

Abbey Croft Care Home Service

Kilwinning

Type of inspection:
Unannounced

Completed on:
3 November 2025

Service provided by:
North Ayrshire Council

Service provider number:
SP2003003327

Service no:
CS2003001163

About the service

Abbey Croft is a residential care service provided by North Ayrshire Council. The service is registered to provide care to a maximum of eight children and young people. At the time of the inspection there were nine young people living in the service, with one young person in the process of moving out during the inspection.

The service is based in a purpose-built building in Kilwinning. The building is detached and on one level, with a car park and some garden space in the grounds. There are eight designated bedrooms within the house and each has ensuite facilities.

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 those of all 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.

About the inspection

This was an unannounced inspection which took place on 28 October 2025 (1230-2015 hours) and 29 October 2025 (1030 - 1925 hours). The inspection was carried out by two inspectors 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 and one of their family members;
- spoke with seven staff and management;
- observed practice and daily life;
- reviewed documents; and
- spoke with one external professional.

Key messages

Young people were kept safe at the service and there was a strong understanding of individual roles and protection procedures.

We identified concerns in relation to the practice and recording of significant incidents, including physical restraint.

Young people enjoyed warm and positive relationships with staff.

Young people were engaged in shaping their care and support.

Positive health outcomes have been adversely affected by changes to the provision of the house cook.

Young people were enabled to develop age appropriate life skills and independence.

There is the need for the provider to better manage new arrivals to the service alongside capacity and their statutory duty to provide care.

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 evaluated this key question as good, where several strengths impacted positively on outcomes for children and young people and clearly outweighed areas for improvement.

Young people were kept safe at the service. The service worked well with other agencies and there was a strong understanding of individual roles, responsibilities and protection procedures. Staff had a good understanding of young people's individual needs and what was required to keep them safe.

Young people had strong networks of support and there were positive links between the service and other key agencies. The role of advocacy was well established and this helped to promote and safeguard young people's rights. This included young people's right to remain in the service beyond the age of 18, under continuing care legislation. We discussed with the service the need to review the practice around complaints to ensure that this process is used correctly and supports the rights of all young people in the service.

The plans and strategies to manage risk for each individual young person were of a high quality, however we found that these did not always inform or reflect the practice in the service. There was an increase in the number of physical restraints for one young person, and we were concerned that the practice during incidents was not trauma informed or aligned to their risk management plan. Management debriefs of significant incidents did not identify this or reflect on learning. Therefore, the quality assurance and oversight of these was lacking (see requirement 1).

The service has undergone staffing changes over the last year, and this has impacted on the stability of young people's care and quality of some relationships. Overall, we found that young people in the house continued to experience nurturing care. Young people enjoyed warm and positive relationships with staff. One young person told us, "They listen when I am upset. No one else has done that. They show they care and are there for me...they made me feel better, talk to me".

Young people were engaged in their care and support and this was a strength of the service. Young people's personal plans were of a good quality and we found that young people were able to participate and shape the care they received and the decisions made that affected them.

Young people's health was promoted and supported well. There were positive examples of young people being supported in healthy routines and habits. There have been changes made, at a provider level, to the provision of the house cook. This has resulted in the young people not receiving homemade meals at weekends. We learned about the impact this has had on health outcomes. We would ask that this is addressed as a matter of priority (see area for improvement 1).

Young people's connections to family and friends was supported and the service had positive relationships with many family members. We discussed with the service that ensuring quality time, between young people and their family members, could be better achieved with greater consideration of staffing and space.

Young people were supported to engage in their learning and education. The service had positive links with education resources. This contributed to positive outcomes for some of the young people.

Young people's individual interests, ambitions and life skills were promoted well by staff. This enabled young people to develop age appropriate levels of independence and confidence. One young person told us, "They care for me but don't keep an eye on me all the time so I can still be me".

In our evaluations, we have taken into account the positive outcomes and experiences for most of the young people within the house. We have considered that decision making at a provider level, in relation to admissions and individual young people's plans, have impacted on the experience and outcomes for one young person. We discussed, with the external manager, the need to better manage capacity alongside the provider's statutory duty to provide care. This is needed to prevent the risk to future outcomes for young people in the service.

Requirements

1. By 1 December 2025 , the provider must ensure there any significant incidents are recorded accurately and there is effective analysis and oversight of incidents.

To do this the provider must as a minimum:

- a) ensure that all incidents are recorded with appropriate detail and with language that is trauma-informed;
- b) ensure staff and managers participate in a debriefing following any incidents and these are appropriately recorded to allow for learning, reflection and consider what could have been done differently; and
- c) ensure that auditing by managers and senior managers includes analysis of adverse incidents and suggested learning to develop consistent and safe practice.

This is to comply with Regulation 4(1)(a) (welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/ 210).

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).

Areas for improvement

1. To ensure that young people have access to a healthy and balanced diet, the provider should ensure that homemade food is provided on all days of the week.

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

'I can choose suitably presented and healthy meals and snacks, including fresh fruit and vegetables, and participate in meal planning.' (HSCS 1.33).

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?	4 - Good
7.1 Children and young people are safe, feel loved and get the most out of life	4 - Good

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