

# Buchanan Street Residential Children's House Care Home Service

COATBRIDGE

**Type of inspection:**  
Unannounced

**Completed on:**  
29 April 2025

**Service provided by:**  
North Lanarkshire Council

**Service provider number:**  
SP2003000237

**Service no:**  
CS2004063632

## About the service

Buchanan Street Residential Children's House is a residential care service provided and managed by North Lanarkshire Council. It is registered to provide a care home service to a maximum of five young people.

The house is situated in Coatbridge, North Lanarkshire. The house is a single storey detached house with an enclosed front and back garden. There are two main living areas, a dining area and kitchen. The five young people each have their own bedrooms and share two bathrooms.

## About the inspection

This was an unannounced inspection which took place on 14 April 2025 between 11.00 and 19.00, and 15 April 2025 between 10.45 and 18.45. 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 two young people living in the house
- spoke with nine members of staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

## Key messages

- Relationships with young people were positive.
- The environment was warm and welcoming.
- The provider's child protection procedures were robust.
- Risk assessment and protocols to report young people as 'missing' must be improved.
- The provider must notify the Care Inspectorate of reportable incidents.
- Key working with young people should be better evidenced.
- Staffing arrangements should be improved.
- The provider should continue to develop the vision and culture in Buchanan Street Residential Children's House.

## 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 evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Relationships with young people were positive, and staff had a good understanding of young people's presenting needs. The continued development of trauma informed practices helped to create the circumstances for young people to feel safe and secure in their home. Leadership by senior staff seemed to be highly supportive of enabling this practice.

The provider and partner agencies created regular opportunities to share information and agree a way forward, in relation to the protection of young people who were at significant risk in the community. These processes were robust, taking full account of national child protection measures. Although strategies were not always effective in reducing risk, the involvement of key members of staff provided opportunities to collaborate with partners in developing care plans for young people.

Although wider agency action plans existed for these young people, the house must be more proactive in ensuring up to date risk assessments, with strategies clearly documented and regularly reviewed to determine their effectiveness. There must be clear expectations of staff practice and their responsiveness to risk situations. (See Requirement 1). This must include individualised protocols where young people are considered as 'missing.' (See Requirement 1). This will ensure consistent responses to meeting the safety and wellbeing needs of all young people.

We acknowledged the importance of key relationships between young people and members of staff, however, key working could have been better evidenced in written form. The provider should develop records demonstrating time spent individually with young people, discussing what's important to them and exploring what would help to achieve progress toward their goals. Assessment of progress, arising from discussion, will help to support the development of personal plan outcomes. (See Area for Improvement 1).

At the time of the inspection visit, the light-hearted mood in the house promoted a sense of fun, and staff worked hard to make the house a welcoming place and a home for all young people. Decorating and furnishing young people's bedrooms, and improving the quality of the environment in general, was further enhanced with creative decorations in recognition of cultural celebrations. Holidays and day trips also offered young people opportunities to join with others and have fun. Where young people spent time with family, staff were also committed to supporting a positive experience for young people.

Some young people were in further education and we saw that this offered them a sense of purpose and meaningful learning for their future. Where young people seemed not to make steady progress, staff were encouraged to be more curious about the reasons for this, and to consider what additional supports may help them to achieve their goals, and to help young people think beyond their current circumstances and be ambitious for themselves.

Managers and staff have made an effort to address key aspects of the findings from the last inspection. The house was asked to consider the development of a clear vision for Buchanan Street, and in March this year, a development day sought to begin this process. Some staff commented that they felt there was an improved sense of cohesion in the team and that managers model elements of a supportive, trauma informed environment, but that differing views about practice with young people, can at times, undermine this approach. There is further work to do to build upon early indicators of improvement. (See Area for Improvement 2).

We acknowledged progress in respect of some key systems and structures. Most staff received formal supervision regularly and staff team meetings occurred more frequently. Managers also met routinely as a team and daily handovers were more formal. Although the frequency of these practices had improved, work was still required to support their function in relation to key supports for young people. We will explore the quality of these at the next inspection.

The Care Inspectorate expects providers to be very clear about the service they are providing to young people. Being clear about responsibilities is essential to ensuring that key information is notified to the Care Inspectorate in line with regulations and guidance. We were not notified about significant incidents involving young people. (See Requirement 1).

External managers play a key role in safeguarding young people, and a key aspect of this practice relates to decisions for staffing arrangements. Whilst the Care Inspectorate continues to recognise the financial pressures, in a challenging sector, there is a need to ensure the correct number of staff, with the right skill and experience, are in place to engage, support and promote improved outcomes for all young people. (See Area for Improvement 3).

Leadership must focus on continuous evaluation of experiences and outcomes for young people. It is important to be resourceful and drive exemplary practices that might make a difference. Whilst improvement activity had been initiated and some key processes had been implemented, there was a need for further development and sustained improvement.

## Requirements

1. By 30 June 2025, the provider must ensure the health, welfare and safety of all young people.

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

- a) ensure that risk assessments are up to date and contain detailed strategies aimed at reducing risk;
- b) develop a clear protocol for responses to individual young people's safety needs and to ensure staff practice is consistent when reporting young people as 'missing' from care;
- c) notify the Care Inspectorate in line with regulations and guidance.

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) and with section 53(6) of the Act.

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

'My future care and support needs are anticipated as part of my assessment' (HSCS 1.14)

and

'I use a service and organisation that are well led and managed' (HSCS 4.23).

## Areas for improvement

1. To ensure that young people actively contribute to decisions about their care, the provider should implement written records of key working with young people.

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

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17)

and

'My care and support meets my needs and is right for me' (HSCS 1.19).

2. To ensure that improvement is further evidenced and sustained, the provider should continue to build upon early indicators of a clear vision for the culture and practice expected at Buchanan Street Residential Children's House.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

3. To ensure that the care and support for young people is consistently of a high standard, the provider should address staffing arrangements to ensure the right number of staff, with the correct skills and experience, are in place to meet the needs and wishes of young people.

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

## 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 ensure all young people consistently experience trauma informed responses to their care and support needs, the provider should continue to develop staff practice which is based on the principles of relational practice. The expected impact of any natural consequences should be carefully considered prior to being implemented.

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

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential' (HSCS 1.6).

**This area for improvement was made on 16 January 2025.**

#### Action taken since then

There was evidence of trauma informed practices influencing the care and support of young people. In less frequent circumstances, management practices could differ from those of the broader staff team. When brought to their attention, managers reflected and considered alternative approaches.

**This area for improvement was met.**

#### Previous area for improvement 2

To ensure all young people's care and support needs are met by a staff team that works well together, the provider should maintain regular opportunities for collective discussion and decision making forums, to enable and promote agreed ways of working with young people.

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

'My care and support is consistent and stable because people work well together' (HSCS 3.10).

**This area for improvement was made on 16 January 2025.**

#### Action taken since then

We acknowledged that the provider had increased the frequency of opportunity for regular staff and management meetings. However, attendance was not optimised and the structure and style of meetings had not yet developed into forums for collective discussion and decision making. We advised of ways in which these could be improved and will review progress at the next inspection.

**This area for improvement was not met.**

## Previous area for improvement 3

To ensure the safety and wellbeing of all young people, the provider should provide closer monitoring of medication procedures to minimise the likelihood of errors occurring in practice.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

**This area for improvement was made on 16 January 2025.**

## Action taken since then

We reviewed medication procedures, including storage and administration, and found this to be satisfactory.

**This area for improvement was met.**

## Previous area for improvement 4

To ensure all young people receive high quality care and support, the provider should commit to regular, effective staff supervision for all members of staff, in line with their policy.

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

'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 16 January 2025.**

## Action taken since then

Formal supervision was occurring more regularly for most staff. Staff told us that this was supportive of their practice and that they welcomed the opportunity to reflect on the care of young people. We advised of the importance of accurate supervision tracking, to reflect meeting dates with staff.

**This area for improvement was met.**

## Previous area for improvement 5

To ensure all young people receive high quality care and support, the provider should undertake analysis, to determine the training and development needs of staff to promote professional growth.

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

'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 16 January 2025.**



**Action taken since then**

A senior staff member had been tasked with overseeing the training calendar for the coming year, but this area for improvement related to an analysis of skills, knowledge and experience within the team, to determine the training needs of individual staff members, to promote their professional growth. Although we will not repeat this area for improvement, we will review progress at the next inspection.

**This area for improvement was not met.**

**Previous area for improvement 6**

To ensure all young people receive high quality care and support from a service which is well led and managed, the provider should enable regular management meetings and other opportunities to develop the service.

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

**This area for improvement was made on 16 January 2025.**

**Action taken since then**

Management meetings had been more frequent, and the provider had arranged a development day for the staff team to consider how to promote a positive culture and vision for Buchanan Street Residential Children's House. The development day had been well received by staff and some progress was noted with regard to an improved culture.

Management meetings needed to evidence a sustained approach to effective leadership practices and we will review progress at the next inspection.

**This area for improvement is not met.**

**Complaints**

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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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