people were supported to get on well together and enjoy each others' company.

The service strove to get the best balance between a person's independence, their rights and their care and support needs. Mostly, the service was getting a good balance. People were doing the things they enjoyed and getting on with their lives.

Most of the time, the service took a responsible approach to helping people with their health and wellbeing needs. When a person was requiring support with their medication, for example, appropriate measures were in place. To respect people's abilities and independence, where suitable, some people managed their own medication and appropriate assessment and attention had been given to this. People were supported with their medication to keep well and safe.

The service had contact with key other agencies, communication and collaboration was good and this meant people were aided with their health and wellbeing needs. Good relationships like this helped people to keep well and safe.

Usually, the necessary health and wellbeing support worked well but we did find some gaps within the service information and guidance for people's support. Often these were where a care or wellbeing need had been highlighted but then there was a lack of good, detailed guidance for staff to follow in supporting the person with the matter. Such gaps in detail, meant people could not always be confident staff were always fully informed as to how to best support them. We refer to this more later in this report under the different key questions.

## How good is our leadership?

## 3 - Adequate

We evaluated this key question as adequate. There were strengths which had a positive impact but these just outweighed the weaknesses. Important areas of service provision, quality assurance and improvement need to improve. Continued performance at adequate is not acceptable for people.

The management team had an active presence within the service. They knew what was going on for people. They communicated well to people, staff, family and other key partners. This was a clear positive in the service and people's health and wellbeing benefitted from this.

Good relationships with key partners in health and social care had been made. If someone's health or wellbeing was not as good as it had been and they were becoming unwell, then the service was quick to notice and involve other agencies. This helped to make sure people received the right care and support at the right time. Often it helped people to keep well and have less disruption in their lives.

The manager was able to express strong social care and person centred values. The service had undertaken its own self evaluation and this led to many helpful actions being taken within the service. People's input into improvement was encouraged. People at Catalina were appreciated for their qualities, knowledge and strengths. Views and opinions were welcomed, sought and people were respected.

The service provider had undertaken quality assurance exercises and this was informative. It did, however, highlight that there were gaps in some of the important information for people's care and support. Care and support plans sometimes lacked detail and were not as good and detailed a guide for a people's health and wellbeing needs as they should have been. People could not be fully confident that the service and staff had all the right information to help them be well and safe.

At times, people could be at risk of harm due to their own decisions or the actions of others. Mostly, the service responded suitably in these situations but it was also the case that there were occasions it did not and nor did it follow the recognised, local adult support and protection guidelines. Safeguarding training had taken place but management did not always take the right actions as they were not informing the local adult protection team, reviewing safety plans for people or notifying the Care Inspectorate of certain incidents which had put a person or people at risk of harm. We have made a requirement for this. See Requirement 1.

To discourage people from smoking in their own rooms, for a period of a few months the service had imposed financial fines on people if found to be smoking in their room. The service had stopped this fining recently and returned monies to people. However, the service was incorrect to impose a financial penalty on people living at Catalina in this way. Whilst smoking within rooms was to be discouraged, fining people was legally a wrong measure as a response by the service. It should have sought a more appropriate, legally suitable approach to support people with behaviour that could be a risk in a health and social care setting. The service management should always be aware of what measures to support people's behaviour, decisions and actions comply both with social care values and legislation. We have made an area of improvement for this. See Area for Improvement 1.

The service management were not ensuring people's monies and financial transaction were always fully recorded with sufficient, detailed information. Checking by and signatures to confirm any transactions from a fellow staff member and/or a resident was not always being done in line with best practice and the service provider's policy for the handling of residents monies. This should be addressed. See Area for Improvement 2.

## Requirements

1. By 9 July 2025, the service provider must ensure people are supported to keep safe and keep good health and wellbeing.

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

- a) report any protection concerns for a person immediately to the relevant adult protection teams
- b) put in place suitable arrangements for minimise any risk to a person's safety and create or update any safety plan in place for a person as necessary
- c) collaborate closely with key partner agencies in the protection of people and
- d) notify the Care Inspectorate immediately of any protection concern incident for a person

This is to comply with Regulation 4(1)(a) and 5(2)(b)(ii) 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 the Health and Social Care Standards (HSCS) which state that: 'If I might harm myself or others, I know that people have a duty to protect me and others, which may involve contacting relevant agencies.' (HSCS 3.24)

## Areas for improvement

1. In order to support good outcomes for people experiencing care, the service provider should endeavour to make sure the service management and staff always act in accordance with the principles, values and legislation of health and social care provision..

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 experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

2. In order to support good outcomes for people experiencing care, the service provider should make sure any monies held and managed by the service on behalf of people is managed safely. That people's financial matters are always suitably handled, recorded and all staff follow the correct procedures.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5) and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27)

## How good is our staff team?

**4 - Good**

We evaluated this as good.

New staff were recruited with all the right checks taking place. Their suitability for supporting people in a health and social care setting was carefully considered. People can trust that the service strove to recruit staff that have positive and caring attitudes.

Family members reported that staff made them feel welcome when visiting or making contact by telephone. The service is good at sharing information. Staff recognised that Catalina was people's home and they were there to assist people's health and wellbeing, to understand their wishes and support them in a respectful and relaxed way.

Many people reported that they felt very comfortable with staff. They felt that they could speak to staff. Staff were seen as friendly and helpful. People said they were happy living at Catalina.

Staff had a range of training to undertake and most of this was up to date. As well as learning new areas of mental health support it also made sure that staff kept up to date with important social care matters, such as medication support or person centred approaches to supporting people. People can have confidence in staff's knowledge and abilities.

Communication within the team and with the management was good. Staff said the management were approachable and easy to talk to. Also staff members had regular supervision meetings and these were an opportunity to talk about the support they provided, what was going well for people and where, for example, the service could do better or introduce something new. These arrangements assisted staff to be reflective about the support they provided, people's needs and wishes, and helps staff to be as able and insightful as they can be. People can trust staff receive suitable support and development in their role.

Whilst we saw good aspects regarding staffing, we did pick up on a couple of matters that need to improve. Management were not always accurate in their staff records. Some staff documents had gaps in the important information.

Importantly, we saw and heard of examples where staff were slow to respond to people health or wellbeing support needs. We shared this with management and management said it will be addressed. Some people said, too, that some staff were easier to talk to than others. This was not just as result of people's natural preference and ability to get on with some staff more than others but it appeared to be because some staff did not listen well when discussing matters with a person. Staff should always respond to people in a skilled, relaxed and professional way. An area for improvement from the previous inspection will be revise and repeated as the service should improve in these areas of support. See Area for Improvement 1.

Like last year, in a couple of instances staffing levels needed to be addressed. There was a night shift that only had two staff members for a period of a few months and this meant those two staff were overstretched. Management should have prioritised some temporary solution for this until they recruited to the vacant post. There was also some repeated comments that domestic and kitchen staff levels could have been higher over the previous year to meet all the demands of their duties. Staff levels should always be sufficient to meet people's expectations and needs.

## Areas for improvement

1. To ensure people receive timely support and staff are alert and responsive to people's care and support needs and wishes, the service provider should ensure staff have clear guidance and have planned and regular, appropriate opportunities to observe and attend to people when needed.

This should include, but not limited to, agreed and assessed set times for daily and nightly observations and checks of communal areas, and staff having a considerate and professional approach at all times.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people respond promptly, including when I ask for help' (HSCS 3.17) and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

## How good is our setting?

### 4 - Good

We evaluated the environment as good. Improvements had taken place and only some areas were still being upgraded.

People were comfortable in Catalina. They exercised their rights to make decisions and choices about their own rooms, how they wanted the rooms to be and we saw the service supported their choices whenever possible.

There were some robust systems in place to ensure a safe environment. This included fire safety. There were clear planned arrangements for regular monitoring and maintenance of the premises and equipment to ensure people had a safe home to live in.

Maintenance at the home was reported as being responsive and quick to attend to any matters. The grounds were attractive and looked after well. People enjoyed and benefited from this as it gave them pleasant surroundings to make use of and relax in. Some residents also gained in positivity from helping with maintaining the grounds on behalf of others living at Catalina. Some thought could also be given to how other people could find meaningful ways to contribute to the weekly quality assurance and checks at Catalina.

A cleaning programme was in place to keep people's home to a suitable standard. Areas or rooms that needed additional support were usually recognised and addressed appropriately. The laundry room was laid out in a suitable way that would help minimise the risk of infection spread. We discussed with management the expectations that any odour should be addressed if needed. People's home was kept clean and infection and other risks were reduced.

The service had a home improvement plan. There were a lot of improvements made in the last year, with only a few actions still to be completed. The progress showed a responsible attitude adopted by the service to make sure people's home was attractive and comfortable. Further plans to enhance communal areas should be kept on the agenda. Management understood that, like any home, the environment was an aspect of the care home that would need continuous attention. People had input into the key decisions and choices made. This was both individually and as a resident's group. People were respected.



**How well is our care and support planned?****4 - Good**

We evaluated this as good. Important strengths outweighed areas where improvement could be made. Improvements though would benefit people's experiences and outcomes at Catalina.

There was some good, helpful information within people's support plans. There were examples of where people were centrally involved or took control of the support documentation. Such examples guided staff to know how a person wished to be responded to when experiencing emotional or health difficulties. Providing explanation and information as to what could work best. As well as respecting people and their opinions, such an approach helped people to keep safe and well.

In care plan and support documents and there were other instances of people's choices and wishes being acknowledge and acted upon. Within the document we mostly found a good recognition of what could be a risk for a person and how to minimise that risk. The approach used for creating care plan documents, doing this jointly with people, helped people stay safe and feel respected.

That said, the service providers own quality assurance activities found gaps in information and sections missed out within some people's care and support plans. This could often relate to matter that could present a risk to a person's health or safety. People could not always be fully confident staff had all the right information and guidelines for their support needs and wishes.

It was difficult within some people's care and support plans to see exactly how a person would be supported with a matter. There was not always a clear picture of the person and their support needs presented. Care and support plans would be improved by being reviewed and where more detail and explanation is needed that being identified and updated. Writing information in clear, simple, spelling it out, respectful and helpful terms would ensure staff have an easy to follow support guide to a person. People will be more assured that staff have the right information for providing support and getting to know them. There was an area for improvement made for these matters at the previous inspection and this is repeated. See Area for Improvement 1.

Whilst the service has a philosophy of respecting people's independence, we did not think it was always fully taking into account their safety, support needs and wishes. By recognising and addressing the balance between these aspects of a person's life when staying at Catalina, the service will enhance people's wellbeing and independence. The requirement made at this inspection ( see under 'How well do we support people's wellbeing?') and other areas for improvement if met in time should address this. Additionally, resources and learning to increase the whole team's knowledge and skills in this should also be sought.

**Areas for improvement**

1. To support safe support and positive experiences and outcomes for people, the service provider should ensure that comprehensive assessment processes and care and support plans are always undertaken, in place and reviewed regularly.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My future care and support needs are anticipated as part of my assessment' (HSCS 1.14) and '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).

## 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 support people's wellbeing, outcomes and experiences, the service provider should ensure that quality assurance is reviewed and developed so as to cover all areas of care and support.

This should include, but not limited to, ensuring people get timely care and support, arrangements that assist staff to be alert to people's needs and wishes, environmental observations regularly undertaken and how person-centred support is practiced.

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 13 May 2024.**

#### Action taken since then

This was met. The service provider's quality assurance had highlighted what was not being done to a suitable standard. Clear examples of this was identifying gaps within people's care and support documents and improvements actions being undertaken in the care home's environment.

#### Previous area for improvement 2

To support improvement the provider should undertake a process of self evaluation. This should result in the development and ongoing reviewing of improvement plans that have measurable outcomes relating to 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 13 May 2024.**

#### Action taken since then

This was met. Self evaluation by the service and the action plan developed in response to that was positive. Improvement actions had been identified and were being carried out. This was evident when looking at the environment and in other ways such as the 'you said, we did' approach which focused on people's wishes and what would make a real difference to their wellbeing and be of benefit. Involving people was an important element of the service improvement journey.

**Previous area for improvement 3**

To ensure people receive timely support and staff are alert and responsive to people's care and support needs and wishes, the service provider should ensure staff have clear guidance and have planned and regular, appropriate opportunities to observe and attend to people when needed.

This should include, but not limited to, agreed and assessed set times for daily and nightly observations and checks of communal areas, and when needed people in their own rooms.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people respond promptly, including when I ask for help' (HSCS 3.17) and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

**This area for improvement was made on 13 May 2024.**

**Action taken since then**

This was not met and we have repeated this area for improvement. See under 'How good is our staff team?'

During the last year, there had been some lengthy periods when the full staff level for a care shift was not present. Recruitment had been a challenge. This was also the case for some non care staff recruitment.

Occasionally, staff were not as relaxed and as responsive as they could have been. This is an area for management to review.

**Previous area for improvement 4**

To ensure safe care and that staff are clear on roles and responsibilities the providers core training should be reviewed and include safeguarding. The manager should have an overview of team training.

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 13 May 2024.**

**Action taken since then**

The service provider had ensured that staff had undertaken the appropriate safeguarding training. This went some way to help make sure people protection, safety and wellbeing needs were recognised and suitable support was provided. Whilst the training has been put in place, we noted separately that protection concerns and response still must be improved and a requirement was made under Key Question 2.

**Previous area for improvement 5**

To support positive experiences for people, the service provider should ensure that all areas within the care home are attractive, homely and suitable for people's use and enjoyment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I experience care and support in a group, I experience a homely environment and can use a comfortable area with soft furnishings to relax.' (HSCS 5.6).

**This area for improvement was made on 13 May 2024.**

## Action taken since then

This was met. There was substantial progress in terms of the environment, making people's home more homely and attractive. Some actions were still be completed but were fully underway.

## Previous area for improvement 6

To support safe support and positive experiences and outcomes for people, the service provider should ensure that comprehensive assessment processes and care and support plans are always undertaken, in place and reviewed regularly.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My future care and support needs are anticipated as part of my assessment' (HSCS 1.14) and '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 13 May 2024.**

## Action taken since then

This was not met. We have repeated this. See under 'How well is our care and support planned?' in the main report.

## Previous area for improvement 7

In order to support good outcomes for people experiencing care, the manager should develop service specific information, which can be shared with prospective residents and their representatives. This should detail the support that can be provided, along with any service limitations.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state that: 'I am in the right place to experience the care and support I need and want' (HSCS 1.20) and 'I receive and understand information and advice in a format or language that is right for me.' (HSCS 2.9)

**This area for improvement was made on 13 May 2024.**

## Action taken since then

This was met. Information has been developed to inform people about the service at Catalina, for instance, a guide titled "Understanding Catalina - what we can do and what we are unable to do" for people and their family or representatives.

## 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 leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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