

Daldorch House Adult Service Housing Support Service

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Unannounced

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Service provided by:
The National Autistic Society

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About the service

Daldorch House offers Care at Home and Housing Support services for up to 15 adults with autism spectrum disorder or learning difficulties, providing support in both their homes and the wider community.

Located in Catrine, East Ayrshire, the service accommodates up to 12 young adults in self-contained flats within secure grounds and gardens. This setting provides convenient access to the surrounding community, with shops and amenities within walking distance. Within the grounds, a multi-use building houses offices and various facilities for supported individuals, including a computer room, a music room, and a sensory room. Additionally, three people share a home? "Park View? "in nearby Mauchline. At the time of inspection, the service was supporting 13 individuals.

Daldorch House aims to deliver personalised support tailored to each person's needs, focusing on the development of personal and social skills. The service also benefits from the provider's multi-disciplinary team, which includes specialists in speech and language therapy and positive behaviour support.

About the inspection

This was an unannounced inspection which took place from 28 April to 5 May 2025. 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 five of their family
- received 24 completed questionnaires
- spoke with 12 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 physical and mental health needs were well supported.
- Leaders were very motivated and effective at maintaining good standards and driving improvement ideas.
- The assessment and planning of staffing should be strengthened further, by making them more evaluative and evidence-based.
- People's care and support plans were detailed and person-centred, but needed more focus on personal outcomes and meaningful evaluations.

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?	5 - Very 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?

5 - Very Good

Quality indicator 1.3: People's health and wellbeing benefits from their care and support.

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

By identifying health concerns early, staff ensured timely medical attention, reducing complications and enhancing quality of life. Staff demonstrated a strong understanding of the importance of supporting people's healthcare needs in an effective and proactive manner. They recognised signs of health deterioration and, based on their thorough knowledge of the people they supported, facilitated necessary health checks.

External health professionals provided very positive feedback, confirming that staff were proactive in supporting people's healthcare needs. They also found staff to be competent and reliable in their approach.

Families and guardians expressed confidence in how staff ensured access to healthcare and appreciated being kept informed and involved in decision-making. Involving families fostered trust, encouraged collaboration, and ensured continuity of care that aligned with people's wishes and ambitions.

Effective preparation of medical appointments and hospital treatment reduced stress, ensured clarity in healthcare decisions, and promoted better outcomes. Observations showed how senior staff engaged families and external professionals to facilitate and coordinate complex healthcare interventions and appointments.

Significant attention was given to communication, ensuring that individuals were appropriately informed and involved in healthcare decisions. Staff carefully considered how and when to best prepare individuals for interventions or appointments, ensuring that each person's unique support and communication needs were met.

Where communication or compliance was particularly limited, staff collaborated with external health professionals to find the best possible solutions, such as consolidating multiple tests and interventions into a single hospital appointment. This approach minimised discomfort, streamlined care, and ensured individuals received necessary treatments with the least disruption.

Documentation related to healthcare management was detailed and kept up to date. This supported robust risk management, effective decision-making, and continuity of care.

Medication management was robust, with regular reviews conducted by prescribers to ensure treatment effectiveness. Regular quality assurance audits and staff competency checks reinforced safe practice. Robust medication management prevented errors, maintained safety, and ensured individuals received the correct treatment for their health conditions.

Good nutrition is essential for overall health, and timely interventions help to prevent malnutrition and associated health risks. Staff actively monitored people's nutrition and weight, with strong evidence of appropriate referrals to external professionals when needed.

We discussed the need for a more structured and evidence-based approach to assessing individuals' weight and BMI with managers. The service planned to implement this as part of its transition to an electronic care planning system over the coming months. Using an established risk assessment tool will support a standardised approach, improving accuracy in monitoring and managing nutritional risks.

How good is our leadership?

4 - Good

Quality indicator 2.2: Quality assurance and improvement is led well.

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

Leadership that is adaptable, reflective, and open to change ensures continuous service improvement and responsiveness to emerging best practices. A key aspect of our assessment of this Quality Indicator was the managers' understanding and awareness of the service's strengths and areas for development. The interim manager demonstrated a deep knowledge of the service and, despite being involved in a senior role for many years, maintained a reflective and astute perspective on areas needing improvement. This included an ability to work creatively and cooperatively when designing new processes and being open to external advice, feedback, and evolving good practice standards.

It was positive to see that important improvement projects continued over the past year, with some additional improvement ideas being introduced. These included trying a more evaluative approach to outcome focused care plan reviews. Regular evaluation ensures that support remains effective, allowing adjustments to be made based on actual outcomes rather than assumptions.

A further positive development was that the management team team worked on enhancing the process of regular senior staff walkabouts, making them less of a checking exercise and incorporating more qualitative aspects, such as assessing staff understanding of a person's daily plan. A more meaningful approach to staff monitoring helps ensure that support is truly person-centred rather than procedural, improving individualised care and engagement.

Where we identified weaknesses, such as the absence of a clear audit schedule or overview, the interim manager acted promptly, providing the necessary information with support from senior managers. The imminent introduction of a new electronic quality assurance support system was a positive development. We were satisfied that managers ensured that quality assurance remained robust even during management transitions. This helped to strengthen service stability and maintained consistent standards of care.

Effective leadership fosters a supportive work environment, improves staff retention, and directly enhances the quality of care for individuals. There were clear signs of strong and positive leadership in a challenging situation. Several staff reported improvements in morale and job satisfaction, while families expressed happiness, with some noting recent improvements in outcomes.

However, the service did not fully meet a previous Area for Improvement, which aimed to strengthen self-evaluation and evidence-based service development planning by improving the format and content of development plans. The service lacked clearly defined desired outcomes for proposed improvements and measurable indicators to assess progress. Without structured outcome definitions and measurable evaluations, the service may struggle to systematically track the impact of changes, limiting the effectiveness of service improvement efforts.

To support consistently good outcomes, the provider should ensure that future development planning explicitly defines intended improvements and includes clear evaluation measures. Embedding these improvements will help create a more effective and transparent process for quality assurance and service development. We therefore repeated the previous area for improvement (**see area for improvement 1 and section 'What the service has done to meet any areas for improvement we made at or since the last inspection'**).

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

Quality indicator 3.3: Staffing arrangements are right, and staff work well together.

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

Compassionate and skilled staff contributed to a supportive environment and helped to create trust and reassurance for families and people experiencing support. Families spoke highly of the compassion and skill demonstrated by staff, which helped them feel confident and at ease.

It was positive to see that managers had started to implement plans for changing the organisation of staffing towards working in core teams for every supported person. Positive feedback about this indicated that this helped to create a more cohesive, effective and consistent way of working.

Staff expressed positive views regarding their morale and job satisfaction and were pleased with the recent changes to the staff allocation system. High staff morale is essential for maintaining engagement, motivation, and a consistent level of care and support.

However, some families highlighted certain weaknesses, such as temporary staff having poor verbal communication skills. Additionally, one family noted that staff shortages occasionally affected community-based activities. This underscored the need to implement transparent and ongoing self-evaluation processes for staffing, as outlined in our repeated area for improvement (**see area for improvement 1 and section 'What the service has done to meet any areas for improvement we made at or since the last inspection'**). Doing so would enable families to better understand how staffing is assessed, planned, and evaluated, whilst strengthening outcome focussed care.

Staff also reported satisfaction with their access to training, with managers maintaining oversight of completed training and a structured training plan. Ensuring staff receive continuous training strengthens their skills, maintains compliance with best practices, and enhances the quality of care provided.

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).

This is to ensure the management of staffing is consistent with Scottish Government document, Health and Care (Staffing) (Scotland) Act 2019: statutory guidance.

How well is our care and support planned?

4 - Good

Quality indicator 5.1: Assessment and personal planning reflects people's outcomes and wishes.

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

Care plans and personal risk assessments were detailed, with evidence of regular review, albeit the reviews lacked evaluative statements. Regular meaningful evaluation of care plans would help to ensure that care remains relevant and responsive to the person's changing needs.

An outcome-focused approach allows care providers to measure progress and tailor interventions more effectively to meet individual needs. A 'focussed outcomes' project, piloted in one part of the service, demonstrated the service's capacity for further, more outcome-focused and evaluative development of care and support plans. The service should continue to develop this approach and ensure its implementation for every supported person (**see area for improvement 1**).

Legal information, such as guardianship responsibilities, was clearly documented, as were existing restrictions, with audit processes in place to support this. This ensured compliance with regulations, safeguarded people's rights and provided clarity on decision-making responsibilities.

Detailed positive behaviour support (PBS) plans and communication plans were in place and supported by specialist staff. These well-structured plans helped people manage their behaviour and communication effectively, improving their quality of life and ensuring they receive appropriate support.

Care plans and risk assessments supporting healthcare were up to date and effective. This ensured the effectiveness of treatments and facilitated timely healthcare interventions when required.

Six-monthly care reviews were well prepared, providing families and social workers with comprehensive information. The reviews and any resulting actions were appropriately recorded. This promoted transparency, facilitated informed decision-making, and helped track progress towards personal outcomes.

Areas for improvement

1. To ensure that effective and dynamic care plans drive consistently good personal outcomes for people, the provider should ensure that care plans, regular reviews and daily documentation are focussed on clearly defined, measurable, personal outcomes, with regular evaluations that reflect the impact of planned actions on people's experiences.

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)

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 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).

This area for improvement was made on 21 May 2024.

Action taken since then

The service had systems and processes for regular quality assurance in place. Senior managers maintained up to date, basic, action plans for service improvement. The provider was about to introduce an electronic system for quality assurance and internal incident reporting. This should further improve management oversight through real time reporting and overviews.

The provider was about to start the employment of an additional support manager, which should strengthen the service's ability for consistent quality assurance and improvement work.

Despite the registered manager's long-term absence, the interim manager carried out planned quality assurance and worked on further improving key quality assurance processes, such as walkabouts and observations of practice.

The interim manager demonstrated a very good awareness of the service's strengths and weaknesses and areas for development.

However, the service still needed more time to implement an ongoing, comprehensive, clear and measurable service development plan.

This area for improvement was not met and will be repeated.

Previous area for improvement 2

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).

This area for improvement was made on 21 May 2024.

Action taken since then

The service started to make recent changes to the planning and allocation of staffing.

It was positive that these changes meant that people would benefit from a core group of staff, instead of being supported by a wider team. This promoted person-centred care and personal outcomes.

Furthermore, it was positive that these changes aligned with staff feedback and the preferences expressed by families.

However, the service needed more time to fully implement the systematic regular evaluation process for staffing, as laid out in this area for improvement.

This area for improvement was not met and will be repeated.

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 people's wellbeing?	5 - Very 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

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