Wade Centre (Care Home)
Care Home Service

Spey Street
Kingussie
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Telephone: 01540 661 863

Type of inspection:
Unannounced

Completed on:
15 October 2026

Service provided by:
NHS Highland

Service provider number:
SP2012011802

Service no:
CS2012307290

About the service

The Wade Centre (Care Home) is registered to provide a care service to a maximum of 11 older people. A maximum of two of these places may be used for respite care. The Wade Centre (Care Home) is a single storey, purpose-built care home. There is a communal sitting area and some smaller, more private spaces residents can use. There is an attractive garden that is easily accessible to residents. The bedrooms are en-suite and have doors leading out to patio areas. The service is situated in a quiet residential area of Kingussie. It has easy access to a range of nearby community resources and facilities.

About the inspection

This was an unannounced inspection that took place on 14 and 15 October 2026. One inspector carried out the inspection. To prepare for the inspection we reviewed information about the service. This included previous inspection findings, details of registration and complaints, and information submitted by the service throughout the inspection year.

This was a core assurance inspection to provide assurance that better performing services continue to deliver care and support that meets people's needs. It is not a validation of previous evaluations, and no new evaluations (grades) have been awarded.

This inspection is called a core assurance inspection. This is because research tells us that these core assurances are the key areas that are essential to a service being safe. We report on them under the headings: legal assurances; wellbeing; leadership; staffing; the setting and planned care/support.

During this inspection, we confirmed that people continued to receive care that met their needs and protected their safety, wellbeing, and rights.

We knew this because we:

- spoke with 5 people using the service
- spoke with 9 staff
- spoke with 4 relatives
- spoke with 1 professional with knowledge of the service
- reviewed survey responses from 5 people using the service, 6 staff members, 2 relatives and 3 visiting professionals
- observed practice and daily life
- sampled relevant documents

Key messages

Scrutiny
We found the service was operating legally and in line with their conditions of registration, including having the appropriate insurance in place and a range of policies and procedures that promoted good outcomes for people. This meant that people were safe and protected from harm and could have confidence in the organisation providing their care and support. The service was in the process of submitting an application to vary the conditions of its registration, in relation to respite provision.

Wellbeing
People felt safe and well supported. Staff were trained and confident in their responsibilities, and relatives told us the home felt safe, with any issues addressed quickly. People's health needs were well supported, and there was evidence of significant involvement with other health and social care professionals.

The service was well led and managed with a focus upon ensuring staff supported people in a compassionate, person-centred manner. People had opportunities to remain active, with a range of daily activities on offer and individuals were actively encouraged to take part. People stayed connected with their family and friends, and staff supported individuals to participate in community activities, helping them build local relationships and maintain meaningful connections. Families provided positive feedback of their relative's experience in the Wade Centre. Relatives told us;

"Its really excellent care; they couldn't do any more for mum."

"Reviews are very useful and we brought up two issues and these were quickly addressed by the staff."

Mealtimes were relaxed and provided a positive social occasion for many people throughout the day. Meals looked appetising and, where people needed any support, this was provided in a dignified, and skilful manner. This meant that people could enjoy their food in a relaxed atmosphere and have the required support to enjoy their meals. People told us;

"The staff are good fun, they are lovely."

"They have excellent food and the Chef comes to me every day to discuss Gluten-free options."

"I am able to tell them if I am not happy about things."

Medication systems were well managed, and staff competence meant people could have confidence that their health needs were being met safely and consistently. Infection prevention and control practices were embedded, and staff had received the necessary training. The environment was consistently clean, tidy, and welcoming. Professionals told us;

"Support staff are very good at alerting us if there are any worries or concerns."

"Their infection prevention and control practice is very good and the place is always clean and tidy."

Leadership
There was oversight from the management team, which helped ensure people received person-centred support and that their rights and values were respected and promoted. Staff described an open and

transparent culture, with leaders who were visible and acted as good role models. This supported staff to follow good practice guidance and deliver person-centred care. Staff told us:

"Yes, I love it here and enjoy working with people and relatives."

"I think we are really good at teamworking and pulling together."

People told us they felt confident that if they raised a concern or complaint, it would be taken seriously and addressed promptly and appropriately. The service had robust procedures to record and manage accidents and incidents. The manager and staff understood their responsibilities to report and record incidents. People experiencing care and their families and other stakeholders had opportunities to comment on the service provided. Families reported that leaders were approachable and receptive to their ideas and suggestions. This meant that people were confident giving feedback and raising any concerns because they know leaders will act quickly and use the information to help improve the service.

Staffing
There was a culture of transparency and shared learning which ensured positive outcomes for people. An open culture, supported by regular supervision, enabled staff to share ideas, raise concerns, and reflect on their practice to support continuous improvement. Safe recruitment practices were followed, and new staff received a thorough induction with regular reviews. This helped them develop the skills and confidence needed for their roles. The manager had effective oversight of training and development, which helped ensure staff skills were maintained and improved. The manager was developing a new tracking system for monitoring staff supervision.

Staff told us they felt valued, supported and happy in their roles. People benefitted from a compassionate and well-trained staff team who knew them well. The staff team were clearly motivated to ensure people enjoyed their time at Wade Centre. The staff team were clearly motivated to improve the quality of life for the people that they support.

Setting
People benefitted from an environment which was well maintained and with regular safety checks. The environment was safe, clean, tidy, welcoming, and homely. The building was decorated to a good standard and had good natural lighting throughout. All resident rooms had en-suite facilities and were personalised in accordance with the wishes and preferences of people. The layout of the home encouraged social interaction and connection. People had access to a fully enclosed, accessible courtyard garden area.

Planned care/support
Support plans were person centred and included information about people's interests and preferences and ways they could remain active and engaged. These contained a range of health assessments and helped staff support people, in line with agreed outcomes, thus ensuring people's rights, choices and wishes were central to their care and support. Risk assessments were used to enable people rather than restrict people's actions or activities. This helped the service provide the right support at the right time and adapt when needs, choices and decisions change. People were encouraged to be independent and live the best life they could. The service was reviewing ways to promote more person-centred recording within the support planning process.

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 people get the most out of life, a review of activities should be undertaken. Activities should be person centred, of interest and relevant to the person participating.

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

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

This area for improvement was made on 30 January 2026.

Action taken since then
Activity planners are now available for staff to reference; activities are allocated to named staff each day/ shift. Some staff are now providing cover at the local day centre which is providing some up skilling and increasing confidence. Linked in with collab team around activities. Full audit to take place.

Whilst the service has initiated a range of actions, these changes need time to become embedded in practice and sustained improvement evidenced over time.

This area for improvement has not been met.

Previous area for improvement 2

To ensure a safe and appropriate environment, the provider should undertake an environmental assessment using guidance such as the 'King's Fund' tool for people living with dementia. The actions identified in this should be progressed timeously.

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

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22); and 'My environment is secure and safe' (HSCS 5.17).

This area for improvement was made on 30 January 2026.

Action taken since then
The manager has provided all relatives with a copy of the Kings Fund Tool (for people living with dementia. This is to consult views about improving the general environment / use of spaces etc. Once completed, views will be collated / reflected in efforts to regularly review / improve the spaces & environment for the benefit of residents (and staff & visitors). A meeting has been arranged involving residents / family / staff

for further discussions about improvements to building environment. I saw evidence that the management team have identified a need to repurpose a large room near the dining area for the use of all staff to access a quite space for IT-related activity / training / recording etc. Also saw that residents were consulted about repainting the large lounge and that this work was completed to cause minimum disruption to residents.

This area for improvement has been met.

Previous area for improvement 3

To ensure a consistent, clean and tidy environment, the provider should review the current domestic arrangements. Staff should be clear about their specific responsibilities in regard to housekeeping and be carrying out these as expected.

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

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment' (HSCS 5.22).

This area for improvement was made on 30 January 2026.

Action taken since then

The management team have introduced a regular nightshift team meeting to ensure good communication about the cleaning schedule to identify problems quickly and take appropriate actions to support improvement. Daily cleaning schedules for 'front of house areas' have been updated to ensure these areas are regularly checked / cleaned without disrupting resident access. Plans in place to recruit to a permanent 4 x day per week Domestic Assistant / alongside current 3 x day per week post to provide greater consistency and help maintain high standards of environmental cleanliness. Handy Person has been re-tasked to take responsibility for regular environmental walk throughs (in addition to current management audits) inside / outside building, to pick up on issues.

Evidence during inspection was that standards of cleanliness / IPC practice were good and evidence changes have contributed to a cleaner environment.

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.scot.

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