

Allinvale House Care Home Service

Airdrie

Type of inspection:
Announced (short notice)

Completed on:
5 March 2026

Service provided by:
Love @ Care Ltd

Service provider number:
SP2018013216

Service no:
CS2020380030

About the service

Allinvale House is a care home service for children and young people. The service is provided and managed by Love @ Care Ltd.

Allinvale House operates out of two houses which are in the North Lanarkshire area. The service is registered to care for up to five children and young people, three in Allinvale House and two in Cromlix House.

The service provides accommodation which is spacious and consists of a range of communal and private spaces. Both houses also have a large living room, kitchen/diner with access to a garden and outdoor space. Young people have their own single rooms.

During inspection, two young people were living in the service on a full-time basis and other young people were in the service on a respite basis.

About the inspection

This was an unannounced inspection which took place on 26 April 2026, 09:30-17:00 and 27 April 2026, 09:30-16:00. 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 family members
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- Young people were kept safe
- Staff were motivated and compassionate
- The house did not have a consistent named manager in place
- Matching assessments for young people needed to be reviewed
- Care plans were not Specific Measurable Achievable Timely (SMART)
- Young people's views were not being sought in a consistent manner.

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

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

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

We evaluated quality indicator 7.1 as adequate, where strengths outweighed weaknesses in the service.

Young people were safe. Staff understood the needs of the young people and were responsive to them. The emotional wellbeing of some of the young people had declined in recent months due to various factors that were still to be fully assessed. (See Requirement 2)

Young people had access to advocacy workers. However, for some young people the impact of this was unclear and a multiagency approach was needed to review this to ensure their rights were upheld.

Young people's emotional wellbeing was prioritised. There was a policy of no restraint ensuring that young people were not traumatised by being involved in or witnessing physical interventions. Staff used low arousal and Safe Crisis Management de-escalation techniques, relationships, and humour to support young people in crisis. There was an agitation protocol for the young people, however this was ineffective as it was generic and not tailored to the needs of individuals.

Staff were nurturing and compassionate and understood impact of trauma on the young people.

Staff knew the young people well they were opportunistic in their interactions and used humour and positive reinforcement to motivate young people to undertake activities. This was reliant on verbal communication, the use of augmented communication was noted in care plans but not consistently implemented. Some young people had been limited in their social activities, and the team were eager to try alternative strategies. (See Area for Improvement 1)

Young people were respected by the team; the environment was well maintained however access to the secure garden could be improved supporting young people to get outdoors.

There was no evidence of how young people had been supported to contribute to or understand their care plans. There was limited evidence of augmented communication tools being used despite this being in their care plans. This was a barrier to young people contributing to their care plan and their sense of wellbeing being understood. (See Area For Improvement 1)

The team worked to meet the physical and mental health needs of the young people but not consistently achieving this. Some young people were not accessing medical appointments and a decline in their wellbeing had been noted. A coherent multiagency approach to addressing this was required. Medical records were accurate however were overly complex, increasing margin for error. Management recognised this and were working to address the issues (See Area for Improvement 2)

Young people were supported to sustain connections to their families. A parent's feedback said that communication with the house was an issue and there was a lack of consistency in who they spoke with, undermining confidence in the service. (See Requirement 1)

The team struggled to engage meaningfully with some young people to support them to pursue interests and broaden their horizons resulting in some young people becoming increasingly socially isolated.

A parent told us, 'They are not living their best life.' The team were taking steps to address this with support from partner agencies (See Requirement 2)

Young people were supported to engage in education with specialist support teachers attending the house. This ensured that young people had opportunities to maximise their attainment.

The service was committed to supporting young people to remain in the service into adulthood. Plans and risk assessments were detailed, and much work had been undertaken to develop them. The consistency accuracy and application of these varied meaning they were not SMART. This impacted upon their effectiveness at addressing need and maximising outcomes. (See Area for Improvement 3).

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

We evaluated quality indicator 7.2 as adequate, where strengths outweighed weaknesses in the service.

Management of the house lacked stability for some time, leadership had worked hard to fill the role. However the absence of a full time manager in the house significantly impacted upon the wellbeing and outcomes for young people and for the ability of the team to confidently meet their needs. (See Requirement 1)

External managers were present and clear about their roles and responsibilities, however having to provide cover for a house manager impacted on their capacity to effectively undertake quality assurance roles.

No transitions had taken place since the last inspection.

The service had the right number of staff with appropriate skills and experience. There were some new members in the team, morale was high and the implementation of a new rota had provided a degree of consistency for staff and young people alike. Parents gave positive feedback about the commitment and compassion of team members.

Staff were receiving appropriate training. Management was exploring input from partner agencies to improve practice and build staff confidence in better supporting adults with complex needs.

Staff were supported by management and spoke knowledgeably about the needs of the young people. A full time manager in the house would ensure that regular supervision from a manager that knows the staff well with the opportunity to observe practice, identifying strengths and areas for development. This would develop effective confident practitioners, improving outcomes for the young people.

Staff recruitment was values based with appropriate induction and shadowing opportunities taking place. We saw no evidence of young people contributing to recruitment which would be best practice.

A re-evaluation of outcomes and experiences of the young people was needed to ensure that they received the best care and support tailored to their needs. The matching assessment for some young people required to be reviewed as a priority as there had been significant concerns raised about their outcomes in recent months. (See Requirement 2)

It was evident that a lot of work had been undertaken to make progress within the service since the last inspection. The appointment of a full time manager based in the house will allow the team to develop the effective implementation of person centred planning and for senior managers to promote and implement sustained service development.

Requirements

1. By 1 June 2026, the service must ensure that there is a named consistent full-time manager within the house.

To do this the provider must, as a minimum:

- a) Must ensure the presence of a qualified, named, full time manager for Allinvale House.
- b) This manager will be based daily in Allinvale House ensuring consistency of care for the young people.
- c) The registered manager will provide the staff team with supervision to support them to develop in their roles becoming confident practitioners.

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.' (HSCS 4.15).

2. By 1 June 2026, the provider must ensure that children and young people receive quality care and support by a service that is thoroughly matched to their needs.

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

- Implement matching guidance that follows good practice,
- Ensure that matching processes are reviewed to be confident that assessments are up-to-date and accurately reflect the changing needs and circumstances of the young people.
- Ensure that matching assessments are conducted by a qualified member of the Allinvale House Team
- Ensure that matching documents clearly identify the skills of the staff team to meet the specific needs of the young people.
- Ensure that any additional support needs of the young people are given detailed assessment and it is clearly stated how these needs will be met.

This is to comply with Regulation 4(1)(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: 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

Areas for improvement

1. The service should ensure that young people are supported to fully express their views and choices and, if required, be supported to use augmented communication tools that are tailored to their needs by staff that are trained to do so and that these strategies are clearly recorded in their care plans.

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

'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions.' (HSCS 2.11)

2. The service must ensure that all recordings of young people's medication requirements are accurate, accessible concise and clear.

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.' (HSCS 3.14)

3. The service should ensure that care plans are accurate, analytical, and SMART and are responsive to changes in young people's circumstances providing clear strategies to address 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)

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

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 iarrtas.

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.