

Torcroft Care Home Service

Bathgate

Type of inspection:
Unannounced

Completed on:
16 March 2026

Service provided by:
West Lothian Council

Service provider number:
SP2003002601

Service no:
CS2007150524

About the service

Torcroft is a Care Home provided by West Lothian Council and is registered by the Care Inspectorate to provide care to a maximum of six children and young people.

Torcroft is situated in a residential area in Whitburn, close to local amenities and public transport routes. The building is all on ground level. It comprises of six bedrooms, a living room, kitchen, and an arts and multi-use room.

About the inspection

This was an unannounced inspection which took place on the 11 and 12 March 2026. The inspection was carried out by an 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 people using the service
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with professionals.

Key messages

- Young people generally felt safe, though the house could feel loud at times. Young people felt supports from staff differed, the service was working on this.
- Improved risk documentation led to more predictable responses during incidents, though post incident reflection still needs strengthened.
- Staff had better protection awareness, but some notifications were delayed and quality assurance processes need improved.
- Young people felt supported in relationships, advocacy and family contact, and environmental improvements helped them feel valued, though staff rotation continued to affect relationship consistency.
- Leadership strengthened culture and practice, and staff felt well supported.
- External visits improved oversight of practice and the environment.
- Matching processes had improved to better consider the impact on existing young people.
- Quality assurance and staffing assessment developed, but wider improvement planning and performance management still need strengthened.

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.

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. Several important strengths were evident and these just outweighed weaknesses. Some improvement was needed to maximise wellbeing and outcomes for young people.

Quality Indicator 7.1 Children and young people are safe, feel loved and get the most out of life.

Young people we spoke with told us that they felt safe most of the time. There were times that the house could feel very loud and unsettling, young people told us, 'Staff try their best to help with this'. Some reported differences in how supported they felt by staff. The provider was aware of this and had begun taking steps to address it. **(We will discuss this further under Quality Indicator 7.2)**

The service had improved its risk associated documents. Where clear strategies were in place, young people benefited from more consistent and predictable responses from staff. We advised the service to continue to strengthen these processes, including further developing post-incident debriefing, to ensure that reflection leads to updated strategies that reduce the likelihood of incidents reoccurring. **(See Area for Improvement 1)**

Staff has an improved understanding of their roles and responsibilities in relation to child and adult protection processes. During inspection, we found that some notifications to external agencies had not been made within expected timeframes due to issues with the service's IT systems. The service had identified this and had begun taking steps to resolve this. We advised the service to strengthen their quality assurance processes to ensure notifications are submitted accurately and on time, and that the records clearly reflect actions taken and decision making. **(See Area for Improvement 2)**

Young people knew they knew how to access advocacy if they needed it. Recent changes to the allocated advocacy worker for the service meant that many young people had not yet formed a relationship with them, which limited the continuity of support available. Young people felt that staff and managers within the service knew and supported their wishes too.

The provider had made improvements to the building at Torcroft and had plans in place for further development. Young people and staff told us that these changes were long overdue and helped the house feel more homely, including faster repairs when damages occurred. Leaders had worked hard to progress these improvements, and this contributed to young people feeling more valued and respected.

Young people benefited from a staff team with improved trauma informed awareness. They had positive relationships with most staff but told us they did not like when staff rotated between houses, as this meant they sometimes missed the relationships they had built. The provider was aware of this and considered how staffing arrangements could be varied to respect young people's wishes, however, this remained an aspect of practice that young people consistently reported they were unhappy with. **(See Area for Improvement 3)**

The service had further developed its care planning processes. All young people had plans in place, and staff had improved understanding of these. Whilst there were steps outlined to help young people achieve their goals, some plans lacked sufficient detail about what was expected from staff to support progress. Strengthening this level of detail would help managers assess individual and group progress more effectively, as well as identify barriers to goals being achieved.

Educational outcomes for young people were mixed. For some, attendance at school had been a long-standing challenge. The service was working closely with education partners to improve young people's access to learning, and where appropriate opportunities for work experience.

Young people's right to family life was respected. They told us that they were supported to stay in touch with people who are important to them. There were examples of staff helping young people to build positive memories with their families, something they told us they valued greatly, which contributed to their sense of belonging and connection.

Quality Indicator 7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights.

The service's internal and external management team had worked hard to develop the culture and practice within Torcroft. Staff told us they felt well supported and received regular staff supervision.

External management arrangements were in place, including house visits to assess the environment and observe practice. This strengthened oversight of the needs of the service and young people.

The service had improved its matching processes for new young people coming to the service. This meant there was greater consideration of how potential placements might impact the young people already living there. This reflected the provider's commitment to getting things right and improving outcomes for young people.

Quality assurance processes were in place and were often effective at identifying issues, such as gaps in medication recording. Where issues were identified, managers communicated with the team to address them. However, some aspects of practice were more difficult to address at a group level. We advised the service to develop performance management systems that allow leaders to track individual practice, training needs, and development more effectively. **(See Area for Improvement 4)**

The service had developed a new process for assessing staffing level deployment. This enabled leaders to consider the individual, social, emotional, and behavioural needs of young people, as well as the needs of the group. This template alongside individual performance management arrangements will further support the service to ensure young people consistently receive the right support, at the right time from a well-trained, supported and developed staff team.

The provider had a development plan for the service; this focused heavily on previous inspection findings. Whilst it was positive to see a clear plan outlining how the service would address these, there were broader areas of improvement where the service would have benefited from a similar level of structured planning. Developing a more comprehensive improvement plan would support a more proactive approach to strengthening practice and improving outcomes for young people.

Areas for improvement

1. To support the young people's wellbeing, the service should review its post incident debrief and support. This is to help reduce the likelihood of incidents reoccurring through reflection on staff supports and responses.

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)

2. To support the young people's wellbeing, the service should review its quality assurance measures relating to incidents, accidents, and protection concerns to ensure that notifications to external agencies are made within expected timeframes and include pertinent detail.

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

'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)

3. To support the young people's wellbeing, outcomes, and choice the service should review their staffing rotation arrangements ensuring that any provision benefits young people using the service.

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

'I am supported and cared for by people I know so I experience consistency and continuity.' (HSCS 4.16)

4. The service should further strengthen its performance management structures for staff to ensure consistency, and support improvement in staff practice within the service. .

This should include, but is not limited to:

a) ensure that these are routinely implemented at all levels, and that senior managers have oversight of this.

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

'If I have a carer, their needs are assessed and support provided' (HSCS 4.26).

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

Requirements

Requirement 1

By 31 March 2025 the provider must improve the environment within the service, to ensure the placement meets the young people's needs and keep them safe.

To do this, the service must, at a minimum, but not exclusive to:

- a) Ensure that identified issues with the drainage system within the service are addressed and resolved with the highest priority. The provider must inform Care Inspectorate of progress relating to this issue.
- b) Ensure that all damages or repairs are repaired swiftly ensuring impact on young people is minimal. Dates of completion should be noted to allow for assessment of completion timeframes.
- c) Create a building improvement plan, which identifies planned works, and upgrading as identified by the service. This should include programme of paint works in public rooms, and bedrooms for young people.

This is 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).

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.22).

This requirement was made on 15 November 2024.

Action taken on previous requirement

Internal and external managers took swift action to escalate the concerns relating to the environment. Extensive work was undertaken to address the drainage issue, and the necessary repairs have been completed. The provider has been progressing plans for future improvements across all their care homes for children and young people, and this has now been formally agreed and signed off.

Ongoing decorative and maintenance work is still being carried out, with close oversight from external managers. There is recognition that more significant improvements will be welcomed once they are implemented.

Met - within timescales

Requirement 2

By 31 March 2025 the provider must ensure the correct numbers, experience, and skills mix are working within the service at all times. This should include but is not limited to:

- a) Recording their assessment of staffing needs in accordance with 'Records that all registered care services (except childminding) must keep and guidance on notification reporting.' This should also include management time and availability.
- b) Undertaking a retrospective training needs analysis of the staff team and managers. Ensuring that all staff have the skills and training required to fully undertake their role and support the young people currently residing in the service. Copy of this assessment should be shared with the service's action plan, along with steps taken to address any gaps.
- c) Considering their ability to meet the needs of new and existing young people prior to new young people coming to the service. This should include assessment of staffing levels, and training needs.

This is 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).

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

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

This requirement was made on 15 November 2024.

Action taken on previous requirement

The service developed a new system for assessing its staffing needs. This was appropriately informed by collective training and development requirements, as well as staffing deployment needed to meet the social, emotional and behavioural needs of young people.

Whilst this was a positive development this inspection identified that the individual performance of staff should be further strengthened. As a result, an area for improvement was made.

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 support the young people's wellbeing, outcomes, and choice the service should review their care planning, and risk assessment processes. This should include but is not limited to:

a) Ensuring that all care plans and risk associated documentation is fully reflective of the needs, views and wishes of young people.

b) Ensuring that goals are SMART (specific, measurable, achievable, realistic and timely). These should be reflective of young people's words, and should clearly describe the supports required to achieve these.

c) Ensuring that staff are fully aware of their roles in supporting young people, and that quality assurance systems ensure that these are regularly reviewed and updated to include relevant information.

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 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)

And

'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 15 November 2024.

Action taken since then

Significant work had been undertaken to help develop care planning and risk assessment processes. This included clearer expectations of the keyworker role, helping to improve consistency of what young people experience from their key working team.

Where goals and risks were well defined and clearly outlined what was expected from staff, we found stronger awareness and more consistent practice. However, this was not evident across all goals, and the service should continue to develop this area of practice.

Pleasingly, the service is engaged in an improvement project that will focus specifically on this area, and we look forward to seeing the developments this brings.

Previous area for improvement 2

To support the young people's wellbeing, outcomes, and choice the service should review their staffing rotation arrangements ensuring that any provision benefits young people using the service.

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

'I am supported and cared for by people I know so I experience consistency and continuity' (HSCS 4.16).

This area for improvement was made on 15 November 2024.

Action taken since then

The service acknowledge that this area of practice remains underdeveloped. There is awareness that this has impact young people, so case by case consideration is given to minimise any adverse effects.

The provider recognises knows that future staffing arrangements will need to change as service developments progress over the coming year, and they intend to give this greater attention. As a result, this area for improvement will be repeated.

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	4 - Good

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