

# Craigellachie Children's Home Care Home Service

Clydebank

**Type of inspection:**  
Unannounced

**Completed on:**  
4 July 2025

**Service provided by:**  
West Dunbartonshire Council

**Service provider number:**  
SP2003003383

**Service no:**  
CS2003001429

## About the service

Craigellachie is a residential care home for children and young people provided by West Dunbartonshire Council. The house is a substantial villa, located in a residential area of Clydebank. It benefits from being close to local amenities, including shops and leisure facilities and has good transport links with nearby trains and bus stops.

The house is set over two floors, the lower floor comprises a large lounge, separate kitchen and dining room, a small snug area, a relaxation room and a small office. The upper floor is made up of seven single bedrooms, shared bathrooms and a small quiet room. The enclosed outdoor space to the rear has a number of sheds and an outhouse converted to a gym. The house is located adjacent to a park which offers green space to play.

## About the inspection

This was an unannounced inspection which took place on 02 and 03 July 2025. 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 people using the service, and their representatives;
- spoke with staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with visiting professionals.

The provider of this service is a corporate parent, with statutory responsibilities to look after and accommodate children. This may mean that the duty to care for children and young people on an emergency basis, or with highly complex needs, is their highest safeguarding priority.

In these circumstances our expectations, focus on outcomes and evaluations remain identical to other providers. We may, however, provide some additional narrative in the body of the report to reflect the impact of these duties, should it be relevant to this particular service.

## Key messages

Young people were safer as a result of living in Craigellachie.

Leaders needed to ensure staff felt confident in following the organisation's child protection policy.

Young people were cared for with compassion and nurture and experienced stable and therapeutic care .

Young people were meaningfully involved in their care.

Leaders in the service needed to improve accountable decision making by clearer documentation.

Learning from incidents had significantly improved since the last inspection.

## 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

We made an evaluation of good for both quality indicators in this key question, as strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Young people living in Craigellachie were safe and where some experienced the potential for harm, they were protected by a staff team who understood the risks they faced. Effective collaboration with a range of key professionals ensured young people at risk were supported in a thoughtful but assertive manner that ensured the risk of harm was minimised. This was balanced with an enabling approach to young people taking positive risks that encouraged them to develop self-confidence, independence and safety awareness when away from the house. One young person told us, 'I feel safe living here because of the staff'.

Staff understood their responsibility to recognise and report when young people were at risk, but the service as a whole needed to be more confident in the application of their organisation's child protection policy. **(See area for improvement 1).**

Young people were cared for by a team who understood the impact of trauma, which led to stable and therapeutic care. The team at Craigellachie were all trained in positive behavioural support and restraint was rarely used. Since the last inspection the team had made significant investment, in building meaningful relationships with young people, and these were effectively underpinning the stability young people experienced. Young people were compassionately nurtured, and this positive practice was extended to building connections with families. This supported young people to stay safely connected and repair relationships with those who mattered. The team were engaging young people in the redesign and redecoration of the house and outdoor spaces, which had significantly improved since the last inspection and now conveyed a message of home and respect.

Young people were supported by a team who were thoughtfully committed to young people fulfilling their potential and staff were effectively engaging young people in their care. Personal plans were individualised, outcome focussed and captured young people's needs.

Leaders in Craigellachie had worked hard with the team to address the necessary improvements highlighted at the last inspection. Thoughtful matching and admissions, supported by external managers had led to young people having a stable experience of care and gave staff the opportunity to build the therapeutic relationship young people needed. The team had begun to build their vision for the service, and we highlighted the need for collaborative and accountable leadership to ensure the vision remained focused and driven by positive outcomes for young people. **(See area for improvement 2).**

The team at Craigellachie continued to be skilled and experienced but absence levels were having an ongoing impact on staffing. However, we were assured that the service was minimising the impact on young people and were effectively addressing this through assertive recruitment and use of familiar, trained sessional staff. The recently implemented staffing needs assessment highlighted young people's needs on an ongoing basis and offered the opportunity to ensure staffing arrangements remained focussed on what people required.

There were systems in place to monitor aspects of service delivery, and leaders were working hard to ensure that the oversight of the service was robust and focussed on young people's experiences. The manager recognised that good quality assurance required the whole team to be involved, and they were gradually

including the wider team in aspects of audit and scrutiny of the service. The team had recently undertaken a review of past incidents and were collectively reflecting and identifying learning. The team understood that this practice was essential to promote positive outcomes and effectively navigate risks young people faced.

### Areas for improvement

1. To support young peoples safety and wellbeing, the service should ensure that all staff are clear and confident in following their organisation's child protection policy. This should include but is not limited to, clarifying roles and responsibilities for escalation of concerns and notifying the Care Inspectorate when protection concerns arise.

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 promote positive outcomes for young people, the leaders in Craigellachie should ensure the vision for the service is effectively underpinned by the evaluation of young people's experiences. This should include but is not limited to, ensuring the service development plan has clearly identified responsible people and timescales for each action, and to promote accountable decision making, any discussion or review of young people's care is clearly documented.

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

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

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

### Requirements

#### Requirement 1

By 31 May 2025 you must ensure that there is effective recording, oversight and analysis of incidents.

In particular you must ensure that:

- a) you undertake a review of previous significant incidents, involving the wider team as necessary;
- b) learning from the review of these incidents is clearly communicated with the whole care team and any identified changes to service delivery or practice is recorded and monitored;
- c) the agreed process of current and future incident reporting is consistently implemented, roles and responsibilities clarified, and includes how people have been supported post incident;
- d) when learning from incidents informs how people need to be supported, this is documented in support plans;
- e) you implement a robust, recorded process of oversight and analysis of incidents that confirms the Care Inspectorate have been notified when necessary.

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 requirement was made on 23 September 2024.**

#### Action taken on previous requirement

The service has undertaken a documented review of all incidents as identified during the inspection. Staff have had support and training to understand the expected documentation standards and processes for incident recording. Post incident learning is now routinely shared within team meeting settings. Risk assessments and personal plans evidenced post incident analysis, learning and alterations to support. Managers had implemented a system of oversight that tracked incidents.

**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 promote children and young people's safety and wellbeing, the provider should ensure that the environment is conducive to safe, therapeutic care.

This should include but is not limited to, reviewing the current layout and purpose of the building to ensure young people can be safely observed and supported and where spaces are shared, ensuring personal information and items that can cause harm are safely stored.

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

'My environment is secure and safe'. (HSCS 5.19);

'The premises have been adapted, equipped and furnished to meet my needs and wishes'. (HSCS 5.18).

**This area for improvement was made on 23 September 2024.**

#### Action taken since then

The service have undertaken a programme of environmental upgrade, including some changes to the layout of the house. There is now clear division between work and living spaces that preserves confidentiality of people's information.

#### Previous area for improvement 2

To support children and young people's wellbeing, learning and development, the provider should ensure that the culture of the service promotes predictability and supports young people to achieve their potential.

This should include but is not limited to implementing high quality, individualised support plans that underpin outcome focussed care.

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).

'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 23 September 2024.**

## Action taken since then

The service had reviewed people's personal plans, with significant input to engage young people meaningfully in capturing their needs and progress. The plans are now of a high standard and regularly reviewed and updated in line with people's needs.

## Previous area for improvement 3

To support young people's development and promote positive outcomes, the provider should ensure a mechanism for assessing staffing arrangements, based on the needs of young people, is in place.

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

'My needs are met by the right number of people'. (HSCS 3.15)

'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).

And to comply with section 7 of the Health and Care (Staffing)(Scotland) Act 2019.

**This area for improvement was made on 23 September 2024.**

## Action taken since then

The manager had undertaken liaison with well performing services and through this work, has introduced a mechanism to take a needs led approach to the assessment of staffing.

## Previous area for improvement 4

To support positive outcomes for all children and young people, and ensure care is safe and effective the provider should ensure people's experiences are evaluated.

This should include but is not limited to ensuring a robust quality assurance framework is fully implemented including evaluation of support plans and risk assessments. and recording and analysis of incidents as specified in requirement one.

This is to ensure that 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 23 September 2024.**

## Action taken since then

The service has implemented a layered model of quality assurance that includes internal scrutiny of key documents and processes as well as peer audit from other residential services and external manager oversight.



## 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?	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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