

Calton House Care Home Service

Edinburgh

Type of inspection:
Unannounced

Completed on:
17 February 2025

Service provided by:
City of Edinburgh Council

Service provider number:
SP2003002576

Service no:
CS2005099728

About the service

Calton House is located in Edinburgh and provides care for up to five young people. The house is nicely decorated with a recently refurbished outdoor space. It is close to local transport links and shops.

About the inspection

This was an unannounced inspection which took place on 10 and 11 February 2025 between the hours of 09:30 and 23:00. The inspection was carried out by two inspectors 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 three people using the service and three of their family/representatives
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

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.

The provider of this service is a corporate parent, with statutory responsibilities to look after and accommodate children. This may mean that the duty to care for children and young people on an emergency basis, or with highly complex needs, is their highest safeguarding priority.

In these circumstances our expectations, focus on outcomes and evaluations remain identical to those of all other providers. We may, however, provide some additional narrative in the body of the report to reflect the impact of these duties, should it be relevant to this particular service.

Key messages

- Child protection processes were not followed correctly when concerns were identified.
- Staff were trauma informed and used this in practice.
- Staff were committed and supported making lifelong memories for young people.
- There was a lack of confidence raising concerns with management.

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
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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?

2 - Weak

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

Child protection concerns were compromised with procedures not being correctly followed. We found there had been a delay in responding to concerns staff raised and reporting concerns to the relevant agencies. Key information had also not been shared with relevant agencies when concerns were identified. **(See requirement 1.)** The service had also not notified The Care Inspectorate appropriately and on other occasions failed to notify these concerns. This led to young people not being protected from potential harm. This had been raised as a requirement at the last inspection.

Staff had a good understanding of trauma informed practice. There was an in depth understanding of individual needs of young people and how best to support them. The team respectfully challenged each other to ensure they were consistent in providing a nurturing approach. This led to young people feeling cared for and a sense of belonging.

Young people had good relationships with staff and had fun. They told us, "The staff are amazing." Staff were motivated, and prioritised supporting activities, holidays and trips to build lifelong memories for young people. This supported relationship building and opportunities to try new hobbies and experiences.

The rights of young people needed to be supported to ensure their safety. There was a lack of clear plans when young people were placed at risk, and identifying how the service would ensure they were kept safe. This needed to improve to safeguard young people. **(See requirement 2.)**

There was a commitment to support the individual health needs of young people. Specific health strategies had been identified with a clear plan on how to support the young people to attend appointments, and provide them with the information they needed. This helped young people to be supported emotionally, and promote a healthy lifestyle.

Young people were encouraged to spend time with their families. One parent told us, "I'm invited to the house, and the staff do a fantastic job." Staff worked hard to support young people to have time with their family, and spend more time together. This gave young people and sense of belonging.

Education, work and further learning opportunities were encouraged within the house. Young people had a clear routine which included a variety of opportunities from a bespoke forest school to supporting young people to attend work. Staff told us, "We are so proud of their achievements." All young people had made some great achievements, and had plans individual to their needs.

There was a commitment to support young people into adulthood. The service had a continuing care policy in place, and a plan how they would support young people when they were ready to move into their own accommodation. Young people told us, "I'm going to stay here for some time yet."

The service had recently developed the care plan and risk assessment format. We found risk assessments needed to be more informative to identify the risks and supports in place. Some care plans were informative and had clear SMART (Specific, Measurable, Achievable, Realistic, Time-bound) goals and captured the young people's views. However, this was inconsistent with some information being conflicting. This was an area for improvement which we identified at the last inspection.

There was a lack in confidence in raising any concerns with managers within the service. We found there had been times where staff had shared concerns, and they had been made to feel as though their honesty had been questioned. This had led to staff being reluctant to raise concerns, and a culture which lacked openness. We were concerned as to how managers would take responsibility for this and restore confidence in the team to promote their integrity. **(See requirement 3.)**

The service had supported the same young people since the last inspection. We found this was positive in supporting continuing care in line with The Promise. Alongside this they had developed their admissions policy, to look at how best they can support young people in the future when they move into the service. We found this focused on individual needs and the services ability to meet these, and consider the impact of young people already living in Calton.

There was a number of vacancies in the service, which were unable to be filled due to a recruitment freeze. This had put added pressure on staff who covered extra shifts, and reliance on locum staff. Alongside this the staffing needs assessment needed to be more informative to reflect the skills and knowledge of the team supporting the young people. This had the potential to impact of the quality of care provided to young people. **(See area for improvement 1.)**

Quality assurance systems needed to be updated more regularly. The system which was in place did not provide the most up to date training and needed to be updated. Individual audits of care plans also did not identify the lack of consistency in recording. Further training would help ensure these systems were effective in identifying areas for improvement and training needs.

Staff were invested in learning about the developments within the local authority. We heard how staff were involved in Promise workshops, and they could confidently articulate the impact this had on their practice. We found there had been changes at a senior manager level, and regular visits sharing this information was seen as a strength to helping the teams knowledge.

Requirements

1. By 20 April 2025, the provider must ensure they review how they implement their child and adult protection policies and procedures:

To do this the provider must at a minimum:

- a) Provide a reflective learning account of previous protection concerns raised
- b) Ensure all employees understand the child protection procedure
- c) Ensure managers are aware of their responsibilities in responding to concerns raised by staff and the timescale this should be conducted within.

This is 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 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).

2. By 30 April 2025, the provider must ensure the rights of young people are upheld:

To do this the provider must at a minimum:

- a) Ensure any protection risks are clearly evidenced
- b) There is a clear plan on supporting the young person's safety
- c) Any potential risk to young person's safety is acted upon immediately.

This is 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 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).

3. By 1 May 2025, the provider must ensure they improve the culture within the service.

To do this the provider must at a minimum:

- a) Reflect with the team on previous events and how they were managed
- b) Ensure there is reflection and learning with managers around processes relating to practice.
- c) Provide team building days with a focus on building confidence around sharing concerns.

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

Areas for improvement

1.
To support children and young people to be cared for by those who have the right knowledge and experience, the provider should update their staffing needs assessment.

This should include, but is not limited to, the knowledge, training and skill set of staff.

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

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

Requirements

Requirement 1

From receipt of this report the provider must notify the Care Inspectorate about incidents as detailed in the document, 'Records that all registered children and young people's care services must keep and guidance on notification reporting (2022)'.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 – Regulation 4(1)(a) – Welfare of Users.

This is to ensure that leadership is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18); and

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This requirement was made on 29 February 2024.

Action taken on previous requirement

We found the service had notified us of all events required, and on some occasions withheld relevant information despite this being requested.

Not met

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 support children's wellbeing, learning and development, the provider should ensure risk assessments detail how to support young people when they present at risk.

This should include, but is not limited to, a detailed risk assessment which is clear on how to support the young person.

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 because people have the necessary information and resources' (HSCS 4.27)

This area for improvement was made on 29 February 2024.

Action taken since then

We found there was still a lack of clear information to reflect the risks young people presented and how staff would support these.

Therefore, this area for improvement will remain in place.

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?	2 - Weak
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	2 - Weak

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