

Heathervale Care Home Service

Edinburgh

Type of inspection:
Unannounced

Completed on:
13 August 2025

Service provided by:
City of Edinburgh Council

Service provider number:
SP2003002576

Service no:
CS2003010930

About the service

Heathervale is a City of Edinburgh care home service that provides care and accommodation for up to seven young people. The service is located in a spacious purpose-built property in the Wester Hailes area of Edinburgh. It is a two storey building with ensuite bedrooms, several communal spaces, kitchen, office and toilet facilities. It also incorporates a flat for the use of one young person preparing for a more independent future. The home is close to local amenities and transport links.

About the inspection

This was an unannounced inspection which took place onsite on 30 July 2025 between 09:30 and 18:45 and 31 July 2025 between 09:00 and 15:45. 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 4 young people;
- spoke with one social workers;
- spoke with 6 staff and managers;
- observed practice, the environment and daily life;
- reviewed returned questionnaires from 6 Staff members;
- reviewed returned questionnaires from 3 external professionals;
- reviewed service documents.

Key messages

- Young people had very good relationships with the staff
- Collaborative work with external professionals had resulted in very good outcomes for some young people.
- Those young people preparing to move on were very well supported and transitions in the past had been very positive.
- Most young people had good outcomes in education
- Some aspects of the environment needed attention
- Care planning needed to be SMART
- Some quality assurance systems needed to be improved

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 found significant strengths in aspects of the care provided and how these supported positive outcomes for young people, therefore we evaluated key question 7.1 as very good. In relation to key question 7.2 we found several strengths which impacted positively on outcomes for young people and outweighed areas for improvement and evaluated this question as good. The overall evaluation for key question 7 is good.

Young people were kept physically and emotionally safe by staff who were attentive to their individual needs. Practice was developed to respond appropriately to those young people who put themselves at risk in the community.

Close collaboration with external agencies produced credible strategies, enabling young people to make progress and mitigate trauma.

Staff were clear about actions they should take and their roles and responsibilities to keep young people safe. We did not find any indicators where protection processes should have been initiated.

Young people received nurturing compassionate care with tactile affection being led by them. They told us they felt safe, that staff cared for them and they always had someone to speak to if they need to. One young person said, "people care about me, they check in and are interested in what I do".

A high level of respect was central to responses to the needs of young people and staff demonstrated genuine concern for their wellbeing. Most staff had a high level of understanding of trauma, and young people benefitted from this approach to their care. Formal trauma training and effective role modelling encouraged a culture of empathy and understanding.

A range of activities provided opportunities for young people to participate in new experiences. Whilst appropriate staffing was, in the main, the norm, we asked managers to be mindful of the deployment of staff to ensure that there were always enough staff to make activities possible.

Young people's voice was encouraged through Care Planning Meetings where young people were fully included in making decisions about their care and their future. Opportunities for discussion around the dinner table or on outings were maximised.

Staff were ambitious for the young people and keen to see them make progress build resilience and self confidence. Most young people engaged in learning at school or college and some had desired career pathways. Shared interests between staff and young people have resulted in better engagement for some young people.

The house was welcoming, homely and clean. However, there were some areas in need of refurbishment, replacement, or repair. Managers committed to resolving these issues as soon as possible. **See area for improvement 1.**

The flat provided a good stepping stone for young people progressing to their own tenancy and promoted the 'staying put' agenda and commitments of "the promise".

We heard that Wi-Fi was an issue, however, City of Edinburgh Council were actively pursuing alternatives, which should improve access for young people.

Regular garden maintenance would improve opportunities for young people to use it to its full potential.

Mental and physical health was strongly promoted with all appointments being prioritised. A patient and sensitive approach helped young people overcome their anxieties about appointments or medical procedures. There was strong awareness of young people's individual mental health needs and responsive action to moods and presentation. Medication was, in the main, managed well and we gave some advice about recording of some medications.

Young people's connections with people who are important to them were well supported.

Young people's participation in care planning was central to the methodology and its success. We saw that staff were beginning to grasp this with regular care planning meetings where most young people attended their key team. However, whilst participation was working well, the recording of care plans was not SMART in relation to assessment of progress, achievement and next steps. **See area for improvement 2**

Safe and sound assessments, (risk assessments), identified behaviours and demeanours and gave some direction about strategies that worked for individual young people. However, some risks were not identified and therefore staff were unaware of the actions they should take to mitigate some risks. Standalone risk assessments for events were clear and informative as were set routines for individual young people.

The positive culture within the house was supportive and focused on the best interests of the young people. Leaders practice by example and although the leadership team was reduced the remaining leadership team had maintained stability. However, the reduction in the management team meant that initiatives such as care planning, promise workshops with young people and staff development plans had not progressed and internal quality assurance oversight had been reduced. Imminent plans were in place to supplement the management team, and the replacement manager had a vision for the home and had ideas to carry these things forward.

The home had gone through a difficult period where tensions were high due to some unsafe behaviours and because of young people being accommodated in emergencies. The provider had initiated strategies to minimise emergency admissions, and it is hoped this will result in better planning for future young people coming to Heathervale. Records supporting a matching process paperwork included consideration about prospective young people and those already living in the home.

Transitions for young people moving on had been successful and many of the current group of young people had firm plans for their future and were confident about the support they would be given to remain at Heathervale until they were ready to move.

A core group of permanent staff and regular locum staff, filling vacancies, provided consistency and reassurance for young people. Young people and staff were looking forward to a cook starting the week after the inspection. This would also free up additional care staff time to be present for the young people.

Staff we spoke with said they had time with their line manager however not all said that their supervision was recorded. Staff told us they felt supported by managers and could approach any of the management team.

The online training system provided an overview of staff training and identified where staff had fallen behind or needed refresher training and medication audits were clear and well recorded. Care plan audits were less successful in that not all the information was completed and there did not appear to be any follow up recorded. A development plan identified areas for improvement, however was not dated. Targets in the development plan indicated progression areas such as care planning and recruitment of staff, however this was not found to be the case during inspection. Having discussed this with the acting manager, he committed to making these changes and we assessed that the service had the capacity to improve quality assurance. **See area for improvement 3**

Incidents and accidents were well recorded and notified to Care Inspectorate.

Young people knew how to raise any concerns they had and could identify a number of people they could speak to.

The service delivery was in line with The Promise and staff could speak confidently about the aspirations of the promise. Next step is to establish a platform for young people's involvement in The Promise themes.

Areas for improvement

1. In order for young people to live in a suitable environment with the facilities that they need, the provider should develop a plan of action to maintain the environment to a high standard.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy well maintained premises, furnishings, and equipment (HSCS 5.22)

2. In order to support young people's wellbeing, learning and development, the provider should ensure that care plans are SMART.

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 is consistent and stable because people work together well' (HSCS 3.19).

3. The provider should ensure that robust quality assurance systems are in place, informed by the development plan and lead to improvement.

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).

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

In order for young people to be cared for and supported managers should work with staff to further improve care plans. Specifically, though not exclusively focusing on;

- Dating and signing of documents.

- Cross referencing care plans with risk assessments
- Identifying timescales
- Consideration of the language used
- Updating all weekly planners.

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).

This area for improvement was made on 3 October 2023.

Action taken since then

The service had made some progress improving care plans. However, further improvement was needed and we have made another area for improvement regarding care planning **See area for improvement 2**

Previous area for improvement 2

In order to promote safety and reassurance the provider should develop robust audit and quality assurance processes, particularly, though not exclusively, focusing on:

- Medication audits
- Overview of care plans and risk assessments

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)

This area for improvement was made on 3 October 2023.

Action taken since then

Whilst audit and assurance systems were in place, they were not always used effectively. We have made another area for improvement in relation to this. **See area for improvement 3.**

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	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	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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