

# Harmony School

## School Care Accommodation Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
20 June 2025

**Service provided by:**  
Harmony Education Trust Ltd

**Service provider number:**  
SP2003002598

**Service no:**  
CS2003011066

## About the service

Harmeny School provides school care accommodation for up to 32 children and young people who have complex social, emotional and behavioural needs. Harmeny School is an independent, grant aided school which is owned and managed by Harmeny Education Trust Ltd, a not for profit organisation with charitable status. The school is situated in extensive grounds in a rural setting on the edge of Edinburgh with good access to local amenities and bus routes. The accommodation is provided in four purpose built cottages within the grounds and in one wing of the original nineteenth century house. Harmeny School is a national resource with children in residence from throughout Scotland. It operates throughout the year.

## About the inspection

This was an unannounced inspection which took place on 17 June 2025 from 11:00 until 19:00, 18 June from 10:00 until 19:00 and from 21:00 until 01:00, 19 June from 09:30 until 18:30 and 20 June from 10:00 until 12:30. 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 eight young people using the service and two family members
- spoke with 33 staff and management
- spoke with 3 board members
- observed practice and daily life involving most young people
- reviewed documents
- spoke with 3 visiting professionals.

## Key messages

- Young people were kept safe both emotionally and physically by confident staff who knew and understood their needs and risks well
- Young people experienced very warm, nurturing, and respectful interactions with staff
- We were impressed with how well young people were supported to maintain and develop connections with family, friends and the community
- We were impressed with the significant positive change in culture across the organisation
- Strong leaderships supported staff wellbeing, learning and development, resulting in increased staff retention
- The organisation's "Here 4U" project was impressive and supported transitions for young people within and out of the service
- Quality assurance processes impacted positively on learning and development and improved practice.

## 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?	5 - Very 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?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for young people, therefore we evaluated this key question as very good.

Young people were kept safe both emotionally and physically by confident staff who knew and understood their needs and risks well. Close working relationships with partner agencies contributed to the staff team's ability to respond proactively to the needs of young people. One young person told us, 'It is safe and more fun than anywhere else.'

The organisation's child protection policy was comprehensive. The service benefitted from having an on-site social worker, who positively contributed to staff feeling confident and supported in this area of practice. Notifications to the care inspectorate had improved and we highlighted the importance of this continuing.

The staff team were keen advocates for the young people and also recognised the importance of independent advocacy. We were confident that all young people had at least one adult out with the service acting in their best interests.

We saw continued efforts to reduce the use of restraint practice. All staff had access to regular training and there was an increase in reflection and evaluation of incidents to learn from and improve future practice. All staff we spoke to were clear that restraint practice was only used as a last resort.

Young people experienced very warm, nurturing, and respectful interactions with staff. External professionals were impressed by these relationships. Spontaneity, fun and laughter were regularly observed during our inspection. Young people enjoyed playing in the extensive grounds as well as going on trips and participating in clubs. Many young people had enjoyed holidays to Blackpool, Alton Towers and Flamingo Land. Many staff members spoke of their love for the young people. The loving, trusting relationships meant that young people had the confidence to try new exciting experiences. This supported development of their skills, widened their worlds and broadened their horizons.

The cottages provided a warm homely environment and most had a private garden space. All staff noted an improvement in the quantity and choice of food for young people. Young people had greater opportunity to express their views and be involved in the planning of their day-to-day care, ensuring they were included and their views valued.

Young people's physical and mental health needs were very well understood and supported. The service had developed good relationships with a variety of health services. This led to multi-agency assessment and timely access to support. We suggested that the organisation consider additional training in sexual health to further support some older young people. We found improvement in the oversight of medication and gave some suggestions to further strengthen this.

We were impressed with how well young people were supported to maintain and develop connections with family, friends and the community. Staff were confident and assertive in promoting young people's rights to meaningful family time. Young people were supported to develop friendships out with Harmeny, friends and family were welcome to visit. This supported young people's sense of belonging, inclusion and identity.

Education was promoted and young people were supported to attend school on-site or at the local high

school. It was evident that close working relationships between care staff and education staff at the local high school had supported transitions, attendance and attainment for young people. The leadership team were aware that the relationships between care staff and Harmeny education staff were not as positive. We were pleased to hear that they were taking action to address this to ensure a more consistent experience across care and education for all young people.

The organisation had a commitment to young people remaining in the service into adulthood. With support from the University of Edinburgh, they were undertaking a research project, to give full consideration on how best to support older young people. The findings of this project will be used to further develop their continuing care policy as well as their model of care. We stressed the importance of ensuring staff were kept up to date on the progress of this and we look forward to seeing the developments at our next inspection.

Working relationships between the assessment and planning team and the care staff had improved. We could clearly see how the robust, trauma informed assessments of young people were being implemented in practice. Some care plans were SMARTer (specific, measurable, achievable, realistic and timebound), and it was pleasing to see ongoing work to ensure further development in this area.

We were impressed with the significant positive change in culture across the organisation, driven by the Chief Executive and the Head of Care. Roles and responsibilities were clear and understood. There was visibility and clear direction to the wider team, from a strong supportive senior leadership team and individual cottage managers. Management approaches were consistent and there were opportunities to share good practice. Many staff reflected on this improvement, advising that it had contributed to an increase in morale.

The change in culture and support for staff had resulted in an increase in staff retention, this allowed for greater learning and development of individual staff. The organisation was using and modifying a staffing needs assessment to ensure they always had the best possible mix of staff skills and experience to support young people's needs.

Transitions procedures into the service had been reviewed and revised. Thorough matching processes were being well led by the on-site social worker and the senior assessment and planning worker. The organisation's "Here 4U" project was impressive with a worker dedicated to ensuring transitions within and out of the service were as smooth as possible. Young people's needs and wishes were at the centre of any move, minimising trauma for them."

We were assured that safer recruitment guidance was being followed and there was a focus on values-based recruitment. Young people had some involvement in recruitment processes. We suggested that the organisation could consider how young people could be further involved.

Staff spoke of a robust induction and several good quality and bespoke training opportunities. Staff were supported by leaders to understand learning from training and embed this in practice, with the use of observations and feedback as well as regular effective supervision.

Quality assurance processes were structured and had a positive impact on learning and development to improve practice. We suggested that greater evaluation and analysis would further strengthen quality assurance processes.

We saw examples of how leadership and improvement actions were driving forward how the Promise will be met within the organisation. We look forward to seeing the impact of this in our next inspection.

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

### Requirements

#### Requirement 1

By 20 December 2024, the provider must notify the Care Inspectorate 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 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 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)

**This requirement was made on 11 October 2024.**

#### Action taken on previous requirement

We were satisfied that all notifiable incidents were notified to Care Inspectorate within timescales and the detail of these notifications has improved.

**Met - within timescales**

#### Requirement 2

By 30 January 2025, the provider must ensure that there is effective leadership to provide structure and support to the staff team. This is to ensure young people's needs are met and they are kept safe. To do this, the provider must, at a minimum:

- a) ensure leadership and management roles and responsibilities are clear
- b) ensure increased visibility of managers within the cottages
- c) ensure a consistent approach across the cottages to develop a positive learning culture across the organisation
- d) ensure that staff benefit from regular advice and guidance
- e) ensure that information is shared effectively within the teams
- f) ensure that staff are consistently debriefed following incidents to support staff to reflect on their practice and how to best support young people.

g) ensure that staff receive regular and effective supervision to reflect on their practice and identify areas of practice for further development

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 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 11 October 2024.**

#### Action taken on previous requirement

We were impressed with the effort put into meeting this requirement. There has been a significant change in culture and development of the leadership team as detailed in the main body of the report.

#### Met - within timescales

### Requirement 3

By 30 January 2025, the provider must ensure there is evaluative scrutiny and oversight of all aspects of the care provision within the service. This is to ensure that children and young people experience high quality, consistent care and support within a culture of continuous improvement. To do this the provider must as a minimum;

a) ensure staff are receiving the support required to embed their training in practice and develop their skills. This should include ensuring regular and effective supervision, observations of practice and feedback from managers

b) ensure that personal plans and risk assessments are reviewed and used to inform day to day practice

c) ensure robust auditing of medication and timely action on any errors identified

d) ensure an evaluative and qualitative approach to learning from incidents, including restraint incidents to develop future practice

This is to comply with Regulation 3, Regulation 4(1)(a) and Regulation 5 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 Health and Social Care Standards (HSCS) which states that "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes". (HSCS 4.19) 7. 7.

**This requirement was made on 11 October 2024.**

#### Action taken on previous requirement

We were satisfied that appropriate action had been taken to meet this requirement.

The organisation has put systems in place to support staff's understanding of learning and to embed this in practice. Supervision records detailed that this was happening more regularly and staff spoke positively about the impact of supervision.

Care plans and risk assessments were being used to inform day to day practice and the assessment and planning team were working closely with the care staff. We saw ongoing work to further develop plans to ensure they were SMARTer Medication audits had improved due to more robust systems being in place.

Improvement had been made in the evaluation of incidents and further advice was given to further improve analysis and evaluation.

Further details are within the body of the report.

**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

The provider should review and develop its continuing care policy to set out its responsibilities to provide continuing care to all 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 (HSCS) which state that:

"As a child or young person I feel valued, loved and secure" (HSCS 3.5)

"My human rights are central to the organisations that support and care for me" (HSCS 4.1)

**This area for improvement was made on 11 October 2024.**

#### Action taken since then

As noted in the body of the report the organisation are currently undertaking a research project that will inform their continuing care policy and model of care. Due to this, this area for improvement will continue.

#### Previous area for improvement 2

To support young people's wellbeing, outcomes and choice the provider should review their care planning, and risk assessment processes. This should include ensuring an inclusive approach to assessment and planning where young people's views are clearly recorded and where there is clear evidence that these assessments are being used to inform day to day practice.

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 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 11 October 2024.**

#### Action taken since then

The organisation has improved how the assessment and planning team work alongside the care staff. This has supported how assessments inform day to day practice. There was also greater evidence of young people's views in all care plans we viewed. We were satisfied that this area for improvement had been met.

#### Previous area for improvement 3

To keep children and young people safe and promote their wellbeing, the provider should ensure they have an effective staffing needs assessment in place. This should be regularly reviewed and recorded ensuring appropriate numbers, experience, and skill mix of staff working within the service at all times.

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 respond promptly, including when I ask for help.' (HSCS 3.17) and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

**This area for improvement was made on 11 October 2024.**

#### Action taken since then

The service had made significant improvement in the use of staffing assessments. This continued to an area that they were modifying and developing and we will review further at our next inspection.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support children and young people's rights and wellbeing?	5 - Very Good
7.1 Children and young people are safe, feel loved and get the most out of life	5 - Very Good
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	5 - Very Good

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