

Newlands Road RCU Care Home Service

Glasgow

Type of inspection:
Unannounced

Completed on:
6 May 2025

Service provided by:
Glasgow City Council

Service provider number:
SP2003003390

Service no:
CS2003001063

About the service

Newlands Road RCU is a care home service for children and young people, provided and managed by Glasgow City Council. Newlands Road RCU is based in purpose built premises in a residential area of Glasgow. The service is registered to provide care for up to eight children and young people aged between 10 and 20 years old.

The house provides spacious and modern facilities. Each young person has their own bedroom with an ensuite bathroom. There are two shared lounges and a large kitchen/dining room. There is an enclosed garden which all children and young people have access to.

About the inspection

This was an unannounced inspection which took place on 29th April 2025 between 11am and 9.30pm, and 30th April 2025 between 10am and 3pm. 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 five young people using the service and one member of their family
- Spoke with eight staff and management
- Observed practice and daily life
- Reviewed documents

Key messages

- Young people felt cared for by nurturing and compassionate staff.
- Staff had a strong relational based approach which resulted in young people experiencing meaningful connections to the adults providing their care.
- There was a strong promotion of mental and physical health as well as engaging with important appointments. This resulted in young people feeling their wellbeing was being prioritised.
- Care planning and risk assessments were robust, child centred and supported good outcomes for young people.
- There was strong leadership in the service with a good level of oversight which promoted best practice.

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.

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

5 - Very Good

An evaluation of very good has been awarded to this key question as a number of strengths were identified which supported positive outcomes for children and young people.

Young people were protected from harm and were kept safe within the house. Staff members had a strong focus on safeguarding and understood their responsibility and accountability to the young people. Staff had a very good understanding of children's rights with young people being confident that staff were able to represent their voice when needed. A Children's Rights Worker regularly visited the house to meet with the young people.

Young people benefitted from nurturing and respectful care from a trauma informed staff team. Staff were understanding of young people's experiences and looked beyond behaviour to understand the need that was being communicated. Physical restraint was not used in the service as there was recognition that this was not the best way to support the young people. There was a strong emphasis on relational based practice which was evident in the interactions between staff and young people.

Mental and physical health was strongly promoted in the service. Staff were actively engaging young people in conversations about managing their health and wellbeing. Healthy eating was a strong focus, which was supported by the appointment of a nutritional support worker in the house. This was a new role that had just been created therefore we look forward to seeing the impact of this on future inspections.

Young people were engaging well in education and work placements. Where young people were struggling to engage with education, creative solutions were being sought to support their academic achievement or additional opportunities. Young people were involved in activities in the community and were included in holidays and fun days out with the staff team.

Care planning was SMART (specific, measurable, achievable, relevant and timebound) and tailored to the individual young person. Risk assessment documentation was child centred and robust which supported young people's engagement in care planning and decision making. This was empowering young people to achieve their goals as well as consider their future possibilities.

There was a positive culture within the service with high standards of care being role modelled to achieve best practice. There was a good level of managerial oversight ensuring that procedures were being followed to a high standard.

Where young people had moved on from or had come to live in the service, the transition had been well managed and progressed at the pace which was led by the young person.

Staffing assessments were completed well and reflected the needs of the young people as well as the service holistically. This meant that the correct number of staff were available to care for the young people.

Staff were supported well in their role and felt confident and valued within the service.

The managers and staff had a strong understanding of The Promise which was evident in their practice and in the operation of the service.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 31st July 2024, the provider must ensure that children and young people receive quality care and support in line with their individual wishes. To do this, the provider must, at a minimum;

- a) ensure that care planning decisions are developed in consultation with children and young people to reflect their individual choices and preferences,
- b) transitions should be clearly planned and set a pace which is right for the individual child or young person.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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, which state Inspection report Inspection report for Newlands Road RCU page 5 of 12 that: 'I am fully involved in assessing my emotional, psychological, social and physical need at an early stage, regularly and when my needs change' (HSCS 1.12) and 'My future care and support needs are anticipated as part of my assessment' (HSCS 1.14).

This requirement was made on 17 April 2024.

Action taken on previous requirement

The service has developed their own management of care plans, which allows the young people to take ownership of their individualised plan. Young people have their own folders and choice of how they want this to visually be. Their voices are central to the plans.

The service has been involved in a pilot of a new risk assessment template for young people. The template has a strong focus on the voice of young people which is used to reflect and inform the assessment.

There have been two transitions managed within this inspection period. Both were well managed, with the young person directly involved in decision making and the transition being managed at a pace that was led by the young person.

We have evaluated that this requirement has been met.

Met - outwith timescales

Requirement 2

By 31st July 2024, the provider must ensure the safety and welfare of children, young people and staff with a clear assessment of risk across the whole service.

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

- a) ensure risks within the service, including relating to staff, are identified and recognised with effect mechanisms in place to manage and report risk,
- b) learning is identified from previous incidents which supports future development and prevents reoccurrence,
- c) ensure improvement plans identify areas to support development and address areas of risk.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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, which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); '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 17 April 2024.

Action taken on previous requirement

All young people had a robust and well analysed risk assessment, which was also reflected in other documentation such as staffing needs assessment, matching assessments and risk management discussions. Incidents were managed well, with staff de-briefs and management oversight. A clear and robust development plan was in place for the service which included individual coaching and transparent reflection of service need. Training plans reflected the need of the staff and service based on identified current and future need.

We have evaluated that this requirement has been met.

Met - outwith timescales

Requirement 3

By 18 October 2024, the provider must ensure that children and young people are kept safe through quality risk assessment and management processes and practices.

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

- a) review all current risk assessments and be satisfied that they reach a standard that supports good risk managements
- b) progress with plans around the development of the risk assessment format to ensure that it is an accessible and effective working risk tool
- c) review the risk management quality assurance processes and include notifications, de-briefs, and risk assessment plans
- d) provide training to all staff on risk analysis and ensure that this is reflected in the quality of risk assessments

e) provide evidence to the Care Inspectorate that this work has been completed and has resulted in quality risk assessment management and practices.

This is in order to comply with: Health and Social Care Standard 4.11: I experience high quality care and support based on relevant evidence, guidance and best practice. Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011 No. 210 Social Care).

This requirement was made on 24 June 2024.

Action taken on previous requirement

The service has been part of a pilot developing new risk assessments. These were clear and robust. Regular update and good analysis of risk, ensured the documents reflected current situation. Robust risk management procedures were implemented within the service which ensured staff de-brief and notifications were completed in a timely manner.

Training had been delivered to staff on risk assessment and analysis which resulted in staff having an increased understanding of management of risk.

We have evaluated that this requirement has been met.

Met - outwith 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

The service should ensure that staff, including the manager, have regular opportunities for good quality supervision in line with their supervision policy.

This is to ensure care and support is consistent with the Health and Social Care Standards 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' (3.14), and with the SSSC's Code of Practice for Employers of Social Service Workers, which state that the employer will 'provide effective, regular supervision to social service workers to support them to develop and improve through reflective practice' (3.5).

This area for improvement was made on 17 April 2024.

Action taken since then

All staff had regular supervision in line with the supervision policy. Staff were well supported through formal and informal support and supervision.

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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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