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NHS Highland
NHS Highland Primary Care Trust
Assynt House
Beechwood Park
Inverness
IV2 3BW

17 October 2025
ENF/2025/CS2024000133/01
CS2024000133

Dear NHS Highland

COMPLIANCE WITH IMPROVEMENT NOTICE

On **16 April 2025** you were served with an Improvement Notice in relation to Sutherland Care at Home Service, Lawson Memorial Hospital, 5 Ben Bhraggie Terrace, Golspie, KW10 6SU in terms of section 62 of the Public Services Reform (Scotland) Act 2010 ("the Act"). The Improvement Notice stated that unless there was a significant improvement in provision of the service, Social Care and Social Work Improvement Scotland (hereinafter referred to as "the Care Inspectorate") intended to make a proposal to cancel your registration. The Improvement Notice specified the nature of the improvements to be made, and the period within which they were to be made.

As there has been a significant improvement in the service, the Care Inspectorate has decided not to proceed to make a proposal to cancel the registration of the service. Our conclusions about the improvements made are noted below.

Improvements

1. **By 28 September 2025, extended from 25 May 2025**, you must ensure you keep people safe and healthy by ensuring medication is handled and administered correctly. You must, at a minimum:

- a) Carry out a medication audit to establish a baseline which identifies what improvements are necessary and implement those;
- b) Ensure that people administering medication are suitably trained and that they have had their competency assessed;

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c) Notify the Care Inspectorate of all medication errors in accordance with the Care Inspectorate's 'Guidance on records you must keep and notifications you must make.

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), section 53(6) of the Act and section 8(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

Action taken:

An audit of medication had been carried out to establish a baseline which identified necessary improvements. Named people had been identified to implement any actions identified. This ensured that people were safe in terms of their medication support and actions were communicated effectively.

We found evidence that the majority of staff had undertaken medication training and had their competency assessed.

The service had made notifications to the Care Inspectorate of all identified medication errors, and appropriate actions had been undertaken.

This required improvement has been met.

2. By 28 September 2025, extended from 25 May 2025 you must ensure that there is effective governance at service level to monitor and manage quality of care. This should include but need not be limited to, the wellbeing and safety of service users and staff practice. In particular you must ensure that:

- a) There is sufficient management and leadership capacity to lead effective continuous improvement, including systematic and effective quality management, quality assurance and implementing early warning systems to identify risks.
- b) There is effective and meaningful monitoring in areas of staff practice, including, but not limited to, administration of medication, moving safely, skin integrity and meeting the care and support needs of service users.
- c) Where there is poor practice, this is recognised, and prompt action is taken to address this.
- d) Staff are appropriately managed and are well led.
- e) You put in place and implement a robust process to listen to and take seriously people's concerns, and to recognise and respond when people may be unhappy.

This is in order to comply with Regulations 3 and 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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Action Taken:

Since the previous inspection an experienced registered manager had been appointed. They had a robust induction plan in place and spoke positively about support received from the service provider. The high level of senior support and oversight in place offered us reassurance that ongoing support would be provided. This will be required to ensure the service is appropriately managed and that improvements are sustained during this period of transition.

We spoke with the registered manager about their plans for continuous improvement and development of the service. They told us about their priority for a more visible management presence and ways to continue to engage with and support staff. This is essential to ensure a responsive and skilled workforce.

We found evidence of quality assurance processes and the implementation of early warning systems to identify risks. There was continued improvements in the level of governance and monitoring of care and support. Despite the office-based staff experiencing significant shortages, we observed managers being responsive to risks identified and issues resolved, ensuring the safety of service users.

Most staff had completed core training and competency checks had been undertaken. We observed good practice and staff we spoke with told us they felt positive about the training, in particular their learning from medication training. We found evidence that staff were identifying risks and notifying the management team of issues. Notifications had been made to the Care Inspectorate, evidencing appropriate actions had been undertaken to keep service users safe.

No formal complaints had been received since the previous inspection. Staff we spoke with were aware of the complaint's procedure. Feedback from staff was varied, with some staff commenting that morale remained low. We received good feedback from people supported by the service and the care they received from staff. The views of service users had been sought with questionnaires. The service had received a high response rate with generally very positive feedback from service users.

This required improvement has been met.

A copy of this notice has been sent to the local authority within whose area the service is provided.

The Improvement Notice dated **16 April 2025** is no longer in force.

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Yours sincerely

[Redacted Signature]

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