

Horizons Residential Care - Glendale House Care Home Service

Gorebridge

Type of inspection:
Unannounced

Completed on:
20 March 2025

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 up to four children and young people. It is one of several services operated by Horizons Residential Care Limited. 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.

About the inspection

This was an unannounced inspection which took place on 19 March 2025 between the hours of 09:50 and 18:15. The inspection was carried out by two inspectors from the Care Inspectorate. This was a follow up inspection to review progress on the requirements and areas for improvement made at an inspection completed on 8 August 2024.

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 living in the house
- * spoke to five members of staff and management
- * spoke to one visiting professional
- * 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

- Young people enjoyed living at Glendale and had positive relationships with the staff team.
- Young people benefitted from continuing care arrangements, supported by a clear continuing care policy.
- Further work is required to staffing within the service, to ensure young people can have spontaneity in their day-to-day lives.
- New staff now received comprehensive training for their role but additional work is required to ensure the learning needs of the wider team are fully addressed.
- The approach to matching had improved.
- Safer recruitment guidance had now been embedded by the provider, helping ensure young people's safety.
- The service development plan was not specific or aspirational enough to drive meaningful improvement to the service.
- Further improvements to the home environment are needed to ensure the environment is respectful and therapeutic.

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

Requirements

Requirement 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.

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).

This requirement was made on 8 August 2024.

Action taken on previous requirement

a) Staffing needs assessments were in use and were regularly reviewed and updated. However, there was no clear assessment of why the determined staffing ratios had been made, and why this changed at different points in the day, which had led to some concern in the staff team. It was also unclear how vacancies were being managed to ensure there was somebody leading each shift, or how staff were paired to ensure a strong range of skills and experience. Further work is required to ensure that staffing needs assessments fully consider the skills and experience of staff, and take into account the risks and needs of young people.

b) Despite some improvements to staffing levels since the last inspection, there were not always enough staff to carry out planned activities for young people. Current staffing arrangements had caused a lack of spontaneity for young people, and further assessment and review is required by the service to ensure there is capacity to fully meet young people's needs.

c) Rotas were now clearly linked to the staffing needs assessments.

d) No new young people had moved into the service since the last inspection, but we were informed staffing needs assessments would be fully reviewed prior to this happening.

This requirement has not been fully met and has been extended until 30 May 2025.

Not met

Requirement 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).

This requirement was made on 8 August 2024.

Action taken on previous requirement

a) There had been some assessment of the training needs of new staff, and this has resulted in a decision to offer new employees a 40-hour in-house induction before they started working in the service. An assessment of the training needs of the wider team was not evidenced, and did not form part of the service development plan (**see also requirement 5**).

b) A training matrix was in use which provided oversight of the training completed by staff, and when training was due to be renewed. Supervision was used to identify any gaps.

c) All staff had completed training on key areas of practice including child protection, trauma, child sexual exploitation and restraint. Mandatory training was now completed as part of the 40-hour in-house induction, which ensured a clear and consistent approach to training for new staff. We identified that many members of staff had not completed adult protection training, which was particularly important due to young adults now living in the house. There had also been some concern that the trauma training offered to staff had not provided enough depth, or space for reflection, to lead to meaningful improvements to young people's care, something the service should address.

d) The child protection policy has been updated and the responsibilities for staff and management are made clear. We suggested some improvements to the wording of the policy to ensure greater clarity on how any allegations of staff misconduct should be managed.

This requirement has not been fully met and has been extended until 30 May 2025.

Not met

Requirement 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).

This requirement was made on 8 August 2024.

Action taken on previous requirement

The service had not matched any young people to the service since the last inspection, due to a decision to focus on improvement work as a priority. This in itself had been a positive matching decision. Matching documentation had been significantly improved. Documentation now presented the right questions to decision-makers and provided a clear template to assist analysis and assessment. Leaders in the service had been part of development sessions to learn more robust approaches to matching assessments. While the service had not had the opportunity to use new procedures in respect of new referrals or arrivals, we were assured that more strict processes and procedures are now in place and would be used as appropriate to ensure the best possible outcomes for all young people.

This requirement has been fully met.

Met - within timescales

Requirement 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).

This requirement was made on 8 August 2024.

Action taken on previous requirement

- a) Staff now did not start work until all pre-employment checks had been concluded. Recent recruitment files evidenced that full checks had been carried out, in line with the provider's new recruitment policy.
- b) A full review of the recruitment procedure had taken place and this now respects the safety and wellbeing of young people.

New employees only started work after completing a 40-hour in-house induction programme, with mandatory training provided. A panel interview process allowed staff from within the house to be part of key recruitment decisions, and allowed recruitment to be targeted to the needs of individual children, where possible. The policy now very clearly captured the need for comprehensive scrutiny in the recruitment procedure, with specific advice given in relation to conducting interviews and carrying out pre-employment checks. The advice reflects Care Inspectorate guidance on safer recruitment.

This requirement has been fully met.

Met – within timescales

Requirement 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).

This requirement was made on 8 August 2024.

Action taken on previous requirement

A service development plan had been created, which was linked to the findings of our last inspection. However, the plan was not SMART (Specific, Measurable, Achievable, Realistic or Timebound). The plan also did not identify a strong vision or value-base for the service or highlight specific team development needs. The goals and aspirations for the service were not made clear and there was no sense of how work was being taken forward. There was no update on progress in relation to the various actions identified, so we could not tell from the document how much progress had been made, or whether or not actions had been fully achieved. We were informed a new development plan was being drafted for 2025/26, which will incorporate the advice provided. We look forward to reviewing this at the next inspection.

This requirement has not been fully met and has been extended until 30 May 2025.

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 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).

This area for improvement was made on 8 August 2024.

Action taken since then

Some improvements had been made to the physical home environment, however further work is required to ensure the house fully represents a respectful and therapeutic environment for children and young people.

Painting, new flooring, and new furniture made the house appear fresher and more modern. However, the garden area had not yet been addressed, meaning young people could not sit comfortably outside and enjoy their surroundings. We were also concerned that some basic standards in the house were not kept, and that quality assurance checks of the household had not sufficiently identified areas requiring attention.

Young people had not been fully engaged in the improvements made to the house. The lack of consultation meant that some of the improvements had an unintended negative impact on young people's sense of comfort. The service should consider how any future improvement work can more meaningfully reflect the needs and wishes of young people living in the house.

This area for improvement has not been met and will be reviewed again at the next inspection.

Previous area for improvement 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 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).

This area for improvement was made on 8 August 2024.

Action taken since then

The provider has developed a continuing care policy which explicitly states young people's right to continuing care and a welfare assessment. The policy states that upon admission to the service, young people will be provided with information on their right to continuing care. We heard that advocacy was widely promoted and could be used to support young people to navigate any complexities that arise in this process. The service has an annex which it plans to use to encourage young people to develop independent living skills. We suggested minor amendments to the wording of the policy during our inspection.

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.com.

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.