

Curo Salus - Laurel House Care Home Service

Johnstone

Type of inspection:
Unannounced

Completed on:
11 August 2025

Service provided by:
Curo Salus Limited

Service provider number:
SP2004006972

Service no:
CS2013319767

About the service

Laurel House is one of several services provided by Curo Salus Ltd and is registered to provide a care home service for a maximum of 10 children and young people.

The house comprises of a large detached three-storey building in Johnstone. There are eight single ensuite bedrooms on the ground and first floors and two self-contained flats on the upper floor. The flats are used to support older young people to prepare for independent living. There is a living room, dining room, conservatory, as well as office space for staff. There is a large enclosed back garden with patio.

Most of the young people attend Northview House School, operated by the Curo Salus and registered by HM Registrar for Independent Schools.

About the inspection

This was an unannounced inspection which took place on 29, 30 July and 5 August 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 seven young people using the service and two of their family/representatives
- spoke with 12 members of staff and management
- observed practice and daily life
- reviewed documents
- reviewed 16 completed survey responses
- spoke with five visiting professionals.

Key messages

- Children and young people were kept safe by a caring and committed staff team.
- The service should improve recording of significant events in the home to support the ongoing understanding of young people's needs.
- Positive relationships were evident in the home which supported a relaxed and homely atmosphere.
- Young people had a variety of opportunities based on their interests and ambitions.
- Young people were supported to maintain relationships with those important to them.
- Improved consistency in recording of care plans and risk assessment would support staff understanding of individual risk and needs.
- Further training opportunities would support staff understanding of their role and responsibilities.
- Development of robust quality assurance process would support the delivery of high quality care and support.

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, where strengths only just outweighed weaknesses.

Staff recognised relationships being a key aspect of supporting them in promoting the safety and wellbeing of young people. This contributed to young people being kept safe by staff who knew them well.

The service needed to ensure that all significant events were recorded on an individual basis. This is to ensure there is management oversight, reflection and analysis of all incidents to support staff's understanding of young people's needs. In addition to notifications made to the care inspectorate, we expect services to keep records in relation to significant events which may affect the health and wellbeing of young people (see area for improvement 1).

There was an up-to-date Child Protection policy in place however, only a small number of staff had completed child protection training in the last 12 months. This has potential implications for the safety and wellbeing of young people in terms of staff identifying protection concerns and understanding their responsibilities when these arise (see requirement 1).

Young people had access to external advocacy services which helped them to engage in wider discussions around their care and support.

Young people experienced warm, nurturing relationships with those caring for them. Some young people had preferred members of the team and staff used these relationships to support young people in a meaningful way. A family member shared that staff know their young person 'really well' and they 'can see how comfortable he is with staff.'

Young people told us there is 'lots to do here', we heard of a variety of activities young people had taken part in including trips to a caravan park, fishing and baking. This provided young people with the opportunity to access new experiences and build memories. Additionally, individual interests and ambitions were encouraged with achievements in these celebrated by the team.

There were photos displayed around the house of young people and staff involved in a variety of activities, school photos on display along with personalised word cloud images which contributed to a welcoming and homely atmosphere. Some young people wanted to paint their bedrooms and a family member noted 'it would be nice to see [the young person's] bedroom looking more homely'. It was pleasing to see this being identified within the service improvement plan and we look forward to seeing how this progresses.

Young people were encouraged to be involved in their care and support in ways which were meaningful to them. Staff adapted their discussions and approaches to this, based on individual needs and levels of understanding to promote engagement of young people.

Health needs of young people were met through access to local health services and supporting attendance at appointments as required. Access to the organisation's psychology team was a valuable support, with several young people attending weekly therapeutic sessions. A family member reflected on the 'big improvements in self-regulation' for their young person as a result of the support they have received.

Young people were supported to maintain relationships with those important to them. Family members who visited Laurel house reported feeling welcomed and informed of key information. All young people received tailored support in education to promote meaningful learning opportunities. An external professional reflected that since moving to Laurel House their young person has had a more positive experience of education than they had previously, with them now feeling at ease in this environment.

The quality of care plans and risk assessment was varied. Staff had a good understanding of young people's needs however, there was a lack of clear recording which would promote consistency of support. Although the service used Specific, Measurable, Attainable, Relevant and Timebound (SMART) principles, the outcome section of care plans could be further strengthened through applying these principles more definitively (see requirement 2).

Staff felt supported in their role and were passionate about improving outcomes for young people living at Laurel House. Staff reported the open door policy allowed them to approach managers as required. Positive working relationships between staff contributed to a relaxed atmosphere in the house and allowed colleagues to learn from each other, recognising the variety of experience and backgrounds staff have.

In line with the organisations policy matching documentation and impact assessments were completed ahead of young people moving in. Those who have moved into the house since the last inspection were supported in a planned way which helped them to settle and feel comfortable in a new environment.

Staffing assessments were carried out on a regular basis and helped to ensure there were sufficient staff available to support young people, in accordance with their preferences where possible. From assessments sampled, it was noted that minimum staffing requirements had been met consistently however, some feedback from staff suggested there would be benefit in having more staff. It is acknowledged that the service is reviewing their approach to recruitment to enhance their staffing compliment.

The provision of training available within the organisation had improved since the last inspection as a result of a training manager now being in post. The organisation have also taken over responsibility for training staff in relation to restrictive practice through developing internal trainers. This meant that staff were able to access support and guidance from colleagues in relation to restrictive practice. We acknowledge that staff shortages have at times impacted on staff being able to attend training. However, we identified large gaps in the number of staff who had completed training regarding child protection and physical intervention for example (see requirement 1).

Overall there was a lack of effective quality assurances processes within the service to consider practice in relation to care plans/risk assessments, incidents (including physical intervention) and staff training for example. This meant that errors in recording such as out of date information, language which was not trauma informed, themes within significant events and gaps in individual training had not been understood. Management oversight in these areas would contribute to a shared understanding across the team of young people's needs and opportunity to consider different approaches and support offered to young people (see requirement 3).

Requirements

1. By 30 December 2025 the provider must review their care planning and risk assessment processes in order to support young people's wellbeing, outcomes and choices.

To do this, the provider must, at a minimum:

- a) to ensure all young people's views are reflected in care plan goals these are clear and visible to them.
- b) ensure that goals are specific, measurable, achievable, realistic and time-bound (SMART). These should reflect young people's words, and clearly describe the supports required to achieve these. Goals should be actively tracked and subject to regular review
- c) ensure that information contained within risk assessment and care plans is up-to-date and relevant to current circumstances
- d) ensure there are quality assurance measures in place to review content, track progress, implement alternative supports if required.

This is to comply with Regulation 5(1) and 5(2)(b and c) 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 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).

2. By 30 November 2025, to promote the safety and wellbeing of children and young people, the provider must ensure that all staff receive training and development opportunities to enable them to meet the needs of children and young people.

To do this the provider must at a minimum:

- a) ensure training opportunities are offered to meet the requirements identified within the services training needs analysis
- b) maintain an accurate record of all staff training, including refresher training
- c) implement quality assurance systems to evaluate the effectiveness of training and development opportunities and ongoing competency of staff.

This is to comply with section 8(1)(a) 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 have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14)

3. By 31 October 2025 the provider must develop and implement robust quality assurance processes in relation to all aspects of care provision. This is to ensure that children and young people experience high quality consistent care and support.

To do this the provider must at a minimum:

- a) ensure that roles and responsibilities of managers and staff at all levels are clearly defined to allow for regular oversight and scrutiny of practice

- b) ensure that young people's plans and risk assessments are regularly reviewed and updated as appropriate
- c) ensure there is regular oversight of any significant events within the home to identify any themes, patterns and areas for staff development.

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 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).

Areas for improvement

1. To support the safety and wellbeing of children and young people, the service record all significant incidents on an individual basis for each young person. This will allow for greater analysis and reflection, and quality assurance of the young people's care and support.

This is to ensure that the quality of 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) and '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

To further enhance young people's safety and experience, the provider should ensure improvement in the consistency of recording risk assessments and personal plans. This should include but is not limited to, identifying specific individual needs, using the most relevant and up-to-date information and ensuring young people's views are included and used to formulate plans and assessments.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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' (HSCS1.15) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17)

This area for improvement was made on 12 October 2023.

Action taken since then

There were inconsistencies in the standard of recording within care plans and risk assessment and a lack of management oversight of these meant this was not picked up.

This area for improvement is no longer in place and has been incorporated into a new requirement.

Previous area for improvement 2

To support the staff team's learning and development and young people's wellbeing, the provider should ensure that staff have opportunity to and access training and other learning opportunities appropriate to their role and apply their training in practice.

This should include but it not limited to child protection training, trauma informed practice, The Promise, supervision and staff development days. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).

This area for improvement was made on 12 October 2023.

Action taken since then

There has been some improvement in availability of training opportunities since the last inspection however we found there were several staff member who had not completed key training as would be expected.

This area for improvement is no longer in place and has been incorporated into a new requirement.

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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