

Yourlife Management Services Limited

Your Life (Hitchin)

Inspection report

Park House Old Park Lane Hitchin Hertfordshire SG5 2JR

Tel: 018235448150

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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

The inspection, which was unannounced, was carried out on 08 February 2016 by one Inspector. Your Life (Hitchin) operates an assisted living scheme in a modern and purpose built private development called Park House. The property consists of 58 flats privately owned and occupied by older people who also share some communal areas and facilities; such as dining rooms, lounges and gardens. At the time of our inspection two people who lived at Park House received personal care and support, although only one was available to talk with us as the other was in hospital, whereas the other residents did not.

There was a manager in post who had registered with the CQC. A registered manager is a person who has registered with the 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 and associated Regulations about how the service is run.

People told us they felt safe and well supported by the staff who provided care at Park House. Staff had received training in how to safeguard people from abuse and knew how to report concerns. Safe and effective recruitment practices were followed to ensure that staff were suitable for the role performed. There were always sufficient numbers of staff available to meet people's agreed care and support needs.

Staff were trained to help and support people take medicines safely if the need arose. Potential risks to people's health were identified and reviewed to keep them safe. People were very positive about the skills, experience and abilities of staff who provided them with care and support. Staff received training relevant to their roles and had regular supervision meetings to discuss and review their development and performance.

Where appropriate, staff helped and supported people to stay safe, both in their homes and in the community. People were supported to maintain good health in a way that took account of their needs and personal circumstances. Staff developed positive and caring relationships with the people they supported and clearly knew them very well.

Staff provided care and support in a way that accorded with people's wishes, agreement and consent. People were involved in the planning, delivery and reviews of the care and support they received. The confidentiality of information held about people's medical and personal histories was securely maintained.

People told us that support was provided in a way that promoted their dignity and respected their privacy at all times. People received care and support that met their needs and took account of their preferences. Staff were very knowledgeable about people's preferences and routines which helped them provide care and support in a person centred way.

People had the opportunity to take part in a wide range of activities provided at Park House if they chose to do so. They felt that staff listened to them and responded to any concerns they had in a positive and timely way. People knew how to complain should the need arise but told us they had rarely had cause to do so.

People who used the service and staff were very complimentary about the registered manager and how th service was operated. Effective arrangements were in place to monitor risks and the quality of services provided.		

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

People were kept safe by staff trained to recognise and respond effectively to the risks of abuse.

Safe and effective recruitment practices were followed to ensure that staff were suitable for the roles performed.

Sufficient numbers of staff were available to meet people's care and support individual needs in a timely way.

Staff were trained to support people with their medicines in a safe way when necessary.

Potential risks to people's health and well-being were identified and managed effectively.

Is the service effective?

Good



The service was effective.

Care and support was only provided in accordance with people's wishes, agreement and consent.

Staff were trained and supported to help them meet people's needs effectively.

People were supported to have their day to day health needs met where required.

Is the service caring?

Good



The service was caring.

People were supported in a kind and compassionate way by staff who knew them well.

People who received support were involved in the planning, delivery and reviews of the services provided.

Care was provided in a way that promoted people's dignity and

respected their privacy at all times.	
The confidentiality of personal information was maintained.	
Is the service responsive?	Good •
The service was responsive.	
People received personalised care and support.	
Opportunities were provided for people to take part in social interests and activities.	
People knew how to complain and were confident that any concerns would be dealt promptly.	
Concerns would be dealt promptly.	
Is the service well-led?	Good •
	Good •
Is the service well-led?	Good •
Is the service well-led? The service was well led. Effective systems were in place to quality assure the services	Good
Is the service well-led? The service was well led. Effective systems were in place to quality assure the services provided and manage risks. People who used the service and staff were positive about the	Good



Your Life (Hitchin)

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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2012, to look at the overall quality of the service and to provide a rating for the service under the Care Act 2014.

The inspection was carried out on 14 and 20 January 2016 by one Inspector and was unannounced. Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make. In addition to this, we also reviewed all other information we held about the service.

During the inspection we spoke with one person who received support, a relative, three staff members and the registered manager. We looked at support plans relating to two people who used the service and four staff files.



Is the service safe?

Our findings

People who used the service told us they felt happy, safe and well supported by staff who knew their personal care needs. One person commented, "Yes of course I feel safe here, it's very secure and I have all the support I need from [family] and staff." People's relatives also told us that staff helped to keep their family members safe at Park House. One person's relative commented, "I am very happy that my [family members] are safe and well supported; I have no worries or concerns."

Staff received training about how to safeguard people from harm and were knowledgeable about the risks of abuse. They knew how to raise concerns and report potential abuse by whistle blowing, both at the service and externally. Staff had access to information and guidance about how to recognise the signs of potential abuse and report concerns, together with contact numbers for the relevant local safeguarding authority. A staff member told us, "The safeguarding training we get is very good and we all take people's safety seriously here, as does the management."

Safe and effective recruitment practices were followed to make sure that staff employed at the service were suitable for the roles they performed and of good character. The registered manager had flexible working arrangements in place to ensure there were enough suitably experienced and skilled staff available to meet people's agreed care and support needs safely and effectively. A person who used the service told us, "There are always enough staff about if you need anything, rarely have to wait too long. I get the support I have asked for when I need it." A staff member commented, "There is actually more than enough staff at the moment to provide personal care, better to have too many than not enough."

Staff were not required to support people with their medicines as a matter of course. However, staff were trained and kept updated about how to provide people safe support with medicines if their circumstances changed and if the need arose. They also had detailed guidance about the medicines people were prescribed, what they were for and information regarding potential side effects. This meant that staff were able to help people with their medicines safely if required.

Where potential risks to people's health, well-being or safety had been identified, these were assessed and reviewed to take account of people's changing needs and personal circumstances. This included in areas such as mobility, medicines, the environment and physical health. The registered manager told us that risks were managed positively and in a way that helped people to be as independent as they were able and wanted to be. An entry in one person's support plan noted, "[Name] is very independent and will assist themselves in most cases without support."

When one person started to use the service staff helped them with their medicines because relatives felt they needed support in that particular area. However, over time they felt able and wanted to administer their own medicines. The registered manager spoke with them about how best to achieve their wishes in light of potential risks, such as forgetting to take the medicines, and put measures in place to help them self-administer safely and in a way that promoted their independence.

For example, staff helped by collecting the medicines from a local chemist and, with the prior agreement of the person concerned, the manager carried out regular checks and reviews to make sure that they were being taken safely in accordance with prescribers instructions.

Arrangements were in place to ensure that any incidents, accidents or injuries that occur were recorded, reported to the registered manager and investigated to reduce the risks and likelihood of reoccurrence. For example, when the registered manager was made aware that people were at risk of falling as they walked on a slope up to the main entrance, they took immediate steps to make sure the slope was modified and a new hand rail installed to improve safety. A relative told us, "The staff were very quick to respond when my [family member] fell in their flat and acted appropriately to get immediate medical attention."

Plans and guidance were available to help staff deal with unforeseen events and emergencies which may affect the services provided or the people they support. This included relevant training, for example in areas such as emergency first aid and fire safety. Information was available to help staff evacuate people quickly and safely in the event of an emergency situation or event.



Is the service effective?

Our findings

People told us that staff provided them with the levels of personal care and support they wanted and had agreed to following consultation with the registered manager. One person who used the service said, "I have agreed to the care I get. I have decided what happens, how and when." A staff member commented, "We only provide what [care and support] people have asked for and agreed to; everything is up to them." We saw that people's individual plans of care reflected their agreement and consent to the support provided.

People received the care and support they needed to help meet their health needs in a safe and effective way. Staff were knowledgeable about people's individual care and support requirements and how they should be met. These were reviewed to ensure that the support provided reflected people's changing needs and personal circumstances. One person commented, "As far as I'm concerned all of my needs are met." A staff member told us, "The care here is fantastic and people are well supported."

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of adults who may lack the mental capacity to do so for themselves. The Act 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. At the time of our inspection we found that the provider worked within the principles of the MCA.

People were very positive and complimentary about the skills, experience and abilities of the staff who provided care and support. One person told us, "Yes, all of the staff are very good, I couldn't fault them really." A person's relative said, "I am happy that my [family member's] needs are met by staff who know what they are doing, which is very reassuring." New staff were required to complete an induction programme as part of a probationary period. They received training and refresher updates relevant to their roles and had their competencies observed and assessed in the work place.

The training provided to all staff, a mixture of classroom based and e-learning, included topics such as the MCA, safeguarding, health and safety, infection control and moving and handling. The registered manager told us they frequently worked alongside staff to validate the training, check out their understanding of what they had learned and ensure that high standards of care and support were maintained.

A staff member commented, "Training is very good with regular refreshers. I have been supported to do my [nationally recognised vocational qualifications]. I'm gaining lots of experience and confidence; all is good." The registered manager explained that they planned to introduce a system of staff 'champions' in key areas such as equality and diversity, nutrition, caring and mentoring. This meant that some staff members would be selected to receive additional training and development in order to 'champion' and lead on specific subjects for the benefit of both colleagues and people who used the service.

Staff felt well supported by the registered manager and had frequent opportunities to discuss issues that were important to them, for example they had regular supervisions where their performance and personal development was reviewed. A staff member said, "It's really good here. The manager is very supportive and

approachable."

Although staff were not responsible for supporting people with their day to day diet, meal preparation or menu choices, they were very knowledgeable about their individual nutritional requirements and food preferences. People's individual plans of care also contained information about their likes and dislikes, for example a note in the guidance provided about one person stated, "No cheese or shellfish." A person's relative told us that the registered manager had helped a family member to plan their diet in a way that helped them address a period of sustained and adverse weight loss in a way that best suited them and their needs.

People were able to select meals from a menu or could choose alternatives such as salads, omelette or jacket potatoes. They had the opportunity to discuss menu options, alternatives, meal quality and the overall dining experience at regular meetings with the registered manager and senior catering staff. Meals were served in a comfortable dining room, where family and friends were also welcome, or peoples could choose to eat in their own private flat.



Is the service caring?

Our findings

People were supported in a kind and compassionate way by staff who were knowledgeable about their care needs. One person who used the service told us, "I've settled in really quick. It's really nice here and the staff are all very pleasant and willing to give you a hand. The staff are all very kind. The care and support I get is wonderful." A staff member commented, "There's a lovely ambience here and it's a very nice and caring environment."

Staff helped and supported people in a way that maintained their dignity and respected their privacy at all times. One person said, "The staff are very good and always respect my dignity during care." A staff member told us, "This is their [residents] home and we are only guests invited in to help and support them; we are always aware and respectful of that."

We found that people who received support, and where appropriate family members, had been fully involved in the planning, reviews and delivery of the care and support provided. People's involvement in planning the care they received was reflected in their individual plans of care. One person told us, "My [family member] and I have discussed my care needs with the manager." A person's relative commented, "We have been fully involved as a family. The staff are absolutely lovely, kind and caring."

Confidentiality was well maintained at the service which meant that information held about people's support needs and medical histories was kept secure at all times. Information and guidance about independent advocacy and advice services was made available and displayed at the service.



Is the service responsive?

Our findings

People received personalised care and support that met their individual needs and took full account of their personal circumstances. One person told us, "I can please myself here and if I need anything I just give them [staff] a ring. I have the support that I need and have asked them for." A staff member commented, "We help and support people in a way that suits them as best we can, that's the most important thing here, it's about what they [residents] want."

Staff had access to detailed information and guidance about how to support people in a person centred way, based on their individual likes and dislikes, preferences and health and welfare needs. The registered manager and staff worked closely with the people they supported, together with relatives where appropriate, to ensure they fully understood how to meet their needs. An entry in guidance about one person noted, "Staff to offer a choice of breakfast according to the preference of [name]."

Opportunities were provided for people to take part in activities and pursue social interests, both at home and in the local community. Coffee mornings were held every day and people could use the hairdressing salon and book treatments in the well-being and Spa facilities located on site. Information about activities and events was displayed in communal areas and delivered to people in their homes. These have included bell ringing, talks by local celebrities and book authors, exercise sessions, singing and musical events and birthday celebrations.

The registered manager told us they were responsible for creating a community environment which ensured that people were not isolated from the wider community. They explained, "We achieve this by having weekly activities and one or two special events within the month. Currently we have four weekly activities....[people] have the choice to participate should they wish to at the same time pursue social interests outside the development."

People who received support were consulted and updated about the care and other services provided and were encouraged to have their say. They felt listened to and told us that the registered manager was always quick to respond to any issues raised in a prompt and positive way. People had the opportunity to attend regular meetings with the registered manager to raise and discuss any issues or concerns they had. These were recorded, circulated to people who used the service and responded to in a prompt and positive way.

There was a complaints and compliments procedure in place and information about how to use it was prominently displayed. People told us they knew how to make a complaint but had never had the need to raise any concerns as most issues were dealt with directly with the registered manager or at resident meetings.



Is the service well-led?

Our findings

People who used the service, relatives and staff members were positive about how it was led and managed. They were complimentary about the registered manager in particular who they described as being very well organised, approachable and supportive. One person told us, "I know the manager, they are very good." A staff member commented, "The [service] is run effectively and the manager is very good; organisation is very good."

The registered manager was very clear about their vision for the service, how it operated and the levels of care and support provided; "The service is also about delivering a safe and excellent service which fosters independence, choice and control [while] at the same time respecting privacy and dignity." Staff understood their roles and were clear about their responsibilities and what was expected of them. A relative commented, "Yes, the service is well led and managed."

The registered manager was very knowledgeable about the people who used the service, their families, friends and personal circumstances. They told us they were well supported by the provider in terms of how the service operated, resources and staff development; "I have excellent support from senior management which will allow me and my staff team to continually improve and develop in order to put in place our core values of passion, responsibility, innovation, determination and excellence."

There were systems in place to monitor risks and obtain people's views about the quality of services provided. We looked at a random selection of the feedback received and saw that it was broadly very positive. The registered manager regularly checked and audited key aspects of the service, for example in relation to infection control and cleanliness and health and safety issues. Visits and checks of the service were also carried out on a regular basis by a senior representative of the provider in areas such as complaints, care planning and record keeping, safeguarding, medicines and staffing matters. We saw that any issues identified, both positive and negative, were recorded, shared and, where necessary, addressed in a prompt and positive way.