

Care service inspection report

Daldorch House School - Short Breaks Service

Care Home Service Children and Young People

Arran House One
Daldorch House School and Continuing Education Centre
Sorn Road
Catrine
Mauchline
KA5 6NA

Inspected by: Chris Barratt

Type of inspection: Unannounced

Inspection completed on: 29 August 2013



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Service provided by:

The National Autistic Society

Service provider number:

SP2004006215

Care service number:

CS2012314346

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	4	Good
Quality of Environment	4	Good
Quality of Staffing	4	Good
Quality of Management and Leadership	4	Good

What the service does well

Managers and staff have worked closely to help people using the service to have a smooth transition between home and the short-break service. This has involved building trust and good communication with a lot of attention to maintaining familiar care routines.

What the service could do better

We have made six recommendations, some of which refer to a need to update generic policies for the whole service at Daldorch. As a new service it will be important to get as much feedback from people using the service and their families as possible in the early months in order to identify any areas for improvement at an early stage.

What the service has done since the last inspection

This was our first inspection of this service and the service has made a good start in which staff have recognised the importance of having effective communication with other carers.

Conclusion

A good start has been made with launching this new short-break service at Daldorch and families of those using the service felt that their children had benefitted from going and looked forward to returning there.

Who did this inspection

Chris Barratt

1 About the service we inspected

Daldorch House School - Short Breaks Service is registered with the Care Inspectorate as a care home service and was first registered on 4th March, 2013. The service is provided by the National Autistic Society (NAS) and is located in Arran House One within the Daldorch House School and Continuing Education Centre's campus at Sorn Road, Catrine in East Ayrshire. The service is registered with the Care Inspectorate to provide a short breaks for up to 4 young people, aged 8 years to 21 years, with a primary diagnosis of Autistic Spectrum Disorder.

Arran House One is a semi-detached house in its own garden within a secure campus enclosed by a perimeter fence. The campus has extensive outdoor facilities including a play-ground area and access to other services provided by NAS including a school and day-care services. Staff working in the short-breaks service also work for the provider's Outreach Service which provides support to young people living in their own homes.

This was our first inspection of this service.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 4 - Good

Quality of Environment - Grade 4 - Good

Quality of Staffing - Grade 4 - Good

Quality of Management and Leadership - Grade 4 - Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

Before the inspection we received the service's self-assessment. As a new service, only registered in March, 2013, no Annual Return was required. We provided questionnaires for staff and people using the service to complete and return to us. Both young people who regularly use the short-breaks service were described to us as "non-verbal". One parent completed and returned to us a care standards questionnaire on behalf of their child. We also received three completed staff questionnaires.

We made an unannounced inspection of the service arriving at 8:00 a.m. and staying until 5:30 p.m. We met and interacted briefly with the one person using the service on the day of our visit. We met staff and senior staff working in the short-breaks house and also with the service manager. We discussed the day-to-day operation of the service, looked around the house and examined a range of paperwork including care planning materials and associated records, and also policies and procedures relevant to our inspection focus. These included the service provider's Participation Strategy and policies on Restraint and Physical Intervention, Behaviour support in Schools and Services, Safeguarding and Safeguarding Children. Following our inspection we spoke by telephone to the main carers for the two people currently using the service and also heard back from one placing social worker.

Following the inspection we gave brief verbal feedback and returned after speaking with carers and placing social workers.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any recommendations we made at our last inspection

This was our first inspection of this service.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: No

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The service's self-assessment provides a good evaluation of the service as it has developed so far.

Taking the views of people using the care service into account

We only met one person using the service and they were non-verbal but observation confirmed they were very much at ease with staff and content to be using the service.

Taking carers' views into account

We have referred to carers' comments as appropriate in our report. Overall both carers that we spoke to were very happy with the start that had been made in providing this service and described their children as looking forward to their stays there.

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

Based on our findings during this inspection a good standard has been achieved in regard to this Quality Statement.

The young person we met during our visit was non-verbal but through observation we confirmed that staff working with them had a good understanding of their needs and interests including what was important to them.

Good attention had been given to communication with the families of young people using the service and they confirmed their views were taken seriously. This had included a lot of information sharing about things that would help ensure good outcomes for young people during their stay. Good use was made of "home-diaries" to maintain communication and staff confirmed their understanding of carers' expectations. One carer spoke to us of the importance of trust and added that managers and staff at Daldorch were "very willing to listen" and that this "feels genuine". One family had attended an "open day" arranged for the whole campus.

Both people currently using the short-break service were non-verbal but staff that we met demonstrated good understanding of their non-verbal communication. Staff comments include that information provided by main carers had been a great help.

Good attention had also been given to maintaining links with other professional carers, for example at a residential school attended by one young person using the service.

The service provider had a detailed Participation Strategy which demonstrates a clear understanding of the importance of participation where possible of people using the service and their carers in decision-making within the service.

The local "Who Cares? Scotland" representative had visited the service and met with staff to talk about advocacy. So far it had been young people's parents who had advocated on their behalf and, based on what we were told by the manager and staff, this had been very successful. The manager acknowledged however that there may be occasions when a young person would need an independent advocate to help them make their own views known.

The Team Leader had begun to keep a record of any matters arising from group dynamics during short breaks in order to try to ensure that young people can come for their break with other people who they get on well with.

Areas for improvement

The main school on the Daldorch campus had a Student Council. The manager thought it likely that users of the short-breaks service would be able to access this if this was considered appropriate. We discussed this in ways in which the needs and wishes of people using the short-breaks service could be represented, if appropriate, at the School Council even if users themselves were unable to participate.

The manager told us she intended to send out annual feed-back questionnaires to enable young people and their families to comment on the service provided. We suggested giving consideration to more regular feedback opportunities. For example, a brief feedback on each visit to check out people's experiences and any specific requests for the next visit. Whilst there was evidence of this occurring informally, a more formal approach is likely to contribute to enhancing people's experience of using the service and assist more with its planned development. See Recommendation

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should develop a way of ensuring regular formal opportunities for feedback from people using the service and their families often enough to influence the way the service is provided. National Care Standards, care homes for children and young people. Standard 2.5: First Meetings and 7.6: Management and Staffing

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

Based on our findings during this inspection a good standard has been achieved in regard to this Quality Statement.

The parents of one young person told us they were confident that they were being well looked after and that their needs were being appropriately met. They also spoke of the trust that had formed with staff and how important this felt to them. Both families that we spoke with told us that their children smiled and looked very happy when they knew they were returning to the short-breaks service.

Only one of the two care plans that we saw had been compiled by staff from the Short-Breaks Service. This took good account of the views of the main carer and gave very good attention to personal care needs and preferred routines. The other was a very detailed plan provided by another care service where the young person is cared for most of the time.

Good attention had been given to ensuring a healthy diet was provided to service users consistent with their dietary needs and preferences. Main meals were prepared in the school's kitchen and brought to the house using special heated trays.

Staff told us that, although the person using the service was non-verbal, they knew how they communicated about eating and drinking preferences and also if they were unwell.

The short-breaks service had access to the same health services that are provided on the main school campus. This included the services of a School Nurse, an educational psychologist and a speech and language therapist. The school also had strong links with community health professionals including a dietician, GP, dentists, optician, continence nurse and physiotherapist. There had been very good communication with families about any specific health needs and any courses of medication. Suitable arrangements were in place for the secure storage, administration and recording of medicines administered.

Areas for improvement

For one person using the service, the care planning documentation being used was from their main care setting. This was a good example of information sharing and helped to ensure a consistent approach between family, school and short-break service. It will be important to ensure that, as staff begin to develop any plans for the young person, specific to their short break, that these continue to take account of the main carers' plan and that good communication is maintained.

The manager acknowledged that only one person in the short-breaks team has been trained in risk assessment and that more staff need to undertake this training. She confirmed that this would be addressed.

Despite evidence of good communication regarding medicines, staff were dependent on information provided by carers. Although medicines had been supplied in their original containers we advised that the service should request a copy of the original prescription in order to help ensure that medicines administered are in accord with the doctor's prescription. See Recommendation.

A number of undated amendments had been added to the care plan we saw in pencil. This helped confirm plans are dynamic and that staff are responsive to new information or changed circumstances. However, it was also potentially confusing. Such new information should be recorded in the daily log or communications book and any changes to care plans should be typed up and dated in order to maintain a clear plan.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should request a copy of the original prescription for any prescribed medicines they are asked to administer. National Care Standards, care homes for children and young people. Standard 12.6: Keeping well - medication

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service strengths

We did not look in detail at this Quality Statement and the grade given is based on our findings in regard to Quality Statement 1.1. This reflects the commitment we saw to 'involvement' but, if this standard is to be maintained, care will need to be taken to ensure this Quality Theme is included in discussions of the service with families and service users.

Paperwork maintained by staff includes a "bedroom profile" which includes consideration of any personal effects that will help people using the service to feel at home. See also below.

Areas for improvement

In discussion with the parents of people using the service we found that, although they are happy with the environment provided, more consideration could be given to discussing the physical environment with them. For example, during our inspection visit, we discussed with the manager the service's emphasis on providing a "low arousal" environment. This is clearly an important part of working with people with autism but can also result in an environment which looked stark and unhomely.

The manager told us that families were encouraged to bring service user's personal effects to the service but that they tended not to. Parents confirmed it is possible to take personal effects in to the service but added that this is not always very easy due to the practicalities of getting the person using the service there together with essential personal items.

Parents' comments include that the environment provided at Arran House is more minimalist than at home and that more homely touches would make it more welcoming for people using the service. We note the manager had also been discussing this with staff but we recommend that this part of the continuing dialogue with parents too. For example, whether it might be possible to provide secure

storage for more personal and familiar items at Arran House in order to avoid creating unmanageable amounts of luggage! See Recommendation

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. More consideration should be given, in consultation with service users and their families to ways of introducing more homely touches; also to whether more storage can be provided for personal effects. National Care Standards, Care Homes for Children and Young people. Standard 5.1: Your environment and Standard 6.17: Feeling safe and secure

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

Based on our findings during this inspection a good standard had been achieved.

Good attention had been given to creating and maintaining a safe environment in a way that takes good account of the particular needs of people with autism.

A 1:1 staffing ratio was maintained. If there was only one person using the service this could result in times when there was only one staff member in the building. Please see our comments below about arrangements for staff to access additional support. Staff confirmed they felt very well supported by managers and senior staff. Staff each carried an alarm device (PIT) which enabled them to summon assistance in the event of an emergency.

A minimalist approach to design and decor has helped to achieve an environment which takes very good account of the self-injurious behaviour of some people likely to use the service.

Doors, both internal and external are kept locked when rooms and cupboards are not in use to help to maintain the safety of people using the service.

Accommodation was well maintained and prompt attention had been given to any breakages or other maintenance issues.

Areas for improvement

Each service user's file includes a bedroom profile which considers individual needs concerning safety. These would benefit from further consultation with families as we have already indicated under Quality Statement 2.1.

There is just one open-plan living area in the house. This looked spacious when there was only one person using the service but would be crowded with four service users and their staff. It was only furnished for four people. The manager told us that this would be managed carefully and that some service users chose to use their bedrooms out of preference. The manager and staff also told us of how they use other outdoor areas on the campus. This will need to be monitored very carefully to ensure feelings of personal safety are maintained when the house is occupied by three or more service users and to ensure genuine choice. We note that the service is already maintaining a list of people using the service in terms of their compatibility with one another.

Mirrors provided in bedrooms were designed to be safe but had become blurred and ineffective. We discussed this during our feedback. Consideration should be given to whether an effective and safe type of mirror can be provided for users who like to have a mirror.

When we discussed the service's Staffing Schedule with the manager it emerged that there has been some misunderstanding over how additional support will be provided when only one person is working in the house. This should be discussed and resolved with our Registrations team. See Recommendation.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The manager should discuss with our registration team the need to get clarity concerning how additional support is provided to staff when they are lone-working 1:1 See National Care Standards, care homes for children and young people. Standard 6.1: Feeling safe and secure

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

We did not look in detail at this Quality Statement and the grade given is based on our findings in regard to Quality Statement 1.1. This reflects the commitment we saw to 'involvement' but, if this standard is to be maintained, care will need to be taken to ensure this Quality Theme is included in discussions of the service with families and service users.

Areas for improvement

No additional comments.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

Based on our findings during this inspection a good standard had been achieved.

Staff were registered with the Scottish Council for Social Services (SSSC) and those who were still unqualified were undertaking the training and qualifications necessary to maintain their registration. Staff appeared well motivated to do this despite having to do so at their own expense and in their own time.

Staff told us that, when they were first appointed, they received induction training which had prepared them well for the specialist environment provided at Daldorch. This included training in autism awareness and a 'low arousal' approach to the de-escalation and management of challenging behaviour. Staff confirmed that they have regular 'refresher training' in this approach and one commented that a new trainer

had recently provided very good training. They said this gave much better emphasis than previously to some of the practical things that staff can do in the event of challenging behaviour.

Staff also told us that there are good opportunities for in house-training in a range of areas relevant to their work. One recent example they told us about was a 2-day course on values and person-centred planning. A senior staff member told us that the short-term staff team (who also provide an outreach service) had "very good values". We confirmed this through our own discussion with staff.

Staff confirmed to us that they felt well-supported by colleagues and managers and that they receive regular sessions of formal staff supervision.

Areas for improvement

We note that there was only one staff member in the team who had been trained in carrying out risk assessments. The manager had already identified this. The process of risk assessment both as a written tool and as a way of thinking is so critical to the needs of young people using the service that this needs to receive priority. See Recommendation

During this inspection process there were some indicators that staff morale across the campus had been under strain. It will be important for managers to identify any factors contributing to this and to address these with the staff group in a way which helps to maintain staff motivation.

We examined a number of policy documents during our visit. These included, the provider's Safeguarding Policy, Safeguarding Children's Policy, Behaviour Support in Schools and Services Policy and Use of Restrictive Physical Interventions in NAS Schools and Services Policy. These were mostly written from an English practice and legal perspective and, although they contain some references to Scottish legislation, this needs to be reviewed and updated. For example, policies and guidance for staff should include appropriate reference to the requirements of The Public Services Reform (Scotland) Act, 2010, the National Care Standards, the role of the Care Inspectorate and the need to consult local multi-agency policies, procedures and joint working protocols for adult and child protection. They should also signpost staff to best practice documents such as Holding Safely (SIRCC/Scottish Government) and Rights, Risks and Limits to Freedom (Mental Welfare Commission for Scotland). See Recommendation.

Managers were unaware of joint working protocols with the host local authority (East Ayrshire Council) for child and adult protection. The service's safeguarding officer should maintain links with the host authority and ensure that the service's safeguarding policies take proper account of joint working protocols. See Recommendation.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 3

Recommendations

1. Staff should receive training in the assessment and management of risk. National Care Standards, Care homes for children and young people. Standard 6: Feeling Safe and Secure.
2. The service provider's national policy documents should be reviewed to ensure that they take full account of current legislation and best practice guidance. National Care Standards, Care homes for children and young people. Standard 6: Feeling Safe and Secure.
3. The service's safeguarding officer should maintain links with the host authority and ensure that the service's safeguarding policies take proper account of joint working protocols for child and adult protection. Standard 6: Feeling Safe and Secure

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths

We did not look in detail at this Quality Statement and the grade given is based on our findings in regard to Quality Statement 1.1. This reflects the commitment we saw to 'involvement' but, if this standard is to be maintained, care will need to be taken to ensure this Quality Theme is included in discussions of the service with families and service users.

Areas for improvement

No additional comments.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

Based on our findings during this inspection a good standard had been achieved.

The manager had compiled a folder of materials and evidence related to our Quality Themes and Statements and different staff had been asked to identify and gather evidence in relation to each theme. This had helped the whole staff team to take responsibility for quality and improvement.

The provider had a range of well-developed auditing tools for maintaining standards in regard to, for example, health and safety, the management of challenging behaviour and staff support and supervision. Managers collated this information in the form of a monthly return using the provider's intranet system.

Meeting minutes that we saw included clear action points.

Areas for improvement

Consideration was being given to introducing peer-quality assurance systems where managers across the organisation would support each other by auditing their areas of service delivery. This initiative has potential to increase attention to improving the quality of service.

Policies and procedures that we looked at had detailed content and promoted high standards but needed to be reviewed and updated to reflect the local and national context. See also Quality Statement 3.3

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Environment - 4 - Good	
Statement 1	4 - Good
Statement 2	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Management and Leadership - 4 - Good	
Statement 1	4 - Good
Statement 4	4 - Good

6 Inspection and grading history

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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