

Yourlife Management Services Limited

Your Life (Taunton)

Inspection report

Ellisfields Court Mount Street Taunton Somerset TA1 3SS Date of inspection visit: 28 November 2017

Date of publication: 27 December 2017

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

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

There were 53 apartments in the assisted living complex. Homeowners' surveys indicated they lived in a secure environment and were treated with respect. However the inspection relates specifically to the registered activity of personal care delivered to the four people in their apartments.

At the last inspection in September 2015 the service was rated Good. At this inspection we found the service remained Good.

Why the service is rated Good:

There were processes and practices in place to keep people safe. People felt safe living in their apartments and with the staff who supported them. People said they enjoyed their independence and felt safe because there was always someone to support them if they needed assistance. One person said "If I need extra help I know it is there." Another person said "I feel very safe. I don't have to worry."

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. People were always consulted fully before any care support commenced.

People said they received support from staff who were always "polite and kind." One person said "This is a lovely place. You live your own life, do whatever you like but if I want help I can press the button and someone will come and help me. I feel very lucky." Another person said "I could not wish for anything better. Staff are always very nice. I am happy with everyone."

Most people living in the apartments were independent and did not require personal care. Staff knew people well. People could be offered the amount of support they required which might be minimal support but made a difference to their well-being.

Support could be offered for a short period of time and discontinued when it was no longer needed for example during acute illness. The service looked for individual solutions to people's care and support needs.

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.

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.	

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service remains Good.	
Is the service effective?	Good •
The service remains Good.	
Is the service caring?	Good •
The service remains Good.	
Is the service responsive?	Good •
The service remained Good.	
Is the service well-led?	Good •
The service remained Good.	



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 comprehensive inspection took place on 28 November 2017 and was announced. 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.

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 one person in their home and two in communal spaces to discuss the care package they received.

We spoke with two staff members and 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 continued to receive safe care.

People felt safe living in their apartments and with the staff who supported them. People said they enjoyed their independence because there was always someone to support them if they needed assistance. One person said "If I need extra help I know it is there." Another person said "I feel very safe. I don't have to worry."

There were processes and practices in place to keep people safe. These included recruitment systems which completed relevant checks before staff began working. Staff attended a structured interview and following their appointment underwent a thorough induction specific to their role and the service.

People were protected from harm because staff had received training in safeguarding people. Senior staff knew what action to take in the event of there being any concerns about people's safety. One senior member of staff said "We keep our eyes and ears open. We are always ready to listen to people."

Risk assessments were completed when people received care. Support plans contained comprehensive environmental risk assessments and risk assessments related to the particular support the person was receiving.

There was a specified number of staff on duty which could be increased if there was an increase in the number of people who were receiving care. All staff employed by the service were trained to provide personal care if this was required. They all received training in manual handling, infection control and safeguarding.

Most people did not require any assistance with their medicines. However if discussion identified the need for some support a care plan was put in place. An assessment was carried out to determine the level of support the person needed. Medicines were stored in secure facilities agreed with the person and clear medication administration records were kept. People were offered very flexible support which meant for example people were able to manage their own tablets but receive assistance applying topical applications (creams) if that was what they required. Staff received regular training and competency assessments in medicine administration.

All staff received training in infection control. The service supplied staff with essential personal protective equipment such as gloves and aprons.



Is the service effective?

Our findings

People continued to receive care that was effective.

Before a person began receiving a care package a comprehensive assessment was undertaken. The service based within the assisted living apartments was the first port of call for people ensuring they received prompt and effective support when needed. The support offered was very specific and could be for as little as five minutes if the person needed prompting to take their medicines. This opportunity to access very minimal support assisted people to maintain their independence. Staff knew people and were able to identify when and what type of assistance a person may need and discuss it with them. People were able to call for assistance at short notice using the call system in their apartments meaning appropriate help could be summoned quickly. When people no longer required support it could be discontinued.

People were supported by staff who had the skills and knowledge to meet their needs. People felt confident with the staff who cared for them. One person said "They all seem to know what they are doing." Another person said "I can ask them about many things. They always try to help or point me in the right direction." All staff were trained to deliver personal care. Staff had access to a comprehensive range of training opportunities. This included manual handling, medication, safeguarding, infection control, health and safety, food hygiene, first aid and nutrition. Several staff had commenced a qualification in Dementia Awareness.

People who lived in the apartments were able to prepare their own meals or visit the in-house restaurant. If people needed assistance with meals as part of their support plan this was available. One person was receiving support to prepare their breakfast. The care plan stressed the importance of always checking what the person wanted for breakfast that morning. If a person looked unwell or appeared to be losing weight staff would show concern and if required would speak to people's family or assist with a visit to the GP.

People made their own arrangements regarding their healthcare however staff could provide assistance with access to appointments if this was required. As people's needs changed additional support could be offered subject to the overall conditions of eligibility to live in the apartments. Staff also assisted people in emergency situations by summoning appropriate help and supporting them until it arrived.

The assisted living complex had been designed and purpose built to a high standard. Comfortable apartments were surrounded by pleasant grounds. There were communal lounge and dining facilities which people could use when they wished. People said they enjoyed both the privacy of their own homes and the opportunity for company when they wanted it.

People only received care and support with their consent. Care plans contained copies of up to date consent forms which had been signed by the person receiving care. A member of staff said "We are very flexible. We talk with the individual. We first need to be sure they want support. They need to be fully involved and completely comfortable with the support offered."

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. A member of staff said "We help them to be the best they can. To make their own decisions and to respect their right to make what we may not sometimes consider to be a good decision."



Is the service caring?

Our findings

The service continued to be caring.

People said they received support from staff who were always "polite and kind." One person said "This is a lovely place. You live your own life, do whatever you like but if I want help I can press the button and someone will come and help me. I feel very lucky." Another person said "I could not wish for anything better. Staff are always very nice. I am happy with everyone."

The support people received promoted their and their families well-being. The Provider Information Return states "We have a very good relationship with homeowners and family members. We often become the extended support background for families that have family members with varying needs. Homeowners have arrived at the development with existing care packages. They no longer need any care provided because the support network, community feeling and friendly ethos has lowered pre-existing anxiety levels and fears. Homeowners feel comforted by the model and the staff within the development who have created a very friendly atmosphere and environment."

One person said "This suits me exceptionally well. Circumstances could not be better." The service recognised the importance of the "companion call" when people benefitted from social support to raise their mood or assist them through a difficult time.

People received care and support in the privacy of their own apartment and care plans contained references regarding the routine to be followed when entering. There was written guidance for staff on maintaining the person's privacy during personal care. Curtains were closed and support was offered in ways that maintained people's dignity. Staff were aware how important it was to maintain confidentiality within the development.

People were supported to make choices about the care they received at the end of their life. Some people had preferred to remain in their apartments. The service had worked with other agencies and services to enable them to spend their last days peacefully and with dignity. Other people had preferred to transfer to a hospice. The manager emphasised how individual each person was and they were guided by the wishes of individuals and their families.



Is the service responsive?

Our findings

The service continued to be responsive.

Most people living in the apartments were independent and did not require personal care. Staff knew people well and told us of the ways in which they supported them when they did not require personal care. This general support meant people continued to live well in their own home. They could be offered the right amount of support which might be minimal support but made a difference. Support could be offered for a short period of time and discontinued when it was no longer needed for example during acute illness. The service looked for individual solutions to care needs for example one person received regular support with their medicines but arrangements were made so they could continue to have days out enjoying their sports.

The care and support plans had been developed and written with the person and contained detailed guidance to staff about their preferences and support needs. The combination of staff knowledge and detailed written plans meant that support was delivered as the person wanted it to be.

People were free to follow their own interests and many had their own transport to travel the short distance to the park or shops. There was also a range of events and social activities available within the complex which were managed by the homeowners themselves.

In addition to formal complaints procedures people felt able to talk to staff about any issues of concern. People had not made any complaints about their care but said they felt able to do so. One person said "I have a good relationship with them (the staff). I feel able to raise any issues with them. I could take things higher too. The manager is very nice, very good." Another person said "I know (registered manager and senior staff) well. I would be very happy to discuss anything with them."



Is the service well-led?

Our findings

The registered manager was experienced and knowledgeable and had recently been given the "national estate managers award" by the provider. 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 was run.

The manager was supported by senior staff who had varied and appropriate skills and experience having followed care careers before moving into the assisted living environment. Senior staff felt confident in their ability to provide support to people at all times. They talked about the "back up" available from other senior staff and said help was always available. The registered manager and staff were clear about the type of service and high standard of care they aimed to deliver. The registered manager said that they were motivated to promote the happiness and wellbeing of everyone in the development supporting them to live as safely and freely as possible. One senior staff member said "Everything we do is about the well-being of the homeowners. We want to make this place special."

The manager knew people living in apartments and staff working there well. People said they would find it easy to talk with the manager. Staff said they were well supported and could approach the registered manager or senior staff at any time.

There were systems in place to ensure people were fully engaged and involved in the running of the service. There were regular formal and informal meetings and prominent notice boards displayed information for people.

The registered manager and senior staff gave examples of the ways in which people's needs might be met by working with other agencies. People were able to request other care agencies to come into their homes if they wished. Healthcare staff visited people when required and staff supported people to access a full range of community facilities and services as required. The registered manager told us sometimes people just needed to be made aware of what was available. Staff provided information and signposted to people or places that might help.

There were comprehensive quality assurance systems in the service. The provider supported the service with clear up to date policies and procedures. The operations manager visited regularly and support was available if required on all aspects of the service. The views of people were sought through regular questionnaires linked to the Care Quality Commission Key Lines of Enquiry. Questionnaires showed people receiving care were very satisfied with the service they received.