

Tigh-na-Cloich Care Home Service

Ord Road Muir of Ord IV6 7XL

Telephone: 01463 872 832

Type of inspection:

Unannounced

Completed on:

1 August 2025

Service provided by:

Nansen Highland

Service provider number:

SP2003001725

Service no: CS2008187641



Inspection report

About the service

Tigh-na-Cloich is a care home registered to provide a service to a maximum of four adults with learning disabilities.

The provider is Nansen Highland, a registered charity based in Easter Ross. Nansen Highland operates other support services to people with a disability, including day care, housing support and care at home.

The home is in a residential area within the village of Muir of Ord and is close to local amenities. The building is a detached one and a half storey house set within an enclosed garden. Accommodation consists of four bedrooms with en-suite facilities. Young adults share a light, comfortable lounge, and a large kitchen/diner with a sun porch. Staff have access to an office and sleep-in accommodation and there is a ground floor bathroom for the use of staff and visitors.

Tigh-na-Cloich aims to support young adults with independent living as part of developing their confidence and learning life skills in both maintaining and sharing a home. Personalised care and support enable people to move forward with their goals and aspirations at their own pace.

At the time of our inspection, three people were being supported by the service.

About the inspection

This was an unannounced inspection which took place on 22 to 28 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 five 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 trust because they knew them well.
- People receiving support felt cared for and listened to and were confident in how the service responded to their needs.
- People achieved positive personal and group outcomes from experiencing individual support and group living.
- Staffing levels were good, and people's care and support benefited from consistent staff teams.
- Staff were competent, skilled, and knowledgeable within their role due to regular training and supervision.
- People benefited from living in a homely atmosphere with high quality facilities.
- People benefited from regular communication between managers, their support team, and external professionals in promoting their health and wellbeing.

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 staff team? | 5 - Very Good |
| How good is our setting? | 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 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.

People received warm, compassionate care and support based on dignity and respect. We observed trusted relationships between people and staff with the comfort that comes from knowing each other well. Staff were skilled and sensitive in promoting people's independent living skills. People's choices were balanced with enabling risk assessments. This meant people achieved positive outcomes while learning how to be safe as they developed their confidence. One family member told us "There is a balance between safeguarding and empowering independence which continues to support my relative's personal development" and another confirmed "I am involved in my relative's care planning and review processes, my relative is also involved in decision-making about their care".

We observed a warm atmosphere and relaxed environment where people benefited from meaningful activities. People were encouraged to pursue their hobbies and interests in addition to participating in community life, such as working or attending other facilities. This meant people were able to get the most of life. Staff told us "We aim to encourage independence but each person has different needs and this is reflected in their support" and this was confirmed by another who said "It's very homely and I like the way we deliver support, I think we do that really well and we get to know people".

There was evidence of a healthy approach to food and drinking, meeting people's needs and wishes, with people enjoying a wide choice of diet. People chose when to eat and what they wished to cook with guidance from staff when appropriate. Fresh fruit was available, and people had independent access to their food and drink. This meant people were in control of their lifestyle choices but benefited from support if needed.

Personal care plans were detailed, clear and promoted people's involvement. This meant people's voice was heard and they directed their own support as much as possible. Staff used person-centred language and people's short- and long-term goals were reviewed. People's health was holistically assessed with evidence of support to community health facilities and communication adapted to suit the person's needs. One family member told us "The quality of care is excellent, and my relative is very happy" and another confirmed "Staff are professional and conscientious whilst being friendly and informal."

People had as much control as possible over their medication and medication was well supported with appropriate documentation. People's finances were well managed by staff and necessary legal documentation was in place where this was required. This meant people and their property were safe.

As a shared living environment, staff provided sensitive support to help people manage relationships and there was a balance of meeting group and individual outcomes. People's own space was respected, and they shared responsibility for arranging when they would access the shared laundry facilities or kitchen. This meant people developed a sense of fairness and cooperation with others. People told us "Staff do a fantastic job" and this was confirmed by another who said, "It's a nice house and the staff are awesome."

The service could improve by clearly recording outcomes when using 'as needed' medication and review these regularly to ensure they are being effective in achieving the desired health outcome.

How good is our staff team?

5 - Very Good

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

Staff were recruited carefully and well to ensure the right people with the right values were supporting people at the right times. Staff were competent, knowledgeable, and skilled based on regular supervision and training. There was a system for assessing staffing and staff hours. People spoke positively about how the service attempted to match staff with them and were flexible in responding to changing situations. This meant people benefited from consistent support from staff who understood their needs. One family member told us "The service is person-centred, empowering and dynamic, able to change in response to external factors" and when we spoke with others, they shared this view.

Staff and managers communicated well as a team and felt supported in their role. This meant the focus of arranging people's support was person-centred and balanced with supporting the wellbeing of staff. Managers were described as responsive, open, and approachable by staff for when they needed guidance and advice. Staff told us "Leadership is really good, and everyone is here for the people. I can talk to anyone" and another confirmed "I feel the team is really good, as long as people are okay that's our priority and their happiness."

There was evidence of a learning work culture and staff felt that they worked within a 'family,' with shared values around making a positive difference to the lives of young adults. This meant staff were confident in building positive interactions and relationships with people. Staff told us "There is a staff team that has been here for some time and a good skills match to the people and the team is fantastic" and another confirmed "I really like the way it's run and working with the people, I feel well supported in my role."

People using the service and staff benefited from a warm atmosphere because there were good working relationships. Staff and management meetings provided opportunities for staff to contribute their views and make suggestions about how to improve outcomes for people. One family member told us "I have complete trust in and admiration for the way management leads and inspires the team" and another confirmed "Staff are really tuned into my relative."

The service could improve by collating their training plans and developments into an organisational training needs analysis. This would enable clear management oversight of current and future training goals as the needs of people and staff change over time.

How good is our setting?

5 - Very Good

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

People enjoyed a spacious, light, bright and comfortable home with access to an attractive garden and sunroom. People's bedrooms were en-suite and decorated how they wished. The shared sitting room and dining/kitchen area were decorated well, and well equipped. This meant people benefited from being able to choose privacy or share company with others. One family member told us "It's quiet and peaceful and my relative enjoys local walks and helping with garden maintenance" and when we spoke with others, they confirmed that the home's location promoted people's wellbeing.

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Staff had access to separate facilities which meant a homely atmosphere was maintained with minimal evidence of work-related materials.

Furnishings and accessories were of a high standard, and we observed people taking pride in keeping their home clean and fresh. People were encouraged to give their views on the setting and how it could be improved. We discussed with the provider how people are involved in choosing who will share their home with them. This meant people could influence changes to their home and feel listened to about any planned improvements.

We saw evidence of clear planned arrangements for regular monitoring and maintenance of the premises and equipment to ensure people were safe.

We discussed how the service was planning improvements to the front garden, which was being landscaped at the time of our inspection and due to be completed.

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 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 7 November 2022.

Action taken since then

Each service had developed an action plan in addition to an organisation action plan. Managers detailed where feedback and self-evaluation had been used to drive forward improvements. Clear objectives were included with named managers responsible for monitoring progress within specified timescales. We discussed the Care Inspectorate guidance on self-evaluation for further clarity in embedding quality assurance systems into current audit activities.

The area for improvement was 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? | 5 - Very Good |
|--|---------------|
| 1.3 People's health and wellbeing benefits from their care and support | 5 - Very 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 |

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