

Yourlife Management Services Limited

Yourlife (Thatcham)

Inspection report

William House, The Moors
Thatcham
RG19 4AU

Tel: 07764226874

Website: www.yourlife.co.uk

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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 ●

Summary of findings

Overall summary

About the service

Yourlife (Thatcham) is a domiciliary care agency providing personal care to people living within a retirement village. The service provides support to older adults who may also suffer from physical disability, sensory impairment or dementia. At the time of our inspection there were 6 people using the service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People and their relatives told us they felt safe using the service. Effective systems were in place to ensure peoples' safety. Recruitment processes ensured suitability of staff for their roles. There were enough staff to meet peoples' needs, and staff were knowledgeable about their role in keeping people safe from harm. Risk assessments were comprehensive and reviewed regularly. There were robust systems in place to ensure safe medicine administration.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People were involved in their care planning and were supported to maintain their independence.

Feedback from people and relatives was unanimously positive. People told us staff were caring, kind, compassionate and friendly. One person told us, "they treat us like family." Staff we spoke to were passionate about their roles. One staff member told us, "I honestly enjoy going to work every day and making people smile and I am proud to be a part of the team."

People and their relatives said they felt listened to and were comfortable raising concerns. People's communication needs were assessed, and care plans included detailed descriptions of their communication requirements.

All feedback about the registered manager was positive. The registered manager had good oversight of the service and was supported by the area manager. The registered manager and staff knew people well, and demonstrated a shared sense of respect for each other, and the people they supported.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 24 June 2022 and this is the first inspection.

Why we inspected

This was a planned comprehensive inspection as a newly registered service. This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people received.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective..

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Yourlife (Thatcham)

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.

Inspection team

The inspection was carried out by 2 inspectors 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

This service is a domiciliary care agency. It provides personal care to people living in specialist housing.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

What we did before the inspection

We looked at all the information we held about the service including notifications. A notification is information about events that the registered persons are required, by law, to tell us about. 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 of this information to plan our inspection.

During the inspection

We spoke with 4 people who use the service and 3 relatives about their experience of the care provided. We spoke with 10 members of staff, including the registered manager and area manager. We reviewed a range of records. These included 4 people's care records, 4 staff files and a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found and sought feedback from healthcare professionals involved with the service.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated as good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe. One person said, "Yes, it's absolutely safe. The carers are excellent."
- Staff received training in safeguarding and demonstrated they knew the process for raising concerns.
- Where concerns had been raised, they were investigated fully and dealt with appropriately. The registered manager made the necessary referrals to the safeguarding team and staff told us they were confident the registered manager would act on any concerns raised to ensure people's safety.

Assessing risk, safety monitoring and management

- Risks to people were managed in a way that protected them from avoidable harm. Within people's care plans we saw detailed and comprehensive risk assessments and directions for care staff to follow so people were kept safe.
- Environmental risks within people's homes had been assessed and care plans contained clear guidance on actions required to ensure people were safe when receiving care.
- People told us the service was the staff were reliable and vigilant in managing and monitoring their safety. One person told us, "I walk with my walker and the carers come along near to me. They make sure I don't fall when we go downstairs."

Staffing and recruitment

- Safe and effective recruitment practices were followed to make sure that all staff were suitable and of good character.
- People told us there were enough staff on duty to respond to their individual needs and requests. One person told us, "They are never rushed. The carers are on time and there has been no missed appointments."
- The managers had considered how they will grow the staff group steadily as more people required personal care, based on assessment of needs.

Using medicines safely

- The service had systems and procedures in place to ensure people received their medicines safely and as prescribed.
- Staff had received training in the safe administration of medication and their competency was assessed by the registered manager to ensure they maintained good practice.
- Where people were safe to continue to manage their own medicines, this was supported.
- Staff understood the protocol for reporting medicine errors and felt the culture of transparency and

learning gave them the confidence to do so.

Preventing and controlling infection

- The provider had infection control policies which were in line with current practice.
- All staff had completed infection control training.
- People were protected from the risk of infection. People told us, "They do wear gloves and aprons" and "they throw away used gloves and wash their hands when they take off the gloves."

Learning lessons when things go wrong

- Evidence was available to show when something had gone wrong the registered manager responded appropriately and used incidents as learning opportunities.
- The registered manager explained how incidents and accidents were investigated, the lessons learned from the results of the investigations, and how learning was shared with staff to prevent recurrences.
- There had been one medicine error reported by a member of staff. The registered manager responded promptly and appropriately to the incident, resulting in a change of procedure for staff when administering medicines.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated 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

- Prior to a person being supported by the service, a full assessment was carried out. This included information about the person's background, culture, religion, preferences and care needs.
- People and relatives told us they were fully involved in the assessment process and any reviews thereafter. One relative said, "I was involved with the manager in discussing mums care needs. And mum had a say. That was written up in the care plan. I drive the care plan."
- Assessments were personalised and had been completed in line with current legislation, standards and good practice guidance.
- People's care files were reviewed regularly to ensure their needs were met and their quality of life was maintained.

Staff support: induction, training, skills and experience

- Staff received mandatory training and a robust induction process prior to commencing their role. This included shadowing of experienced staff and having their practice observed until they were confident to work without supervision.
- People and relatives told us they felt staff had the necessary skills and experience to support them safely. One relative told us, "the people who visit are friendly and show sensitivity in their work with mums needs. They have the skills and training."
- The registered manager met with staff regularly to review their performance and development needs. Staff felt supported and able to discuss any concerns, share ideas and request further training during these meetings.

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

- People's care files identified if they required support with their meals or drinks. Where people required support their food and drink preferences were documented within their care notes.
- Care files also contained specific information about the assistance required. One care file noted, "I would like staff to ask me if I have eaten, and offer any help when necessary to prepare food, mostly my breakfast."
- People had access to a communal dining room on the ground floor of the building which provided lunch daily.

Staff working with other agencies to provide consistent, effective, timely care

- The registered manager worked closely with healthcare professionals to ensure people received consistent care and support. For example, important information about people's needs and medical history were shared when they were admitted to hospital and the registered manager worked closely with

healthcare professionals to assist with discharge planning.

- Staff enabled consistent care to be delivered by writing daily records of their visits in people's homes. This enabled other staff members and healthcare professionals to understand any developments and changes in people's care. One relative said, "they mention if anything needs attention."

Supporting people to live healthier lives, access healthcare services and support

- Most people lived independently, however, there was a personalised approach to care and people were supported to access healthcare services and professionals when needed.
- Care plans included agreed outcomes to support people to maintain healthier lives.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People's care plans identified if people had capacity to consent to receiving care and if they required support to make decisions.
- People told us staff respected their decisions, one person said, "They will respect if I don't want something done."
- All staff completed MCA training. Staff understood the principles of the Mental Capacity Act, one staff member told us, "The Mental Capacity Act is about an individual's right to make decisions for themselves. If I don't agree with it I have to respect it. Everyone has a right to make their own decisions."
- When a power of attorney had been appointed for a person a copy of the legal authorisation was held on file.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated as good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us they felt the staff were kind and caring. People told us, "the carers are very compassionate" and "they are excellent, very caring and understanding."
- Staff received training on equality and diversity as part of their induction process.
- People's views and beliefs were respected and included in people's care files. People were supported to attend Church where this was requested.
- Staff spoke about people in a caring manner and told us they enjoyed the work they did. One staff member told us, "The staff at William house are always going over and beyond to ensure our service users are well looked after."

Supporting people to express their views and be involved in making decisions about their care

- People were supported to express their views and were encouraged to be involved in making decisions about their care and support. One person told us, "Carers always ask me, what do you want today? and they ask me what I want them to do."
- People's care plans demonstrated their involvement in making decisions about their care.
- People and their relatives told us they were involved in decisions about their care and felt comfortable expressing their views. One person told us, "I get on very well with the manager who has been very helpful whenever I have needed her. She is just across the car park."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected by staff. One person said, "Yes they do [treat them with respect and dignity], they keep me private when dressing me."
- Care plans included individualised plans to support people to maintain their independence.
- Information held about people was stored securely to ensure confidentiality was maintained.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated as good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were involved in their care planning. One person said, "I was asked what I needed when we started here."
- Care plans were comprehensive, individualised and contained up to date information about people and the care they required. This included details of people's specific routines, backgrounds, religions, needs and likes and dislikes.
- Staff were proud of the support they provided people and felt they delivered care in a way that was respectful and collaborative. One staff member told us, "I honestly enjoy going to work every day, and making people smile and I am proud to be a part of the team."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People told us they received regular communication in a way they could understand. One person said, "I get information every day and know what is going on" and another person told us, "they usually give me information verbally and explain it. They come and talk to us. Or, we get information by letter."
- People's care plans contained guidance on how to communicate with people in a way they were able to understand and respond to. One care plan stated, "Ensure I am wearing my hearing aids. Talk loudly and clearly to me. Talk to me at the same level and please make eye contact with me."
- Staff were aware of people's communication needs and communicated with people via their preferred method.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The development had a communal dining and social area and provided opportunities for social stimulation with activities such as bingo, quizzes and coffee mornings.
- People's care plans detailed social inclusion and access to the community which included specific activities and hobbies people enjoyed and how this could be supported by the service.
- One person told us, "I've made friends here. The lounge is out of this world. There is a bistro. They know what coffee I like. I can read my papers there. We have quiz things, bingo and it's nice to talk to people."

Improving care quality in response to complaints or concerns

- The registered manager told us they had not received any formal complaints in relation to people's care. There was a complaints procedure in place and the registered manager explained how complaints would be investigated and resolved.
- People were aware of how to raise a complaint. People told us, "everyone is excellent. In case of a problem I'd go to the management. They're just down the corridor" and "in case of any worries I'd talk to the manager or staff in the office."

End of life care and support

- There was no one receiving end of life care at the time of the inspection.
- Care plans documented people's resuscitation status and their needs and preferences for support at the end of their lives.
- All staff had received end of life training.

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.

This is the first inspection for this newly registered service. This key question has been rated as good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People spoke positively about the atmosphere at the service. People told us, "the staff seem to be very pleasant and work well together" and, "they all get on extremely well together and are very friendly with each other. They're happy and talk to us."
- Staff knew people well and felt supported by the registered manager. One staff member said, "All of our team members are amazing and truly care that our service users are happy and receiving the best possible care that we can provide."
- The registered manager's organised approach and management of systems enabled the service to operate smoothly and effectively while maintaining a holistic approach to the care people received.

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

- The Care Quality Commission (CQC) sets out specific requirements that providers must follow when things go wrong. This includes informing people and their relatives about the incident, providing reasonable support, providing truthful information and an apology when things go wrong. The registered manager was aware of their responsibilities in relation to this standard.
- The registered manager was aware of when to report events to CQC and the local authority. Copies of all records were saved and available to view at the time of the inspection.
- The provider had a policy in place that set out the actions staff should take in situations where the duty of candour would apply, and evidence reviewed on the day of inspection confirmed this was adhered to.

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

- The registered manager demonstrated a good overview of all aspects of the service.
- There were effective systems in place to monitor and evaluate the service. These systems were used to enhance oversight, identify risks and learn from concerns, incidents and accidents.
- Staff understood their roles, and all staff spoke positively about the registered manager. One staff member told us, "[the registered manager] is a visible manager, she would not ask us to do anything she would not do."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were empowered to express their views. People and their relatives told us they felt listened to, and the registered manager was easily accessible and responsive. One person said, "the management are excellent. They are easy to access and listen to us."
- The service sought the views of everyone using the service through 'Homeowners meetings' and regular conversations. One person told us, "There are several managers who do different shifts. They are all very nice and come to have a chat."
- Care plans included people's cultural and religious needs, and the support required to meet them.
- Activities were available to people and their relatives in communal areas. One relative told us, "we do join in and go to everything going on. There are coffee mornings and social afternoons, quizzes and bingo. In good weather there are garden parties."

Continuous learning and improving care

- The registered manager continually sought feedback from people and their relatives to improve the service.
- Staff had monthly supervisions where they had the opportunity to discuss their role and highlight where any learning or improvement requirements were needed.
- The service provided comprehensive training to all staff and shared information about changes on notice boards and staff meetings.

Working in partnership with others

- The service had effective working relationships with external agencies, such as the local authority, district nursing teams, GP practices and the CQC.
- The registered manager was a member of the Skills for Care network. This is a national organisation for care providers to seek support, develop best practice, keep up-to-date and share ideas.