

# Care at Home and Enablement Service Nairn Support Service

Nairn Town and County Hospital Cawdor Road Nairn IV12 5EE

Telephone: 01667 422 702

Type of inspection:

Unannounced

Completed on:

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Service provided by:

NHS Highland

Service provider number:

SP2012011802

**Service no:** CS2019377296



# Inspection report

## About the service

Care at Home and Enablement Service Nairn is registered to provide support to people with an assessed need in their own home. The service has an office base within the Nairn Town and County Hospital, and the service operates in the Nairn and surrounding areas.

The service provides support which enables people to safely remain in their own home and community. The service works to maximise their abilities to develop confidence, skills and independence. It offers a service which is limited in time to facilitate discharge from hospital as early as possible and avoid unnecessary admission to hospital or a care home.

The provider of the service is NHS Highland.

## About the inspection

This was an unannounced inspection which took place from 30 June to 2 July 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 three people using the service and one of their family
- spoke with six staff and management
- · observed practice and daily life
- · reviewed documents
- spoke with visiting professionals.

## Key messages

- Staff developed meaningful relationships with people based on warmth, respect and compassion.
- People receiving care and support felt valued and confident in how the service responded to their needs and wishes.
- Staffing levels were good and people's care and support benefitted from consistent staff teams.
- Staff were skilled, knowledgeable and competent within their role due to regular supervision and comprehensive training.
- Managers ensured people received a high-quality service by using thorough systems and processes to monitor people's experiences.
- Leaders and staff contributed to an open culture of learning and continuous improvement where people's best outcomes were a priority.
- People and their families were fully involved in planning their care and support.
- People benefitted from partnership working with external professionals and organisations which promoted holistic care and support.

# 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?	5 - Very Good
How good is our leadership?	4 - 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?

5 - Very Good

We evaluated this key question as very good, where significant strengths supported positive outcomes for people.

People received warm, compassionate care that was based on trust and confidence in a skilled support team. Staff enabled people to make choices based on a clear understanding of what was important to them in achieving their goals. One person spoke of how they had been enabled to reduce their support as their independence developed and another of how staff were flexible in adapting to their preferred routines. This meant people were in control of directing their support and their preferences respected. One person told us, "Staff are fantastic and give the help that I need" and another confirmed, "They find out if I can do things as part of seeing how I am getting on in being more independent".

People consistently described staff as caring and how they positively worked to their strengths and pace. We heard from staff about their passion for their role and commitment to ensuring people's health and wellbeing benefits from their care and support. One person told us, "When I came out of hospital I wondered how I would cope, it's a comfort, I look forward to seeing my carer and am happy with my care" and another confirmed, "Carers are pleased to see me and I am pleased to see them". People were sometimes unsure who was coming in to support them but told us that this did not affect them, as they knew their team and everyone was friendly.

Staff in the service demonstrated a clear understanding of their responsibilities and recognised changing health needs. This meant people received the right care at the right time from the right people. People were enabled to make informed choices about their health and involved in making decisions through detailed person-centred plans. One staff member told us, "The service focus is on the individual" and another confirmed, "The service gives people confidence and support to enable them to feel comfortable and secure back in their own home".

Managers and staff knew people and families well and developed strong working partnerships with other professionals and organisations. This meant people benefitted from holistic discussions about promoting their wellbeing based on regular communications. One external professional told us, "The service is very responsive, very proactive" and this view was confirmed by another who told us, "I am confident that people's outcomes are achieved due to the level of detail frequently expressed by the reablement service".

The service could improve by ensuring completion of body charts for when topical cream is administered for people.

## How good is our leadership?

4 - Good

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

Staff continually evaluated people's experiences to ensure that, as far as possible, the right care and support was provided in the right place to meet their needs and goals. Leaders demonstrated the skills and capacity to oversee improvement and were responsive to feedback from people using the service. Staff told us they felt well supported within a learning culture and developed from comprehensive training. One staff member told us, "There is always room for improvement and learning, which I feel we are doing on a daily basis, updating in real time, which helps us acknowledge people's ongoing needs and development" and another confirmed, "It is a learning culture, we all learn and get support". This meant people benefitted from quality assurance processes that monitored their experiences of the service.

Staff told us that managers were open and approachable and were confident giving feedback because they knew leaders would act quickly. Staff benefitted from regular supervision and opportunities to reflect on their practice. This meant learning from staff training was applied in people's care and support. One staff member told us, "I have good access to manager support and feel everybody is there to help me" while another confirmed, "I feel supported at all times, any time I have a query one of the team will be available to help me".

Leaders demonstrated a clear understanding of what was working well and their role in directing and supporting improvement. We saw evidence of managers' diligence and commitment to undertaking regular quality assurance activities to ensure people achieved the best outcomes. One external professional told us, "I feel the service is well led and managed" and this was confirmed by a staff member who told us, "I feel we excel at team working and communication and feel we have a great community team who strive to provide the best possible care".

Managers had developed a workplan and started a process of self-evaluation. We discussed with the provider how the developments they identified and feedback gathered, could be collated into a service improvement plan. We heard about projects for new ways of meeting people's unmet needs and would encourage the service to share this good practice and include their aspirational ideas. We highlighted gaps in notifying the Care Inspectorate of specific accidents and incidents. We identified where both areas should improve. (See Area for improvement 1)

#### Areas for improvement

1. In order to support continued quality assurance, the provider should ensure that an improvement plan is developed, which is reviewed regularly and informed by self-evaluation. This should include but is not limited to, submitting appropriate notifications to the Care Inspectorate.

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).

# How well is our care and support planned?

5 - Very Good

We evaluated this key question as very good, where significant strengths supported positive outcomes for people.

## Inspection report

People's care plans were detailed, updated regularly and used person-centred language that demonstrated how to achieve their goals. This included strategies on how staff safely supported and responded to people in a crisis. Staff anticipated people's needs and were able to identify changes in health and reported concerns to managers. This ensured people were safe and their health needs met in a timely way. Risk assessments and safety plans focused on enabling people rather than restricting activities. One staff member told us, "I feel we have a strong sense of what it means to do this job well and pull together as a team in order to support and care for everyone involved" and this was confirmed by a person using the service who told us, "I cannot fault the service, it acts as a second pair of eyes; the carers may see something that needs to be taken care of".

People benefitted from responsive and aspirational care planning that consistently informed all aspects of the support they experienced. People were involved in developing and shaping their support based on positive working relationships with other providers and professional colleagues. Strong leadership, staff competence, meaningful involvement of people and embedded quality assurance supported positive outcomes for people as their needs changed. External professionals told us, "Issues are recognised and resolved, they respond very quickly to any issues or concerns" and "Their information is excellent, they clearly identify unmet need and if we have capacity, we work well together with good discussions and respect each other's expertise".

One of the strengths of the service was the close partnership working with others and a clear understanding of their role in the wider context of holistic support for people. One example was their recognition of unmet need, or how people's care would require longer term support and how everyone worked together for the best outcome for the individual with positive transitions to other providers. One external professional told us, "I feel the service works implacably to support identified aims and objectives" and this was confirmed by another who told us, "I find the team very proactive in escalating concerns and communicating, all seem very well informed of the client, their needs and family network".

The service could improve by looking into how people and families, where appropriate, could be informed about rotas and the staff that will be supporting on specific days.

# 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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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