

Yourlife Management Services Limited

Your Life (Ilkley)

Inspection report

Scholars Place, Chesterton Court
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Tel: 01943604235

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07 August 2019

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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

Your Life (Ilkley) is a complex of 58 self-contained apartments in central Ilkley for people over the age of 70. The service is registered to provide personal care for older people, people with a sensory impairment, physical disability or dementia. Two people were currently receiving this service. People own their own apartment and staff are on site 24 hours a day. The flats have a communal lounge and bistro on the ground floor and shared accessible gardens.

People's experience of using this service

People told us they felt safe. Staff had a good understanding of how to safeguard adults from abuse and who to contact if they suspected any abuse had taken place.

Risk assessments were individualised and minimised risk whilst promoting independence. A robust system of managing incidents kept people safe. Staff knew what to do in the event of an emergency situation.

People told us staff were usually on time and had never missed a care visit.

Staff were supported with an induction, supervision and role specific training, which ensured they had the knowledge and skills to support people. People received support with their meals if this was part of their care plan.

People received support to maintain good health and were supported to access healthcare professionals and services if required.

People had maximum choice and control of their life and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People told us staff were caring and supported them in a way that maintained their dignity, privacy and independence. People were involved in planning their care.

Social activities were on offer within the service if people wished to take part.

The registered provider had good systems of governance in place to maintain and improve the quality and safety of the service.

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

Rating at last inspection

The service was registered with us on 17 August 2018 and this is the first inspection.

Why we inspected

This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people received. Newly registered services are inspected within 12 months of registration.

Follow up

We will continue to monitor the service and re-inspect in line with the current rating. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Your Life (Ilkley)

Detailed findings

Background to this inspection

The 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 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.

Inspection team

The inspection took place on 7 August 2019 and was announced to ensure someone would be in the office to speak with us. The inspection was conducted by one inspector.

Service and service type

This service provides personal care and supported living to people living in their own apartments in a shared building. The accommodation is the occupant's own home. CQC does not regulate the premises; this inspection looked at people's personal care and support service.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

What we did before the inspection

Prior to our inspection we reviewed all the information we held about the service. This included information from notifications received from the registered provider, feedback from the local authority safeguarding team and commissioners. We reviewed all the information we had been provided with from third parties to fully inform our approach to inspecting this service.

On this occasion we did not ask the registered provider to complete 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.

During the inspection

We spoke with two people who used the service. We spent time looking at two people's care plans and other

records. We looked at three records relating to staff recruitment, supervision and training, and various documents relating to the service's quality assurance systems. We spoke with the registered manager, one duty manager, two support workers and the area manager.

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 for 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 told us they felt safe. One person said, "Yes it's safe. If there was a problem they [staff] would sort it out. I've not had any problems." Staff had completed training in how to ensure people were safeguarded from abuse and knew the procedure to follow to report any incidents.

Assessing risk, safety monitoring and management

- Risks were minimised by detailed risk assessments, with clear directions for staff. They included environmental risks, falls, mobility and personal safety. One person said, "I have a pendant [alarm call] for emergencies. I haven't had to use it." A second person said, "The best thing is there is somebody around if I fall. I have a pendant alarm."
- Fire safety measures were in place, and people and staff were aware of the procedure to follow in the event of the need to evacuate the building.

Staffing and recruitment

- The registered provider deployed sufficient numbers of staff to meet people's needs. People told us they were usually supported by a consistent team of staff who had never missed a care visit.
- Recruitment procedures were safe.

Using medicines safely

- People were protected against the risks associated with medicines because the provider had appropriate arrangements in place. Medicines were administered in line with good practice.
- Staff had completed regular medicines training and competence assessments.

Preventing and controlling infection

- People were protected from the spread of infections by good staff practice and staff told us there was a good supply of personal protective equipment available. Staff supported people with cleaning their flat if required.

Learning lessons when things go wrong

- The registered provider had an effective system in place to implement learning from incidents and reduce future risks, for example putting measures in place to prevent falls.

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 as good. This meant people's outcomes were consistently good, and feedback confirmed this.

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

- Prior to moving to their flat the service completed an assessment of people's needs to ensure appropriate support was in place.
- Physical, mental health and social needs had been assessed and care plans included guidance and information to provide direction for staff, for example details of how people liked to be supported and their tastes and preferences.

Staff support: induction, training, skills and experience

- Staff were provided with an induction, training, supervision, spot checks and appraisal to ensure they were able to meet people's needs effectively.

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

- People were supported with meal preparation if required and accessed the bistro when they wished. Staff recorded the support they provided with meals and drinks, if required, to ensure people's nutritional needs were met.

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

- The service promoted good relationships with community health professionals to achieve best practice and help people to achieve good outcomes where this was part of the persons care plan.
- The service supported people with access to health care if they were unable to do this independently and liaised with family members where agreed.

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 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.

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.

- The staff members we spoke with had a good understanding of the MCA and they told us people currently using the service made their own decisions. People had consented to their care plans and told us staff always asked their permission before delivering care.

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 staff were caring. One person said, "Staff are wonderful. I have no complaints. If I want anything I just tell them and they say OK." We observed caring, warm and respectful interactions from staff and the registered manager.
- Positive caring relationships were developed through staff understanding people's needs and their personality. One staff member said, "I like helping other people. I like putting a smile on someone's face." All staff we spoke with said they would recommend the service to a member of their own family if they needed this kind of support.
- Equality was promoted within the service and staff knew how to support the cultural needs of people from different ethnic and religious backgrounds.

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

- People told us they made decisions about their care and we saw from records this was the case. One person said, "They are led by what I say. They treat me with respect. They have been very helpful."
- Each person's care plan contained information about people's preferred gender of carer and this was respected.

Respecting and promoting people's privacy, dignity and independence

- People we spoke with said their privacy, dignity and independence were respected by staff. We saw people's confidential information was securely stored.
- The service had an enabling ethos which promoted people's independence. One staff member said, "We try to achieve independent living. Let people get on with things and observe for support and encouragement where needed. Don't do things for people."
- The service was designed to be accessible and people owned their own accessible apartments, with passenger lift access to all floors.

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

- The registered manager said, "We get to know the person and their personality and match them to the keyworker."
- We looked at two people's care plans and found they were person-centred and explained in detail how people liked to be supported.
- People were involved in regular reviews and care plans were updated regularly, or when needs changed.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service met the AIS. People's communication needs were recorded in care plans and Information was available in large print should this be required.

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

- Staff encouraged people to attend the activities available within the service and the people we spoke with enjoyed socialising in the Bistro over lunch. One person said of other home owners, "They really are a friendly lot, honestly. I feel like I've known them for years. I have been to one or two activities. I shall go to the BBQ."
- Activities on offer included an exercise club, movie night and games afternoon.

Improving care quality in response to complaints or concerns

- No complaints or concerns had been raised. One person said, "I have not had to complain. They have all been very good."
- A complaints procedure was shared with people when they began using the service and was discussed at home owners' meetings.
- Staff we spoke with said if a person wished to make a complaint they would facilitate this. Compliments were recorded and shared with staff.

End of life care and support

- End of life care was not currently being delivered at the service. Discussions about people's end of life plans and wishes could be recorded if people wished to do so.

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 we spoke with told us the service was well led. One person said, "The manager is good, yes. Everything is very good, excellent." A second person said, "[Name of registered manager] is very helpful and pleasant. I had a parcel for the TV over there for a week. He put it all together for me."
- Staff we spoke with were clear about the organisations aims and values. One staff member said, "The best thing about the service is it allows people to maintain their independence. Our values include pride, passion, responsibility, innovation, determination and excellence."
- Staff told us they felt generally supported. One staff member said, "We are a good team and support one another. Yes, definitely well led." A second staff member said, "Duty managers are fantastic and [name of registered manager] is good. The home owners love him."

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

- The registered provider had a robust system to manage and reduce incidents and was aware of the duty of candour.
- The registered provider had effective systems in place to assess, monitor and improve the quality and safety of the service and the area manager completed regular visits to the service. The management team completed audits and staff observations to ensure compliance with the registered providers policies.

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

- The registered manager had an in-depth knowledge of the needs and preferences of the people they supported and made adjustments for people's equality characteristics, such as disability.
- The registered provider sought feedback from people and the responses were positive. People were involved in the service through regular 'home owners' meetings.
- The registered manager held regular staff meetings to share information. A staff survey had been completed and feedback was acted on.

Continuous learning and improving care; Working in partnership with others

- The registered provider reviewed information to improve quality in the service. The registered manager attended training and good practice events to share up to date good practice.

- The management team worked in partnership with community healthcare professionals, for example, ensuring best practice in falls prevention was followed.