

Young Foundations Limited

The Daltons

Inspection report

Dalton-le-Dale
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Outstanding ☆

Is the service well-led?

Good ●

Summary of findings

Overall summary

This inspection took place on 23 August 2018 and was announced. The Daltons was last inspected by the Care Quality Commission (CQC) on 4 and 8 February 2016 and was rated Good. At this inspection we found the evidence continued to support the rating of 'Good' and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risk or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The Daltons is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The Daltons accommodates up to 6 people up to the age of 26 who have additional learning needs and/or mental health issues. The home provides people with opportunities to develop independence skills and coping strategies. On the day of our inspection there were six people using the service. People who used the service and their relatives were complimentary about the standard of care at The Daltons.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

The registered manager understood their responsibilities about safeguarding and staff had been trained in safeguarding vulnerable adults. The home was clean, spacious and suitable for the people who used the service. The provider had effective procedures in place for managing the maintenance of the premises and appropriate health and safety checks were carried out. Accidents and incidents were appropriately recorded and risk assessments were in place where required. Appropriate arrangements were in place for the safe management and administration of medicines.

The provider had an effective recruitment and selection procedure in place and carried out relevant checks when they employed staff. There were sufficient numbers of staff on duty to meet the needs of people who used the service. Staff were supported to provide care to people who used the service through a range of mandatory training, supervision and appraisal. Staff said they felt supported by the registered manager.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. People were protected from the risk of poor nutrition and staff were aware of people's nutritional needs. People had access to healthcare services and received ongoing healthcare support.

The service complied with Article 12 of the UN Convention on Children's Rights which states every child has

the right to express their views, feeling and wishes in all matters affecting them, and to have their views considered and taken seriously. The service had arrangements in place to give people a voice in matters which affected them.

Staff treated people with dignity and respect and helped to maintain people's independence. People were offered choices by staff to participate in activities which supported their growth and learning as well as increased their confidence.

The service commissioned a psychologist who visited the service weekly to provide support to people and staff. This meant there was a psychological perspective in the service which promoted people's growth and potential.

Care records showed people's needs were assessed before they started using the service and care plans were written in a person-centred way and reviewed regularly. Person-centred is about ensuring the person is at the centre of any care or support and their individual wishes, needs and choices are taken into account.

The provider had an effective complaints procedure in place and people who used the service and their relatives were aware of how to make a complaint. The provider had a quality assurance process in place. People who used the service and staff were regularly consulted about the quality of the service through meetings and surveys.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Outstanding ☆

The service remains Outstanding.

Is the service well-led?

Good ●

The service remains Good.

The Daltons

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 23 August 2018 and was announced. The provider was given 48 hours' notice because the location was a small care home for young adults who are often out during the day and we needed to be sure that someone would be in. The inspection was carried out by an adult social care inspector and an expert by experience. The expert by experience had personal experience of caring for someone who used this type of care service.

Before we visited the home, we checked the information we held about this location and the service provider, for example we looked at the inspection history, complaints and statutory notifications. A notification is information about important events which the service is required to send to the Commission by law.

We contacted professionals involved in caring for people who used the service, including commissioners, safeguarding and infection control staff. We also contacted Healthwatch. Healthwatch is the local consumer champion for health and social care services. They give consumers a voice by collecting their views, concerns and compliments through their engagement work. Information provided by these professionals was used to inform the inspection.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we spoke with six people who used the service and two relatives. We spoke with the registered manager, psychologist, five care staff and two social care professionals.

We looked at the personal care or treatment records of three people who used the service and observed

how people were being cared for. We also looked at the personnel files for three members of staff.

We reviewed staff training and recruitment records. We also looked at records relating to the management of the service such as quality audits, surveys and policies.

Is the service safe?

Our findings

All the people we spoke with told us they felt safe at The Daltons. One person said, "I feel absolutely safe here, secure too" and another person said, "Yes, I feel safe." One relative told us, "Yes, she is absolutely safe." There were sufficient numbers of staff on duty to keep people safe. People who used the service, their relatives and the staff did not raise any concerns about staffing levels.

The provider had an effective recruitment and selection procedure in place and carried out relevant security and identification checks when they employed new staff to ensure they were suitable to work with vulnerable people. The provider's safeguarding policy provided staff with guidance regarding how to report any allegations of abuse. Staff had been trained in how to protect vulnerable people. The staff we spoke with demonstrated a good awareness of safeguarding and whistleblowing procedures.

People had risk assessments in place relating to, for example, accessing the community. The assessments were detailed to ensure staff could identify and minimise the risks to keep people safe. The provider had environmental risk assessments in place relating to, for example, the building, equipment, care practice and activities which contained detailed information on particular hazards and how to manage risks.

People's money was kept safe and was handed over to people as and when they needed it. Accidents and incidents were recorded and regularly reviewed by the registered manager. Regular safety checks were carried out on the home's vehicle to keep people safe.

The home was clean, spacious and suitable for the people who used the service. All visitors were required to sign in. The provider had effective procedures in place for managing the maintenance of the premises. Appropriate health and safety checks were carried out and the records for portable appliance testing, gas safety and electrical installation were all up to date. Appropriate personal protective equipment (PPE) and hand washing facilities were available. Staff had completed infection control training.

There were arrangements in place for keeping people safe in the event of an emergency. The provider's emergency continuity plan provided the procedures to be followed in the event of a range of emergencies. People who used the service had Personal Emergency Evacuation Plans (PEEPS) and evacuation information was presented in a pictorial format throughout the home. A fire emergency plan was displayed in the reception area, a fire risk assessment was in place and regular fire drills were undertaken. The checks and tests of firefighting equipment, fire alarms and emergency lighting were all up to date.

Appropriate arrangements were in place for the safe management, administration and storage of medicines. The provider's medication policy covered all key areas of safe and effective medicines management. Staff could explain how the system worked and were knowledgeable about people's medicines. People's medication administration records (MARs) showed the medicines a person had been prescribed and recorded whether they had been administered or the reasons for non-administration. Records we viewed were up to date with no omissions. Staff who administered medicines were trained and were required to undertake an annual competence assessment. Medicine audits were up to date. One person told us, "I

always get my medication on time" and another person said, "Staff have explained to me what my medicine is for."

Is the service effective?

Our findings

People who lived at The Daltons received care and support from trained and well supported staff. New staff completed an induction to the service. Staff mandatory training was up to date and where gaps were identified, training was planned. Mandatory training is training that the provider thinks is necessary to support people safely. Staff were supported in their role and received regular supervisions and an annual appraisal. A supervision is a one to one meeting between a member of staff and their supervisor and can include a review of performance and supervision in the workplace.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met. The registered manager had a good understanding of their legal responsibilities with regard to the MCA and DoLS and staff had received training in the MCA. Some people were subject to the Court of Protection which required them to live at the Daltons and applications for DoLS had also been submitted to the supervisory body. Consent to care and treatment was documented in people's care records.

A pre-admission assessment was completed to determine whether the service would be able to meet people's needs. Care records provided information on people's preferences, whether they had any specific dietary needs and guidance for staff to follow to support the person. Staff were knowledgeable about people's special dietary needs and preferences. The provider had a nutrition and wellbeing policy in place and staff had completed training in food hygiene and food allergy. The home had been awarded a "5 Very Good" Food Hygiene Rating by the Food Standards Agency on 20 June 2018.

Mealtimes were a sociable experience. At lunch time we observed one person prepared sandwiches for everyone who used the service and washed up afterwards. Another person prepared chicken teriyaki for the evening meal. People could eat in their own bedrooms if they preferred. One person told us, "We get a choice. We plan the menu together and if you don't like the main choice you can put an alternative on the menu." One relative said, "He has never complained about the food."

People had access to healthcare services and received ongoing healthcare support. Care records contained evidence of visits to/from external specialists including, GPs, dentists, opticians, mental health teams and dietitians.

The layout of the building provided adequate space for people and the home was suitable for the people who used the service. People's bedrooms were individualised. The registered manager told us how people were consulted about, and involved in, the refurbishment of the home.

Is the service caring?

Our findings

People who used the service and their relatives were complimentary about the standard of care at The Daltons. One person told us, "I am happy with my care." One relative said, "She seems to really like the staff, she is very happy." Another relative told us, "The staff are very kind."

The service focussed on the whole person's wellbeing. Staff chatted to people and engaged with them in meaningful conversation, talking about shared experiences. People approached staff with issues they wanted to discuss and looked comfortable in the presence of staff. Staff talked with, and listened to, people in a kind and caring manner.

Staff demonstrated they understood what care people needed to keep them safe and comfortable. Staff worked well as a team giving individualised care and attention to people. One person told us, "Staff knock on the door before they come into my room" and another person said, "Staff always ask me before they do things." Staff had completed person centred approaches and equality and diversity training. Our observations confirmed staff treated people with dignity and respect.

Staff were very thoughtful and interacted with people in a friendly and reassuring way. Staff knew how to support people and understood people's individual needs. One person told us, "Staff help me with budgeting, hygiene and making appointments. They supported me at college. They used to sit and wait for me whilst I was in my class and then take me out to lunch so it didn't feel like such a long day" and another person said, "Staff use keyworker sessions to talk through any problems we have."

Staff supported people to maintain their independence. People had a good rapport with staff. One person who used the service told us, "Staff give me the right level of support when I need it. It's so amazing they give me confidence" and another person said, "Staff support you to go out and get your toiletries and sweets or anything else you want."

People were encouraged and supported to maintain their relationships with their friends and relatives. Staff could tell us about people's friends and relatives and how they were involved in their care. People's comments were, "My boyfriend comes over when he wants for tea," "My brother, nana and mam visit whenever they want. My mam comes every Saturday and we go out," "I got support to visit my family" and "Sometimes I meet friends." One relative said, "I can visit whenever I want."

Advocacy services help people to access information and services, be involved in decisions about their lives, explore choices and options and promote their rights and responsibilities. The registered manager told us some of the people who used the service had independent advocates. Advocacy information was made available to people who used the service and people were directed to advocacy services if required.

We saw that people's care records were kept securely and could be located when needed. This meant only care and management staff had access to them, ensuring the confidentiality of people's personal information as it could only be viewed by those who were authorised to look at records.

Is the service responsive?

Our findings

People and their relatives told us how staff continued to provide outstanding help and support to them. We found powerful examples of how the service had impacted on the lives of people who used the service. However, it would be difficult to go into detail in the report as this would enable the people who lived in the service to be identified. One professional told us, "The Daltons is a leading example of how people with additional needs can be supported and integrated into community participation with exceptional outcomes."

The registered manager told us the aim of The Daltons was to value the potential of each young person and continuously support them to develop positive independent, life skills and empowering relationships to help them lead happy and productive lives. One person said, "Staff motivate me. I wouldn't have done so well at college without them. They saw the potential in me." One relative told us, "I am over the moon with the place they are doing such a great job it is having such a positive effect on her." One professional said, "This service is a leading example of exactly what expectational care should look like. They are a truly dedicated staff team where the values of enabling every person using the service to reach their full potential is lived and breathed in everything they do."

The service complied with Article 12 of the UN Convention on Children's Rights which states every child has the right to express their views, feeling and wishes in all matters affecting them, and to have their views considered and taken seriously. The service had arrangements in place to give people a voice in matters which affected them.

People informed us that they were treated as individuals and actively encouraged to make choices for themselves. People's comments included, "I am going out to the pub tonight for a meal as I have passed my exams," "I just got two tattoos," "I go to the youth club" and "I do karate." A relative told us, "Staff are helping her make her own choices." The registered manager also told us how people were included in the decisions regarding the home décor and we saw an example of a person's artwork on the wall in the communal lounge.

People were empowered to participate in education and employment which supported their growth and learning as well as increased their confidence. Since the last inspection, one person was exploring becoming a volunteer in a local dog day care service. Another person had successfully been employed at a local vintage tea room one day a week assisting with baking and general cleaning. One professional told us, "I am amazed as to how well the individual has progressed. The individual works alongside other learners and over the weeks has significantly improved in engagement. The staff are very kind, caring and most of all empowering and nurturing, and very much follow a philosophy of enabling support. The progress this individual has achieved is remarkable and fundamentally comes from the dedicated and outstanding support from the staff team at The Daltons and their willingness to engage with services such as ourselves."

The service also supported and involved people in positive daily activities which encouraged enjoyment including, board games, computer and Xbox, pamper nights, bingo, keep fit and stay healthy, movie night

and theme nights. The provider wrote in their PIR, "The team endeavour to promote new experiences and created new opportunities to allow each young person reach their own individual potential. Some of these experiences include visits to the theatre, going on holiday to Amsterdam (2017), Edinburgh Christmas Markets, visiting theme parks, trying new foods and visits to the Spa."

People told us the staff were marvellous and went the extra mile to facilitate outings. People's comments were, "We have been to Alton Towers for the day and I went on holiday to Selby. We are going again next year to a wooden cabin near Thirsk," "I went to Whitby Abbey and had a milkshake," "I am going to Whitby. I am getting new clothes, having my nails done and going swimming. I love holidays. I am hoping to go on two next year." One relative told us, "He went to the Harry Potter castle, he enjoyed that" and another relative said, "She has been so busy I can't believe it!"

The service was committed to providing a model of therapeutic care which was based on attachment and recovery from trauma. The service commissioned a psychologist who visited the service weekly to provide support to people and staff. This meant there was a psychological perspective in the service which promoted people's growth and potential.

Since the last inspection, a young person had been supported to move onto independent living by improving their insight into relationships, reducing their dependency on medicines and by learning such things as healthy eating, money management and travel training. One professional told us, the progress in the individual has been remarkable and The Daltons supported the person with some advice and guidance from ourselves."

One professional described how well staff had responded to a new referral to the service. They told us, "The young person looks well in herself and is settling in, getting along well with staff and young people. She is engaging in activities and the provider is open to suggestions in relation to the activities that the young person may like. The provider is communicating well with the social worker and providing regular communication with her." This meant the service enabled people to comfortably remain in their home environment and prevented readmission to hospital.

Since the last inspection, the registered manager described how the service had put forward a research proposal to Teesside University for a psychology student to work with the service on the therapeutic benefits of Pet Therapy and the impact of this on young people who have trauma backgrounds.

People's care records were person-centred and demonstrated staff had an excellent understanding of their individual needs. Care plans were in place and covered a range of needs including, behaviour, communication/social interaction, education/employment. For example, people's communication care plans clearly detailed the alternative communication aids used when young people struggled to verbally communicate their thoughts and feelings.

People had health action plans and hospital passports in place which contained information about their health needs. These would accompany the person should hospital treatment be required. People's care records described what a good day and a bad day looked like for them and provided staff with a valuable awareness of the person's potential triggers which may cause them to be unhappy. Since the last inspection, staff told us how one person's independence had been increased and the level of support they required reduced through positive risk taking and an incentive scheme.

People's preferences were recorded and met by staff. For example, one person told us how they had wanted an alarm on their bedroom door to feel safe and they showed us this had been fitted. A member of staff

described how one person had expressed a desire to manage their own finances and how a savings pot had been set up for them. People were aware of and involved in the care planning and review process. One member of staff told us how one person had designed their own care plans since the last inspection. Care records were regularly reviewed, updated and evaluated.

People told us they were encouraged to give their views and raise concerns or complaints. The provider's complaints policy was on display. There were no open complaints at the time of our inspection. The registered manager confirmed any concerns or complaints were taken seriously, investigated and responded to. People and their relatives told us they knew who they could go to with any concern or complaint and all felt that they would be listened to and that the concern would be addressed.

Is the service well-led?

Our findings

The home had a registered manager in place. A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager had been registered with CQC since 27 April 2015 and told us they felt supported in their role.

The registered manager told us the home had an open-door policy, meaning people who used the service, their relatives and other visitors could chat and discuss concerns at any time. People who used the service and their relatives spoke positively about the registered manager and the staff. They said that they were very approachable. They would have no concerns in approaching them if they had any worries or concerns. One person told us, "You can talk to [Registered Manager], she is wonderful the best manager. She is non-judgemental and a great supporter."

The home had a positive culture that was extremely person centred, open and inclusive. One relative told us, "I quite like the atmosphere in the home, it is happy calm and quiet" and another relative said, "The atmosphere is nurturing." One member of staff told us, "The manager promotes a homely home."

We looked at what the provider did to check the quality of the service and to seek people's views about it. The provider, registered manager and an independent professional carried out regular audits to ensure people who used the service received a high standard of care. These included audits of medicines, accidents, complaints and vehicle safety. These were up to date and included action plans to promote continuous improvement.

Staff were regularly consulted and kept up to date with information about the home and the provider. Staff meetings were held regularly. The staff we spoke with felt supported in their role and felt they could report concerns. One member of staff told us, "I love working here, it's rewarding to help young people move on." Another staff member said, "The manager is receptive to suggestions and takes your ideas on board."

The provider regularly sought the views of people who used the service and their relatives. Young people's meetings were held regularly. Discussion items included the weekly menu, jobs around the home and activities. We saw positive responses from the results of the 2018 surveys. People's feedback included, "I like the fact that staff are there to help and support me", "Staff are there to listen to me and give me very good advice", "The staff are caring supportive and good to talk to", "I like [Registered Manager]" and "I like the support I get and the activities."

The home had close links with the community including the local college and schemes to develop young people's employment and educational opportunities. People who used the service also regularly visited the local community centre, shops, pubs and restaurants.

The provider had policies and procedures in place that considered guidance and best practice from expert

and professional bodies and provided staff with clear instructions. The staff we spoke with told us policies were accessible and informative. The provider was meeting the conditions of their registration and submitted statutory notifications in a timely manner.