

Autism Accreditation Assessment

Marcus and Marcus including

Clay Hill Lodge, 10 Southgrove, The lodge at Sweet Briar Walk, 4 Turkey Street, 8 Gloucester Road, 163 Winterton, 865 Great Cambridge Road, 23 Halstead Road, Quaduct Lock Cottage, 13 Lausanne Road, 12 Old Park Ridings, 2a Rayleigh Road, Flat 3, 36 Torrington Park.

Reference No.	136
Assessment dates	4- 8 July 2022
Lead Assessor	Hannelore Bout
External Moderator	N/A
Status prior to the assessment	Accredited
Advanced status applied for	N/A

About this Assessment

This report states key findings on how well autistic individuals are supported according to our framework of good autism practice. Evidence has been primarily obtained from observation, supplemented by evidence from interviews, a sample of support plans and information provided by the provision. If opportunities to observe have been problematic or limited greater weighting has been given to other sources of evidence.

Where appropriate, feedback has been obtained from autistic people supported by the service and/or family members and this feedback has been taken into account in the findings.

Findings from the Assessment

Differences in Social Communication

Key outcomes identified from personal support documents and staff discussions:

The service has a PBS team of a PBS practice lead manager, 8 PBS coaches who support teams and a caseload, supported by 6 PBS Champions working across services.

The PBS coaches receive high levels of autism-specific and BILD training and clinical supervision from an external provider. The PBS coaches deliver most of the autism-related induction and in-house training, further training is delivered specifically to meet the needs of autistic individuals, based on their functional behaviour analysis.

This often happens as part of the transition programme or when behaviour patterns emerge or change.



The service often refers to or works together with SALT teams to ensure communication strategies are pitched at the right level. The service also commissioned Us on a Bus for tailored Intensive Interaction training and coaching. Information from SALT reports and Functional Behaviour Assessments informs the bespoke support plans.

The staff induction programme has been reviewed and adapted since the last assessment, and although this programme is part of the services' ongoing development: it is clear from interviews and observations that the service embraces a culture of reflecting, improving and learning together.

The service has carried out intensive work to design an induction and CPD programme, that aims to scaffold learning through training, shadowing, modelling, roleplay, and self-reflective practice, where support staff are supported and practice is monitored and triangulated to ensure new and established staff understand and demonstrate competencies to deliver good autism practise in line with the services ethos. New staff reported that the induction process was thorough and supportive.

Plans identify how each autistic person prefers to communicate, such as using body language, pointing and leading staffs' hands, but also using written or spoken English, symbols, pictures, Makaton and Objects of Reference (OOR). Plans also describe how to be on first introductions or what motivates them to socially interact with others, such as being light-hearted, "they are a big fan of the Labour party", sharing interests or having a sense of humour. Other examples are "Staff to have a good understanding of the GRID 3 app on my iPad that I use to communicate with others."

Plans identify what challenges or barriers each autistic person may experience in social communication and interaction, such as liking or disliking communication supports such as visual schedules, social stories, Objects of Reference, Intensive Interaction or making eye contact. Some individuals would like these supports to help them make sense of what is happening, whereas some individuals explicitly would not want visual support or social stories as they are in their words "very high functioning."

Support plans offer detail on what approaches or tools should be employed (or avoided) to enable autistic people to understand or accept others and express themselves, such as social stories, symbols or Talking Mats, access to pen and paper to write things down, emotion or pain charts, 10-second processing rules, or which OOR are currently used.

Support documentation illustrates a high level of communication support detail for each individual it would be useful to have these summarised consistently across all pen portraits to give a quick snapshot of key communication supports.

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Almost all PCPs provide evidence of positive outcomes in an achievements section. Some of these illustrate how autistic individuals make progress in their communication



and social engagement such as learning to express needs and wants or inviting family over, or wanting to be helpful.



The service has begun piloting daily monitoring forms for 3 autistic adults, which also track progress on communication targets, such as participation in interaction, which will feed into a weekly summary, to be in a position to summarise progress and achievements in the annual PCPs.

Progress videos and case studies demonstrate that autistic adults make progress in communication and social engagement such as introducing and learning to use 5 OORs, becoming more engaged, developing positive relationships with staff through having fun using tailored Intensive Interaction or having social get-togethers such as going for dinner, bowling or cinema with the team around the autistic person.

In interviews, staff can give examples of how autistic people have been supported in their communication and social engagement and the positive outcomes this achieves, such as wanting to play games with staff and or a very shy and socially withdrawn person kicking a ball around with members of the public. One person who used to live in a confined area due to risks is planning trips with staff and is learning to make requests for precise information, which helps settle their anxiety. Another person who has been in hospital for a long time and recently moved into the service is now learning to communicate using objects of reference and because staff can read his signals, can meet their needs. The service supports autistic people with visiting friends and family and organises activities such as Sports days and BBQs where autistic people have an opportunity to socialise.

Key outcomes identified from observation/review of key activities:

Almost all staff make themselves understood for example by simplifying or structuring verbal language and by providing visual cues, such as symbols, photos and OORs. All staff offered calm and adjusted communication opportunities and allowed adequate time to process information. A couple of individuals particularly benefit from social stories to help them make sense of a situation or to provide reassurance

Autistic people can make themselves understood for example by access to symbols or OOR. Staff are attuned to reading their particular ways of verbal and body language, such as whispering or signs such as putting their top over their heads.

Autistic people are provided with plenty of opportunities and purpose to communicate with staff, it is clear that staff make time to engage with individuals in their preferred ways, such as offering choices, intensive interaction, playing games, listening to cues when an individual would like a break and responding to bids to be playful with each other.

In one observation an individual was keen to look after and welcome visitors, by wanting to take jackets, bags and shoes, whilst outside. And although this information had been handed over to the service, this had not happened before as they recently joined the service and had few opportunities to welcome visitors during the pandemic.



It may be helpful to develop a programme to support welcoming visitors in a circumstance-appropriate way.

Problem Solving and Self-reliance

Key outcomes identified from personal support documents and staff discussions:

Plans identify each autistic person's skills in functional life skills within their homes, attending college or ambitions around volunteering and employment. Other plans describe passions such as green topics, politics and swimming, which are motivating to the individual to develop and achieve ambitious plans. All autistic adults are supported to develop independence skills, within the context of their skills and abilities. Adapted structured teaching programmes are designed around developing independence, consolidating skills and extending the tasks as and when the individual progresses.

Plans also identify challenges in functioning life skills related to everyday life, work and education, for example, some autistic people who have recently transitioned into the service are new to developing communication skills, being able to make choices or follow instructions, some individuals followed "desensitisation programmes" to help them access the community and activities again, others have a passionate dislike for Day centres and colleges.

Documentation routinely incorporates peoples' motivations and interests to make skills development relevant and interesting. Plans identify approaches and tools for supporting autistic people in carrying out activities, transitioning, coping with changes and making choices. Such as how they like information and choices presented and the various skilled teaching programmes.

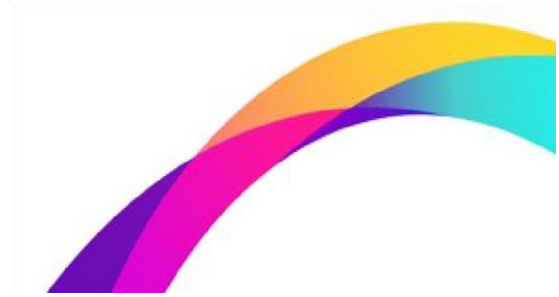
There is some variation in how PCP Plans identify positive outcomes in terms of autistic people developing functional life skills and becoming more self-reliant and autonomous. The new daily tracking documents aim to address this.

Some plans have a section on achievements, such as becoming a NAS ambassador or writing a speech, others have a section with my plans for the future, listing what has been done or not yet done, such as organising a tree fair and raising money for charity. Some achievements and plans are ambitious and offer a source of pride and focus, such as raising money, swimming the channel again or inviting celebrities to after-parties. Other outcomes are "As I like organising things one of my achievements is that I had a job for almost a year as a volunteer for Children with needs, I was promising envelopes", others are proud they wash their dishes after every meal. The service can extend celebrating successes in the achievement section in all PCPs, also



capturing progress in communication and social interaction, using the daily and weekly recording tools.

The PBS team is instrumental in each individual's transition process, and provided evidence of carefully planned and successful transitions for autistic individuals who had failed placements, had stayed in a long-term hospital or had lived in unsuitable services. The transition principles are also applied to supporting individuals to attend new activities such as going to a new college, a new day service, or moving into new accommodation within the service.



In interviews, staff can give examples of how they have supported autistic people in following routines, such as daily living skills, using an interest in playing golf or picking up items from the floor and transferring this to learning to vacuum clean the floor. The service supports autistic people with coping with change, through using individualised "Change protocols" or detailed and prolonged transition programmes. Other examples were given where newer people to the service are supported to develop communication to help them to make choices through tailored communication tools such as learning 5 OORs or requesting a social story when they need clarification or reassurance about what is happening. Staff reported that the Structured Teaching programmes always evolve, for example when a person has mastered becoming independent to do their laundry independently, they may then learn how to switch the machine on correctly by using an erasable marker to teach them to press the correct program button and once that is mastered, they may learn to buy the correct washing detergent.

Key outcomes identified from observation/review of key activities:

Staff routinely support autistic people with what is happening now and what they are expected to do next, using visual, written schedules, checklists, social stories or OOR. Staff practice updating the individualised schedules with each other, whilst being observed, before supporting someone, to ensure they consistently follow the correct protocols.

In almost all observations, autistic people are supported to do things by themselves and support is adapted to the individuals' ability such as modelling, hand over hand or graded assistance. Autistic people are offered plenty of time to process and instructions and Structured Teaching visuals assist individuals to be independent with making chocolate rice krispies for example, which was a fun and motivating activity, where the individual was learning and making progress in stirring the chocolate whilst counting up and counting down with the member of staff.

There were a couple of missed opportunities where a member of staff could have offered an opportunity to participate or be involved in tidying up.

All autistic people develop skills and confidence in actively making and taking decisions by using their preferred mode of communication. Staff were always responsive and respectful of choices and offered plenty of time to process or make these decisions and were attuned to any changes in body language or demeanour indicating when an individual needed a break.

It is clear that all autistic people are provided with appropriate opportunities to consolidate and develop daily functional skills e.g. such as doing their shopping with visuals and minimal staff supports, learning to use the self-checkout, learning strategies on how long to stir food by counting together, but also looking if all was stirred correctly, taking time and paying attention to plates being washed up correctly,



laundry was put in the washing machine, vegetable gardens were being looked after. Intensive interaction was offered to build relationships, or engage for extended



periods, whilst others are budgeting for a laptop or planning a big fundraising event for swimming the channel again with a big afterparty to celebrate.

Sensory Experiences

Key outcomes identified from personal support documents and staff discussions:

Sensory profiles identify sensory experiences which offer positive opportunities for each autistic person such as having a cool temperature in their home, which in some cases is regulated by air-conditioning to ensure a stable low temperature. Individuals have access to their preferred music, sensory and music sessions, quiet environments, or access to their sensory room, trampoline, jacuzzi or fire pits in the garden to make bonfires. Some sensory diets included bubble tubes, fidget toys, therapy balls, weighted blankets, massage etc.

Plans identify what challenges each autistic person may experience in regulating sensory experiences, such as unpredictable contact or overcrowded or noisy environments, feeling hot, or people not using a soft/ gentle tone of voice. Some pen portraits could be developed further to consistently summarise sensory supports likes, dislikes, and motivating and calming activities.

Support and sensory plans identify what approaches or tools should be employed to help autistic people regulate sensory experiences or avoid sensory overload. There is a helpful section that lists "know this- do this" for example "I am known to dig my nails, rock and fidget to self-stimulate- Please do not try to stop me from stimming, this helps me regulate my emotions. If you see me digging my nails please remind me that I am hurting myself. Please follow my PBS plan". Strategies may include avoiding busy and noisy environments, soundproofing in their homes, and support to help check the bath water temperature. One person's profile describes offering the right level of sensory support, reducing the use of weighted blankets, and offering more strategies such as gym, trampoline or house chores, to prevent their nervous system from "shutting down". Another person has a support plan for garden activities including their own safety-ensured bonfire, which is highly motivating and they get "an enormous amount of pleasure from this".

In case studies the service describes sensory sensitivities and supports such as being able to hear the neighbours talk, which was causing distress. Noise cancelling headphones have been introduced to help cope with hearing neighbours talking. Or one person moved from shared accommodation into their own house and has a jacuzzi, garden swing and sensory room, which are part of their daily activities and choices. Staff have noted "a decrease in anxiety and consequently, there has been a decrease in the frequency and severity of self-harm". This has had a positive impact on developing skills in communication and an increase in confidence.



In interviews, staff can give many examples of how they have supported autistic people in their sensory regulation such as regulating room temperatures, having access to jacuzzies, or having adapted sensory facilities in their flats. Examples were also given where accommodation has been specifically selected for its low arousal environments and some of these have been adapted to reduce sensory overload or offer control over their sensory environment. Examples were shared where this has had a positive impact and improvements to quality of life, such as having access to sensory facilities within the home, which are offered as a choice, such as a jacuzzi, swings or access to outdoor spaces.

The service also gave examples of successful “desensitisation programmes” to help individuals overcome a fear of going outside and in cars after a traumatic experience with car alarms, this person is now much happier accessing community activities as a result. The service is in the process of introducing and developing a capable environment checklist with the support of an external agency to ensure all aspects are considered to create enabling environments.

Key outcomes identified from observation/review of key activities:

All autistic people access sensory activities which they find enjoyable or relaxing, all accommodation has been adapted to a high standard to reflect individuals’ sensory preferences. Many autistic adults have sensory equipment on site such as a sensory room, many have their own jacuzzi installed or can access a jacuzzi at one of the other homes. Gardens are designed and equipped with swings, fire pits and vegetable plots according to interests. Activities programmes often offer a sensory choice option on their schedules, and sensory motivating activities are built into daily schedules.

Autistic people tolerate a range of sensory experiences within a safe and secure context, where good practice was observed homes were located or specifically acquired in rural areas within Greater London, and some were adapted with soundproofing, climate control, side access, or fencing to ensure greater control over the sensory environments, reduces impact from external sensory stimulation overloading autistic individuals but also reduces risks of placement breakdowns, when individuals make noise when self -regulating or stimming.

Staff consistently offered low arousal support and, in some cases, reduced volume to a whisper, adapted presentation to a low and positive tone whilst offering reassurance to ensure autistic adults were feeling safe and respected.

Autistic adults are supported to regulate sensory experiences which interfere with what they are trying to do or cause them discomfort through low arousal approaches, access to sensory equipment, such as weighted blankets, weighted neck support and activities to help with muscle tone or vestibular sensitivities. Some individuals have access to their preferred sensory equipment for stimming at all times.



Emotional Well-being

Key outcomes identified from personal support documents and staff discussions:

Plans routinely show an appreciation of activities which each autistic person finds enjoyable, and relaxing or provide them with a sense of achievement and purpose. PCPs, detail what music an individual may like and how they can access this, activities such as swimming in the sea, wildlife, and politics. One individual has access to their own trampoline in their back garden but also attends weekly scheduled trampoline sessions as this offers motivation to transition into the community. The Positive & Proactive Support Plans (PPSP) have designated sections to "Promote Active Engagement in Meaningful Personalised Activities", such as playing football with staff, and making art using different materials.

Support Plans identify approaches or activities to help maintain the well-being of each autistic person including zones of regulations, Talking Mats, to talk through eleven questions or a memory book to help capture positive moments, to help reduce negative thoughts.

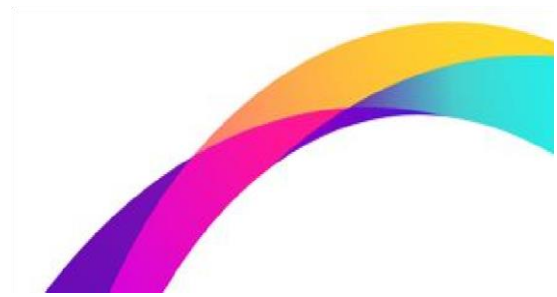
The PBS team drives the Functional Analysis of Behaviour which informs all support planning and PPSPs, these illustrate proactive and preventative strategies to avoid anxiety or distress and emotional support strategies in detail.

The PBS team analyses incidents in detail and they shared examples and data where incidences have reduced significantly. In the case where a person had a few more incidences recorded than usual, they had made referrals to the Learning Disability PBS team to review their support together. Case studies also illustrate examples where someone is much less anxious and reduced self-harming since moving to their own home.

A recent Restraints Data Collection and Analysis Report identified a reduction in the number of occasions that PRN was given in the period from 30 in December to 20 in March and whilst there had been no high levels of physical interventions in that period there was a significant reduction in low-level physical interventions. Some of the autistic individuals that were flagged up in this process have had a more detailed analysis of the supports that have been introduced to reduce anxiety levels such as the use of social stories to help come to terms with changes or reintroducing swimming and making plans to swim the channel, have given a positive focus reducing anxiety.



Case studies identify positive achievements and progress impacting on the quality of life of each autistic person including one person who struggled in previous placement having greater access to and inclusion within community activities, such as having regular social meetups with their teams in favourite restaurants or bowling. Another person has reduced anxiety levels and self-harming since moving out of shared accommodation into their own home, and they have increased confidence are developing new skills. Another individual had a successful transition into their new home from a long-stay hospital and is now mostly happy and engaged in indoor and



outdoor activities, learning new skills, and has a healthier lifestyle where they lost weight through a healthy menu and doing regular exercise.

In interviews, staff can give examples of how autistic people have been supported that resulted in positive outcomes in terms of quality of life and life opportunities including greater inclusion and involvement within the community, such as a desensitisation programme to become less wary of cars after a traumatic incident where car alarms were set off on a ferry. After a period of not wanting to participate in community activities, the person has now begun to access community-based activities again, by foot or car and is planning to see their favourite football team. Another person has lost a significant amount of weight by adjusting eating habits and by working closely with families who used to bring sugary snacks, this has increased their mobility and ability to access the community for longer. Some individuals had experienced difficult periods through failed placements, living in unsuitable services or in long-stay hospitals and have made successful transitions where they are now able to access the community and begin to learn to communicate and regulate.

In interviews, staff can describe how autistic people are actively engaged in determining how they are supported by using a Talking Matt to reflect on the week, using "11 questions" and expressing how they are feeling about the support they receive and how the team can adapt.

In interviews, staff can describe how family, carers or advocates are supported and involved. Each autistic person has their own WhatsApp group where staff, family and PBS coaches are sharing daily events, concerns and positive outcomes. The service invites families to meetings and consultations to co-create support plans. The PBS team recently attended a training on Systemic work to assist with supporting complex family dynamics more effectively.

Feedback from 7 autistic people shows that they are happy with the support they receive, and the staff's understanding of their skills and needs.

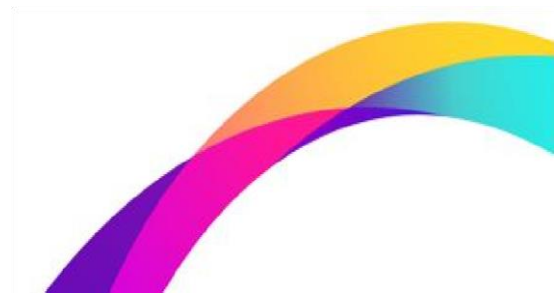
Verbal feedback from 4 families was very positive. They described the service as realistic, flexible and going the extra mile to design the service around specific and sometimes very complex support needs. Some families spoke of slow and wellconsidered transitions which ensured the autistic person had a smooth move into the new service. The 12 returned surveys show that families are happy with the support their relatives receive and staff understanding of their relative's skills and interests.

Key outcomes identified from observation/review of key activities:

Almost all autistic people present as feeling safe and calm, and felt at ease with staff and visitors. Where good practice was observed, an autistic adult that is fairly new to the service, was having a difficult morning and had been showing signs of dysregulation by pulling their top over their head prior to the observation. A member



of staff met with the observer outside the flat, to advocate on behalf of the autistic adult that visitors and placing demands on them, like the planned observed activity, would cause more anxiety.



As mentioned earlier, one autistic person got concerned with welcoming visitors by insisting to take coats, shoes and bags, this was causing some distress and they were quickly guided away and redirected to get ready for their jacuzzi.

In almost all observations the support is meticulously planned and individuals are supported with their understanding of what is expected, whilst offering clear structure and access to motivating activities. These proactive and preventative strategies are in place to avoid anxiety, confusion or distress from occurring or escalating. When signs of anxiety are recognised staff are quick to respect individual requests or offer reassurance, which was visibly helping individuals self-regulate.

Where appropriate, autistic people are supported to understand and regulate their emotions, by referring to zones of regulations or using Talking Mats with 11 questions to reflect on what has gone well and what they would like to discuss or change. It was evident that these sessions helped the individuals to express and reflect and staff were responsive and offered solutions, whilst checking in if this would be of benefit to the individual. In other observations, staff used scripts to respond to negative ruminations and gently suggested: "that was in the past" and helped them to focus on now and the future goals.

All autistic people are treated with dignity, status and respect and are provided with meaningful positive feedback to boost confidence and self-esteem, in ways that helped individuals. The staff demonstrated they know the people they support well, and will advise visitors to take glasses or facemasks off for particular individuals or offer seethrough visors so that the autistic adult can be reassured by being able to see facial expressions.

In all observations, autistic people engaged in meaningful activities which they find fun or interesting, these were highly individualised.

It is clear that the service is reflective and always considers the next steps for helping autistic people develop further within the context of what is meaningful to them and enhances their quality of life. For example, if someone mastered completing all aspects of doing their laundry independently, the goal would move to purchase laundry detergent.

Staff adapted their approach to reassuring and praising the autistic people they supported in appropriate ways, for some individuals there was a constant stream of praise and for others, it may have been a high five at the end of completing the task or reiterating that they have done a good job.



Section 3: Summary of assessment

What the provision does particularly well

What stood out as particular strengths in supporting autistic people: The service has clear ideas of where its strengths and continuing areas for development are and use the autism accreditation audit and their recently developed auditing and recording tools, to continue to monitor practice and outcomes across the services. The ethos of this service is underpinned by analysing, reflecting, monitoring, supporting and learning as a team. One support staff summarised that the teams "leave no stones unturned" in regards to training, staff support and support planning.

The Behaviour Support Team drives the analysis of behaviour, which in turn informs the detailed support planning. The extensive team, consisting of a PBS Lead coach, 8 PBS coaches who support teams and have caseloads and 6 PBS champions, supports autistic people and their teams, through training, analysing incidents and fine-tuning approaches to ensure well-being and quality of life are supported adequately. The team of PBS coaches receives clinical supervision and is supported by an external agency. The PBS coaches make referrals and work collaboratively with relevant professionals and families.

The Behaviour Support Team is instrumental in each individual's transition process, and provided evidence of carefully supported and successful transitions for autistic individuals with complex backgrounds or support needs, who often struggled to find suitable support and accommodation. The same person-centred transition principles are also applied to supporting individuals to attend new activities such as going to college or a new day service, as well as moving into new accommodation within the service.

Sampled behaviour analysis data demonstrate a marked decline in incidents. And teams are quick to respond when data demonstrate changes in patterns of behaviour.

Homes are selected for and adapted to a high standard to accommodate individual support needs and personal and sensory preferences, resulting in autistic people settling in well, sometimes for the first time in their adult life.

The Staff induction programme has been reviewed and adapted since the last assessment, and although this programme is part of the services' ongoing development: it is clear from interviews and observations that the service embraces a culture of reflecting, improving and learning together. The service has carried out intensive work to design an induction and CPD programme, that aims to scaffold



learning through training, shadowing, modelling, roleplay, and self-reflective practice, where support staff are supported and practice is monitored and triangulated via video to ensure new and established staff understand and demonstrate competencies to deliver good autism practise in line with the service's ethos. New staff reported that the induction process was thorough and they felt supported.

Feedback from autistic people and their circle of support is very positive and families and teams reported working closely together, having open communication and inviting collaborative practice. The PBS team recently received training in systemic work, to be better equipped to support complex family dynamics.

Families described the service as realistic, flexible and going the extra mile to design the service around specific and sometimes very complex support needs. Some families appreciate the careful planning of slow and well-considered transitions which ensured the autistic person had a smooth move into the new service.

Support planning documentation illustrates a high level of person-centred support detail.

Consistent use of adapted and bespoke visual communication to facilitate choice, structure and communication was observed in almost all observations.

The service delivers a varied and high-quality sensory-based offer.

What else the provision does well:

The service has developed and introduced the practice audit tool in the last 18 months, where the services ensure practice and documentation is effectively and accurately monitored by the leadership team. These audits are analysed and inform where gaps are in terms of practice but also where the leadership team needs support in conducting these audits to a high standard.

All autistic adults are supported to develop independence skills, within the context of their skills and abilities. Structured teaching is embedded practice for those autistic people who can learn along these lines, and all individuals continue to make progress in functional living skills.

The week in the life of and progress videos provide a good insight on all the activities and support on offer for each individual and the progress they have made in sometimes short periods, these videos illustrate the service focus on improving the autistic person's QOL and the positive impact that the individualised support programmes have.

Almost all autistic people presented as happy, confident safe and calm and were offered reassurance and detailed levels of support to help with regulation.



What the provision could develop further

Areas to consider:

Building on existing good practice, the service could celebrate successes in the achievement section in all the PCPs, and comment more consistently on progress including independence, communication and social interaction.

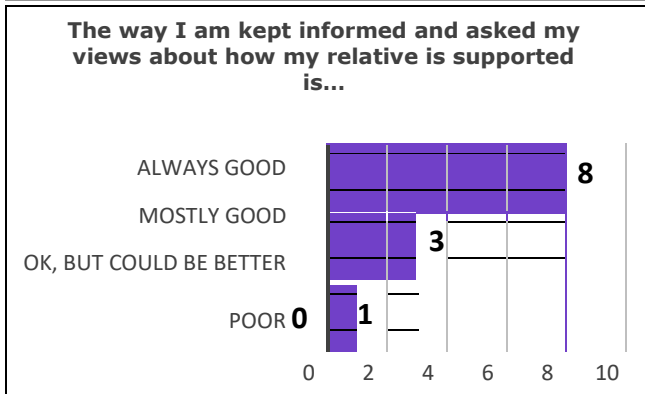
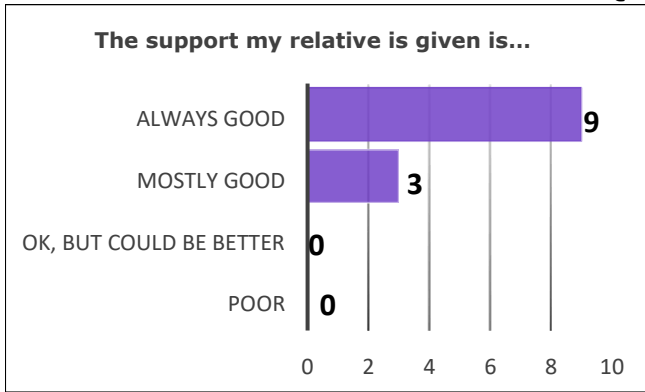
The service has begun piloting daily monitoring forms for 3 autistic adults, to be in a position to summarise progress and achievements in those areas in the annual PCPs.

Support documentation illustrates a high level of support detail for each individual, it would be useful to have these summarised consistently across all pen portraits to give a quick insight into the key support strategies that should be offered.



APPENDIX: SURVEYS

Families of Autistic Persons - Questionnaire Responses (12)



Comments

My son is new in the setting at Turkey Street. At the moment, they look after him very well. It is important that we review after one year how things are going, whether the service is still good. but I am very happy at this moment.

My daughter is well looked after in every aspect. Staff are attentive and anticipate her needs given she is non verbal. I have had independent feedback from LAS about the outstanding support provided to my daughter. Overall I am happy with the care and support my daughter receives.

I value and appreciate the daily work, autism specific knowledge and expertise of my son's team to support his complex care, health and wellbeing. It makes a huge difference to his quality of life and social contribution. The accreditation from NAS is worth it. Thank you.



Its my son's third week sleeping over with Marcus and Marcus and its difficult to answer these questions, however I hope that slowly we are progressing forward.

We happy

Provision provided is excellent.

My daughter has received outstanding service from Marcus and Marcus. She is non verbal and has very challenging behaviour. Her team have worked extremely hard over the last few years to help her with the challenges she faces and there has been a dramatic improvement in the quality of her life. When I say "her team" it truly is a team effort! Working together are the staff , the project manager, the PSI , Edward, Clement and her family. We have been very much involved from the start and our opinion sought. Lines of communication are good and there is a lively What's App group so we are kept informed of daily activities etc. I feel that I can call anytime to discuss ideas. Before she moved into her placement the staff shadowed us at home for about six weeks to get to know her. My daughter has always been treated with respect , kindness and consistency. Her staff team has remained very stable and when new staff are needed there has been a long shadowing period before they take on the role, this has helped so much to make her feel more relaxed and safe when new staff do takeover . This type of attention to her needs is especially important for my daughter , she needs to trust her caregivers and feel safe with them, she needs to know they can cope with her behaviour. As I mentioned there has been a dramatic change in her quality of life, which will never be without its challenges, however, she is happy, relaxed, she listens well and tries hard , she's communicating much better, enjoying her activities, learning new skills , she is proud of herself and her achievements. These are huge achievements! She is so different to the person she was when this journey started and I am so grateful. I know her progress will continue.

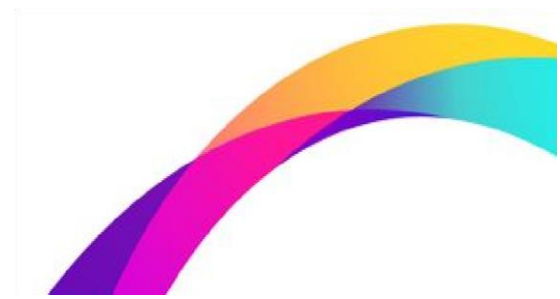
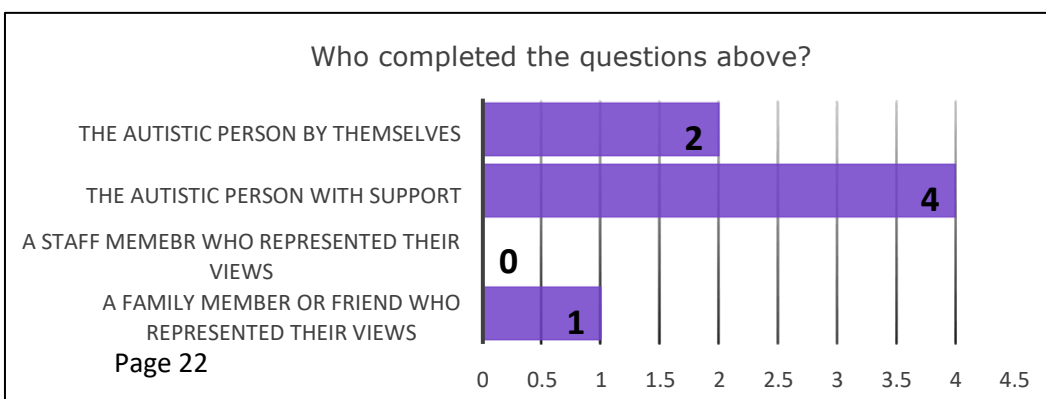
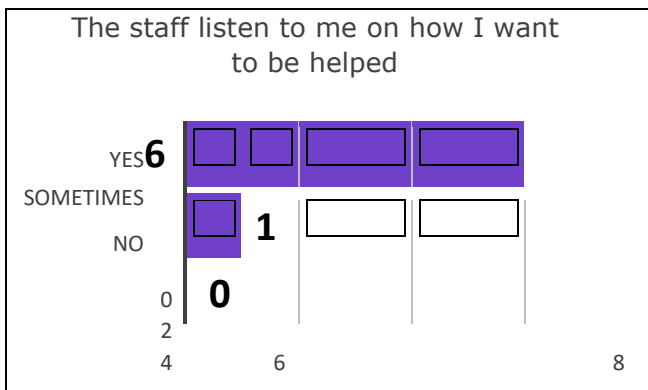
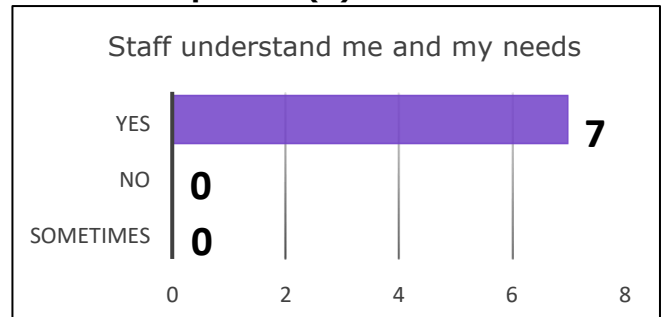
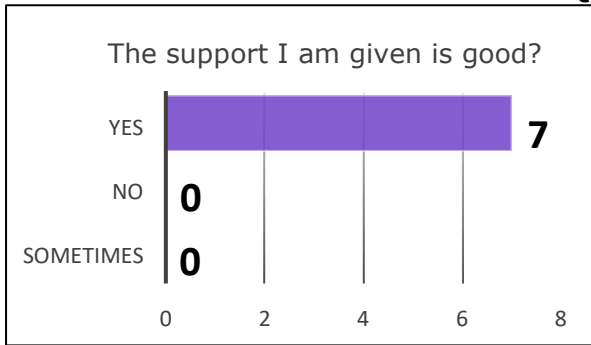


I have given feedback as 'mostly good' because life is never 100% 'good' there is always room for improvement and learning. I believe that my son T is well cared for however frustrations arise when staffing levels have been affected due to sickness or absence for other reasons which may affect outings and activities for T. My son is a young man with energy and a need for the pleasures of life, if boredom sets in then his behaviour can become challenging which then affects the other clients in his house and can put T, staff and clients at risk. T comes home for a visit 1x per month and because he can often be unsettled the staff will support us the best they can while he is at home but this is not funded support, they do this out of the goodness of their heart and sometimes it may not be possible due to other clients needs at the time. The care and support that my son gets is extremely good and the

lines of communication between myself and the staff and managers is always open to any feedback , they are approachable and will always listen and if I want to join in a team meeting I am welcomed. T cannot express some of his needs and it is very important that we continue to help improve communication between him and those who care for him so that T quality of life is as happy and fulfilled as possible.



Autistic Person - Questionnaire Responses (7)



Comments

not applicable

I am having a better time in present than past placements.

No further comments.

None

I asked my client these questions with Talking Mats. We had to be more specific with some of the questions e.g. 'The Support I am given is good' we asked questions about if he is happy with staff, do staff listen, do staff talk nicely, do staff help you to do what you want to do? etc...

My client explained that sometimes staff will wake him up early. My client can sleep in until 4pm. We gently try to wake him at times, so he can sleep at night. This is why staff go to him and knock on his door in the morning. When he refuses, they try to negotiate with him and ask when they should come back. I agreed that I would speak to the team, but is it ok if we meet in the middle. My client smiled and said "Yes." I also asked if staff speak nicely to him. He said "Sometimes." Then explained that a member of staff (Who was present) raised his voice when he was in red zone. But he explained that the member of staff was not angry, because he knew it was not his fault. I facilitated a dialogue between the staff and client, where the staff explained that he was firm with his tone. I then asked the client to tell him that he does not like that firm tone. The client is extremely sensitive to facial expressions and voices when he is high arousal. When we speak to him, we need to be very reassuring and take the bass out of our voice, to avoid further triggering him.



I am very happy for my son to be supported by Marcus and Marcus especially the support staffs.

APPENDIX: INFORMATION FROM THE PROVISION

This section should be copied and pasted directly from the assessment introduction form

Provide a brief description of the provision made for autistic people.

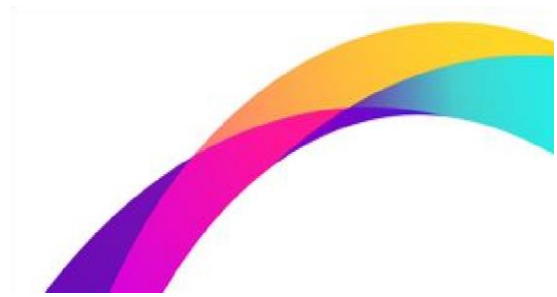
As a Company, Marcus and Marcus provide individual packages of support to enable people with complex needs to live ordinary lives in their community. This is done via its Supported Living Projects, which are primarily focused around the boroughs of Enfield, Haringey and Barnet.

We focus on supporting people with high levels of need many of whom have behaviours that challenge services, Autism and learning disabilities with additional mental health issues. Many of our clients have had multiple hospital admissions and. Or placement breakdowns due to the complexity and challenges in understanding and meeting their needs.

How many people are supported by the provision? 106

How many of this number are autistic? 76, 19 as part of this membership

What is the range of autistic people supported by the provision? e.g., age; learning disability; verbal or non-verbal etc.



A range of ages are supported from the early 20s to 50s and they all have different support needs i.e. autism, Learning Disability, mental health etc and the support is included in detailed Person Centred Plan, PBS plan, Risk assessment, Support plan.

What are the main approaches or methods employed by the provision in supporting autistic people?

Our main approaches are,

- Positive Behaviour Support.
- Total communication i.e. Object of reference, Symbols, Talking Mats etc.
- Intensive Interaction.
- Zones of regulation, Feelings Thermometer.
- Sensory Diet/lifestyle.
- Social Story.
- Structured Teaching.
- Capable Environment.
- Active support – skills development

What was the outcome of the provision's last statutory inspection (where appropriate)

CQC inspected the service in September 2017 and considered them to be good

What training/ongoing professional development is provided for staff in delivering autism related approaches or methods?

Our PBS Team usually provides these training (depending on the person's need) below,

- Autism & Learning Disability
- Introduction to PBS
- TEACCH
- Intensive Interaction (External Trainer from "Us in a Bus")
- Making Sense of Behaviours
- Introduction to Functional Behaviour Assessment
- Incident Analysis Workshop
- Person Centred Plan
- Social Story
- Picture Exchange Communication
- Makaton
- Capable Environment



What processes are in place to ensure that each autistic person has an individual support plan that considers their communication and sensory responses and promotes their independent and well-being?

If a Service user already have a Speech Language Therapy report, we incorporate this into the Person Centred Plan. It is also discussed in the Person Centred Planning training for frontline staff. We then monitor this through our practice audit and direct observations.

If a SaLT or OT gets involved while we are supporting the person, usually the SaLT/OT would do an assessment and provide training and workshop to the staff. We will then role model the intervention i.e. Object of Reference, get feedback from the SaLT/OT and implement these with the service user. The SaLT/OT will oversee the implementation until we achieve our target.

In regard to promoting independence and sensory responses, whilst we are developing the support plan our "Thinking behind the activity" of each plan would focus and consider addressing sensory need, skill development and promoting overall well being of the person.

What do you consider to be the main areas of development for the provision?

1. Staff induction programme.
2. Practice audit.

What do you consider to be the main areas of strength for the provision?

1. Making Sense of Behaviour.
2. Transitioning service users to our service.

