

Yourlife Management Services Limited

Your Life (Taunton)

Inspection report

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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?	Good	
Is the service well-led?	Good	

Overall summary

This inspection was announced and took place on 03 September 2015. The provider was given 36 hours' notice because the location provides a domiciliary care service and we needed to be sure the registered manager would be available for the inspection. It also allowed us to arrange to visit people receiving a service in their own homes.

Your Life (Taunton) provides personal care to people living in their own apartments in an assisted living complex in Taunton. At the time of the inspection they provided personal care for four people who had minimal care needs.

This was the first inspection of the service which was registered with the Care Quality Commission in June 2014. No concerns have been identified with the care being provided to people since their registration.

There is a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission 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.

People who received personal care from Your Life (Taunton) told us they were happy with the care and

Summary of findings

support provided. They said the manager and staff were open and approachable and cared about their personal preferences and maintaining their independence. One person said, "They are excellent, really excellent, I look forward to them visiting and they listen to me as an individual." Another person said, "Nothing is too much, I can talk with the staff and the manager whenever I need to."

People receiving care and support required minimal levels of personal care. They were supported by sufficient numbers of staff who had a clear knowledge and understanding of their personal needs, likes and dislikes. We observed the registered manager and staff took the time to talk with people throughout the day as their office was situated in the assisted living complex.

People told us they received care from care workers who were knowledgeable about their needs and were appropriately trained to meet them. Care workers had access to training specific to their roles and the needs of people for example they had attended training in the use of Epi-pens. An Epi-pen is a medical device for injecting a measured dose of medication against an allergic reaction. Training for dementia awareness was also advertised for staff to attend. Staff confirmed they would all be attending the training.

People said they were cared for and supported by care workers who were polite, compassionate and caring. One person said "They are always so polite and caring, that for me is important." Another person said "They always respect my privacy, even though it's only me in my apartment doors and curtains get closed, and they always ring the doorbell and wait for me to say it is ok for them to come in."

People's care needs were recorded and reviewed regularly with senior staff and the person receiving the care. All care plans included written consent to care. Care workers had comprehensive information and guidance in care plans to deliver consistent care the way people preferred. One person said, "I have gone over my care plan with the manager so many times I know exactly what is in it and they change it if I say things are different."

During our visit to one person's apartment we observed a relaxed and friendly relationship between the person and

care worker. The person said, "They are all really nice, I know them all by their first names and they know exactly what I need." With a small staff team people received a consistent approach to their care and support. Staff confirmed they knew everybody very well and were kept aware of specific changes. People said they felt the small staff team meant they got to know the care workers and the registered manager well.

The registered manager had a clear vision for the service provided. Their statement of purpose said, they aimed to provide a "Personal care service which promotes dignity, privacy, respect and individuality." Throughout the inspection we saw this vision was at the very centre of the care and support provided by all the care workers. Staff said they were aware of the philosophy of the service and worked towards helping people maintain their independence.

People were protected from abuse because the provider had systems in place to ensure checks of new staffs characters and suitability to work with vulnerable adults were carried out. Staff had also received training in protecting vulnerable people from abuse.

Although people's personal care needs were minimal their health care needs were fully assessed and care and support was provided on an individual basis. Most people were able to access health care professionals independently but assistance could be provided if requested.

The service had a complaints policy and procedure that was included in people's care plans. People said they were aware of the procedure and knew who they could talk with. People and staff said they felt confident they could raise concerns with the registered manager and they would be dealt with appropriately.

There were systems in place to monitor the care provided and people's views and opinions were sought on a daily basis. Suggestions for change were listened to and actions taken to improve the service provided. All incidents and accidents were monitored, trends identified and learning shared with staff to put into practice.

Summary of findings

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.

People were protected from the risk of abuse as staff had been trained to recognise and report abuse. Staff were confident any concerns would be acted on and reported appropriately.

People were protected from being looked after by unsuitable staff because safe recruitment procedures were followed.

Risk assessments were completed to ensure people were looked after safely and staff were protected from harm in the work place.

Good



Is the service effective?

The service was effective.

People received effective care and support because staff understood their personal needs and abilities.

Staff had the skills and knowledge to meet people's needs. The provider had a programme of training which ensured staff had up to date guidance and information.

Staff ensured people had given their consent before they delivered care.

Good



Is the service caring?

The service was caring.

People received care from staff who were kind, compassionate and respected people's personal likes and dislikes.

People's privacy and dignity was respected and staff were conscious of the need to maintain confidentiality

People were involved in making decisions about their care and the support they received.

Good



Is the service responsive?

The service was responsive.

People were supported by sufficient staff to provide a consistent team of care workers.

People received care and support which was personal to them and took account of their preferences.

Arrangements were in place to deal with people's concerns and complaints. People told us they would be comfortable to make a complaint and felt any concerns raised would be dealt with.

Good



Is the service well-led?

The service was well led.

People and staff were supported by a registered manager who was approachable and listened to any suggestions they had for continued development of the service provided.

Good



Summary of findings

There were systems in place to monitor the quality of the service, ensure staff kept up to date with good practice and to seek people's views.

People were supported by a team that was well led with high staff morale.

Your Life (Taunton)

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 checked 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 was announced and took place on 03 September 2015. The provider was given 36 hours' notice because the location provides a domiciliary care service and we needed to be sure the registered manager would be available for the inspection. It also allowed us to arrange to visit people receiving a service in their own homes.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the

provider to give some key information about the service, what the service does well and improvements they plan to make. We looked at the information in the PIR and also looked at other information we held about the service before the inspection visit. This was the first inspection of this service since it was registered.

Your Life (Taunton) provides personal care to people in an assisted housing complex. At the time of the inspection they were providing personal care to four people. We visited all four people in their homes to discuss the care package they received.

We spoke with three staff members as well as the registered manager. We looked at records which related to people's individual care and the running of the service. Records seen included four care and support plans, quality audits and action plans, three staff recruitment files and records of meetings and staff training.

Is the service safe?

Our findings

People told us they felt safe with the care provided and the staff who visited them in their apartments. One person said, "I have never felt safer, they are all kind and considerate." Another person said, "I feel very safe when they visit have never had a concerning moment."

People were protected from harm because staff had received training in recognising and reporting abuse. Staff told us they had attended training in safeguarding people. They also confirmed they had access to the organisation's policies on safeguarding people and whistle blowing. Staff understood how to recognise the signs that might indicate someone was being abused. They also told us they knew who to report to if they had concerns. People had access to information on how to report abuse; contact details were clearly recorded in people's care plans and posters were displayed in the complex so visitors and other people living there were also made aware.

Staff said there was excellent communication between themselves and the registered manager and they would be listened to if they raised any concerns. Where a concern had been identified the registered manager had informed appropriate agencies to make sure people were protected.

Risks to people were minimised because relevant checks had been completed before staff started to work for the agency. These included employment references and Disclosure and Barring Service (DBS) checks to ensure staff were of good character. The DBS checks people's criminal history and their suitability to work with vulnerable people. All three staff members we spoke with confirmed they had not started work for Your Life (Taunton) until their references and DBS check had been received. They said their interview had been very thorough.

Care plans included clear risk assessments relating to people's personal needs and the environment. At the time of the inspection nobody was identified as having a risk with mobility. However everybody had a mobility risk assessment in place. The forms showed there was room for information about the number of staff and any equipment

that would be used to help a person move. Care plans also showed risks had been discussed and agreed with people at their first assessment. For example one person was at risk of developing urinary tract infections. There was clear guidance for staff on what to be aware of and how the person changed when they had an infection. The risk assessments were reviewed with people when care plan reviews were carried out and if people's needs changed. One person said, "I have discussed what goes in there [the care plan] and I know the risks we have considered."

To protect people from the risks associated with unsafe moving and handling procedures all staff received regular training in this. Two senior members of staff were trainers for moving and handling and offered regular support and guidance to other staff. However at the time of the inspection nobody required assistance that required this expertise.

The agency's policy and procedure for the safe handling of money protected people from financial abuse. When handling people's money as part of their personal care package staff kept a record of, and receipts for, all monies handled. One person confirmed staff had handled their money safely and maintained a clear record.

At the time of the inspection nobody required support to take their medicines. One person confirmed staff reminded them in the evenings to take their medicines but staff did not administer any medicines. Some people were assisted with creams and ointments. One person said, "I know what creams I need and when, so I discuss this with the girls on a daily basis." Care plans clearly identified when a person required assistance with applying creams. There was clear guidance for staff and a record maintained of what and when any cream was applied. Staff records showed they had received training in the administration of medicines, one staff member said, "The training was good especially when it explained the difference between creams and ointments." Care plans showed there was a system in place to assess a person's ability to manage their own medication and a clear record of who was responsible to order repeat prescriptions.

Is the service effective?

Our findings

People received effective care and support from well trained staff. People said they felt all the staff were well trained and knew their needs well. One person said, “I think they know me as well as I know myself now.” Another person said, “I have no concerns that the girls have not had the training to look after me well, they certainly do a good job.”

People were supported by staff who had undergone a thorough induction programme which gave them the basic skills to care for people safely. All the staff spoken with confirmed they had attended an induction programme. They said it had taken place over a two week period and included team building as they were all new to the organisation. One staff member said, “The induction was brilliant we did all the mandatory training and came away with a good knowledge of the organisation and what was expected from us.” One person spoken with said, “I believe they have some really good training before they are allowed to work with us.”

People were supported by staff who had the skills and knowledge to meet their needs. All staff confirmed they had access to plenty of training opportunities. This included annual updates of the organisation’s statutory subjects such as, manual handling, medication, safeguarding children and vulnerable adults, infection control, health and safety, food hygiene, first aid and nutrition. The registered manager confirmed staff could also attend further training related to specific needs. For example they had attended training in the use of Epi-pens. An Epi-pen is a medical device for injecting a measured dose of medication against an allergic reaction.

Staff had attended all the statutory training and a date was advertised for mental capacity act and dementia awareness training. The organisation used a company who kept track of staff training and emails were sent to indicate when mandatory training needed to be updated.

People were supported by staff who received regular supervisions. These were either through one to one meetings, team meetings or working with senior staff. This enabled staff to discuss working practices, training needs and to make suggestions with regards to ways they might

improve the service they provided. Staff confirmed they met regularly to discuss training needs and work practices. The registered manager said they aimed to carry out six one to one supervisions with staff annually as well as staff meetings.

People only received care with their consent. Care plans contained copies of up to date consent forms which had been signed by the person receiving care. One person said, “I am always asked if I am happy for something to be done. They always seek my consent.” Another person said, “Nothing is done without my agreement, I have signed the consent forms and I have signed the care plans, so I am fully involved.” Staff confirmed they would always ask for consent before doing anything.

Staff had a clear understanding of the Mental Capacity Act 2005 (MCA) and how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected. The MCA provides the legal framework to assess people’s capacity to make certain decisions, at a certain time. When people are assessed as not having the capacity to make a decision, a best interest decision is made involving people who know the person well and other professionals, where relevant. Nobody receiving a personal care package lacked capacity at the time of the inspection however the registered manager was aware of the process they would follow.

At the time of the inspection nobody needed assistance to eat, staff would help prepare breakfast or an evening snack if required however people could join other residents in the assisted living complex restaurant for lunch if they wished. One person said, I don’t need help with food I make my own sandwiches in the evening, but I know if I was under the weather they would do them for me.”

The four people receiving personal care had minimal care needs and were able to communicate with health care professionals any need they might have. However care staff monitored people’s health and liaised with relevant health care professionals with the persons consent to ensure people received the care and treatment they required. Staff explained that with a small team people received consistent support and communicating changes was not a problem.

Is the service caring?

Our findings

All the people we spoke with were very complimentary about the care they received. Everybody said the staff and the registered manager cared about their needs and wishes. One person said, “They are all so very caring and that is important.” Another person said, “The girls show such care and patience. I’m sure I can be awkward at times but they always keep smiling and carry on with a cheerful caring attitude.” Satisfaction surveys included comments such as “They go that extra mile” and “Excellent thank you.”

People had a consistent staff team and this was important to them. They were very complimentary about the way they had been able to develop relationships with all the staff and they knew them well. One person said, “I know all the girls by their first names. They all know me very well and the care they provide is excellent.” Another person said, “The consistency of staff is important so nothing is ever lost in the telling again and again to different people.”

The registered manager confirmed they aimed to ensure the teams going to individuals continued to be consistent as and when the number of people they provided personal care for increased.

People confirmed care workers cared for them in a way that respected their privacy. One person said, “It is always private and personal, my bathroom door is shut and any curtains are closed. They respect me as an individual in my own home.” Staff were observed to respect people’s privacy by ringing door bells and waiting for people to respond before they entered the apartments. One person said, “It is my home and they respect that.” During our visits we did not observe personal care however people told us they never felt uncomfortable with the staff they received care and support from.

There were ways for people to express their views about their care. Each person met with the registered manager when they started to use the service to discuss their care needs and expectations. One person said, “I have been through and through the care plan with the manager there is nothing I do not know about it, and if I want it changed they listen.”

Staff were aware of issues of confidentiality and did not speak about people in front of other people. When they discussed people’s care needs with us they did so in a respectful and compassionate way.

Is the service responsive?

Our findings

Everybody told us care workers had a good knowledge of their needs and responded in a flexible way to any changes that were identified.

Staff had a good knowledge of the needs and preferences of the people using the service. This enabled them to provide care that was responsive to people's individual needs and wishes. People said the staff all knew what they needed and how to care for them appropriately. One person said, "They know what I need and they also know that I can tell them when and what creams I need so they listen and respond flexibly to me each day. They are brilliant."

Care workers had a good understanding of what was important to people and provided support in line with people's social and cultural values. Everybody said staff respected them as individuals with their own lifestyles and preferences. One person said, "If I want to be later or earlier or I am going out I just let them know and they change things to suit me." The registered manager confirmed sometimes people wanted their calls changed or cancelled and they could be flexible to meet those needs.

Staff worked in partnership with people to make sure care plans were personalised to each individual. Care plans contained information to assist staff to provide care in a manner that respected their wishes and assisted them to be independent. One person explained how they had been involved with their care plan they said, "I have discussed and agreed everything I know exactly what it says and they are so good at listening to me."

People told us they could have a choice about the care workers who supported them, one person said, "I don't have any preferences about who provides my care. I know I can say if I didn't want a male carer coming in but they are all girls at the moment so it is not a worry."

Initial assessments were carried out with people who wished to use the service. This enabled them to express their wishes and views. It also allowed the agency to decide if they were able to provide the care requested. The registered manager confirmed that although Your Life (Taunton) provided the personal care for people at the assisted living complex they carried out an assessment of their needs before they offered a care package. If they felt they were unable to meet the needs of the person they would either signpost them to another care agency or refer them to other healthcare professionals. This meant people could be supported to receive a personal care package that was appropriate to meet their needs.

Changes to people's care plans were made in response to changes in the person's needs. People said their care plans were reviewed with them and any changes were made immediately and agreed with them. Staff confirmed they were aware of changes made in care plans. One staff member said, "Communication is very good. Any changes are recorded and we are also told about any changes before we provide care." One person said, "They are always reading my care plans, especially this young lady here, she always looks before she does anything to make sure there have been no changes."

Each person received a copy of the complaints policy when they started to use the service. Care plans contained the contact details and guidance on how to raise a complaint. People said they knew how to raise a complaint if they needed to. One person said, "The manager is always there and always ready to listen to me. I have never had to make a complaint but I know who to go to and I am confident it would be dealt with." The registered manager confirmed they had not received any complaints however the policy was readily available in the site office for anybody to read.

Is the service well-led?

Our findings

People were supported by a team that was well led. The registered manager was supported by a small team of staff who all said there were clear lines of responsibility. Staff also confirmed they had access to senior staff to share concerns and seek advice. Senior staff worked as part of their team which enabled them to monitor people's well-being on an on-going basis. Staff said they had all started at the same time and had benefited from the induction which included team building. This meant people were supported by a cohesive team who worked well together.

People told us the registered manager was always present in the building and was open and approachable. One person said, "I know I can talk with the manager at any time. He is available and ready to drop anything and listen to me." We observed people enter the office and speak with the manager openly throughout the day.

Everybody said they felt the service was well run. The registered manager confirmed the service was in its infancy and they were working to increase the staff team as and when new referrals were made. People who received care from the service required minimal support however they all praised the level of support they received.

The registered manager had a clear vision for the service. Their statement of purpose said, they aimed to provide a "Personal care service which promotes dignity, privacy, respect and individuality." Staff said they knew the philosophy and values and hoped they supported people to live their lives independently.

Staff personnel records showed they received regular daily contact with the manager as well as one to one supervision meetings. Supervisions were an opportunity for staff to spend time with the manager to discuss their work and highlight any training or development needs. They were also a chance for any poor practice or concerns to be addressed in a confidential manner.

There were effective quality assurance systems to monitor care and plans for on-going improvements. There were audits and checks in place to monitor safety and quality of care. As well as audits carried out by the registered manager the operations manager would visit the service to meet with the registered manager and discuss any issues identified. If specific shortfalls were found these were

discussed immediately with staff at the time and further training could be arranged. Staff members confirmed they had attended staff meetings to discuss ways to improve the service and how they worked. Staff also confirmed they had been involved from the start in organising how they would provide a service that would meet the needs of the people they visited.

Following audits of the care plans changes had been introduced in the way they were written to make sure they were more person centred and involved the person from start to finish. Because people received minimal support the service was still at the stage of assessing how things worked and changing their approach to suit individual needs and expectations. People said they felt they were involved in the development of the service provided.

All accidents and incidents which occurred were recorded and analysed. The time and place of any accident was recorded to establish patterns and monitor if changes to practice needed to be made. Very few accidents had occurred during the time the service had been providing personal care.

The registered manager kept their skills and knowledge up to date by on-going training and reading. They shared the knowledge they gained with staff on a daily basis or at staff meetings/supervision. Your Life (Taunton) is part of a larger organisation with many locations. There are senior managers and peers in place to support the registered manager in maintaining their knowledge and improving the service they provide. There were also specialist teams such as human resources available to support specific functions of the service.

People were supported to share their views of the way the service was run. A customer satisfaction survey had been carried out and people were very complimentary about the care they received. The registered manager confirmed that as the service grew they would also involve other stakeholders such as district nurse teams, GP's and social workers in their satisfaction surveys. Staff surveys were also available however with such a small team the registered manager and staff confirmed they were able to talk and discuss any issues daily.

Although Your Life (Taunton) had not needed to notify the Care Quality Commission of any significant events which had occurred, the registered manager was aware of their legal responsibilities.