

82 Main Street Care Home Service

Biggar

Type of inspection:
Unannounced

Completed on:
10 June 2025

Service provided by:
Greenleaf House Co Ltd

Service provider number:
SP2018013227

Service no:
CS2024000404

About the service

82 Main Street (Clay Cottage) is a care home service provided by Greenleaf House Co Ltd. The service is registered to provide a care service to a maximum of one young person. The service has been registered with the Care Inspectorate since October 2024.

The house is spacious, with a large living room, dining/kitchen and garden. The house is located in a small village in a rural setting with close proximity to amenities.

About the inspection

This was an unannounced inspection which took place on 4 June, 10:00-17:00 and 5 June 2025, 10:00-17:00. 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 one young person using the service and one family member
- spoke with four staff, the house manager and senior management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- The house did not have an established consistent staff team in place.
- Staff were motivated and committed.
- Young people experienced nurturing compassionate care.
- Young people saw the people that were important to them.
- Care Plans and risk assessments were not Specific , Measurable, Achievable, Realistic Timely (SMART) they lacked consistency and analysis.

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

Quality Indicator 7.1: Children and Young People are safe feel loved and get the most out of life.

We gave a grade of adequate for this Key Question. We found strengths but these just outweighed a number of weaknesses.

Young people told us they felt safe. Staff collaborated with partner agencies to address areas of risk.

The safety of the young people was compromised by risk assessments and care plans that were inconsistent, lacked analysis and were not SMART. Risks to young people were not recorded accurately and strategies to protect them were unclear. This meant that the team had no accurate overview of changing risk and how to respond, leaving young people vulnerable. (See Requirement 2).

Young people's rights were supported by staff and partner agencies. The young people had the support of an independent reviewing officer. Access to independent advocacy had been delayed. This was a barrier to young people's rights being fully considered. A referral to advocacy had been made by the new manager.

The staff team were new and the application of training into practice was ongoing. Only one team member was not on their probationary period.

Young people experienced therapeutic care. The provision of care lacked stability, with only 50% of a core staff team in place. The inconsistency of staffing impacted on young people's sense of security. A stable core team needed to be established. Young people required consistent support to enable them to develop trusting, nurturing relationships and feel valued. (See Requirement 1).

Staff were trained in Crisis, Aggression, Limitation and Management (CALM). There was limited use of restraint, when this had been used it had been done appropriately. Staff worked hard to use relationships and humour to support young people in crisis. Some of the team had still to complete their CALM physical training. (See Area for Improvement 1).

The young people's opportunity to develop meaningful relationships had been undermined by significant changes in staffing. Staff were nurturing and compassionate towards the young people, however this had limited impact due to the rotation of staff through the house. (See Requirement 1).

Young people's mental health was prioritised and if they needed support, the staff and manager were active in pursuing this.

The team's ability to support the young people to understand and manage risk was at an early stage. Routines and rules within the house were yet to be fully established. Staff were sensitive, non-judgemental and nurturing in their response to distressed behaviours. The young people were shown high levels of respect from their carers.

The house was maintained to a good standard, however it was impersonal. The manager was looking to make changes by including the young people in choices of décor for the house and their room.

Staff engaged with the young people and gained their views when possible. The development of trusting relationships with a consistent team should support young people to confidently share their views and meaningfully participate in care planning.

Family connections were a priority the service ensured that the young people spent time with the people that were important to them. This supported young people's sense of belonging and identity.

Getting to know young people's interests and supporting them in developing life skills was a focus for the staff team. Young people had individual learning pathways established. These were tailored to support young people to maximise their attainment. Progress had been made in supporting young people to prepare for participation in mainstream education. Opportunities were in place for learning and attainment. Young people would need ongoing support to maximise these opportunities.

Care plans and risk assessments were up-to-date, however the contribution of the young people was not evident. We found inconsistencies in how plans were recorded; they were not Specific, Measurable, Achievable, Realistic, Timely (SMART). Plans lacked analysis making them less effective in addressing need and risk. Information in care plans was inconsistent.

Risk assessments were contradictory. Changes in levels of risk had not been quantified or analysed. Risk assessments gave conflicting information and were inconsistent in identifying areas of risk.

These inconsistencies, inaccuracies and omissions undermined the organisation's ability to meet the needs of the young people and ensure their safety. (See Requirement 2).

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

We gave a grade of adequate for this Key Question. We found strengths but these just outweighed a number of weaknesses.

Leaders were supportive and empowering and modelled high standards of care. The manager of the house was new and would need time to establish a new team that could provide consistent care to the young people. (See Requirement 1).

External managers were clear about their roles and responsibilities and effectively performed these. Quality assurance work had been conducted.

Transitions were managed well, feedback from families and partner agencies was positive. Although very new to the placement young people told us that they were happy.

There had been significant instability in the staff and management team. A consistent full staff team had yet to be established. Time would be required for the team to establish themselves and develop positive working relationships with the young people and each other. The lack of continuity and consistency had limited young people's ability to build trusting relationships and undermined their sense of belonging. To ensure best outcomes for young people they require care and support from a consistent team that know them and have established relationships and have a good understanding of their specific needs. (See Requirement 1).

Staff had an understanding of the impact of trauma; ongoing training will be required to ensure care and support is trauma informed, embedded in practice and responsive to the individual needs of young people.

Moving forward regular, consistent, reflective supervision and team meetings would need to be established with the new team ensuring that staff are confident and effective in their roles providing consistent care informed by care plans and risk assessments that are consistent and understood.

Systems to monitor service delivery were in place. Gaps in risk assessments and care plans and staffing issues had been identified and recommendations made. It would take time to ensure that these are achieved and the impact it would have on the young people was assessed.

Opportunities for young people to achieve best outcomes were being impacted by the instability within the team. The development of a new team would be the priority going forward.

Recent staff turnover impacted directly on the implementation of effective child centred planning strategies and service development. The management and team had worked hard to minimise the impact of this on the young people, new team members were due to assume their post. It would however take time for this team to coalesce and get to know the young people and each other, until this is achieved it will continue to impact on outcomes for the young people.

Requirements

1. By 31 August 2025, the service must ensure that there is an established consistent staff team.

To do this the provider must, as a minimum:

- a) Establish a consistent staff team who know the young people and have in depth understanding of their needs, interests and vulnerabilities.
- b) Establish a staff team whose skills knowledge and values reflect the needs of the young people being supported by the service.
- c) Establish a staff team that form enduring, trusting, and genuine relationships with young people being supported by the service.

This is to comply with Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SS1 2011/210). This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation.' (HCSC 4.15)

2. By 31 August 2025 the service must ensure that care plans are accurate, analytical, and SMART and that Risk assessments are consistent and accurately identify and address risk.

Plans must be current, accurate, consistent and analytical, reflecting and adapting to changing circumstances and risk.

This is to comply with Regulation 5(2)(b) (ii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SS1 2011/210) which state: 'a provider of a care service must review the personal plan when there is a significant change in a service user's health, welfare or safety needs.'

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)

Areas for improvement

1. To support children's wellbeing and safety, the provider should ensure staff training and refreshers that is appropriate to their role is fully up-to-date. This should include, but is not limited to in Crisis, Aggression, Limitation and Management (CALM).

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.' (HSCS 3.14)

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	3 - Adequate

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