

Holestane Cottages Care Home Service

THORNHILL

Type of inspection:
Unannounced

Completed on:
31 October 2025

Service provided by:
Greenleaf House Co Ltd

Service provider number:
SP2018013227

Service no:
CS2021000121

About the service

Holestane Cottages was first registered with the Care Inspectorate on 25 June 2021. The service is based in two side by side cottages in a rural setting. Each cottage provides for a solo placement for one young person.

About the inspection

This was an unannounced inspection which took place on 28 October and 29 October 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 two young people
- Spoke with four staff, the house manager and area manager
- Observed practice and daily life
- Reviewed documents.

Key messages

- Young people were safe.
- Young people were actively involved in their care.
- Young people were engaged in activities which were specific to their individual interests.
- Care plans were not SMART (Specific, Measurable , Achievable, Realistic , Timely)
- The staff team was new but stable.
- Restrictive practice plans and strategies were unclear.

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
--	----------

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

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

We made an evaluation of good for this key question. We could see important strengths, with some areas for improvement. The strengths found had a significant impact on young people's experiences and outcomes.

Young people told us they were safe, staff were responsive to the needs of the young people and supported them to understand risk and keep themselves safe. This was undermined by risk assessments that were inconsistent and care plans that were not SMART. (See Area for Improvement 1)

Young people had access to advocacy services. This ensured that the rights of the young people were safeguarded.

A new inexperienced staff team would need time to develop into confident knowledgeable practitioners. The application of training into practice for several staff was in its infancy. The impact of trauma and how to respond to incidents in a trauma informed way was a focus for the team. The organisation recognised that continuous training and development was a priority.

The service was able to offer a level of therapeutic care. The team had prioritised developing nurturing relationships with the young people promoting trust and a sense of inclusion. The care team was stable at the time of inspection, however a number of the staff were very new to the service and there were still vacancies to be filled. This created a sense of uncertainty for the young people.

Not all staff had completed their CALM training. Restrictive practice plans lacked clarity and were not tailored to the needs of individuals. This increased the vulnerability of young people if they were in crisis. (See Area for Improvement 1)

At the time of inspection there had been no restraint used with the young people living there and there was a culture of restraint reduction.

Young people enjoyed positive relationship with those caring for them. Staff were compassionate and patient and the provision of care was from a trauma perspective supporting recovery and building young people's resilience was a focus for the team. This meant that young people felt valued. The staff team worked hard to instil a sense of fun and spontaneity.

Young people were shown high levels of respect by those involved in their care. This was reflected in the environment which was maintained to a good standard.

Meaningful connections to family and friends were championed and sustained. Young people had regular time with the people that were important to them. This meant that young people's connections to their community were sustained promoting their sense of inclusion and identity.

Young people were supported to engage in their care and support and to be fully involved in decisions that affected them. The rights of the young people were paramount to their sense of wellbeing and worth was central to the ethos of the house. Carers spoke warmly about the young people and clearly valued them. Young people's mental and physical health was prioritised ensuring their emotional wellbeing.

Young people were supported to pursue their ambitions and interests and to develop their life skills.

Young people were consistently offered opportunities to broaden their horizons.

Young people had education plans in place however the implementation of these was for some limited. Opportunities were in place for learning and attainment. Young people would need ongoing support to maximise these opportunities.

There was a commitment to young people remaining in the service into adulthood if that was their wish. There was a commitment to sustaining enduring relationships, this ensured that young people felt valued and loved.

Care plans and risk assessments were up-to-date and current with the young people's contribution evident. We found inconsistencies in how plans were recorded and plans were not Specific, Measurable, Achievable, Realistic, Timely (SMART). Risk Assessments were inconsistent and gave conflicting information, which potentially undermined the safety of the young people.

Plans lacked analysis making them less effective in addressing need and risk. Leadership recognised this was an area for continuing development and were addressing these issues through ongoing quality improvement, staff training, and supervision. (See Area for Improvement 2).

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

Staff told us they felt supported by the management and this enabled them to feel more confident as practitioners.

Managers promoted an empowering culture modelling good standards of practice. Staff received regular structured supervision, staff reported that this was a safe space to talk covering professional development and personal wellbeing.

Transitions were well planned and managed well, taking account of the needs and rights of others.

Recruitment and staff retention had been a challenge for the service with a number of staff still on probation. New team members had yet to develop their knowledge and would need time to become confident at applying theory to practice. A priority for the team had been developing nurturing relationships with young people; the provision of a consistent stable team was central to this.

Staff recruitment was values based, however we did not see evidence of young people being involved in the process, which is best practice.

There was a clarity of vision of what the service wanted to achieve. There were quality assurance systems in place. It was evident that audits had highlighted areas for development within the service and the impact this would have on the young people. This ongoing scrutiny and reflection promoted best outcomes for the young people.

Management was committed to driving forward change to ensure that the service provided best outcomes for the young people in line with the ethos of Scotland's 'The Promise.' This can be achieved through effective implementation of both child centred care planning strategies and sustained service development.

Areas for improvement

1. To support young people's safety and wellbeing the provider should review their restrictive practice procedures. This should include but is not limited to:

Ensuring that plans for physical restraint are tailored to the needs of the individual and that plans clearly reflect what has been assessed as safe interventions with specific holds identified. Also, if it has been identified that the use of restraint has been assessed not to be safe for a young person that this has been recorded.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that. 'If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively' (HSCS 1.3) and 'I am as involved as I can be in agreeing and reviewing any restrictions to my independence, control and choice.' (HSCS 2.6)

2. The service should ensure that care plans and risk assessments are accurate, analytical, and SMART. This should include, but is not limited to:

- a) Care plans that are dynamic, accurate and include all relevant significant changes to a young person's circumstances.
- b) Risk assessments that accurately and consistently reflect identified risk and are responsive to changes in these.

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)

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 children's wellbeing, learning and development, the provider should ensure staff access to training that is appropriate to their role and consistently apply their training to practice and this be reflected in recordings.

This should include, but is not limited to, ongoing training in Trauma Informed Practice, ensuring that behaviours are understood and responded to, from a trauma informed perspective.

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).

This area for improvement was made on 7 November 2023.

Action taken since then

This Area for Improvement has been Met.

Previous area for improvement 2

To support the achievement of positive outcomes for children and young people, the provider should ensure that the recording of care plans consistently comply with SMART principles.

This should include, but not limited to, the clear recording of specific actions, these should be realistic, measurable and have an identified timeframe for completion.

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.'

This area for improvement was made on 7 November 2023.

Action taken since then

This Area for Improvement has still not been Met and will be inspected at the next visit.

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
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.