

Care Visions Quhytewoolen Care Home Service

Lockerbie

Type of inspection:
Unannounced

Completed on:
20 March 2026

Service provided by:
Care Visions Group Limited

Service provider number:
SP2003002569

Service no:
CS2010274118

About the service

Care Visions Quhytewoollen provides residential care to a maximum of four children and young people. The service is provided by Care Visions Ltd. At the time of this inspection, two children and young people lived in the service.

The service is situated in a rural setting in Lockerbie. The house is a large detached house with a large garden. The house is spacious with ample communal living areas. Children and young people each have their own bedroom and bathroom facilities.

About the inspection

This was an unannounced inspection which took place on 17 March 2026 (09:40 to 19:20) and 18 March 2026 (08:30-13:00). 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 young people using the service
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

Key messages

- Child protection concerns were not always responded to appropriately therefore a requirement has been made.
- Children and young people had good relationships with staff and felt valued and listened to.
- Whilst all young people had individual plans and risk assessments, these would benefit from more detailed strategies and interventions.
- The service needed to improve their admissions process, ensuring the correct legal order is received.
- Partnership working was effective in meeting children and young people's physical and mental health needs.

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
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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?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

We found young people were not always kept safe in the service. Responses to concerns did not always align with procedures in place and we found gaps in identifying indicators of harm. Risk assessments were also not effective at identifying areas of concern and how to support young people effectively. This had led to young people at times being placed at risk and not being kept safe. This will form part of a requirement made in relation to risk assessments and care planning. **(See requirement 1).**

Advocacy was not consistently available, a young person told us, "I think I have a worker, I have only met them once". This limited young people's opportunity for independent advocacy to ensure that the voices of young people are fully represented in decision making.

We found there to be a lack of understanding regarding child protection. While staff had an understanding of protection procedures these were not always consistently applied and recorded. The service needs to take action to ensure that all staff are aware of procedures and ensure appropriate responses to all young people therefore will form part of a requirement made in relation to safeguarding. **(See requirement 2).**

Staff demonstrated an understanding of trauma-informed practice. This contributed to a positive reduction in restraint within the service. However, reviews of incidents identified that support during periods of distress was not always consistent which limited young people's experience of therapeutic and stable care.

Young people had good relationships with those caring for them. A young person told us "Staff do a really good job. I can approach the staff if I want to talk about something difficult". This meant that young people felt supported and valued.

Young people were encouraged to have fun and try new activities. Young people were encouraged to try new experiences such as dance groups as well as fun day trips away. This promoted young people's interests and nurtured their sense of identity.

The environment generally reflected a high level of respect for young people, supported by recent improvements to shared and personal spaces. Staff tried to make the house feel homely for the young people, personalising spaces to the individualised preferences. While further development of the garden was required, we were pleased to hear of plans to enhance this area, which would strengthen young people's sense of pride in their environment.

We found that staff worked hard to engage young people in their care and support through key-working and ongoing discussions. However, we found that where young people's views were provided, these were not always listened to. Personal plans and risk assessments were of reasonable quality; however, the language was often not accessible to young people meaning their views did not meaningfully shape their care. Risk and crisis strategies needed clearer guidance to support consistent responses, and plans should identify safe holds with evidence these have been risk assessed. This was an area for improvement made at the last inspection which we have assessed as not being met, and therefore is now a requirement. **(See requirement 1).**

Young people's physical and mental health needs were well met. Young people had a range of supports available including access to specialist services. The team received regular input from external professionals which informed care planning and best practice. This helped ensure that care was responsive and supported young people to get the most out of life.

Staff supported and sustained meaningful connections with family. We saw staff helping young people to make sense of their experiences through sensitive discussions. This supported young people's understanding of their experiences and contributed to their sense of identity, belonging and connection.

Young people benefitted from a staff team who nurtured their interests. Their enthusiasm for nature, arts and crafts was evident in the resources and experiences provided. A professional told us "This is most settled period of time in [their] life. I have found [them] to be happy and relaxed, and able to focus on play rather than being hypervigilant. All the staff have worked so hard to care for, and make the young person feel happy, safe and secure".

Staff supported young people to engage with learning, however attendance in education was not consistent. Staff collaborated with education providers and external agencies to encourage engagement. While progress was evident, further work was needed to ensure young people could participate fully in learning opportunities to develop their skills.

The service needed to ensure they followed their clear procedure regarding admissions to the service. However staff skills were not assessed against identified risks and young people's views were not gathered. **(See area for improvement 1)**. We also identified gaps in records relating to the legal authorisation of a placement. This meant admission decisions did not reliably consider the rights and views of the young people. **(See requirement 3)**.

Requirements

1. By the 30 June 2026, the provider must ensure that all personal plans and risk assessments are written in child-friendly, accessible language and fully reflect the each young person's identified needs. To achieve this the provider must:

- a) Review and revise the language in personal plans and risk assessments and strategies to ensure it is age appropriate, clear, and easily understood by children and young people and their families.
- b) Implement structured risk and crisis management approaches, ensuring primary, secondary and tertiary strategies are clearly defined. These must provide staff with consistent, proportionate guidance on how to manage risk.
- c) Specify and justify any safe holds within relevant plans, ensuring these are only included when necessary. Evidence must be in place to demonstrate that each safe hold has been individually risk assessed, approved and reviewed in line with current best practice.
- d) Ensure plans are regularly reviewed, with updates clearly recorded and shared with the young people in a way that supports their understanding and participation.

This is 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 fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17) and 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

2. By the 30 May 2026, the provider must ensure they review how they implement their child and adult protection procedures. To do this the provider must at a minimum:

- a) Ensure all employees are fully aware of protection procedures and their responsibility in responding to concerns raised swiftly.
- b) Ensure all concerns are reported immediately to the lead agency, sharing all information relating to safeguarding of current young people.

This is 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, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

3. By the 30 May 2026, the provider must ensure that no young person is admitted to or continues to live in, the service without documented evidence confirming the lawful status of the placement. To achieve this the provider must:

- a) Obtain and securely retain written legal authority—including any court order or equivalent statutory documentation—before accepting any young people coming to live in the service.
- b) Verify the legal status of all existing agreements of care for young people, ensuring that up to date documentation is in place and clearly recorded within the young person's personal file and care plan.

This is in order 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 am in the right place to experience the care and support I need and want' (HSCS 1.20); and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

Areas for improvement

1. To ensure that decisions made about arrivals and transitions are in the best interests of all young people the service should carry out effective matching analysis. To do this the service must, at a minimum:

- a) Provide a detailed assessment of how the service plans to support identified risk or need for young people referred to the service.

b) Undertake analysis of how the arrival of any new young person may impact on young people already living in the service and record how this will be supported.

c) Ensure this is carried out in line with the Care Inspectorate guidance 'Matching Looked After Children and Young People: Admissions Guidance for Residential Services (2024)'

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am in the right place to experience the care and support I need and want' (HSCS 1.20); and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

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

The service should notify the Care Inspectorate of incidents as described within 'Records that all registered children and young people's care services must keep and guidance on notification reporting' 25 October 2022.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18).

This area for improvement was made on 21 March 2024.

Action taken since then

We found that all appropriate notifications to Care inspectorate had been made in line with the guidance. However, during inspection we found occasions where the service had not responded appropriately to concerns raised by young people or professionals.

We have therefore assessed that this area for improvement has been met, however have made a requirement in relation to the approach to safeguarding.

Previous area for improvement 2

The service must ensure that all young people have comprehensive and up-to-date personal plans and risk management plans. This should include, but is not limited to:

- a) ensuring that all plans include the contributions of young people, their parents/carers and the multiagency team around the child.
- b) these should outline clearly a young person's support needs, the desired outcomes for the young person and the role of the service in meeting these.
- c) risks to young people using the service are recorded accurately within relevant risk assessment documents and this include strategies to support the young people.

This is to ensure that the 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).

This area for improvement was made on 21 March 2024.

Action taken since then

Whilst some improvements were identified relating to care plans and risk assessments, plans lacked child-friendly, accessible language and did not fully reflect the identified needs of each young person. Primary, secondary and tertiary strategies were not clear, or at times proactive.

This area for improvement has not been met and will be made a requirement at this inspection.

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

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