

Chalmers House Care Home Service

Edinburgh

Type of inspection:
Unannounced

Completed on:
4 July 2025

Service provided by:
City of Edinburgh Council

Service provider number:
SP2003002576

Service no:
CS2024000113

About the service

Chalmers is a residential house which can accommodate up to five young people. It is situated in Edinburgh close to local amenities and public transport. Young people had their own personalised bedroom and shared bathroom facilities. There was a garden area which was nicely decorated, however, some of the building required upgrading to make it more homely.

About the inspection

This was an unannounced inspection which took place on 1 and 2 July 2025. 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 two people using the service and three of their family/friends/representatives
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents.

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

- Risk assessments and care plans did not contain the relevant details.
- Staff had really good relationships with the young people.
- Searches of young people were not appropriately recorded.
- There was a lack of consideration as to how the service could meet the needs of new admissions.
- Young people were supported to continue meaningful connections with families.
- There was a lack of quality assurance and oversight of 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?	3 - Adequate
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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?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas need to improve.

There was a lack of recording around how some young people were supported to be kept safe. We found a number of risks present for young people which were not recorded, and there was a lack of support strategies for recognised risks. Some documents also contained details about other young people and had the potential to breach their confidentiality. This led to a lack of clarity around how the service was keeping young people safe. **(See requirement 1.)**

There was a lack of advocacy services available to young people. Staff were passionate about ensuring young people's rights were upheld, however, recognised the importance of young people having the ability to access independent advocacy to support them if needed.

Staff had a good knowledge of child protection and how to raise concerns. We found any concerns were reported immediately, and followed up to ensure that young people were safeguarded. However, the service had failed to notify the Care Inspectorate at times of these events. **(See area for improvement 1.)**

The staff team provided trauma responsive care, the young people told us, "They really understand me and help me." Staff had an in depth understanding of the young people's needs and how to support them. This supported young people to grow and develop socially and emotionally.

There was a strong focus on building relationships with young people. Staff had very good relationships, and supported young people to try new experiences and have fun. Young people told us, "I really appreciate the opportunities I get, and I'm excited to go on holiday." Staff were also confident in challenging other professionals care plans for the young people they supported; acknowledging that this didn't support a relational approach. This helped young people feel cared for, and make lifelong memories.

Searches for young people were not appropriately recorded. There was a number of times this had been conducted and not been recorded or notified to the Care Inspectorate. This is important to ensure the young people's rights have been upheld and there is justification for this practice to take place. **(See area for improvement 2.)**

Young people were supported to stay connected to their family and friends. There was some good outcomes where young people were supported to move back with their family. Staff also understood the importance of keeping in touch with families, and offering them support if they needed. This supported families to build lifelong relationships and feel included.

There was opportunities for young people to stay into adulthood, and to have access to support when they moved out. Staff continued to keep in touch with a number of young people, and support them with their emotional and physical needs. This is in line with 'The Promise' and supports lifelong relationships.

Care plans were not in place for all young people. Those which were in place, lacked the most up to date information, around living arrangements and time with family. This impacted on the ability to provide a consistent approach to young people. **(See requirement 2.)**

There was recently a new manager appointed to the service. Staff were positive about this change, feeling listened too and supported.

Some quality assurance processes were in place, however, these were not effective. Some audits identified areas for improvement, however, these had not been actioned. There was a lack of oversight of incidents, and reflection with staff. This had contributed to inconsistent recording and a lack of reflection and learning. **(See requirement 3.)**

Admissions for young people were often on an emergency basis. Decisions that needed to be made by the local authority needed more consideration, planning and should have been implemented before young people moved in. This would help to ensure the service can meet their needs, and keep all young people safe. **(See requirement 4.)**

Staff had a wealth of experience and knowledge. However, the service needed to complete a staffing needs assessment to ensure they could meet the needs of the young people. At times there was a low ratio of staff with no rational to support this. This would ensure young people receive the support which is right for them. **(See area for improvement 3.)**

The staff team had a good understanding of 'The Promise' and were articulate how this was reflected in practice. They were passionate about providing support for families, and supporting young people into adulthood. They were also confident to challenge other agencies when they felt this was not being reflected in the care plans for young people.

Requirements

1. By 31 August 2025, the provider must ensure that risk assessments reflect all risks present for young people and strategies. In particular the provider must:

- a) ensure there is a risk assessment in place for each young person, which identifies all relevant risks
- b) ensure there is primary and secondary strategies in place to support young people
- c) ensure risk assessments are updated regularly.

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 am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm' (HSCS 3.21).

2. By 31 August 2025, the provider must ensure that care plans are in place for all young people and contain the most up to date information. In particular the provider must:

- a) ensure there is a care plan in place for each young person
- b) ensure care plans are detailed and contain all the relevant information to support young people on a daily basis
- c) ensure care plans are updated regularly, and contain the most up to date information.

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:

'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. By 30 September 2025, the provider must ensure that quality assurance systems are in place and effective. In particular the provider must:

- a) ensure there is oversight of incidents
- b) ensure when audits are in place they are completed on a regular basis
- c) ensure where audits identify areas of improvement there is a clear plan how these will be actioned.

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

4. By 1 August 2025, the provider must ensure the admissions process considers the ability of the service to be able to meet the young person's needs and keep them safe. In particular the provider must:

- a) ensure there is a comprehensive assessment of the needs of the young people using the service, underlining how the service will meet these needs and evidence regular reviews of the assessment.
- b) ensure there is an assessment of the impact on young people in the service and the referral, when a new admission is considered.
- c) ensure the service has the staff skills and training to meet the needs of the young person.

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:

'My care and support meets my needs and is right for me' (HSCS 1.19).

Areas for improvement

1. To support effective scrutiny of the service, the provider should ensure that managers submit notifications of significant events to the Care Inspectorate in accordance with guidance.

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).

2. To ensure young people's rights and views are respected the provider should ensure they have a record of all searches and report these to the Care Inspectorate.

This should include, but is not limited to updating the search policy and recording any searches.

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

'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively' (HSCS 1.3).

3. To support children and young people to be cared for by the right number of staff and 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.'

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?	3 - Adequate
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	3 - Adequate

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