



Inspection Report on

Autism Spectrum Connections Cymru- Community Support Services

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Cardiff
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Date Inspection Completed

03/01/2024

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About Autism Spectrum Connections Cymru- Community Support Services

Type of care provided	Domiciliary Support Service
Registered Provider	Autism Spectrum Connections Cymru
Language of the service	English
Previous Care Inspectorate Wales inspection	[2 March 2023]
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

Autism Spectrum Connections Cymru is a small domiciliary support service that focuses on providing care and support to Autistic people in their own homes. People achieve positive wellbeing outcomes as a result of their care and support. The service has a clear person-centred values base and ensures that this is linked to all aspects of the support provided, including the support and development opportunities for support workers.

Support workers speak positively about their opportunities for learning and development, and the support they receive from their manager. There are plenty of staff to meet the needs of the service.

However, there appears to be a misunderstanding about the requirement of the service in meeting people's needs in their own home. Some aspects of care and support delivery are more suited to a care home. The service has made some progress since the last inspection, however at the time of this inspection they have not demonstrated a sufficient understanding of their responsibilities under the regulations and the Priority Action Notices have not been achieved.

Well-being

People experience positive wellbeing outcomes as a result of the care and support provided. The service requests feedback from people and families; we saw written feedback forms however the responsible individual (RI) has not always met with people, support workers and their families as part of their regulatory duties. Support workers told us that the training delivered as a result of this feedback was beneficial in supporting them to carry out their roles. Feedback from people suggests that support workers and people experience positive rapport and have good working relationships. People are treated with dignity and respect, and individual circumstances are considered when planning care and support. We found that people are involved in the development and review of their personal plans. Support workers have a strong understanding about the needs and aspirations of people using the service. People receive care and support in a timely manner, and are supported to develop new skills, engage, and make a contribution to the local community. People are supported to remain healthy and active. We saw care notes that evidence people are supported to do the things that make them happy.

People can access information about the service when needed. There is a written guide to the service provided to people that explains what opportunities are available to help them achieve their well-being goals. We found that the information contained in the written guide to the service did not accurately reflect the service provision. The service are in the process of separating the provision of care from the accommodation provided. This process is ongoing since our last inspection. Support workers complete health and safety checks which are not suited to people's own homes, and there is a lack of clarity from the service about the distinction between care homes and domiciliary support services which may impact the nature of the support provided to people.

People are protected from harm and abuse. The service has a clear procedure to enable support workers to safeguard people. People are informed about how to make their concerns known through consultation meetings with the support workers and manager. However, we found that written information to support people to make a complaint is unclear.

Care and Support

People are involved in the development of their personal plans. The service has a clear focus on supporting people to develop and maintain skills and ensures that people are involved in setting and reviewing their personal wellbeing goals. Support workers complete thorough and accurate recording to demonstrate people's progress in achieving their goals. People's personal plans and goals are reviewed frequently in line with the regulations. We found clear evidence that people are supported to access a wide range of opportunities, and to lead active lives within their community. Personal plans are clear and provide thorough guidance for support workers to support people with day-to-day activities.

People are supported to be as independent as possible. Risks and specialist needs considered in the care planning process. Where people are unable to keep themselves safe, the service works well with external agencies to ensure that the support provided meets people's needs. Support workers speak passionately about their roles, one staff member told us, "*We are trained Autism specialists who have a passion for the work we do.*" We found that support workers appear knowledgeable about people and training is tailored to support them to meet people's individual needs. Support workers speak fondly about people and appear to have good rapport.

The service promotes hygienic practices and effectively manages infection and control procedures. We found that support workers have access to plenty of personal protective equipment. Some processes and procedures implemented by the service are not suited to support provided in people's own homes. We saw that health and safety, maintenance, and fire checks are completed routinely in people's homes which could be intrusive. The service provider has not sufficiently separated the provision of care and support from the accommodation. Some procedures and policy do not adequately reflect the care and support requirements of the service. The service has a policy in place for the safe handling of medication, however some aspects of the policy are not practical for a domiciliary support service. People are supported to manage their medication in a way that works for them, and this is documented in their personal plan. The service completes regular medication audits to ensure that medication is safely managed and administered.

Leadership and Management

The service benefits from a consistent manager who feels well supported in their role by the RI. Since the last inspection, the manager has worked to implement changes and recommendations to improve service delivery. The manager works alongside support workers to identify training needs through support and supervision sessions. We saw that the content of the supervision links to the services value base and uses the same approach to frame reflective sessions. Support workers are given opportunities to discuss practice and role specific competencies. Support workers speak positively about the support from the manager, and their opportunities for learning and development. A staff member told us, *"I have been given opportunities such as progressing in my qualifications. I have now gained my QCF Level three Health and Social Care and am exploring doing my level four."* The rota is clear with a breakdown of designated tasks to support staff to carry out their duties. The service has updated procedures in place to support the future recruitment of support workers in line with the regulations. At the time of inspection, the updated procedures had not been applied to existing support workers, this was addressed by the manager following the inspection visit.

The service has a Statement of Purpose (SoP) which outlines the support provided by the service. However, there are some inaccuracies within the SoP, which makes reference to a set location for support delivery which does not fit within the requirements of domiciliary care.

There are process and procedures to support quality assurance within the service. We found that not all documentation relates to Welsh legislation. The RI completes quarterly visits, however found that these visits do not meet the requirements under the regulations as the RI has not demonstrated that during these visits they meet with people using the service, their representatives, or support workers. A quality of care report is prepared for the service provider every six months. At the time of inspection, the report did not provide any information or analysis of aggregated data, nor a summary or assessment of the quality of care provided. Following our inspection visit the service provided an updated report. However, the updated report also contains information on the accommodation provided, which is not appropriate for domiciliary support services, and demonstrates misunderstanding about the provision of care provided. The provider has not demonstrated suitable progress in achieving the Priority Action Notices in this area. Where providers fail to take priority action, we will take enforcement action.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
6	At the time of the inspection, the service provider did not have clear arrangements for the oversight and governance of the service in order to establish, develop and embed a culture which ensures the best possible outcomes are achieved for individuals using the service and to meet the requirements of the regulations.	Not Achieved
66	The responsibly individual has not supervised the management service in a satisfactory manner to ensure the service has sufficient numbers of staff who are trained, competent and skilled to undertake their role and achieves best possible outcomes for individuals.	Not Achieved

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements, we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

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