

Newhaven House Care Home Service

Edinburgh

Type of inspection:
Unannounced

Completed on:
30 April 2025

Service provided by:
Horizons Residential Care Limited

Service provider number:
SP201301211

Service no:
CS2022000372

About the service

Newhaven House is a registered care home service which provides care for up to three children and young people. The provider is Horizons Residential Care Limited.

The service is located in the Corstorphine area of Edinburgh, close to the city centre. The service is spread over four floors and has three bedrooms with en-suite facilities, a kitchen/dining room, living room and staff sleepover space. There is also a secluded garden. The service backs on to another Horizons care home service.

About the inspection

This was an unannounced inspection which took place on 23 and 24 April 2025 between the hours of 10:00 and 17:45, and 12:30 and 17:30 respectively. 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 young people using the service
- * spoke to eight members of staff and management
- * spoke to seven external professionals
- * reviewed survey responses from two staff members
- * observed practice and daily life.

Key messages

- * A responsive and collaborative approach to risk was helping to keep young people safe.
- * Young people had positive relationships with the adults caring for them.
- * Young people were involved in planning their care but the service should improve how it formally responds to young people's requests.
- * The service worked well with health and education services to make individualised plans to improve young people's outcomes.
- * A high turnover of staff had impacted on young people, but there was now a period of stability which was benefitting young people and enabled a clearer focus on service development.
- * There was a commitment from leaders to developing a culture of reflection throughout the service.

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
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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?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for young people and clearly outweighed areas for improvement.

Young people were kept safe by knowledgeable adults who understood them. When there had been concern over young people's safety, the service was responsive and worked collaboratively with other professionals to assess and manage risk. Risk assessments were detailed and regularly reviewed and updated. Young people experiencing crisis had benefitted from creative and individualised risk management approaches which helped them to achieve greater stability. Young people's safety was prioritised.

Many agencies were involved with young people to help meet their needs. We received mostly positive feedback from external professionals about the service's communication and contribution to planning. Young people also had access to advocacy services and the provider was exploring ways to further promote the role of independent advocacy. The service responded well to child protection concerns, with adults being trained regularly and a clear policy in place. Adults worked together well to keep young people safe and promote their interests.

The service aimed to create a stable and therapeutic environment of care for young people. However, a high number of incidents had recently created some stress and uncertainty in the house. The team took steps to support all young people, even when the house felt unsettled. Leaders were also mindful over the impact on staff and ensured reflective discussions and debriefs took place where required. This led to young people feeling protected and staff feeling supported.

Incidents of concern and incidents of restrictive practice were generally well responded to. There was a commitment to restraint reduction and staff were equipped with the necessary training, skills and knowledge. It was clear that the service learned from incidents and plans for young people were adapted where needed. However, not all incidents were correctly notified to the Care Inspectorate and there was a lack of recorded meaningful debrief with young people after an incident occurred. Improvements are needed to ensure all incidents are comprehensively managed, evaluated, and reflect best practice (area for improvement 1).

Young people had warm and nurturing relationships with those caring for them. Relationships were based on trust and fun and we observed natural and relaxed interactions occurring. It had been a challenge to engage young people in organised activities due to their age and circumstances, but the team were skilled at using young people's interests to spend positive time with them. A high turnover of staff last year impacted on young people's experiences, however there was a sense of the team being more stable now, and efforts were being made to help young people build relationships with newer staff. Young people liked the adults caring for them and enjoyed spending time with them.

Adults had a good understanding of the impact of trauma, and we saw reflective practice being instilled throughout different parts of the service including in supervision, team meetings, and in staff debriefs. Adults were trained in trauma but would welcome more specialist training to support their capacity to meet young people's more complex needs.

The house was homely and in good condition. There was some personalisation, with young people's artwork displayed, and young people liked their bedrooms. Young people were valued as important contributors to their day-to-day care. This had included young people attending team meetings to raise issues and contributing to a team training session about their needs. Sometimes young people felt it took a while for adults to get back to them if they raised an issue, and it would be helpful for the service to develop a framework to formally document young people's requests when they arise (area for improvement 2). There was clear commitment to offering continuing care to young people, with a continuing care policy highlighting young people's rights.

Young people's physical and mental health needs were well responded to. The service was skilled at seeking and utilising advice from a range of health professionals, including mental health services, addiction services, and care experienced nurses. This helped to develop a shared understanding of young people's health needs, so that young people could get the help and support they needed, and at the right time.

Individual interests, life skills, and education were well promoted. Young people were encouraged to learn to drive, take on apprenticeships, and learn independent living skills. Strong working relationships with schools helped to tailor individual learning plans that were adapted in line with people's changing circumstances. Young people had made positive progress in relation to their education and skills since moving to Newhaven.

Young people had plans that were SMART (Specific, Measurable, Achievable, Realistic and Timebound) and contained valued contributions from young people. There was a clear link between young people's needs and work being carried out to support them. We made suggestions for more detail in certain areas to help further improve young people's plans.

Leadership in the service was supportive. Staff were positive about the skills and qualities of managers in the service which led to a culture of openness and mutual respect. The removal of a peripatetic management arrangement with the neighbouring Horizons care home last year had allowed for greater focus on improvement activity in recent months. A clearer leadership structure was helping to stabilise the team and develop the service.

Quality assurance practices were established and had input from different layers of management. Quality assurance activity identified many areas for development, which we saw then being addressed. We identified some aspects which would benefit from additional scrutiny, for example around notifications (see again area for improvement 1). Leaders should consider how they can further improve quality assurance practices.

Transitions into and out of the service were now being well considered. Across the provider group there had been learning and development around the assessment of new arrivals into the service. No new young people had moved into the service recently, which had enabled the service to focus on building stability. When young people moved on from the service, this was part of a multi-agency plan, with the service being involved in transition discussions and visits. Adults also kept in touch with young people who had left the service and saw the benefit in nurturing these relationships.

The service had worked hard to create a well-balanced team. Staffing needs assessments took account of the skills, qualities, experience and training of staff members, and rotas were dynamic and responsive to the changing needs of young people. Staff were now safely recruited, after a review of the recruitment procedure in 2024 identified areas for development. A comprehensive in-house induction prior to starting work in the service ensured staff had carried out mandatory training and were well prepared to work in the house. Regular supervision, probation reviews, and appraisals helped provide a framework which supported staff learning and development.

There was a strong vision for the service to be therapeutic and to embed reflective practice. An ambitious service development plan was in place, which involved the whole team on the services' improvement journey. We look forward to evaluating the impact of this plan at the next inspection.

Areas for improvement

1. To ensure young people receive quality care and support, the service should ensure effective management of incidents. This should include meaningful debriefs being recorded with young people and notification of incidents to the Care Inspectorate, in line with regulatory requirements.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which states that, 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

2. To ensure young people are respected and involved in decisions relating to the care, the service should keep a record of requests from young people with a note of the response.

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).

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

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