

Springfield House Care Home Service

Cupar

Type of inspection:
Unannounced

Completed on:
21 May 2025

Service provided by:
Applied Care & Development Limited

Service provider number:
SP2003003432

Service no:
CS2013317845

About the service

Springfield House is a care home service registered to care for up to nine young people. The provider is Applied Care and Development Limited (ACAD).

The service is situated in a rural area near Cupar in Fife and operates from two premises, Springfield House and Ladeddie Steading. Springfield House is a detached, two-storey former farmhouse. It has five bedrooms, four of which are en suite, one bathroom, one shower room, a living room, a dining room, conservatory and kitchen.

Ladeddie Steading is a single-storey house and has five bedrooms with en suite, living room, dining room kitchen and an internal courtyard area. Ladeddie Steading also has a separate annexe which is not currently in use. Both houses are in close proximity and have their own office, parking, outbuildings and extensive gardens.

About the inspection

This was an unannounced inspection which was carried out by two inspectors from the Care Inspectorate. The inspectors visited on 14 May and 15 May 2025 between 13:00 and 19:30. Feedback was provided on 21 May 2025.

To prepare for the inspection we reviewed information about the service. This included previous inspection findings and registration information. We also reviewed information submitted by the service and information gathered throughout the inspection year.

To inform our evaluation we:

- met with six young people using the service and spoke to three family members
- spoke with six members of staff and management
- spoke to representatives from social services and education
- reviewed survey responses received from staff and external stakeholders
- observed practice and daily life
- reviewed key documents.

Key messages

- Staff and additional senior staff had been recruited to support children and young people's care.
- Staff spoke about the importance of relationships with children and young people.
- Staff felt supported by the leadership team, and quality assurance processes ensured ongoing evaluation of children and young people's outcomes.
- The service had continued to improve its admissions and matching assessments for children and young people.
- Ongoing development opportunities were required to ensure rights-based, trauma- informed care was embedded in practice.
- The service had continued to improve its care planning documents, however these required to be SMART (specific, measurable, achievable, relevant and timebound) to support positive outcomes for children and young people.

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

This inspection considered our key question 7: How well do we support children and young people's rights and wellbeing? This key question has two quality indicators associated with it. We evaluated the key question as good, as there was a number of important strengths which were outweighed by areas for improvement.

Observations of children, young people and information from family members indicated that young people felt safe in the service. Staff received child protection training and enhanced child protection training was planned for managers. We found that protection training could be improved further, by ensuring all staff receive adult protection training.

Improved practice around incident recording had been sustained. This included undertaking incident analysis which informed preventative, risk assessed practice. This supported oversight and reduced restrictive practices.

There was a varied level of staff skill and experience within the team, and trauma-informed care was not yet embedded in staff practice. We found that strategies used to support children and young people could be developed to support the individual needs of young people (see area for improvement 1). It was pleasing to see that the service had identified this as an area for development.

Staff had received thorough inductions, commenced training and regular opportunities for staff reflection were facilitated. We look forward to seeing the impact this has in supporting an understanding of young people's needs.

A high turnover of staff had impacted on the service's ability to provide stable care for the children and young people, and the staff team recognised the impact this had including the ability to develop trusting relationships. Staff spoke about the importance of relationships with young people, in order to support their emotional wellbeing. We found that staff showed compassion and care to young people.

Young people's individual talents and interests were promoted, and involvement in activities was supported by staff. This ensured young people had the opportunity to create lifelong memories and try new experiences. It was pleasing to see that plans to continue to develop the environment in both houses had continued including new living room furniture and a new fitted kitchen.

All young people had access to independent advocacy which included specialist arrangements to ensure young people could meaningfully access this. Children and young people's views were sought, however, the service could develop its own resources and training further to support children and young people's communication and participation. Understanding around children's rights and how to support young people's rights, could be developed further (see area for improvement 1).

Staff supported young people to maintain connections to people important to them. This included supporting family relationships, facilitating transport and family regularly visiting.

Young people were supported to access services including health and education. Some young people were supported to go to school and young people were encouraged to achieve.

All young people had care planning and risk assessment documents. It was pleasing to see that these had been developed since the last inspection. This included improving recording and quality assurance processes which improved communication within the staff team and consistency of care for young people. Care planning documents could be developed further by being SMART (specific, measurable, achievable, relevant, timebound). In order to support therapeutic care, care planning documents should contain clear strategies used to support young people (see area for improvement 2).

The service supported continuing care, and young people's transitions to Springfield House, to support successful outcomes for young people. This included visiting young people and their family, and getting to know them prior to their arrival. The service had completed impact assessments for all young people. These were individual to the young person and informed how young people would be supported, and how staff would meet their needs. We made an area for improvement in our report dated 11 July 2023 in relation to admissions and matching. This area for improvement has now been met.

Staff commented that they felt supported by the leadership team. All staff reported that they benefited from regular advice and guidance through effective supervision, team meetings, observations and opportunities for reflection. Staff training was tracked, identified and development days held, relevant to the young people's needs.

Quality assurance processes were in place to monitor service delivery. These were detailed and included management and external management audits which informed the service's development plan. This meant that there was a continuous evaluation of young people's outcomes, experiences and their setting.

Areas for improvement

1. To support children and young people's wellbeing, the provider should ensure that staff have learning and development opportunities and embed this in practice. This should include but is not limited to, children's rights and trauma.

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).

2. To support the achievement of positive outcomes for children and young people, the provider should ensure that the recording of care plans comply with SMART principles. This should include, but not be limited to, the clear recording of specific actions, these should be realistic, measurable and have an identified timeframe for completion.

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).

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 to ensure young people have the service that is right for them, the provider should ensure that decisions about admissions are fully informed by a robust, clearly evidenced assessment and matching process.

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) and "I am in the right place to experience the care and support I need and want" (HSCS 1.20).

This area for improvement was made on 11 July 2023.

Action taken since then

Young people's transitions to Springfield House were supported, including visiting children and young people, and getting to know them prior to their arrival. The service had completed impact assessments for all young people. Impact assessments had continued to be developed to include individualised information to support children and young people's care.

This area for improvement has now been met.

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
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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