

# South Lodge Care Home Service

Glenrothes

**Type of inspection:**  
Unannounced

**Completed on:**  
30 April 2025

**Service provided by:**  
Radical Services Ltd

**Service provider number:**  
SP2003002568

**Service no:**  
CS2021000117

## About the service

South Lodge is a care home, registered to care for children and young people. The property is a large detached house situated near the village of Leslie, close to the town of Glenrothes. The provider is Radical Services Limited and the service has been registered with the Care Inspectorate since June 2021.

The house is a two storey property, with young people having their own bedroom and bathroom. There is a communal living room/dining room, along with a modern kitchen area and staff space for an office and sleep-in room. There is also an outdoor area for the house.

## About the inspection

This was an unannounced inspection which took place over two days - 24 April 2025 from 09:30 to 17:30 and 25 April 2025 from 09:00 to 17:30. 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 registration information, information submitted by the service, and intelligence. To inform the inspection, we:

- spent time with young people living at the service
- spoke with six staff including managers
- observed practice and daily life
- reviewed documents
- spoke with two external professionals
- considered responses to Care Inspectorate questionnaires.

## Key messages

- Young people at South Lodge told us they felt safe, enjoying warm, caring, nurturing and respectful relationships with staff.
- The service collaborated well with key external agencies.
- Staff had a good understanding of safeguarding procedures.
- Young people were fully engaged in their care and support.
- The management team at South Lodge modelled high standards of practice based on a clear vision for the team.
- Transitions to South Lodge had been well planned.
- The service should ensure debriefs are being formally recorded.
- Quality assurance could be enhanced with a greater qualitative focus.

## 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 made an overall evaluation of good for this key question as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a significant positive impact on young people's experiences. The current staff team had made considerable progress and we have confidence that maintaining this over a longer period of time will result in consistently very good outcomes for young people. Quality Indicator 7.1 was evaluated as very good.

Young people at South Lodge told us they felt safe, enjoying warm, caring, nurturing and respectful relationships with a stable staff team within a homely environment. One young person commented "this was the best thing that could have happened to me". Staff demonstrated good knowledge of all young people and were alert to indicators of concern, guided by risk assessments and individualised safety plans. Young people were meaningfully participating in creating these flexible plans alongside staff who listened and responded to their needs.

Young people had at times been involved in high risk behaviour, but strategies to manage and minimise future risks were established through valuable collaboration and multi-agency review with key external agencies.

The service was effectively advocating on behalf of young people, and consistently encouraged them to access independent advocacy services at key times to support their needs and rights. Additionally, staff responded sensitively to address any discrimination that young people may experience, ensuring their identity was protected.

Staff had a good understanding of safeguarding procedures, with the service demonstrating their commitment to implementing best practice in relation to child protection. This included ensuring that key agencies were alerted to concerns; one social worker commented on the positive and timely communication from the service.

The service was committed to a culture and focus on least restrictive practices, prioritising individualised de-escalation strategies, supported by the positive relationships between young people and staff. The organisation had introduced a new behaviour support framework to further promote a therapeutic model of managing behaviours of concern. Additionally, the importance of staff fully understanding the impact of trauma was recognised, with future mandatory learning and training opportunities in place.

Young people were fully engaged in their care and support; this included being central to making improvements to the house, having their voices heard at meetings, taking an active role in staff interviews and successfully supporting the development of South Lodge as a service on a wider scale.

Young people were supported to be involved in an impressive variety of activities, experiencing some exciting opportunities to broaden their horizons and identify interests they wanted to pursue further. At times when young people were less involved in activities or structure, staff continued to encourage and offer suggestions based on their knowledge of the young people.

Health needs were prioritised for young people with the service collaborating with a variety of external partners in addition to primary health services. There were also positive examples of South Lodge advocating on behalf of young people to support health needs to be met more comprehensively.

The organisation benefits from an embedded therapy team to provide additional wellbeing support and the staff team had recently introduced a range of therapeutic activities to promote young people's mental health.

Young people were encouraged to be safely and meaningfully connected to important people, including family and friends, and there was encouragement to link in with local community groups. This was supporting them to maintain their identity and reduce feelings of isolation.

Young people's attendance at school varied at times; however, due to flexible and personalised timetables, young people were being supported to build on individual strengths and develop skills. This flexibility supported both academic and practical learning opportunities.

Care planning documents, including the various risk assessments, provided valuable information to support staff to understand the needs, strengths, likes and dislikes for young people. The organisation had recently introduced an alternative process to ensure care planning was more inclusive for young people and we look forward to the progression of this model.

The management team at South Lodge modelled high standards of practice based on a clear vision for the team, seeking the best possible outcomes for young people whilst emphasising the importance of staff wellbeing. Strong leadership had previously not been consistent, but we are confident that the management team has subsequently laid effective foundations to make sustained progress for consistently positive outcomes for young people.

Transitions to South Lodge had been well planned, with various information sharing opportunities to support transition planning. This included the introduction of a welcome video to introduce young people to South Lodge prior to their arrival. The inspection process highlighted where this planning process could be further enhanced to fully support young people moving to South Lodge.

There was a strong commitment at South Lodge to ensuring adequate staffing levels were in place, supporting young people to benefit from a consistent staff team. Staffing assessments considered the skill set and experience of individuals. The service planned to enhance this by incorporating potential gaps in staff availability, whilst matching the skill set of staff to particular activities identified by young people.

Young people benefitted from a staff team that had undertaken the required training for their role, with a variety of training and development opportunities. This included training that was specific to the needs of the young people. The organisation had plans in place to enhance their programme of training for the whole staff group to strengthen practice in relation to therapeutic and trauma informed care. Staff development was also supported by regular supervision and the recent introduction of reflective practice space opportunities, highlighting the ambition of the service to support staff practice alongside improving outcomes for young people.

The service had detailed recordings of significant events, with oversight from the manager and external manager, supporting analysis to inform future care planning. To fully inform practice, care planning and risk assessments, this process could be strengthened by ensuring staff are identifying specific effective/ ineffective strategies; supporting the whole team to develop. Additionally, although staff felt supported following incidents, there was no formally recorded individual debriefing records; again this will support learning and capture areas of improvement (area for improvement 1).

There were a number of valuable quality assurance processes in place and the service demonstrated a commitment to improvement through the introduction of various self evaluation documents. To further evaluate the experiences of young people, quality assurance processes could be enhanced by external management providing an additional level of oversight, ensuring a greater qualitative focus (area for improvement 2).

## Areas for improvement

1. To support ongoing improvement and children's wellbeing, the provider should ensure that staff debriefing is being formally recorded following incidents.

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 support continuous improvement and evaluation of young people's outcomes, the provider should ensure external management have enhanced oversight of the service with a qualitative focus.

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 requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 30 August 2024, the provider must ensure young people are being kept safe.  
In particular you must:

- a. ensure indicators of concern are promptly recognised and effectively responded to
- b. ensure risk management measures are established
- c. collaboratively agree risk management measures along with relevant other agencies.

This is in order to comply with Regulation 3 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).

**This requirement was made on 10 July 2024.**

#### Action taken on previous requirement

Staff demonstrated their ability to recognise and respond to indicators of concern, with child protection and child wellbeing concerns being appropriately shared as required. Additionally the service has risk management plans and safety plans to support specific needs, collaboratively done with other agencies.

**Met - within timescales**

#### Requirement 2

By 30 August 2024 the provider must ensure young people are experiencing care and support they require.  
In particular, you must:

- a. ensure that comprehensive admission and matching processes, and ongoing assessments, are being used to accurately and correctly determine the capability of the service to meet the needs of the young people coming into the service
- b. ensure young people are only admitted to the service when matching and admission processes evidence that the needs of young people can be met
- c. ensure that matching and admission processes evidence that the additional external supports required to meet the needs of children and young people are in place.

This is in order to comply with Regulations 3 and 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).

**This requirement was made on 10 July 2024.**

### Action taken on previous requirement

The service has adapted their admissions and matching documents, and young people's transition to South Lodge was supported by the service ensuring that key professionals and family members were consulted, in addition to ensuring the required documents were shared.

Additional training has been put in place prior to young people arriving at the service with referrals to specialist agencies made in advance.

### Met - within timescales

## Requirement 3

By 30 August 2024, the provider must ensure young people are benefitting from a service that has an effective development plan which improves and sustains good outcomes for children and young people. In particular, you must:

- ensure the development plan identifies all the necessary improvements required for the service to meet the needs of children and young people
- develop and enhance the service development plan to have SMART objectives which reflect the urgency of improvements required
- implement the improvements identified and then review their effectiveness.

This is in order to comply with Regulation 3 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).

**This requirement was made on 10 July 2024.**

### Action taken on previous requirement

The service has live documents that are referred to and updated as required, including valuable documents in self evaluation. This inspection highlighted that some of the actions could be more SMART.

### 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

To ensure young people's rights, views and choices are supported, the provider should have independent advocacy for all young people from the initial stages of placement.

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

I am supported to use independent advocacy if I want or need this (HSCS 2.4).

**This area for improvement was made on 10 July 2024.**

#### Action taken since then

The service has made significant attempts to secure an individualised advocacy service and young people are encouraged to make use of the service as required.

#### Previous area for improvement 2

To support young people's wellbeing, the provider should ensure all health needs are fully known so that appropriate and specialist services are put in place in a timely manner.

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).

**This area for improvement was made on 10 July 2024.**

#### Action taken since then

Multi agency meetings prior to young people coming to South Lodge supported identification of any specialist health support required, with support in place from the in-house psychology team.

#### Previous area for improvement 3

To support young people's progress into adulthood, the provider and service should ensure all relevant policies reflect their commitment to providing continuing care. This should include, but is not limited to policies, aims and objectives, admissions guidance and placement agreements.

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

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

This area for improvement was made on 10 July 2024.

Action taken since then

The organisation has reviewed their continuing care policy and the service statement of purpose now includes the commitment to continuing care.

Previous area for improvement 4

To ensure young people are cared for and supported by an appropriately skilled staff group at all times, the provider should strengthen their staffing needs assessment.

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

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

This area for improvement was made on 10 July 2024.

Action taken since then

This is now in place, taking account of appropriate staff pairings dependent on skills and knowledge. This inspection has commented on how this could be strengthened further..

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?	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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