

Cambian Whinfell School Limited

# Cambian Dilston College

## Inspection report

Dilston Hall  
Corbridge  
Northumberland  
NE45 5RJ

Tel: 01434632692

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Cambian Dilston College is a specialist residential college, providing educational services, accommodation and personal care for young people aged 16 to 25 with learning disabilities, autism spectrum disorder and complex needs. Some people attend the college as day students and other people have residential places for up to 52 weeks. There were 9 young people receiving care and accommodation at the college during this inspection.

The accommodation is made up of several flats above the college and cottages in the grounds.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### People's experience of using this service and what we found

**Right Support:** Staff knew people well and knew the most effective ways to communicate with each person. People were supported to have maximum choice and control of their lives and staff assisted them in the least restrictive way possible and in their best interests; the policies and systems in the service upheld this practice.

**Right Care:** The service provided safe, personalised care. Staff worked well with other agencies to do so. The service had enough appropriately skilled staff to meet people's needs and keep them safe. The provider assessed risks and staff encouraged and enabled people to take positive risks. Staff had training on how to recognise and report abuse and they knew how to apply it.

**Right Culture:** People received good quality care and support because trained staff could meet their needs and wishes. Staff knew and understood people well. The values and attitudes of leaders ensured people led inclusive and empowered lives. Relatives gave positive feedback about the caring attitudes of staff and the effective management of the service.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 13 October 2021) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

At our last inspection we recommended a more collaborative approach to the assessment process to ensure all people's needs can be met before they move to the college. At this inspection we found the provider had acted on this and the assessment process was more robust.

#### Why we inspected

We carried out an unannounced focused inspection of this service 11 August 2021. A breach of legal requirements was found relating to good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions Safe, Effective and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last inspection, by selecting the 'all reports' link for Cambian Dilston College on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service effective?**

The service was effective.

Details are in our effective findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-led findings below.

**Good** ●

# Cambian Dilston College

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Cambian Dilston College is an educational college which also provides accommodation and personal care to some students. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spoke with 9 relatives about their experience of the care provided and observed the support of young people during our visit.

We spoke with 8 staff including the registered manager, senior support workers, head of care, college principal, facilities manager and transitions manager and senior support staff. We spoke with the regional lead for care who is the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also contacted 22 staff in writing for their views.

We reviewed a range of records. This included people's care records and multiple medication records. We looked at staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

At the last inspection we found the failure of the provider to assess and mitigate risks to safety contributed to the breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Premises risks were assessed and actions taken to make sure people's accommodation was safe and well-maintained. Previous fire safety issues had been addressed. The provider's maintenance team carried out routine checks of the building and equipment.
- People were protected from avoidable harm. Individual risks to people were assessed and actions were put in place to keep them safe.
- Relatives said the staff knew how to support people in a safe way because they understood their family members. A relative commented, "We feel [person] is 100% safe as staff know them really, really well."

### Systems and processes to safeguard people from the risk of abuse

- The provider had systems in place to protect people from potential abuse. Staff and managers understood their responsibility to safeguard people. Any concerns were reported appropriately.
- Relatives said people felt "safe" at the service. Their comments included, "[Person] is safe there and I have felt that from the very beginning" and "[Family member] is safe there from what we see of the level of care they receive and they are always happy."

### Staffing and recruitment

- The provider ensured there were enough staff to provide sufficient support to people who use the service. This included use of agency staff to cover vacancies. The provider endeavoured to use consistent agency staff who were familiar with people.
- Care professionals and relatives spoke positively about staffing levels. Their comments included, "The staffing levels are good so staff can do things with [person] that [person] wants to do" and "The service provides good consistent, good quality staff support, despite the challenges of recruitment, particularly given its rural nature."
- The provider used safe recruitment practices to check new staff were suitable to work with people.

### Using medicines safely

- Medicines were managed safely.
- People's medicines were securely stored and administered by staff who had training in medicine management.
- A 'medicines champion' was responsible for ordering and checking medicines to make sure staff followed best practice.

#### Preventing and controlling infection

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- Visiting arrangements were in line with best practice guidance. People were able to receive visitors and were able to go out of the college with support.

#### Learning lessons when things go wrong

- Systems were in place to learn from events. The provider had carried out a thorough review of lessons learnt following the last inspection and significant improvements had been made.
- The registered manager analysed trends in incidents and actions taken to help prevent similar incidents occurring again.
- The management team now had improved contact with the provider's other care services to share best practice.



# Is the service effective?

## Our findings

achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were robustly assessed before using the service. There had been significant improvements to the assessment process which was now managed by an entry panel. This made sure the service could determine whether the service was a suitable place for each person's individual needs.
- Care professionals commented positively on the "commitment, approaches and interventions of staff" in their support of people with "very complex needs". Relatives said their family member's specialist needs were well-met by the service.

Staff support: induction, training, skills and experience

- The provider made sure staff received appropriate training relevant to their role.
- Relatives said regular staff were particularly skilled and competent to work with their family members. Their comments included, "Staff are well trained in autism" and "Staff are well trained and totally switched onto [my family member's] needs."
- Staff received periodic supervisions and appraisal of their performance. Staff said they felt supported and there were clear lines of management.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff supported people to eat and drink enough to maintain good health. They understood people's food intolerances and where possible tried to help people broaden their diet. People were involved in planning their own weekly menus.
- Relatives said people got the right support with their meals and cultural diets. Their comments included, "[My family member] makes a list and they go shopping with staff", "Staff came to the house several times before [my family member] moved in and (learnt to) cook the food they like" and "Staff do their best with [person] around their diet but they are a very fussy eater."

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- Staff supported people to access healthcare services to maintain their well-being. The provider also employed specialist professionals to support people on site including a speech and language therapist and a learning disability communication co-ordinator.
- The service held regular multidisciplinary meetings with relevant health professionals and a local GP held clinics for the students.
- Care professionals commented positively on the collaborative approach of the college staff. One professional told us, "The leadership team have been responsive to any requests for information and have

been available to meet with myself and colleagues regularly."

Adapting service, design, decoration to meet people's needs

- The main college building was adapted to support people to live in smaller, self-contained flats. Cottages in the college grounds were similarly adapted.
- A redecoration programme was underway to upgrade the accommodation.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- The service was working within the MCA principles. Relevant representatives were involved in visiting people and checking the conditions of any DoLS were being met.
- Staff understood the need to be as least restrictive as possible. Where restrictions needed to be in place, staff were given detailed guidance and support about how to keep people safe.
- All staff had training in supporting people to manage distressed behaviour. A behavioural well-being lead made sure the emphasis was on positive behaviour support.

# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection we found the inconsistent approach to management and failures in governance systems contributed to a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider had quality assurance systems in place. The management team ensured these were now effective in identifying and generating improvements within the service.
- The management team and governance arrangements had been strengthened over the past year. A care professional commented, "I have definitely seen improvements in the service they offer, there's a more stable leadership team in place now."
- Relatives had confidence in the way the service was run. Their comments included, "It is very well run" and "It's well organised."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service promoted positive, person-centred outcomes for each person. A care professional told us, "The service has enabled [person's] growth and development resulting in far fewer challenges than may have been the case otherwise."
- Relatives said the service had a positive impact on people's well-being and abilities. Their comments included, "They have worked wonders with [family member]" and "[Person] is learning independence and they have come on in leaps and bounds there."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; how the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- People were involved in celebrating their 'good news' stories in a colourful monthly newsletter. One person was a student representative involved in governance meetings and health and safety meetings. An independent advocacy service inspected the service regularly to check it was run in people's best interests.

- Relatives were complimentary about the contact they had with the college. They told us, "The staff are excellent in communicating with us" and "We have regular chats with [registered manager], she is very open and if we have any concerns she is extremely pro-active."
- Staff were involved in meetings and briefings to give their views.
- The provider and registered manager understood their legal responsibility to be open and honest if something goes wrong. They submitted notifications to CQC for significant events that had occurred at the service.

Continuous learning and improving care; working in partnership with others

- The management team were committed to continuous improvements at the service.
- There was improved networking with other services within the provider's organisation to share good practices.
- Staff had worked hard to establish improved and effective working relationships with other professionals to make sure people received the right support. A care professional commented, "There's a more stable leadership team in place now, whom I have been able to develop good working relationships with."