

Parkside Court Care Home Service

1/2 Parkside Court
Dalkeith
EH22 3BF

Telephone: 01316 542 257

Type of inspection:
Announced (short notice)

Completed on:
6 February 2026

Service provided by:
Scottish Autism

Service provider number:
SP2003000275

Service no:
CS2003011035

About the service

Parkside Court is a care home service registered to provide accommodation and support to five adults with learning disabilities and autism. It is one of a range of services in Scotland provided by Scottish Autism. The service consists of a ground floor flat where two people live and a first floor flat where three people live.

The service is situated in Dalkeith town centre and is close to local transport links and amenities. The care home blends in with other properties in the area, which promotes integration for residents in their local community. The service provides twenty-four hour support to people living at Parkside Court with an on call back up system.

Five people were using the service at the time of our inspection.

About the inspection

This was an announced (short notice) inspection which took place between 2 and 3 February 2026. We visited the registered service on 2 February, met with residents, staff and sampled relevant documentation. On 3 February we reviewed further documentation remotely. We provided feedback to the manager on 6 February 2026.

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 residents using the service.
- Received further feedback from all five residents through our online questionnaires, with support from staff where required.
- Received feedback from three relatives through our online questionnaires and email correspondence.
- Spoke with four support staff and management. Plus, received comments from a further two staff via our online questionnaires.
- Observed staff practice and daily life.
- Reviewed a range of documents.

Key messages

- We observed warm, respectful, and natural interactions between staff and the individuals they support.
- People praised the quality of the staff who supported them.
- People were supported to maximise their experiences and opportunities for enjoying a variety of activities within the community. Building friendships with others.
- A positive and inclusive service was experienced by all.
- Care plans were well-crafted and tailored to meet each individual's unique needs, reflecting a person-centred approach.
- Staff reflective practice discussions were embedded within the service, maximising positive outcomes and experiences for people as much as possible.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found the service had made positive progress in completing their self-evaluation. The service should continue to develop this approach to support improvement.
- Concerns remain regarding the suitability of the premises at Parkside Court. This has the potential to impact people's outcomes negatively. Improvement was needed.

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 staff team?	5 - Very Good
How good is our setting?	3 - Adequate

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

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

People told us they found the support staff to be kind and polite. Through the positive relationships they had built, people said they felt treated with dignity, respect, and compassion, reflecting the principles of the Health and Social Care Standards.

People also shared they enjoyed taking part in meaningful activities, both within the service and in their local community. These included recreational and social opportunities such as attending the day centre, music therapy, swimming, and arts and crafts. One person told us, "I enjoy doing my colouring in".

People were supported by a small, consistent team of staff whom they knew well, with effective management oversight in place. This consistency reassured people and their families and helped build trusting relationships. One relative commented, "The leaders are very confident in all they do".

Staff demonstrated a strong understanding of people's needs, supported by detailed and up to date personal plans and guidance. This ensured staff were well informed and able to work consistently to help people achieve the outcomes which mattered to them.

Staff kept good records when administering prescribed medication. However, the effects of some 'as required' medications had not been recorded, meaning it was unclear whether the medication had been beneficial. We highlighted this to the manager.

Staff worked well with health professionals, ensuring people had access to a range of healthcare opportunities, regular assessments, and treatment from trained practitioners who supported their health and wellbeing.

Although registered as a care home for adults, the service operated very much in line with a care at home approach, supporting people to live as independently as possible. This included help with weekly shopping, planning activities, housework, cooking, washing, and promoting self care wherever possible. This approach supported people to make choices about how they lived their lives and to maintain or develop independent living skills.

How good is our staff team?

5 - Very Good

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

Staff had been recruited in a way which ensured they were safe and suitable to care for people. Recruitment practices were robust, clearly documented, and supported by the necessary checks.

Staff told us the management team was knowledgeable and supportive. They demonstrated a strong understanding of the nature and challenges of supporting the individuals in their care. Staff also described managers as open and approachable, contributing to a positive, collaborative working environment.

At our previous inspection, we identified the need for staff to receive more regular formal support and supervision with their line manager. Evidence reviewed during this inspection showed improvements had been made. Regular supervision sessions were taking place, alongside annual performance reviews and observations of practice. There was a strong focus on reflective practice and ongoing development, all aimed at maximising outcomes for people using the service.

A range of learning approaches was available to suit different learning styles, and it was evident all staff had access to relevant training, to meet people's ongoing care and support needs. The manager maintained a training matrix to ensure training remained up to date and aligned with best practice.

Team meetings were held regularly and focused primarily on the experiences of people receiving care and included opportunities for reflective practice. Staff were supported to stay informed about current and emerging best practice, with easy access to a wide range of guidance.

How good is our setting?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas needed to improve.

The home was clean, tidy, and free from clutter. People were actively involved in relevant housekeeping tasks with staff support, as described in Key Question One of this report.

All bedrooms contained personal belongings and appropriate decoration. This reflected the support provided to residents, to choose their own furnishings and room layout.

Over recent years, we have become increasingly concerned about the design and layout of the property. Issues such as the steep internal staircase and the shared bathroom do not fully promote people's rights to dignity and independence. Since our last inspection, the manager has developed an action plan as part of an ongoing project to identify more suitable accommodation, recognising people's care needs may increase as they grow older.

Although regular management meetings have taken place, including consultations with residents and their families or guardians, there has been limited meaningful progress, and no agreed timelines have been established.

The lack of a clear decision about the future of the service's accommodation has led to growing frustration among some residents, relatives or guardians, and staff. One person told us, "My room is very small. I have to share a bathroom with two other residents and the staff".

The current premises at Parkside Court are not fully suitable and have the potential to negatively affect people's outcomes. Management should ensure residents and their relatives or guardians remain actively involved in ongoing discussions, with realistic timescales clearly outlined and reflected in updated action plans. Please see Area for Improvement One.

Areas for improvement

1. The manager should continue to adapt premises for changing support needs, whilst looking at alternative options as previously outlined, and ensure individuals using the service, along with their relatives or guardians, are actively and meaningfully involved in shaping decisions about the future of the environment.

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Clear and realistic timeframes should be established for the completion of all proposed actions.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "I can use an appropriate mix of private and communal areas, including accessible outdoor space, because the premises have been designed or adapted for high quality care and support". (HSCS 5.1)

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 ensure people experience high quality care, the provider should ensure that there is a structured support and supervision system in place for staff and this is delivered consistently in line with their relevant policies and procedures. This is to support the ongoing development of staff, ensuring they are competent, skilled and able to reflect on their practice to continue to meet people's needs.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: 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 10 March 2023.

Action taken since then

As reported in the main body of this report, improvements have been made since our last inspection. Therefore this area for improvement has been met.

Previous area for improvement 2

To support positive outcomes for people, the provider should ensure the environment is suitable to fully meet peoples' assessed care and support needs, and potential future care needs including people's mobility being a key focus area.

To do this, the provider should, as a minimum:

1. Develop and implement an action plan which has specific, measurable, achievable, relative and timebound (SMART) objectives, to ensure the accommodation is fit for purpose to meet people's care needs in the medium to long term. This includes adaptions to the current registered building.
2. Engaging in meaningful discussions with people, their relatives, welfare guardians and other relevant agencies and professionals.
3. If from the above action plan, it was identified that the current environment would not meet people's care needs in the medium to long term, then alternative accommodation opportunities that can meet people's outcomes should be explored.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "The premises have been adapted, equipped and furnished to meet my needs and wishes". (HSCS 5.16)

This area for improvement was made on 10 March 2023.

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Action taken since then

As reported on under Key Question 4 of this report, work has begun in terms of consulting with people and holding various meetings as part of the ongoing project for improvement. However, we feel that timescales need to be set, even if not fully achieved, to enable people, their relatives and staff to have an idea of the timescales involved. We have therefore repeated this area for improvement with a greater focus on setting timescales.

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 staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good
How good is our setting?	3 - Adequate
4.2 The setting promotes people's independence	3 - Adequate

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