

# Horizons Residential Care - Glendale House Care Home Service

43/45 Powdermill Brae Gorebridge EH23 4HX

Telephone: 01875 572 544

Type of inspection:

Unannounced

Completed on:

8 August 2024

Service provided by:

Horizons Residential Care Limited

Service provider number:

SP2013012111

**Service no:** CS2015341181



#### About the service

Horizons Residential Care - Glendale House is a registered care home for children and young people. It is one of several services operated by Horizons Residential Care Limited.

The service is registered to provide a care service to a maximum of four children and young people. The service is located in Gorebridge, Midlothian, and is close to local amenities and transport links.

The property is a large, detached house with a spacious garden. Inside, there are three floors, and each young person has their own bedroom and bathroom. The house also has large communal areas, and space for staff to work and sleep. At the time of our inspection there were three young people living in Glendale House.

## About the inspection

This was an unannounced inspection which took place on 30 July 2024 between the hours of 09:45 and 16:30 and on 31 July 2024 between the hours of 08:45 and 17:15. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about the service. This included registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform our evaluation we:

- spoke with two young people using the service
- spoke to seven members of staff and management and met with the directors of the service
- spoke to three visiting professionals
- received survey responses from two young people and four members of staff
- reviewed documentation
- · observed practice and daily life.

During our inspection year 2024-2025 we are inspecting against a focus area which looks at how regulated services use legislation and guidance to promote children's right to continuing care and how children and young people are being helped to understand what their right to continuing care means for them. Any requirements or areas for improvement will be highlighted in this report.

## Key messages

- Staffing arrangements were not sufficient to ensure young people's safety.
- Young people did not always receive the support they needed.
- The physical home environment needs to be improved.
- Young people were engaged with care planning and had some positive outcomes in relation to their health and education.
- Transitions into the service were poorly planned and did not take account of all young people's needs.
- Recruitment practices posed risk to young people's safety.

## 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 children and young people's rights and wellbeing?	2 - Weak
	2 - Weak

Further details on the particular areas inspected are provided at the end of this report.

# How well do we support children and young people's rights and wellbeing?

2 - Weak

We made an evaluation of weak for this key question. Whilst we identified some strengths, these were compromised by significant weaknesses.

There were not always enough staff who had the required skills and experience to keep young people safe and respond to their needs (Requirement 1). Not all staff were trained or confident in key areas of practice including child protection, trauma, child sexual exploitation, or restraint, and were at times working alone in the service (Requirement 2). We considered the service to not be equipped to respond to indicators of concern or risk, which had the potential to impact on young people's physical and emotional safety.

The service communicated with other services to help reduce risks, and key time sessions took place to help young people develop skills and promote their wellbeing. Young people had supportive relationships with their key workers, which helped to mitigate the impact of a lack of stability in the service. Young people trusted their key workers and this helped them to build resilience.

Instability in the service and the redeployment of staff to and from other Horizons services meant that the level of care was variable, and sometimes provided by unfamiliar adults. This made young people feel uncomfortable. Young people did not always have access to the right support at the right time.

Young people's views were regularly sought to plan their care and support. Young people were encouraged to take part in activities to develop their interests and to have fun. However, young people could not always benefit from these experiences, and we heard of activities being cancelled due to a lack of staff. This meant that young people had become very attuned to the rota and had developed low expectations for their care and support (Requirement 1). This impacted on young people's sense of self worth.

The home environment did not reflect a respectful or therapeutic approach to care. The home appeared tired, pieces of furniture were old and worn down, and parts of the home appeared unclean. Despite the large garden, young people had no resources to sit outside and enjoy their surroundings. Improvements are required to allow young people to feel valued, proud of their home and to be able to feel relaxed and comfortable in it (area for improvement 1).

The service aimed to promote young people's health and wellbeing and encouraged engagement with specialist services where required. However, not all young people had established or consistent routines, and instability in the service created barriers for some in being able to make progress with their health and wellbeing.

Young people were generally supported to maintain relationships with important family and friends. We were however concerned that decision-making around family time was not always in keeping with young people's rights. This impacted on young people feeling they had security in valued relationships.

Some young people were achieving well through attending college and taking part in volunteering. However, there was a lack of structure for some young people in relation to their education. Efforts were made to support young people's learning, but improved consistency in the service would further promote young people's ability to engage with their education.

Young people were encouraged to develop independent living skills to help prepare them for adulthood.

The service encouraged continuing care, however information on young people's right to continuing care was not provided clearly (area for improvement 2).

Young people were involved in their planning, and attended monthly reviews to ensure their goals and ambitions were worked towards. Some plans would benefit from being more SMART (Specific, Measurable, Achievable, Relevant and Time-bound). Risk assessments were comprehensive and accurately reflected young people's needs, and strategies required to support them.

Leadership lacked the necessary stability and vision to focus sufficiently on young people's rights. The lack of core staff in the service and movement of staff across Horizons services meant the team at Glendale House did not have a strong identity. This impacted on the service's ability to focus on improving young people's outcomes.

Transitions into the service were poorly planned, at times when the service did not have the resources to ensure safe and stable care for new people coming into the service. This led to unnecessary distress, with unplanned endings occurring for some young people, and reduced levels of support for those already living in the service (Requirement 3).

Staff did not always feel supported in their role. While some staff spoke positively of their leaders, many staff did not feel listened to and had little confidence in leaders resolving challenges. This impacted on staff retention, and the potential for young people to build trusted, enduring relationships.

Safer recruitment practices were not followed, and immediate improvements are required (Requirement 4). Some employees had started working in the service without all necessary background checks being completed. Prospective employees carried out several shadow shifts prior to having any background checks carried out or being offered employment. This posed risk to young people's safety. We shared guidance during our inspection of more respectful ways to support young people to be involved in the recruitment of staff.

Assurance systems were in place to monitor aspects of service delivery, and an external manager provided additional oversight and scrutiny. However, these systems did not contribute meaningfully to improving young people's outcomes. The service had no clear strategy or development plan for driving improvements in young people's care and support (Requirement 5).

#### Requirements

- 1. By 16 August 2024, the provider must ensure that children and young people are supported by the sufficient number of staff. To do this, the provider must, at a minimum:
- a) Carry out a comprehensive staffing needs assessment which should be reviewed at least four weekly or when young people's needs change. This assessment should consider the skills, experience, qualifications, and training history of staff, and take into account the needs and risks of all young people using the service;
- b) Ensure that the assessed number of staff to meet needs and manage risks are available at all times;
- c) Rotas should clearly link with the staffing needs assessment;
- d) Ensure that there are processes in place to review the staffing needs assessment before a young person is admitted to the service.

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This is to comply with section 7 of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: 'My needs are met by the right number of people' (HSCS 3.15) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

- 2. By 10 October 2024, the provider must ensure that children and young people's care is provided by staff who have the appropriate levels of knowledge and skill to meet their needs. To achieve this the provider must, at a minimum:
- a) Carry out an assessment of the training needs of staff;
- b) Confirm the expectations of staff with regards to completing training, with clear timeframes of when this training should be completed by;
- c) Provide training to all staff to the level required to provide quality and consistency of care and support. Training provided should include, but not be limited to: child protection; trauma-informed care; child sexual exploitation; and restraint;
- d) Review and update their child protection policy and ensure that staff have a clear understanding of their responsibilities in line with national legislation and guidance.

This is in order to comply with Section 8 of the Health and Care (Staffing) (Scotland) Act 2019.

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).

- 3. By 16 August 2024, the provider must carry out effective matching analysis to ensure that decisions made about arrivals and transitions are in the best interests of all young people. To do this, the provider must, at a minimum:
- a) Provide a detailed assessment of how the service plans to support identified risk or need for young people referred to the service;
- b) Undertake analysis of how the arrival of any new young person may impact on young people already living in the service, and record how this will be supported;
- c) Ensure that any decisions for young people to transition between Horizons services is subject to robust assessment and analysis.

This is in order to comply with Regulation 4(1)(a) and Regulation 15(b)(i) 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: 'I am in the right place to experience the care and support I need and want' (HSCS 1.20) and 'I

experience high quality care and support because people have the necessary information and resources.' (HSCS, 4.27).

- 4. By 16 August 2024, the provider must follow safer recruitment principles to ensure that children and young people are not placed at unnecessary risk. To do this, the provider must, at a minimum:
- a) Ensure that staff do not start work until all pre-employment checks have been concluded;
- B) Carry out a review of their recruitment procedure to ensure it respects the safety and wellbeing of young people.

This is to comply with Regulation 4(1)(a) (welfare of users) 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: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

5. By 10 October 2024, to ensure children and young people receive high quality care and support, the provider must develop an improvement plan. This should reflect the coordinated response required to raise the standards of care within the service and drive continuous improvements.

This is to comply with Regulation 4(1)(a) (Welfare of Users) 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: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and, 'I use a service and organisation that are well led and managed' (HSCS 4.23).

#### Areas for improvement

1. To ensure the home environment reflects a respectful and therapeutic approach to care, the service should carry out a review of the physical home environment, identifying the upgrades and improvements required. Clear timeframes should be set for completing this work.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HCSC) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

2. The service should develop a continuing care policy to set out its responsibilities to provide continuing care to young people and how it will ensure that young people are aware of their right to continuing care up to the age of 21.

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

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state that: 'As a child or young person I feel valued, loved and secure' (HSCS 3.5), and 'My human rights are central to the organisations that support and care for me' (HSCS 4.1).	

# 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 lessen frustration and help young people to feel more involved and considered the provider should provide feedback to young people when there are delays to their suggestions for improvements.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that "I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership." (HSCS 4.7).

This area for improvement was made on 6 June 2022.

#### Action taken since then

We could see that 'you say, we did' meetings had recently started in the service. House meetings had also been occurring regularly. Young people living had been able to raise suggestions for improvement and received feedback. We would suggest for clarity, it would be helpful to keep a track of requests and the dates of discussion/agreement/disagreement. This will enable there to be a fuller oversight.

#### Previous area for improvement 2

In order to support young people and involve them in decisions about their care, the provider should consider how to make them more accessible to young people.

This is to ensure that care and support is consistent with Health and Social Care standards (HSCS) which states that "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 6 June 2022.

#### Action taken since then

We considered young people to be very involved in planning their care. Young people attended monthly case management meetings where plans were discussed, reviewed and updated. Plans contained a section on young people's views, and these reflected their current views and wishes.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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## Detailed evaluations

How well do we support children and young people's rights and wellbeing?	2 - Weak
7.1 Children and young people are safe, feel loved and get the most out of life	2 - Weak
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	2 - Weak

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