

Phoenix Futures National Specialist Family Service, Harper House Care Home Service

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Saltcoats
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Type of inspection:
Unannounced

Completed on:
2 July 2025

Service provided by:
Phoenix House Trading as Phoenix
Futures

Service provider number:
SP2003003595

Service no:
CS2022000284

About the service

Phoenix Futures National Specialist Family Service, Harper House is registered to provide a care service to a maximum of 25 adults (20 single parents and/or up to 5 couples) with substance misuse issues. The provider is Phoenix House Trading as Phoenix Futures.

The service offers a unique, family-focused programme of interventions. The programme is available for between 12 and 26 weeks depending on need and brings together three main elements; therapeutic interventions, parenting and childcare each responsive to the individual needs of each family. Children have access to the nursery, which is registered separately with the Care Inspectorate. People using the service are referred to as community members.

The service is based in Saltcoats, within a spacious three storey accommodation, which is split into four units each containing bedrooms and communal living areas. There is also two self contained flats. There is access to enclosed garden spaces.

About the inspection

This was an unannounced inspection which took place on 30 June, 1 and 2 July 2025 between the hours of 07:45 - 16:20. 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 eight people using the service
- spoke with six staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Staff were responsive to people's needs with a caring and professional approach.
- The service operates a very good therapeutic community model that is designed to support individuals on their recovery journey.
- People received very good access to health professionals.
- There were good quality facilities to support people in their recovery journey.
- Staff were well trained in trauma informed practice, in order to support people dealing with trauma.

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 people's wellbeing?	5 - Very Good
How good is our setting?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support

We saw positive, encouraging interactions from staff towards community members. Staff were responsive to people's needs with a caring and professional approach.

The service operates a therapeutic community model which offers a structured schedule of work groups, that are designed to support individuals on their recovery journey. Community members take part in a daily programme that promotes the development of life and social skills through engagement in work and activity routines.

Community members specifically spoke of the significant impact the parenting support group had on assisting them to build positive relationships with their child. Not only positively impacting the parent but also the child's wellbeing.

The service employs a mental health nurse who is based in the service. Community members spoke about how valuable it was to have direct access to mental health provision at this stage in their recovery, significantly impacting their mental health and wellbeing in a positive way.

Each community member has access to various health professionals. The service has a local arrangement with a GP practice, where community members and their children are registered. A designated GP from this service visits each week, providing health care and allows for people to detox safely. Each community member had a comprehensive assessment prior to admission which was reviewed regularly with the person.

We observed staff members extensive knowledge of the people they support, through their communication with each other. They were able to identify where community members were struggling and reasons for this. Staff ensured that each community member was fully supported by being trauma responsive, by recognising the impact trauma may have had on the person, resulting in their behaviour.

Community members also have access to a small gym on site, as well as a walking group and meal planning group, all of which encourages a healthy lifestyle. Community members could also access local amenities such as the local leisure centre with both parent and child having access to leisure passes, once further into the programme.

The service had good robust medication management systems in place, ensuring people are receiving the right treatment for them at the right time. As required medication protocols and recording evidence were missing, however the service was addressing this during the inspection.

How good is our setting?

4 - Good

We found important strengths in aspects of the facilities provided and how these supported positive outcomes for people, therefore we evaluated this key question as good.

Quality Indicator: 4.1 People experience high quality facilities

The service is situated on large grounds with ample garden space for community members and their children to utilise. This includes raised beds for growing vegetables. Community members are responsible for maintaining these areas as part of their work whilst living in the service.

They also had access to the door code to let themselves in and out of the building unhindered.

The building was clean, free from clutter and had a homely environment. Community members had their own bedrooms with ensuite, providing a private space for them to be with their family. There are also four communal living areas with kitchen and dining facilities and access to televisions and toys for children. These areas help to reduce any isolation and enable a supportive environment between community members.

There was access to communal bathrooms as ensuites only had showers, giving people a choice of bathing. There was a treatment room, sensory room, small gym and group work rooms, which benefit people's health and wellbeing.

Some areas of the building had started to show signs of wear and tear. The service had a maintenance and refurbishment programme in place to address these issues and ensure that a high standard environment is maintained.

We did however discover that the lift providing access to all floors was out of order and had been for two months. This could have had potential impact on parents with buggies and prams and those who may have had mobility issues. The service had developed a contingency plan to mitigate the impact however, the service has a responsibility to report significant equipment failure to the Care Inspectorate, which on this occasion did not happen until prompted. (See Area for Improvement 1).

There was ample stock of cleaning materials and personal protective equipment. Staff were able to demonstrate their knowledge around infection prevention control practices and the service had daily cleaning schedules, to reduce the risk of infection and cross contamination.

The service also had a comprehensive business continuity plan in place for managing adverse events such as outbreak and staff shortages.

Areas for improvement

1. The provider must improve their practice of informing the Care Inspectorate of any notifiable events as detailed in 'Adult care services: Guidance on records you must keep and notifications you must make.'

This ensures care and support is consistent with the Health and Social Care Standards, which state: "I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected." (HSCS 4.18).

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 the improvement journey, the service should continue to develop and embed their quality assurance system. This should include but not be restricted to:

- a) Devising an audit schedule to clearly detail the expectations in relation to quality assurance activities.
- b) Internal quality assurance systems effectively identify any issues which have a potential negative impact on the health and welfare of people supported and ensure these are timeously addressed.
- c) Quality audits and action plans, including care planning and medication, must be accurate, up to date and ensure they lead to the necessary action to achieve improvements without delay.
- d) Systems for the monitoring of practice such as supervision, appraisal and practice development are implemented in accordance with organisational policies.
- e) Service management have a clear overview of staff training including identified gaps.

This is to ensure 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 26 June 2023.

Action taken since then

We saw evidence of an audit schedule that was used by the registered manager. The organisation has a system in place which assists with the audit process and we found that audits of care plans and medication were robust. The registered manager had a clear overview of staff training. The service had a recent internal audit completed by the quality compliance manager and quality officer.

Area for improvement has been Met.

Previous area for improvement 2

The provider must ensure that staff access training appropriate to their role and apply their training into practice to promote the safety and wellbeing of people supported. To do this the provider must, at a minimum:

- a) Ensure staff receive core training, as directed by the needs analysis - including stress/distress, adult support and protection, service specific training and leadership training.

- b) Monitor staff competence through training, supervision, and direct observations of staff practice.
- c) Keep accurate records of all training completed to evidence that staff have the required skills, knowledge and qualifications for their role.

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, are able to reflect on their practice and follow their professional and organisational codes." (HSCS 3.14)

This area for improvement was made on 26 June 2023.

Action taken since then

Although not all staff had completed mandatory training, a significant number had and those who had not were going through their probationary period or this was their refresher training. We saw evidence of staff competency checks. Accurate records of staff training were in place and this was audited monthly by the registered manager.

Area for improvement has 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 people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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