

# Daldorch House Adult Service Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
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**Service provided by:**  
The National Autistic Society

**Service provider number:**  
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**Service no:**  
CS2020380626

## About the service

Daldorch House provides Care at Home and Housing Support services to a maximum of 15 adults with an autistic spectrum disorder/learning difficulty in their home and in the community. The provider is the National Autistic Society.

The service is located in Catrine in East Ayrshire. Up to 12 young adults live in self-contained flats within an enclosed perimeter. In addition, 3 people share a house, called Park View, in nearby Mauchline. The service supported 13 people at the time of this inspection.

The service provides individualised support to meet people's needs and to develop their personal and social skills. The service has access to the provider's multi-disciplinary team which includes speech and language and positive behaviour support specialists.

## About the inspection

This was an unannounced inspection which took place from 15 to 20 May 2024. 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 four people using the service and six of their family
- received 24 completed questionnaires
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

## Key messages

- Staff formed positive relationships with the people they supported and provided compassionate, person-centred care which supported people's wellbeing.
- People's choices, preferences and personality were respected, which led to positive examples of people being supported to strengthen their existing skills and to learn new life skills.
- People's physical and mental health needs were well supported.
- People's care and support plans were detailed and person-centred, with good examples of care plans being used to achieve good outcomes for people.
- The assessment and planning of staffing and the service's self-evaluation process should be strengthened further, by making them more evaluative and evidence-based.

## 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 people's wellbeing?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

## How well do we support people's wellbeing?

4 - Good

**We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.**

We spoke to people experiencing care and their families and received several completed questionnaires. The feedback we received was unanimously positive. People appreciate the good and supportive relationships between staff and the people they supported and their families. Families praised the kind and compassionate attitude of staff and were happy with the way staff kept them informed and involved. This helped people to achieve good outcomes and to have a sense of confidence in the service, which supported their wellbeing.

We saw that people experiencing care felt at ease and that they were happy to meet us and tell us about their day or recent activities. We saw that staff interacted respectfully with the person they supported and that they listened to people's wishes and enabled them to make positive choices. There were several examples for how this enabling approach improved people's outcomes, such as increasing their independence and their confidence in social situations.

There were good examples of staff supporting people with meaningful activities in their own home or outside. Staff showed good awareness of how to work with each individual strengths and abilities to support them to get the most out of life. People were enabled to make new experiences, such as going on holidays, camping or work experience and achievements were recognised and celebrated. This helped people to build their confidence and to increase their life skills. However, some families told us that they would like to see more activities in the community. We discussed this with the managers who acknowledged that the service still needed to further develop this aspect of support. Managers addressed this proactively and had plans to make some positive changes that would enable this.

Staff showed a good understanding of how to support people in difficult or challenging situations and spoke about the people they supported with respect and empathy. We saw good examples of positive behavioural support that enabled people to keep themselves and others safe, whilst promoting self-awareness, safe choices, and social skills.

The service demonstrated a strong sense of responsibility for supporting the physical and mental health needs of the people they supported. We found some good examples of facilitating healthcare assessments and treatment for people in a timely and pro-active way. Families provided some very good examples of staff supporting people through a health crisis. This supported people's health and wellbeing and avoided unnecessary deterioration of health issues.

We found that the management of people's medication was safe. The service had the right documentation in place, and we saw that it was completed correctly. Staff we spoke to were competent and felt confident about their practice when supporting people with taking their medication. Training and quality assurance processes were in place to sustain good practice. This helped to keep people safe and supported their health needs.

## How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

We found that managers had a very good understanding of the service's strengths and what they needed to improve. Staff said that managers promoted a sense of responsibility and accountability and staff felt involved in the future direction and development of the service. As a result, people benefitted from a culture of continuous improvement and robust quality assurance processes. We assessed a previous area for improvement for quality assurance and found that it was met (**see section 'What the service has done to meet any areas for improvement we made at or since the last inspection'**).

We found that managers were approachable and open to feedback. Families provided several examples of managers solving problems quickly and effectively. One person said, "the communication is great, and they won't keep anything from us". This meant that people could feel confident about the service and that people's rights, choices and wishes were respected and valued.

Managers had an ongoing service development plan with timelines, allocated responsibilities, and evidence of regular review. This supported staff at all levels with knowing what to do to ensure that the service remained focussed on continuously driving improvement, in order to achieve good outcomes for people.

However, we found that the service development plan should be further improved by clearer descriptions of the problems or improvement ideas, and by adding more information about how managers will know if the planned improvement has been achieved. We discussed this with the managers and identified it as an area for improvement (**see Area for Improvement 1, below**).

### Areas for improvement

1. To support consistently good outcomes for people through effective service self-evaluation and evidence-based service development planning, the provider should improve the format and content of their service development plans.

This should include, but not be limited to, clearly defining the desired outcomes of changes or improvement ideas, and defining how improvement will be measured.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

## How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Staff and the people they supported benefitted from a warm and respectful work atmosphere. We found that there were good relationships between staff and the people they supported, and their families. Staff felt listened to, informed, and involved. This helped staff to feel confident in their abilities and clear about their role in the service.

Staff were provided with the training the needed and wanted. Managers had an overview of planned and completed training. This meant that staff had the right skills for their role and responsibilities. We assessed a previous area for improvement for staff training and found that it was met (see section 'What the service has done to meet any areas for improvement we made at or since the last inspection').

Planning and scheduling of staff rotas was robust and effective. There was clear evidence that managers took people's choices, strengths, abilities, and personalities into account when trying to match staff to the people they supported. This showed that managers valued compatibility and it increased the continuity of staffing. As a result, the planning of staffing contributed to people experiencing good outcomes. We assessed a previous area for improvement for staffing and found that it was met (see section 'What the service has done to meet any areas for improvement we made at or since the last inspection').

However, there was consistent feedback from families who felt that there were not always the right number of staff to enable regular activities outside the service premises. Managers were aware of this feedback and had plans to make some aspects of staffing more flexible and efficient to enable more activities in the community. This showed that managers listened to feedback about staffing and that they were pro-active in planning improvements. We agreed with the managers view that these changes were a necessary part of the service's still recent transition from a service for children and young people, to a service which supported young adults.

We discussed the importance of ensuring that the way staffing is assessed, planned, and evaluated is transparent, systematic, consistent, and based on good practice principles. To support this, we made an area for improvement (see Area for Improvement 1, below).

### Areas for improvement

1. To support a consistently high quality of the service the provider should ensure that the continuing assessment, planning and evaluation of staffing is transparent, evidence-based and focussed on achieving good outcomes for people.

This should include, but not limited to, taking into account:

- feedback from service users, family and staff
- quality assurance outcomes and clinical governance
- staff wellbeing
- individual needs, abilities, characteristics and circumstances.

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

'My needs are met by the right number of people' (HSCS 3.15).

## How well is our care and support planned?

4 - Good

**We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.**

We found that people's care and support plans were up-to-date and person-centred. The care and support plans included good detail that helped to inform staff about how to support people to achieve good outcomes. People confirmed to us that they had regular opportunities to review care and support plans with senior staff. This helped to ensure that people's care and support plans were dynamic and centred on people's outcomes and experiences.

Clearly identified personal outcomes can ensure that people's choices, aspirations, and wishes are heard and included. We saw some very good examples of how the service worked with personal outcomes. The service used the regular care reviews with families to identify important personal outcomes and then worked systematically with the person's support team on achieving them. As a result, people had meaningful experiences and achieved personal goals. We discussed the need to include more and regular evaluative statements as part of the care planning and review process. We assessed a previous area for improvement for the regular review of outcomes and found that it was met (**see section 'What the service has done to meet any areas for improvement we made at or since the last inspection'**).

The service facilitated regular, six-monthly reviews of people's care. These reviews were very well prepared and documented. This ensured that families have regular opportunities to discuss their loved one's care and to be involved in decision making. However, we discussed that this process could be strengthened by improving how the feedback of people experiencing care is captured and included, and by clearly documenting any agreed actions.

People's care and support plans included detailed information about their healthcare needs. This provided staff with clear guidance on how to facilitate regular health checks and treatment, and on what to do in a physical or mental health crisis.

People's personal risk assessments were complete and up-to date. Risk assessments and plans to promote people's safety were not overly restrictive and enabled people to be active and to make valuable experiences. This promoted people's sense of wellbeing, as well as their skills and confidence.

People felt that their rights were respected, and legal documentation was in place to ensure that staff were aware of who held legal rights for the people they supported. This helped to keep people safe and ensured that decision-making was inclusive and transparent.

## 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 promote the safety and wellbeing of people supported the provider should ensure that staff access training appropriate to their role and apply their training into practice. This should include, but is not limited to:

- a) Staff receive training in Covid-19 and infection prevention and control practice in line with current guidance.
- b) Monitor staff competence through training, supervision, and direct observations of staff practice.
- c) Keep accurate records of all training completed to evidence that staff have the required skills, knowledge and qualifications for their role.

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

"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 area for improvement was made on 25 January 2022.**

#### Action taken since then

Managers had an ongoing training plan and an overview of completed training. Supervisions were scheduled and managers carried out observations of practice. Staff provided positive feedback about their access to training.

**This Area for Improvement was met.**

#### Previous area for improvement 2

To promote the safety and wellbeing of people supported the provider should ensure that the number and skill mix of staff are suitable. This should include, but is not limited to:

- a) The level of staffing is adequate to always provide the assessed level of support to people receiving care.
- b) Suitably qualified, skilled and experienced staff are working in the service in such numbers as are always appropriate.
- c) The effectiveness of the management team is rigorously, regularly and systematically evaluated and documented.
- d) Robust and regular oversight of the service by the organisation to monitor implementation of the quality assurance system and its effectiveness.

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

"My needs are met by the right number of people" (HSCS 3.15).



**This area for improvement was made on 25 January 2022.**

#### Action taken since then

Managers had clear schedules and processes for ongoing quality assurance of the service. Where things needed improvement, actions were detailed in a service improvement plan.

Staffing was well organised and focussed on meeting people's needs and staff continuity. Plans to increase the efficiency of staffing to maximise resources were ongoing. We made a new Area for Improvement to support this.

**This Area for Improvement was met.**

#### Previous area for improvement 3

To support continuous improvement, the service should continue to develop their quality assurance systems, including:-

- quality of support plan recording
- extending review tracker, to include all information in support plan
- support and supervision overview
- observational templates of practice
- overview and effectiveness of training

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

"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19).

**This area for improvement was made on 21 April 2022.**

#### Action taken since then

Managers had clear schedules and processes for ongoing quality assurance of the service. Where things needed improvement, actions were detailed in a service improvement plan.

We made a new Area for Improvement to support work on further increasing the effectiveness of the ongoing service self-evaluation and service development planning.

**This Area for Improvement was met.**

#### Previous area for improvement 4

To ensure that people are receiving the right support at the right time, the service should continue to update their processes for recording the review of outcomes detailed within the support plan. The service should also continue with ensuring the support provided is reviewed at least six monthly for all people supported.

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)

This area for improvement was made on 21 April 2022.

## Action taken since then

Regular care reviews were completed and were detailed and well prepared. Personal outcomes were identified at reviews and focussed work to achieve them was well documented.

We discussed that further improvement work should continue to ensure that clear evaluative statements are included as part of regular care reviews.

**This Area for Improvement was met.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good
5.2 Carers, friends and family members are encouraged to be involved	4 - Good

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