

Whitrigg House Care Home Service

Bathgate

Type of inspection:
Unannounced

Completed on:
20 February 2025

Service provided by:
West Lothian Council

Service provider number:
SP2003002601

Service no:
CS2003011110

About the service

Whitrigg House is a care home for children and young people, in East Whitburn, West Lothian. It is one of two residential services for children and young people provided by West Lothian Council. The house was situated on the outskirts of Whitburn in a residential area, close to public transport links and local shops and amenities.

The service operates as a small resource for young people, and they are registered to provide a care service for up to three young people.

The house is on two floors, with five bedrooms, one bathroom two communal living rooms, a kitchen, a downstairs cloakroom with shower and a small office. The house is detached, with a small front garden and outbuildings and parking to the rear.

About the inspection

This was an unannounced inspection which took place on 18 February 2025 between 11:00 and 19:00 and 19 February between 09:30 and 15:30. 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 3 young people;
- spoke with 7 staff and managers;
- observed practice, the environment and daily life; and
- reviewed documents.

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 areas for improvement will be highlighted in this report.

Key messages

- Young people enjoyed comfortable relationships with staff who were kind, caring and fun.
- Staff knew the young people well and were responsive to their needs
- Young people were very well supported to achieve their ambitions and plan for their future
- The staff felt well supported by the managers and the team
- The provider must ensure that procedures are followed in line with their continued care policy.
- The provider should make an action plan in relation to a number of environmental issues.
- The provider should ensure that staff have relevant training
- Further improvements were needed to ensure care plans were SMART

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?	4 - Good
--	----------

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?

4 - Good

We found several strengths which impacted positively on outcomes for young people and outweighed areas for improvement therefore we evaluated this key question 7 as good.

Young people were kept physically and emotionally safe. Sometimes young people fell out and this resulted in feelings of anxiety and emotional stress. However, staff had a high level of understanding of young people's needs and had developed practice to respond, providing reassurance and nurture.

External professionals visited the house regularly and they said they felt welcomed. They provided external advocacy and represented young people's views.

The training staff received ensured clarity about their roles and responsibilities to keep young people safe. Managers had responded appropriately to child protection concerns and had followed guidance and procedures. Managers were reminded of the guidance regarding notifications to the Care Inspectorate.

The majority of staff had a good understanding of trauma and the young people benefitted from this approach. However, formal training in relation to trauma had been limited with staff practice based on effective role modelling by senior staff. We would strongly encourage all staff to receive formal training in trauma informed practice.

Staff were understanding and compassionate in their care of the young people. Care was tactile with affection being led by the young people.

We found evidence of many activities that young people took part in, however young people told us that sometimes they were bored and there wasn't a lot to do. All of the young people were keen to spend time with staff and when staff were not immediately available they found this frustrating. At these times staff gave appropriate responses helping young people to build resilience and self-confidence. There was a high sense of fun in the house with friendly banter between young people and staff.

For a number of years there has been a plan in place to replace Whitrigg with a purpose built property. It was clear that this had resulted in more limited attention to the aesthetics of the current property. Staff and young people tried very hard to make the house welcoming, homely and clean, however, there were a number of areas in need of repair. In addition the house would benefit from regular deep clean in order to maintain a high standard of environment for the young people. **See area for improvement 1**

Four weekly care planning meetings and house meetings helped elevate young people's voices. In addition, a weekly youth group, with activities led by young people, offered opportunities to get together for discussion whilst having fun. We also saw representation in a young person planning a presentation for young people arriving at a West Lothian residential house. Despite all of this some young people still felt that they were not listened to or they did not receive answers to their requests and we urged staff and managers to find further ways to help young people feel listened to.

Mental and physical health was strongly promoted with all appointments being prioritised. Staff were patient and sensitive when helping young people to find ways to overcome their anxieties about appointments or medical procedures. Staff had a strong awareness of young people's individual mental

health needs and were particularly attuned to their moods and presentation. Medication was administered appropriately.

Staff were ambitious for the young people helping them to plan for their future and aspire to their chosen path. Realistic attempts were made to get young people into formal education. When this was not possible education packages were developed including input from external agencies alongside engaging activities to stimulate learning and broaden knowledge.

West Lothian Council had introduced a new system for care planning and staff were at varying stages in implementing and understanding care planning. Some of the plans absolutely captured the essence of the young person and provided very credible strategies to help that young person achieve success. All of the plans offered goals and identified achievements, however, some could be further improved to make the goals SMART (specific, measurable, achievable, realistic, and timely). **See area for improvement 2**

The culture within the house was very supportive and focused on the best interests of the young people. High standards were role modelled and expected.

We saw a good level of internal monitoring and quality assurance including audits of care plans which resulting in actions. In order to further enhance the quality and assurance process plans were in place for a staff development day focusing on key responsibilities.

A matching analysis to support admissions and transitions was at the draft stage. This was a positive step towards formally considering the needs of all young people alongside staff skills. This should now be embedded into practice.

Recent admissions from another West Lothian residential house had happened at the request of the young people involved. These moves were proving to be positive and beneficial to the young people involved. Other admissions throughout the year were described as emergencies and were thought, by the manager, to be outwith the current registration of the home, which was not in fact the case. We will work with West Lothian and our registrations team to sort out the registration. Whilst we did not see any negative impact on young people due to the emergency admissions we would urge these to be kept to a minimum and should always be subject to 72 hr review which had not happened in all cases.

Transitions for young people moving on had been well supported and managed. These had been conducted at the young person's pace, with good introductions and planning. West Lothian Council have an appropriate policy and procedure regarding continuing care. However the guidance had not been followed in relation to welfare assessments and young people being made aware of their right to continuing care. **See requirement 1.**

There were enough staff to meet the needs of the young people and consideration was given to staffing levels. Sometimes locum staff were used to support staff absence. In order to provide consistent relationships caution should be used to ensure that the amount of adults in young people's daily lives is kept to a minimum.

We saw evidence of good engagement with training but note that some staff are earlier on their journey than others in terms of a trauma informed approach and this should to be an area of focus for the whole team. Whilst there had been no physical interventions staff should have up to date training in de-escalation and restrictive practice. **See area for improvement 3**

All staff that we spoke with felt fully supported by the manager, assistant manager and the team as a

whole. Formal supervision was timely and reported to be of a high quality, guiding practice and continuous improvement and supporting staff.

The service delivery was in line with The Promise. A Promise lead within the team participated in West Lothian Promise in Practice network. Next steps are to scope young people's in Whitrigg's understanding of the promise and their rights.

We have made some suggestions of how improvements could be made and some formal areas for improvements. Moving forward we need to see impact to bring the service to the next level.

Requirements

1. The provider must ensure that welfare assessments are carried out timeously for young people who are eligible for continuing care .

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: "My future care and support needs are anticipated as part of my assessment (HSCS 1.14) and
"My human rights are central to the organisations that support and care for me"
(HSCS 4.1)

Areas for improvement

1. In order for young people to experience a pleasant and safe environment the provider should make a plan to maintain the property to the highest standard and carry out deep cleaning on a regular basis.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment.' (HSCS 5.22)

2. In order to ensure that the service can consistently achieve positive outcomes for all young people the provider should review the care planning system and adopt a SMART approach to care planning that is integrated with robust risk assessment and risk management procedures. These care plans and risk assessments should be outcome focused and clearly express strategies to mitigate risk and help young people to progress.

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)

3. In order for young people to experience a high level of support and care the provider should carry out a training needs assessment and use this to inform and action a training plan.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes". (HSCS 3.14)

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

The provider should ensure that all risk assessments are updated regularly, and as children and young people's circumstances, needs and desired outcomes change.

This is in order to ensure that the quality of care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am helped to understand the impact and consequence of risky and unsafe behaviour and decisions' (HSCS 2.25).

This area for improvement was made on 15 March 2023.

Action taken since then

Risk assessments were up to date and identified risks and strategies for mitigation of risk.

Previous area for improvement 2

The provider should ensure that young people are involved in directing and leading their own care and support and ensure that young people's needs and desired outcomes are clearly identified within their personal plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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); and 'My needs, as agreed in my personal plan, are fully met and my wishes and choices are respected' (HSCS 1.23).

This area for improvement was made on 15 March 2023.

Action taken since then

Young could be involved in care planning as much as they wanted to be.

Previous area for improvement 3

The provider should ensure that appropriate systems are in place to support quality assurance and improvement within the service. Quality assurance processes should always include care planning for children and young people, risk assessments and monitoring of notifications to the Care Inspectorate.

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 experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 15 March 2023.

Action taken since then

Whilst we saw appropriate quality assurance for care planning and risk assessments managers needed to improve processes for submission of notifications to the Care Inspectorate

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 children and young people's rights and wellbeing?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.