

Mulberry House Care Home Service

Airdrie

Type of inspection:
Unannounced

Completed on:
11 February 2026

Service provided by:
Love @ Care Ltd

Service provider number:
SP2018013216

Service no:
CS2023000148

About the service

Mulberry House is registered as a respite/short breaks service for children and young people with learning disabilities. The service is registered to support a maximum of two young people.

The service is provided and managed by the LOVE group.

It is located in a residential area in Chapelhall close to Airdrie and close to local transport links and shopping facilities.

About the inspection

This was an unannounced inspection which took place on 10th and 11th February. 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 people using the service and of their family
- Spoke with four staff and three management
- Observed practice and daily life
- Reviewed documents

Key messages

- Staff maintaining positive relationships with young people
- Young people and children's plans were individualised
- There were few restrictive practices
- Young people were well supported to develop their skills and resilience
- Internal and external quality assurance systems had been developed and introduced

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 the service as good as there are a number of important strengths which, taken together, clearly outweigh areas for improvement. These strengths will have a significant positive impact on people's experiences and outcomes. However, improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible.

Staff were observed providing young people with nurturing and supportive care. Staff spoke fondly of the young people and offered a good understanding of their needs.

Being a respite service young people had full contact with responsible adults outside of the service. This contact would be with parents, social workers and independent advocates.

Staff had a good level of knowledge of their role and expectations on them from their duties under child protection legislation and provider policy. Any such concerns were followed up appropriately. We did note the child protection policy would benefit from a review to update it however this would not have a detrimental impact on the young people supported in the service.

There was a low incidence of restraint within the service and this is commendable. Staff were very clear that restrictive practices were a last resort intervention. The provider has scheduled 'low arousal' training for staff which will aim to further strengthen this approach.

These factors ensured young people were being kept safe, both emotionally and physically.

Young people we spoke with stated they were bored and that there was not a lot to do. However the service quality assurance records provided a good deal of evidence of the activities the staff had accessed for the young people. These activities included those designed to promote more independence and resilience whilst managing risk. Supportive strategies were identified to support young people progress with these aims.

Staff were ambitious for young people and supported their learning new skills. Examples of this were learning cooking skills and identifying and applying for college courses.

Young people's support plans were outcomes based and linked to the young persons individual preferences and needs. They provided good guidance on how goals were to be achieved.

The service had experienced some difficulties with staffing and staff retention for several reasons. We could see the provider had taken steps to attempt to address this and the leadership team recognised what was required in the face of structural barriers. A new service manager had been identified and the leadership team continue to aim to develop a consistent and stable staff team. The service should ensure that the identified manager is registered with the service.

Staff were recruited in alignment with safer staffing practices. Checks with the appropriate registration services were completed and references followed up on. A staffing level assessment was used to identify staff skills, experience and knowledge and subsequently identify any gaps in the service team composition and in team training needs. These were matched with the young people's individual needs.

Given there was a relatively high percentage of newly recruited staff we advised that supervision intervals should be reviewed to ensure less experienced staff were in receipt of proportionate guidance, mentoring and support. (See area for improvement 1)

We noted that the service's audit report appeared to use defensive language which rightly identified areas for the service to develop. However, it would be beneficial to also highlight the positive outcomes being achieved and the impact this has on service delivery and outcomes for young people. To this end an action plan should be developed which identifies areas for improvement, how these will be achieved and timeframes. (See area for improvement 2)

Whilst the service development plan mentions The Promise our discussions with staff revealed a limited understanding of The Promise ambition. We ask that the service identifies more clearly how young people are involved in their support plan and also stronger evidence the promotion of young people's rights (See area for improvement 3)

Areas for improvement

1. The provider should ensure that all staff receive regular, and good quality formal supervision and that an appropriate record is maintained. This is to ensure that care and support is consistent with the Health and Social Care Standards, which state: "I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organizational codes" (HSCS 3.24).

2. To support children and young people's health and wellbeing, the provider should ensure timely action is taken in response to quality and audit activity. This should include, but not limited to, timely action on identified areas of improvement from audit activities.

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).

3. To further promote The Promise the provider should look to introduce measures to support young people to

- engage in their care planning
- understand and be aware of their rights.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My human rights are central to the organisations that support and care for me" (HSCS 4.1).

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

Requirements

Requirement 1

By 1 May 2025, the provider must implement effective oversight and quality assurance systems to ensure that young people are kept safe and practice is focused on improving outcomes. To do this, the provider must at a minimum:

- a) Regularly audit young people's daily recordings, risk assessments, personal plans, and outcomes.
- b) Regularly audit medication records and associated documentation.
- c) Carry out improvement activities when there is practice identified that does not keep young people safe or is not focused on improving outcomes.

This requirement was made on 11 March 2026.

Action taken on previous requirement

The service has reviewed their quality assurance procedures to include:

- Twice weekly medication audits
- A journal notes audit
- File audit processes where any actions identified are sent to the manager from RADAR. the introduction of RADAR which automatically generates action plans for areas of improvement.
- Training planned for all staff in the use of RADAR

This requirement has been **met**

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 ensure that children and young people's needs are met by the right number of staff, the provider should implement an effective system for assessing, reviewing, and -

recording the number of staff or staff hours, skills, and experience that are required throughout the day.

This area for improvement was made on 11 March 2025.

Action taken since then

A staffing level assessment process and template had been produced and together with rota and staff information was providing an analysis of staff levels.

Previous area for improvement 2

To promote the best possible outcomes for children and young people, the service should ensure they complete a comprehensive development plan for the service which includes but is not limited to:

- a) SMART goals, which are regularly reviewed and updated.
- b) How development and improvement activities are driving forward The Promise.
- c) Assessment of staff training and overall service development.

This area for improvement was made on 11 March 2025.

Action taken since then

The service had developed:

- a) Care plan and outcome portfolios identifying young people's goals how to achieve these, what support available and within a given time frame.
- b) The service were issuing survey monkey questionnaires to staff and parents to gather views evaluating the service.
- c) A staffing level assessment tool had been developed which linked to a service training tracker.

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
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