

Horizons Residential Care - Westhaven House Care Home Service

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Unannounced

Completed on:
1 October 2024

Service provided by:
Horizons Residential Care Limited

Service provider number:
SP201301211

Service no:
CS2013318832

About the service

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

The service consists of two houses: Westhaven House and Westhaven Lodge. The services can care for a maximum total of five children and young people. The two houses back on to each other and share a service manager, but each house has its own staffing team. Another registered Horizons care home service, Newhaven House, is located next to the Westhaven houses.

The houses are located in the Corstorphine area of Edinburgh, close to local amenities and transport links. Westhaven House is set over three floors, with a basement also serving as a laundry room. Westhaven Lodge is set over two floors.

At the time of our inspection, two young people were living in Westhaven Lodge, and no young people were living in Westhaven House. A decision had been taken earlier this year to close Westhaven House while the provider sought to address staffing challenges.

About the inspection

This was an unannounced inspection which took place on 23 September between the hours of 09:45 and 17:45, 24 September between the hours of 07:45 and 13:00 and 25 September between the hours of 11:00 and 15:00. 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 six members of staff and management
- spoke to three visiting professionals
- received survey responses from two young people and five members of staff
- reviewed documentation, including centrally held recruitment records at head office
- observed practice and daily life.

A complaint was made to the Care Inspectorate about this service on 4 June 2024. Following investigation, the complaint was upheld and three requirements were made. This was a full inspection of the service, where we also followed up on the requirements made during the complaint investigation.

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

- The quality of care and support varied between the two houses, impacting on some young people's experiences.
- A complaints investigation earlier this year identified weaknesses in risk management and child protection. Improvements have been made, but further work is still required.
- Young people were doing well in relation to their education and took part in a range of activities which helped build their skills.
- Independent advocacy was well promoted, and young people were engaged in making decisions about their care and support.
- Staff felt well supported by leaders and efforts had been made to ensure staff were able to raise concerns.
- The provider should review staffing and management arrangements in the cluster of three houses in the area.
- The provider must ensure staff are recruited safely.
- Quality assurance and evaluation systems should be reviewed to ensure they contribute meaningfully to improving young people's outcomes.

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?	3 - Adequate
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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?

3 - Adequate

We made an evaluation of adequate for this key question, where strengths only just outweighed weaknesses.

Young people using the service were currently being kept safe by staff who had a clear understanding of young people's needs and risks. At the time of the complaint investigation, risk management approaches were not robust. The requirement in relation to risk that was made at the complaint inspection has been met, however further work is required to ensure that risk assessments and plans are discussed and reviewed with lead professionals (**see requirement 1**). This will ensure a collaborative approach to keeping young people safe.

Individualised work was carried out with young people in Westhaven Lodge to reduce risk and help to develop resilience. We were however concerned that prior to the closure of Westhaven House, there was a reactive approach to risk which increased young people's distress. Work is required to improve the quality and consistency of care provided across both houses (**see requirement 2**).

The complaint investigation identified that staff were not equipped to sufficiently respond to protection concerns. The requirement made in relation to child protection has been met and staff now had a strong understanding of child protection and child sexual exploitation. We made suggestions during inspection on ways to improve the child protection policy further. The recording of child protection events should be strengthened to ensure a clear and consistent approach (**see area for improvement 1**).

Restrictive practice was used only as a last resort, and visual debriefs took place with young people to support them afterwards. Greater analysis and evaluation is required within the recording of incident and restrictive practice reports, to ensure a focus on restraint reduction and improving outcomes (**see area for improvement 2**).

Young people currently using the service received compassionate care that was trauma-informed. Staff received training in trauma, which helped enable an embedded approach across the team in Westhaven Lodge. Young people were respected by staff, which helped to build trusting and enduring relationships.

Young people enjoyed the company of staff, with fun and playful interactions taking place. The home environment was well maintained and decorated nicely, with personalisation throughout. There was a relaxed atmosphere in the lodge which helped young people to feel at ease.

The service worked hard to engage young people in decisions about their care and support. Young people made decisions about decorating their bedrooms and helped to plan food menus and activities. Visual tools were used to promote engagement. Independent advocacy was well promoted by the service, and there was a plan to carry out more work to promote young people's rights across all of the services.

Young people's health needs were comprehensively responded to. The service advocated to ensure specialist assessments and interventions took place. Young people were engaged with mental health services and other specialist services, and this was supported well by staff. We considered young people to be receiving the support they needed with their health and wellbeing.

The service supported young people to have meaningful relationships with members of their birth families.

Where appropriate, the service had built positive relationships with family members to ensure positive transitions around family time. Well planned family time helped young people to develop a clear sense of their identity.

The individual interests and ambitions of young people were nurtured by the service. Young people took part in a range of activities including horse riding, drama and going to the cinema. Opportunities were also planned to broaden young people's horizons, including going on holidays within the UK. Individualised support helped young people to participate fully in learning and education. There was strong collaboration with school to develop consistent and effective strategies. Young people were living full and active lives that helped to build their skills and confidence.

Young people had comprehensive plans and risk assessments in place that took account of their needs and risks. Young people's views were sought regularly, but using visual tools would further support participation for some young people. Multi-agency planning took place to consider young people's future needs as they approached adulthood. Continuing care was well promoted, and a continuing care policy confirmed young people's rights. Plans were helping young people to get the right support at the right time.

Leaders aimed to develop a supportive culture within the service. Leaders were relatively new to the service and started in their roles during a time when there had been a very high staff turnover across the organisation. Staff had at times not felt able to safely share concerns with leaders. Work has been carried out to address this including reviewing the whistle-blowing policy and strengthening communication across the team. The staff we spoke were very positive about leadership. A more unified team was now helping to focus on improving young people's outcomes.

Transitions into and out of the service were not always well planned or child-centred. The recent decision to close Westhaven House at short notice, despite this being to ensure safety, had caused loss and trauma for young people. We welcome the work going on across the provider group to improve matching assessments and ensure that all young people's needs are robustly considered.

Staffing was now more stable and young people benefitted from strong relationships with experienced staff. We were however concerned over the reliance on staff from a neighbouring Horizons service to provide support day-to-day. This created an institutional and fragmented approach to care. A review is required to ensure that staffing is as consistent as possible for young people (**see requirement 2**).

Staff were now well equipped to meet the needs of young people. A renewed training matrix and induction process placed importance on providing staff with the skills and knowledge to carry out their roles. Staff received regular meaningful supervision from their leaders which helped them to reflect on practice and strive for continuous improvement.

There was an inconsistent approach to safe recruitment practices. Not all required background checks were carried out, and the recruitment process did not contain enough rigour or involvement from leaders working within the houses. Improvements are required to ensure young people receive high-quality care from staff who are safe (**see requirement 3**).

Quality assurance systems were in place and were supported by external managers. However, systems had not identified many areas requiring attention. A development plan was in place however this was not SMART (Specific, Measurable, Achievable, Realistic, Time-bound). Leaders had until recently spent time covering shifts, causing a lack of strategic oversight and vision for the service. There should be a review of management arrangements, quality assurance practices and self-evaluation across the service, to ensure young people have the best possible care experience (**see requirement 2**).

Requirements

1. By 30 November 2024 the provider must protect the safety of young people living in the service. To do this, the provider must at a minimum:

- a) develop a consistent approach to risk assessment and management plans;
- b) share and discuss risk assessment and management plans with lead professionals;
- c) review risk assessment and management plans with lead professionals when needs or risks change.

This is to comply with Regulation 4(1)(a) and (d) (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: 'My care and support meets my needs and is right for me' (HSCS 1.19); and 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

2. By 30 November 2024 the provider must ensure that management and staffing numbers are sufficient to ensure consistent safe care for children and young people in both houses listed in the conditions of registration. To do this, the provider must at a minimum:

- a) review staffing across the three sites located next to each other (Westhaven House, Westhaven Lodge and Newhaven House) to ensure each house has a distinct group of staff who meet the day-to-day needs of young people living there;
- b) undertake a specific staffing needs assessment for management arrangements which considers whether a registered manager is required for each house;
- c) review the external management resources and arrangements for ensuring accountable care practice and good outcomes for children and young people in both houses.

This is to comply with section 7 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: 'I am supported and cared for by people I know so that I experience consistency and continuity' (HSCS 4.16) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

3. By 30 November 2024, the provider must review its recruitment practices 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 employment until all pre-employment checks have been concluded;
- b) carry out a review of the recruitment policy and procedure to ensure a robust recruitment process which adheres to safer recruitment guidance.

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).

Areas for improvement

1. To promote young people's safety, the service should ensure there are clear systems in place for recording child protection concerns and for effective management and oversight of any concerns.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20) and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

2. To support reflective practice and to focus on improving young people's outcomes, the service should improve the quality of reflection and evaluation from incidents, including incidents of restrictive practice. These should be recorded in detail and be subject to scrutiny through robust quality assurance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm' (HSCS 3.21).

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 26 July 2024, the provider must ensure that children and young people receive quality care and support to manage risks effectively. To do this, the provider must, at a minimum:

- a) review Risk Assessment and Management Plans and be satisfied that they are accurate and of a quality that supports the reduction of risks
- b) ensure that staff completing or quality assuring these documents have the knowledge and skills to do so to a quality standard.

This requirement was made on 2 July 2024.

Action taken on previous requirement

Risk assessment and management plans had been updated and improved, and were now an accurate representation of young people's needs, risks, and the strategies needed to support them. Additional training had been provided to staff on completing risk assessments. Managers had oversight of plans and were part of reviewing them and providing quality assurance.

Met - within timescales

Requirement 2

By 16 August 2024, the provider must ensure that children and young people receive safe care and support through effective child protection practices. To do this, the provider must, at a minimum:

- a) review child protection guidance and ensure that staff have a clear understanding of practice expectations
- b) develop organisational guidance that provides direction on the responsibilities of staff to ensure that only care staff can provide support to young people
- c) ensure that all staff members have been trained in Child Sexual Exploitation (CSE)
- d) review and distribute the whistleblowing policy and include guidance to staff on how they can raise concerns safely if they have concerns about people within the organisation at a senior level.

This is to ensure care and support is consistent with Health and Social Care Standard 3.20: I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.

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).

This requirement was made on 2 July 2024.

Action taken on previous requirement

Child protection guidance has been reviewed and updated to ensure clarity over reporting responsibilities. Managers and staff had a clear understanding of the policy during the inspection. Policies highlighted that only care staff could provide care to young people in the service, and all staff we spoke to had been well informed of the importance of this to ensure young people's safety. Staff have undergone renewed child protection training and external training has been providing on Child Sexual Exploitation. These sessions had strengthened the staff team's understanding of risk. The whistle-blowing policy has been updated and has been discussed and shared with staff. The staff we spoke to were confident in being able to raise concerns with their leaders.

Met - within timescales

Requirement 3

By 3 July 2024, on receipt of the report for immediate action, the provider must ensure that children and young people receive safe care and support. To do this, the provider must, at a minimum:

a) ensure that care and support is only provided by care staff.

This is to ensure care and support is consistent with Health and Social Care Standard 3.18: I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.

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).

This requirement was made on 2 July 2024.

Action taken on previous requirement

Staff, leaders and Directors were clear that only members of care staff should care for young people and there was no evidence of any further concerns.

Met - within timescales

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 that young people have consistently positive outcomes the service should ensure that key working records identify progress and next steps.

This is to ensure that care and support is consistent with the 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

This area for improvement has been met. The key working records we sampled were comprehensive, linked to actions identified in plans, and specified further action required.

Previous area for improvement 2

To ensure that young people are fully protected the provider should review the child protection policy to include the following:

- ensure language is consistent with The Promise
- be more explicit in terms of timescales for reporting and recording
- identify who should be informed
- identify contact numbers for lead professionals.

The policy and procedure should be reviewed regularly to reflect current guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

This area for improvement was made on 6 June 2022.

Action taken since then

This area for improvement has been met. The changes required have been added to the child protection policy. We have however suggested additional detail and clarity is added to the policy, which we have been informed will take place when the full policy is reviewed in November 2024.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support children and young people's rights and wellbeing?	3 - Adequate
7.1 Children and young people are safe, feel loved and get the most out of life	3 - Adequate
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	3 - Adequate

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