

REPORT TO: SCRUTINY COMMITTEE – 25 JUNE 2025

REPORT ON: CARE INSPECTORATE REPORTS ON CHILDREN'S HOMES

REPORT BY: EXECUTIVE DIRECTOR OF CHILDREN AND FAMILIES SERVICE

REPORT NO: 205 - 2025

1 PURPOSE OF REPORT

- 1.1 This report provides a summary of the Care Inspectorate's findings from recent annual inspections of Children's Homes at Gillburn House (published 3 December 2024; Appendix 1); The Junction (published 12 February 2025; Appendix 2); and Foresters House (published 5 May 2025; Appendix 3).

2 RECOMMENDATION

- 2.1 It is recommended that the Scrutiny Committee notes the contents of this report, including findings and work being undertaken to progress further improvements.

3 FINANCIAL IMPLICATIONS

- 3.1 There are no direct financial implications arising from the agreement of this report.

4 BACKGROUND

- 4.1 All inspections were unannounced and focussed on key question 7 of the Care Inspectorate's Quality Framework for Care Homes for Children and Young People. This is comprised of a single key question of 'How well do we support children and young people's rights and wellbeing?' with two quality indicators:

- Children and young people are safe, feel loved and get the most out of life.
- Leaders and staff have the capacity and resources to meet needs and rights.

- 4.2 The inspections are typically carried out on an annual basis, but the Covid-19 pandemic disrupted this and a proportionate approach is applied to adapt the frequency. Evaluations can range from Weak to Adequate, Good, Very Good and Excellent. Over the last 3 inspections, grades of the houses have been:

Quality Indicator	Gillburn	The Junction	Foresters
7.1 Children and young people are safe, feel loved and get the most out of life.	2022 Good	2022 Very Good	2022 Adequate
	2023 No inspection	2023 Very Good	2023 Good
	2025 Good	2025 Adequate	2025 Very Good
Quality Indicator	Gillburn	The Junction	Foresters
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights.	2022 Not Evaluated	2022 Good	2022 Adequate
	2023 No inspection	2023 Not Evaluated	2023 Good
	2025 Not Evaluated	2025 Adequate	2025 Very Good

Gillburn House

- 4.3 The house has maintained a consistent grading of Good and in the recent inspection, some findings were that young people were safe, protected from harm and cared for with love, warmth and compassion. As a house which cares for young people with a disability, understanding their physical health needs was identified as a key strength.
- 4.4 It was however identified that the house could be improved further by being even more aspirational and developing plans which help to drive the service towards excellence. This has been seen as an endorsement of the house's capacity for improvement and although there were no requirements, 3 areas for improvement are being progressed:
- **Ensure that robust quality assurances processes are in place** – this included audit measures in relation to dispensing medication, which were implemented soon after the inspection.
 - **Mechanisms for reviewing staffing arrangements** – the inspection coincided with a period of sickness which has now been resolved. The houses are also being supported to share and deploy staff in response to any episodes of increased risk.
 - **Development of the vision for the service** – all managers of the houses have been supported to participate in a leadership development programme and co-design a single Improvement Plan to further build on progress and aspire to excellence.

The Junction

- 4.5 The grades declined from Very Good and Good to Adequate but findings did note that young people were cared for by compassionate and nurturing staff. It coincided with a challenging period for the house which was immersed in caring for a young person with higher levels of more complex need which they struggled to meet.
- 4.6 In relation to challenges presented at the time, inspectors found that matching and risk management processes needed to improve to effectively protect all young people and ensure staff are equipped to meet the complex range of needs that young people might present.
- 4.7 In relation to matching, they identified that leaders within and external to the service, involving managers from both the house and the area teams which oversee plans for young people, needed to more clearly define their roles and responsibilities. There had been an issue with sharing some critical information to inform support.
- 4.8 Inspectors therefore made two requirements in relation to matching assessments and risk management procedures. They also identified three areas for improvement relating to ensuring children and young people are aware of their right to Continuing Care, advocacy and legal representation; access to learning opportunities; and staffing arrangements.
- **Matching assessments** – arrangements to support information sharing and care planning have been reiterated. They require house and area team managers to share all details which may necessitate adjustments to the nature and extent of support.
 - **Risk management procedures** – support available to the house from the Out of Hours Service has been clarified and required escalation of concerns through joint planning/review processes has been reiterated.
 - **Rights to Continuing Care, advocacy and legal representation** – managers at the house have been given further advice on young people's entitlements, which will be further reinforced by joint planning and review arrangements
 - **Access to learning opportunities** – at the time of the inspection, 2 young people were struggling to engage with education and monthly monitoring arrangements have been introduced to promote timeous responses to any concerns.

- **Staffing arrangements** – the inspection coincided with a period of higher levels of staff absence requiring temporary cover from sessional staff. This has now been resolved, and maintenance will be supported by implementing the above measures.

4.9 The house manager and area team managers have also been jointly involved in the leadership development programme referred to above to co-design a single improvement Plan. It will be finalised in June 2025 and will include a multi-agency 'Team Around the Houses' model and a learning schedule for the teams.

Foresters House

4.10 The grades of Foresters House show a journey of continuous improvement over the last 3 inspections from Adequate to Good and Very Good. In the more recent inspection, key findings were that children and young people were flourishing and safer because they lived in Foresters House.

4.11 Leaders were passionate and had an inspirational vision for the service. Young people were cared for with compassion, nurture and respect with trauma responsive care creating opportunities for them to recover from past experiences. Their combined needs were well considered through a careful matching process.

4.12 There were no requirements and no areas of improvement other than the house team striving for excellence and continuous improvement. In the process of the leadership development programme with all house and area team managers, this approach has been shared to promote consistently high standards and ambition.

Conclusion

4.13 Clearly, there was some variance in the evaluation findings of the three houses, with one declining from Very Good to Adequate in the context of some very specific circumstances; one maintaining a trend of Good; and one continuing to make progress from Adequate to Very Good.

4.14 Going forward, each of the houses are working collaboratively with area team managers to address the requirements and areas for improvement whilst being supported to participate in leadership development and create even more aspirational plans by June 2025.

4.15 These plans will focus specifically on models of care, bi-annual self-evaluation and a 'Team Around the House' approach to consistently support the teams who care for young people and the young people in their care. Once the plan has been finalised, the first self-evaluation is scheduled to commence in August 2025.

5 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate Senior Manager has reviewed and agreed with this assessment.

6 CONSULTATIONS

- 6.1 The Council Leadership Team have been consulted in the preparation of this report and agree with its content.

7 BACKGROUND PAPERS

- 7.1 Attach as appendices.

Audrey May
Executive Director of Children and Families Service

Glyn Lloyd
Chief Social Worker

APPENDIX 1



Gillburn House Care Home Service

Dundee

Type of inspection:
Unannounced

Completed on:
3 December 2024

Service provided by:
Dundee City Council

Service provider number:
SP2003004034

Service no:
CS2003000495



Inspection report

About the service

Gilburn House is a residential care home provided by Dundee City Council. It is registered to care for up to four children and young people affected by complex disabilities.

The house is a single storey detached building located in a residential area to the North of Dundee and has four spacious single bedrooms, a large open-plan living and dining area, accessible bath and shower rooms, sensory room, kitchen and laundry. The house is surrounded by a large enclosed garden and the location provides easy access to local and central leisure facilities.

About the inspection

This was an unannounced inspection which took place on 13 and 14 November 2024. 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 people using the service and their representatives;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with visiting professionals.

During our inspection year 2024-2025 we are inspecting against a focus area which looks at how regulated services use legislation and guidance to promote children's right to continuing care and how children and young people are being helped to understand what their right to continuing care means for them.

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 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.

Inspection report**Key messages**

Young people who lived in Gilburn House were safe and protected from harm.

Young people were cared for with love, warmth and compassion.

Understanding young people's physical health needs was a strength of the service.

The service needs to be more aspirational and focussed on young people reaching their full potential.

Quality assurance should improve to monitor aspects of service delivery.

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.

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How well do we support children and young people's rights and wellbeing?

4 - Good

We made an evaluation of good for this key question, as there were a number of important strengths, which outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a positive impact on the young people's experiences.

Young people living in Gillburn house were protected and cared for by a team who had a good insight into each person's unique needs. Understanding the complex health conditions that impacted upon the young people was fundamental to day-to-day safety and this was a particular strength of the team. Connected relationships ensured that the caring adults were attuned to indicators of risk and the staff had a good foundation of knowledge in relation to their role in protecting the people they cared for. To strengthen this understanding, we asked the manager to repeat the previously delivered specialist learning disability protection training to newer staff who had recently joined the service.

Life in Gillburn was stable and predictable and the loving approach to care offered young people a nurturing experience. The staff developing understanding of the impact of trauma was beginning to contribute to this positive culture and the organisational commitment to people staying in the service created certainty for people.

Young people were cared for by a team who were part of an effective, multi-agency network that was responsive to people's changing health. Leaders had a good understanding of people's rights and advocated on behalf of young people who faced barriers in communicating their health needs and experiences. This ensured young people's physical health needs were promptly addressed. The service had supported staff to competently administer medication, but the quality assurance process was not robust enough to ensure the process was consistently safe and effective. (See area for improvement 1).

Since the last inspection young people have had more opportunities to spend time out with the house and some of their interests had been promoted, but the impact of staff shortages had continued. We made an area for improvement at the last inspection to reflect this and whilst leaders had worked hard to promote consistency and ensure people's care was safe, a more robust staffing assessment was required that reflected young people's global needs. (See area for improvement 2).

Overall, there were positive outcomes for young people, but these were weighted towards positive physical health. Care was individualised and desired outcomes were identified in personal plans, but young people's potential was stifled as the service lacked an assertive vision that was driven by a robust understanding of best practice, self evaluation and aspirations for young people. (See area for improvement 3).

Areas for improvement

1. To prioritise young people's safety, the service should ensure that robust quality assurance processes are in place. This should include but is not limited to, implementing an audit of medication that scrutinises all aspects of administration, record keeping and storage.

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

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

2. To support young people's development and promote positive outcomes, the provider should ensure a mechanism for assessing staffing arrangements, based on the needs of young people, is in place.

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

'My needs are met by the right number of people'. (HSCS 3.15)

'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).

And to comply with section 7 of the Health and Care (Staffing)(Scotland) Act 2019.

3. To support young people to reach their potential, the service should develop the vision for the service that is based on best practice.

This should include but is not limited to:

- undertaking a team wide exercise in self evaluation, using validated methods, to determine what is working well and what needs to improve;
- developing an improvement and training plan that is informed by relevant research, current guidance including UNCRC and The Promise.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential'. (HSCS 1.6).

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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 support young people's wellbeing and safety, the service should ensure staff are confident in understanding their role in assessing, documenting and managing risk. This should include, but is not limited to, implementing a model of risk assessment that recognises all aspects of young people's vulnerability, and which informs support plans that clearly details how risk will be managed and mitigated.

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, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities" (HSCS 3.20).

This area for improvement was made on 1 November 2022.

Action taken since then

The service had reviewed the existing model of risk assessment and improved the quality of recording. The organisation is scoping alternative models of risk assessment. The service delivered bespoke training to the team that reflected the needs of the young people they care for.

This area for improvement has been met.

Previous area for improvement 2

To support positive outcomes for young people and ensure they regularly get the most out of life, the provider should undertake a review of the current staffing levels within Gilburn House to ensure staffing levels safely enable this.

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

"I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors".
(HSCS 1.25).

This area for improvement was made on 1 November 2022.

Action taken since then

The service has successfully recruited to new posts. Day to day needs are captured in daily planning. The current staffing assessment does not meet the expectations of current staffing legislation, thus this area for improvement will be repeated and amended to reflect this.

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Previous area for improvement 3

To optimise young people's experiences, the service should ensure continuous improvement is well informed. This should include but is not limited to, review and update of the service development plan that reflects stakeholder feedback and evaluation of quality assurance processes.

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).

This area for improvement was made on 1 November 2022.

Action taken since then

External managers have implemented key performance indicators that underpin the service's model of quality assurance but some aspects still need to improve. A service development plan is in place but this is not robustly focussed on best practice and informed by self evaluation, thus this area for improvement will be repeated and updated to reflect the findings of this inspection.

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

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APPENDIX 2



The Junction Care Home Service

DUNDEE

Type of inspection:
Unannounced

Completed on:
12 February 2025

Service provided by:
Dundee City Council

Service provider number:
SP2003004034

Service no:
CS2003000481



Inspection report

About the service

The Junction is a residential care home for up to 5 young people and is provided by Dundee City Council. The house is located in a residential area, close to local shops, transport links and leisure facilities and is within easy travel distance of Dundee city centre.

The spacious house is on one level and has single en-suite bedrooms, a kitchen diner, large living room, activity room and sensory room. Outside, the large, well-tended gardens surround the house, providing extensive space for activities.

About the inspection

This was an unannounced inspection which took place on 29 and 30 January 2025, and 03 and 04 February 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 people using the service;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with visiting professionals.

During our inspection year 2024-2025 we are inspecting against a focus area which looks at how regulated services use legislation and guidance to promote children's right to continuing care and how children and young people are being helped to understand what their right to continuing care means for them.

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 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.

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Key messages

- Young people were cared for by compassionate and nurturing staff.
- Risk management procedures and practice must improve to effectively protect all young people.
- Staff were skilled at developing meaningful, trauma informed relationships with young people.
- Leaders within and external to the service need to more clearly define their roles and responsibilities to promote accountable decision making.
- Matching processes must improve to ensure staff are equipped to keep young people safe and meet the complex range of needs that young people exhibit.

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.

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How well do we support children and young people's rights and wellbeing?

3 - Adequate

We made an evaluation of adequate for this key question. Whilst strengths had a positive impact, key areas need to improve.

The safety of young people was a priority for the service and the Junction team understood that positive relationships were key to protecting people from harm. For most young people the meaningful connections with staff ensured adults were alert to, and responded to early indicators of concern, but for some, whilst their complex risks were known and could be anticipated, risk management plans internally and with key partners, were not robust enough to protect all young people from harm. (See requirement 1).

External professionals were welcomed into the house and as a result, young people had access to a number of adults who acted in their best interests. Staff were passionate about young people's rights and clear that young people had a right to access independent advocacy, but following some changes to the workforce, the previously proactive presence of advocacy partners had reduced, and we asked the manager to re-establish the connection with advocacy partners.

Young people were cared for by a kind and nurturing team, and their developing trauma informed approach meant the impact of young people's past experiences were considered when relating to young people. Leaders in the service were promoting a model of practice that gave young people opportunities to safely explore their choices. Non-judgemental responses from the caring adults increased the likelihood that young people could learn from mistakes, build their resilience and repair relationships when things went wrong.

Relationships in the house were warm and positive, and the team saw this as the backbone of The Junction and integral to their culture of practice. The service was recovering from a highly challenging period that had impacted on young people living there and the team were actively and energetically reinvesting in both the environment and culture of practice to ensure young people were provided with the positive experiences, care, and compassion that they deserved.

Young people were engaged in their care to varying degrees and this was partially reflective of their individual age, stage and circumstances. We identified a need for a more informed and inclusive approach to decision making to ensure all professionals were working towards shared goals, that meaningfully focussed on young people's rights whilst effectively managing risks. This was relevant to day-to-day routines as well as future decision making including continuing care. (See area for improvement 1).

All young people living in The Junction had some access to individualised learning opportunities, but the team were frustrated that they could not consistently access the desired external resources to support young people's learning and development. Senior managers were aware of organisational barriers to young people accessing meaningful opportunities and were committed to addressing this. Whilst these external resources were critical to young people achieving, within the service, the team could be more aspirational for young people and creatively offer opportunities that broaden young people's horizons. (See area for improvement 2).

Leaders within the house and external to the service were all committed to upholding young people's right to compassionate, trauma informed care, that supported them to fulfil their potential and lead meaningful lives. To achieve this for every young person living in The Junction we identified a need to improve

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communication between leaders and to ensure a mutual understanding and execution of roles and responsibilities underpinned the delivery of the service and promoted accountable decision making. As a corporate parent the organisation has a statutory responsibility to care for young people but transitions into the service needed to be more robustly planned to ensure staff are adequately equipped to keep all young people safe and meet the complex range of needs that young people exhibit. (See requirement 2).

Young people were supported by a team with a diverse range of skills and experience. Whilst practice at times was highly skilled, reduced staff numbers due to high levels of absence had impacted on young people's experiences. One person told us 'Our staff are good but sometimes I didn't know who was going to be here'. (See area for improvement 3).

Throughout the inspection, leaders at all levels demonstrated both capacity and strong commitment to learning from the experiences of young people and staff and were actively promoting a plan for improvement, identified prior to, and during the inspection.

Requirements

1. By 30 May 2025, you must ensure that effective risk management procedures are in place for all young people.

To do this you must at a minimum ensure that:

- (a) All young people have a clear risk assessment and risk management plan that clearly documents how identified risks will be robustly addressed.
- (b) When there are increasing and unmanageable risks for young people, a procedure is in place to support staff to escalate concerns within the organisation and access help and support.
- (c) In the event a young person is at risk and support is required from professional partners such as police, a mechanism is in place to clearly define professional responsibilities including what happens when police cannot offer support.

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)

2. By 30 May 2025, the provider must ensure that matching assessments contain improved analysis and that transitions into the service are carefully planned to consider the needs of the new young person and young people already living there.

To do this, the provider must ensure that matching assessments:

- a) Include analysis of how a new admission may impact on young people.
- b) Consider the nature of known risks and clearly define how young people will be protected.
- c) Ensure that matching assessments are linked to assessment of staffing levels, skills and knowledge required within the service.

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This is to comply with Regulation 4(1)(a) and Regulation 15(b)(i) 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:

'If I experience care and support in a group, the overall size and composition of that group is right for me'. (HSCS 1.8); and

'I have enough time and support to plan any move to a new service'. (HSCS 4.13)

Areas for improvement

1. To promote young people's rights and meaningfully engage them in informed decision making, the service should ensure that children and young people are aware of their right to continuing care as soon as is practicable after admission to the service, including their right to advocacy and legal representation.

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 3.10)

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

2. To support children and young people's wellbeing, learning and development, the provider should ensure that the culture of the service promotes access to learning opportunities and creatively supports young people to broaden their horizons and fulfil their potential.

This should include but is not limited to:

(a) Addressing barriers to formal education.

(b) Ensuring personal plans clearly define the role of house staff in offering informal learning and development opportunities.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential'. (HSCS 1.6).

3. To support young people's development and promote positive outcomes, the provider should ensure a mechanism for assessing staffing arrangements, based on the needs of young people, is in place.

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

'My needs are met by the right number of people'. (HSCS 3.15)

'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'.

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(HSCS 3.14).

And to comply with section 7 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

APPENDIX 3

[DRAFT]



Foresters House Care Home Service

317 South Road
Dundee
DD2 2RT

Telephone: 01382 436747

Type of inspection:
Unannounced

Completed on:
5 March 2025

Service provided by:
Dundee City Council

Service provider number:
SP2003004034

Service no:
CS2024000069



Inspection report

About the service

Foresters House is a residential care home for up to four children and young people. The service is provided by Dundee City Council and is located in a quiet residential area to the West of Dundee. The house is set out over one level and all people living in the service have their own bedroom with en-suite facilities. Shared spaces include a large living-dining room, a kitchen, sensory room and multi-purpose games/meeting space. The property has an enclosed outdoor garden and private wooded area to the front. Local services and transport links are within close walking distance to the service.

About the inspection

This was an unannounced inspection which took place on 04 and 05 March 2025. 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 registration information, information submitted by the service and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with four people using the service;
- spoke with ten staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with visiting professionals.

During our inspection year 2024-2025 we are inspecting against a focus area which looks at how regulated services use legislation and guidance to promote children's right to continuing care and how children and young people are being helped to understand what their right to continuing care means for them.

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 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.

Inspection report**Key messages**

Children and young people were flourishing and safer as a result of living in Foresters House.

People were cared for with compassion nurture and respect.

Trauma responsive care created an opportunity for people to recover from past experiences.

Leaders were passionate and had an inspirational vision for the service.

The combined needs of young people were well considered through a careful matching process.

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.

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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 children and young people, therefore we evaluated this key question as very good.

Children and young people were flourishing in Foresters House, and they were safer because of their care there. They benefited from consistent, skilled, and attuned staff. The team were able to use the strong relationships they had built with the young people to identify and reduce risks. Young people's needs were well understood, and this combined with a flexible, emotionally attuned and responsive approach by staff, supported young people to navigate the risks they faced, build their resilience, and recover from their experiences.

Children and young people experienced therapeutic and stable care, and the use of restraint was very rare. Instead, compassionate, and containing relationships with young people were highly effective in supporting them during difficult times. Children and young people always had access to responsible adults outside the service. The team were responsive in recognising changing needs and pro-active in responding, and positive communication with their multi-agency partners ensured people worked effectively together. Children and young people were engaged in their care in a way that was reflective of their age and stage.

Children and young people's connections to family, friends and the community were championed and carefully considered. The safe, containing relationships with their key people were supporting them to navigate difficult life events.

Some young people in Foresters were thriving in education. They received individually tailored support to participate fully in learning and maximise attainment and attendance. When access to formal learning proved difficult, the team advocated for what was best for their children and supported learning and achievement in less formal ways.

Young people had fun and the respectful care they experienced was reflected in the warm and homely environment they lived in. They were involved in all decisions about house life and were supported to engage in their care and the decisions affecting them.

High quality personal plans reflected the individual needs and wishes of young people, and underpinned the outcome focused, trauma informed and compassionate care that young people experienced.

Leaders ensured the culture was supportive and empowering. The managers modelled consistently high standards of practice and successfully championed the best possible outcomes for children and young people. There had been a concerted effort to embed reflective practice and develop the team and this had a positive impact on the outcomes for children and young people.

External managers were clear about their roles and responsibilities and effectively performed these. They played a key role in monitoring the quality of children and young people's experiences, safeguarding and improving outcomes.

Young people's transitions were minimised because of very careful matching decisions, and this supported the house to feel settled, and allowed children and young people to grow together. Leaders were clear about their roles and responsibilities and ensured that the decisions for young people to move into Foresters had a

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positive impact on the individual young people and also took into account the needs and rights of the other young people living there.

Children and young people's needs were effectively met as the sensitively considered approach to staffing ensured they were supported by the right staff with the right skills. This dynamic approach was driven by leaders who understood that children needed the adults to constantly adapt to get it right for them.

Passionate leadership, self-evaluation and improvement activities drove forward how the service was being delivered. This was centred around the aspiration for all children and young people to achieve the best possible outcomes and included a demonstrable and enduring commitment to staying in the service into adulthood.

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?	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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