

St. Mary's Kenmure Secure Accommodation Service

St. Mary's Road
Bishopbriggs
Glasgow
G64 2EH

Telephone: 01415 861 200

Type of inspection:
Unannounced

Completed on:
24 March 2026

Service provided by:
St. Marys Kenmure

Service provider number:
SP2011011646

Service no:
CS2011299188

About the service

St. Mary's Kenmure is a secure accommodation service, located in Bishopbriggs that provides 12 secure beds for young people. At the time of this inspection, the service was supporting six young people.

St. Mary's Kenmure is governed by an independent board of managers and is a registered charity. It is an approved exam centre with the Scottish Qualifications Authority (SQA), registered with the Registrar for Independent Schools, and in addition to the Care Inspectorate, is inspected by His Majesty's Inspectorate of Education (HMIE).

The service has a campus style facility, which includes an education centre, administration and a catering centre around a large central courtyard containing an outdoor recreation area. Additionally, there are indoor recreational facilities, including a swimming pool and gymnasium.

The accommodation for the young people is single bedrooms with ensuite bathrooms. There is a living/dining area, kitchen area, office, and a visitors/activities room in each house.

The Care Inspectorate is a member of the <https://www.nationalpreventivemechanism.org.uk/> - a group of organisations designated to monitor the treatment and conditions of people who have been deprived of their liberty. This includes children and young people in secure care.

About the inspection

This was a follow up inspection to examine progress made in relation to requirements made at a full inspection in August 2025. This inspection took place on 18 March 2026 between 11:45 and 19:00 and 19 March 2026 between 09:00 and 17:00. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection, we reviewed information about the service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

To inform the inspection we:

- spoke with 13 members of staff, including managers;
- spoke with five young people on a 1:1 basis;
- reviewed questionnaires from young people, staff and family members;
- reviewed documents.

Key messages

The last inspection of St. Mary's Kenmure in August 2025 made four requirements. The timescale for these requirements has passed. The service successfully met three of the requirements and this follow up inspection report will detail the progress to date. The one outstanding requirement will be further assessed at the next full inspection.

- The service had taken positive action to ensure the safety and security of young people and staff.
- Staff were knowledgeable and confident regarding authorisation for restrictive practices.
- The detail and quality of the information recorded within incident reports varied, and this will continue to be a focus of the next inspection.
- The service demonstrated a comprehensive approach to staff recruitment.
- Care planning documents were reflective of the individual needs of young people.
- Young people's experiences could be evaluated through effective quality assurance systems.

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

Requirements

Requirement 1

By 4 January 2026 the provider must ensure the safety and security of young people and staff is prioritised. To do this, the provider must at a minimum:

- a. ensure visitor management measures are reviewed and strengthened
- b. ensure monitoring and response systems work effectively to safeguard young people and staff
- c. ensure appropriate response times to young people's presenting needs.

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

I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm (HSCS 3.21) and

My environment is secure and safe (HSCS 5.17).

This requirement was made on 15 August 2025.

Action taken on previous requirement

Since the last inspection, the service had developed additional guidance to ensure enhanced security measures were implemented for visitors. These included a Visit Policy and Open Day Policy. The framework to planning larger scale events had also been enhanced, with a more comprehensive approach to managing risk. Governance of safety and security had been integrated into the strengthened quality assurance processes, with an initial audit having been undertaken.

Monitoring and response systems had been upgraded since the last inspection, with contracts in place to ensure ongoing review and maintenance. Auditing had again successfully identified areas of ongoing improvement.

The service had developed their duty manager role and on call system, introducing greater consistency and clarity of roles. This promoted increased accountability and established key authorisation pathways for staff. Additional training opportunities in collaboration with external providers had commenced, including enhanced trauma training. These actions supported staff within various roles to more knowledgeably respond to young people's needs.

Met - within timescales

Requirement 2

By 4 February 2026 the provider must ensure that where young people are subject to restraint or other restrictive practices there is effective recording, oversight and wellbeing assessments. To do this, the provider must at a minimum:

- a. ensure the use of restrictive practices are fully recorded and sufficiently detailed to support analysis and justification of actions
- b. ensure debriefs are undertaken and effectively support staff to learn from practice and identify development needs
- c. ensure effective wellbeing assessments are being undertaken for young people following all restraints
- d. ensure that personal support plans and risk assessments sufficiently guide staff practice in relation to restrictive practices.

This is in order to comply with Regulation 4(1)(a) and Regulation 4(1)(c) 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:

Any treatment or intervention that I experience is safe and effective (HSCS 1.24) and

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 requirement was made on 15 August 2025.

Action taken on previous requirement

Since the last inspection, the service had introduced additional training for less restrictive intervention; further promoting young people's safety and wellbeing within St. Mary's Kenmure and enhancing staff skills to have an improved understanding of young people's needs. Where young people experienced restraint, the service ensured that their wellbeing needs were being met by the staff team and followed up by health professionals.

Staff were knowledgeable and confident regarding the line of authorisation for restrictive practices, and clear recording and procedures were in place for any use of searches.

The detail and quality of the information recorded within incident reports varied. This was an area of development that the service continued to prioritise to ensure incidents were consistently well documented, with managers at all levels being responsible for ensuring that the required level of recording is established. This will support the service to ensure timely reviews of young people's experiences are being undertaken.

The service had developed and enhanced their support to staff through opportunities for debriefs. Debriefs were comprehensive, well documented and provided opportunities for reflection and learning. It was reassuring that this process continued to be further developed, consistent with staff feedback.

New care planning documents had been developed, and these were reflective of the individual needs of young people. Initial workshops and mentoring had been provided for staff who welcomed the new approach; finding plans easier to navigate, more child focused with greater clarity relating to triggers and strategies. The service continued to establish training and guidance for staff to enhance confidence and knowledge in this area.

Risk management documents demonstrated a greater understanding of individual young people's risks, and they were detailed and specific, whilst also supporting and guiding staff practice. Plans were dynamic, being updated when young people's needs or risks changed. This was supported by a revised and strengthened team around the child meetings, developing a more unified approach for each young person.

There had been significant progress to address the areas identified within this requirement, however the service must ensure that incident recording progresses to support analysis and reflections of decisions made. This will continue to be a focus of the next inspection and this requirement has been extended to 10 July 2026.

Not met

Requirement 3

By 4 January 2026 the provider must ensure that young people are being protected by implementing the Safer Recruitment Through Better Recruitment guidance.

This is in order to comply with Regulation 4(1)(a) and 9(1) 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 am confident that people who support and care for me have been appropriately and safely recruited (HSCS 4.24).

This requirement was made on 15 August 2025.

Action taken on previous requirement

Since the last inspection, the service had undertaken a review of their recruitment policy, incorporating the Safer Recruitment Through Better Recruitment guidance, alongside an evaluation of all existing employee recruitment documents.

As part of this follow up inspection, the service demonstrated a comprehensive approach to staff recruitment which was inclusive of young people, with safeguards also being extended to agency staff members working within St. Mary's Kenmure.

Met - within timescales

Requirement 4

By 4 February 2026 the provider must ensure that effective quality assurance systems are implemented to ensure young people are being safely and consistently cared for. To do this, the provider must at a minimum:

a. establish effective quality assurance systems for all care practices.

This is in order 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 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 requirement was made on 15 August 2025.

Action taken on previous requirement

The service demonstrated their commitment towards the creation of effective quality assurance systems. St. Mary's Kenmure had developed a clearly structured quality assurance audit schedule, incorporating a wide range of key areas across the organisation with specific responsible individuals and frequency. These supported various layers of assurance with greater accountability across roles.

Additionally, the service had created a restraint and restrictive practice oversight group with a focus on the reduction of restrictive practices, alongside learning and reflection to enhance the knowledge and skills of staff.

We will assess the effectiveness and consistency of these improvements at the next full inspection, however these offer key opportunities for young people's experiences to be meaningfully evaluated and for areas of improvement to be effectively managed.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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Care Inspectorate
Compass House
11 Riverside Drive
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