

Yourlife Management Services Limited

Your Life (Poole)

Inspection report

Horizons
87 Churchfield Road
Poole
BH15 2FR

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04 June 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 (Poole) is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of this inspection two people received care and support from the service. It is located within a purpose-built property which provides flats and retirement living for people over the age of 70 years.

Not everyone living in the flats 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

We saw, and people told us, they received care from staff who knew their needs well, arrived on time and ensured that they felt safe and well cared for.

People were supported by staff who provided flexible, responsive care. Staff recruitment checks were robust and ensured staff were suitable to work with people in a care setting. Staff induction, on-going training and support enabled them to carry out their roles effectively.

People told us they felt listened to and consulted when planning and agreeing what care and support they needed. People were supported to access appropriate healthcare where necessary to maintain their health and wellbeing. Where needed, people received their medication as prescribed.

Risks to people were assessed and regularly reviewed. Staff understood the actions needed to minimise the risk of avoidable harm including the prevention of avoidable infections.

People knew how to make a complaint and felt confident they would be listened to if they needed to raise any concerns.

People and staff felt the service was well led. Governance systems and oversight of the service were robust. Issues were identified, and actions taken to address any shortfalls.

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.

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 11 June 2018 and this is the first inspection.

Why we inspected

This was the service's first planned inspection since it was registered.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. 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 (Poole)

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 Care Act 2014.

Inspection team

One inspector carried out this inspection.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own flats. All flats are in one building which also provides support services to people such as help with laundry and housework.

People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for this purpose. This inspection looked at people's personal care and support. 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.

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 provider or registered manager would be in the office to support the inspection.

Inspection activity started and ended on 4 June 2019 and this included visiting the office location.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information

helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with four members of staff including the registered manager, assistant manager and care workers.

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including quality assurance information.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at the information and evidence we had gathered during the inspection which included training data and policies.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff fully understood their role in protecting people from abuse and had received appropriate training on safeguarding of adults.
- The registered manager had a good knowledge of safeguarding and understood how to raise concerns with the local authority if this became necessary. A member of staff told us, "I have been here since last October. I have done safeguarding and whistleblowing training. I know who to go to and how to do it."

Assessing risk, safety monitoring and management

- Staff understood the actions they needed to take to minimise the risk of avoidable harm.
- One person told us, "I see somebody every day. That and my pendant [emergency call alarm] make me feel safe."
- Assessments were carried out to identify any risks to people and to the staff supporting them. This included any environmental risks in people's homes and any risks in relation to the care and support needs of the person. Individual risk assessments detailed the action staff should take to minimise the chance of harm occurring to people or staff.
- There was a contingency plan in place in case of events that effected the service running safely such as staff sickness, problems with the building or adverse weather.

Staffing and recruitment

- Recruitment practices were safe. The relevant checks had been completed before staff worked with people in their homes.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility to meet people's changing needs whilst ensuring consistent care. A member of staff told us, "I don't feel pressured. We talk about the work and make a plan."
- People consistently described the staff as reliable at arriving on time and having enough time to meet their needs.
- A member of staff told us, "I worked at another service for 14 years, but it only took a week for me to feel settled here. Everyone is so welcoming, and the team is good."

Using medicines safely

- People received their medicines when they were needed and in ways that suited them. There were systems in place to ensure this was done safely.
- People had their medicines administered by staff who had completed safe management of medicines training and had their competencies checked regularly. One person told us, "They always remember my

creams and tell me if there any concerns [with my skin]."

Preventing and controlling infection

- People were protected from the risk of infection because staff were trained in infection control.
- Staff told us they were supplied with personal protective equipment for use to prevent the spread of infections.

Learning lessons when things go wrong

- Accidents and incidents were reviewed and analysed by the registered manager so that any trends could be identified, and learning could be facilitated.
- Accidents and incidents were seen as an opportunity to reflect on practice and continually improve outcomes for people. An example had been an accident which involved a heated towel rail. The same one was provided in all flats in the complex. The incident had been discussed amongst the staff and shared with all the home owners in the building.

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.

People's outcomes were consistently good, and their feedback confirmed this.

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

- People's care needs and choices were assessed before the service started to provide any care or support and were then regularly reviewed.
- Assessments had been completed in line with current legislation, standards and good practice guidance and the information was used to create person centred care and support plans.
- Assessments included gathering information about people's cultural, religious and lifestyle choices and any equipment that was needed such as key safes, storage of medicines and telephone emergency alarm systems.

Staff support: induction, training, skills and experience

- People told us they felt their needs were met by staff with the right competencies, knowledge, qualifications, skills, experience, attitudes and behaviours for their roles.
- Staff told us they received training that was effective and felt sufficiently skilled to carry out their roles.
- Staff were knowledgeable about their roles and how to provide the correct support to meet people's needs. A member of staff told us, "The training made me feel capable. I have no worries and can always speak to someone if I need to. The registered manager is very approachable."
- Staff completed a comprehensive induction and did not work unsupervised until they and the management team were confident they could do so. An ongoing programme for updates and refresher training was in place.
- Staff said they felt well supported by their manager and told us they had regular supervision meetings which allowed them to discuss their performance, concerns or training and development needs.
- A member of staff told us, "The [the registered manager] is bang on with supervision. I had an annual appraisal and we set tasks and goals for my development."

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

- People were supported by staff who understood their food and drink needs and preferences.
- Care plans reflected the support the person needed.
- Staff had received training in how to support people with eating and drinking.

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

- Records showed collaborative working with other agencies had ensured effective care and improved people's quality of life.
- Staff spoke knowledgeably about people's health needs and recognised the importance of being proactive in seeking guidance and support from health professionals.

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

- People were supported to access healthcare services when they needed this. This included support from GP's, community nurses, opticians and chiropractors. People told us this was done in a timely way and records confirmed this.
- Records showed that instructions from healthcare professionals were carried out.

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.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty

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

- Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- People told us they were encouraged to make decisions for themselves and felt involved in making choices wherever possible.
- People had signed their care records to show that they consented to the care and support they were being provided with.
- Training records confirmed that staff had undertaken training in relation to the MCA.

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.

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 and staff spoke highly about how caring and supportive the service was. One person told us, "I cannot fault the care I get. The girls are thoughtful, considerate and respectful."
- Staff understood and respected people's lifestyle choices. When we discussed with staff the people they supported they demonstrated an open, non-judgemental attitude that respected people's diversity.

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

- Everyone we spoke with felt included in how their care and support was planned and delivered and had opportunities to have their opinions heard.
- If people needed independent support with making decisions, the registered manager had information available about advocacy services.

Respecting and promoting people's privacy, dignity and independence

- People confirmed that staff were respectful of their privacy, dignity and independence.
- People were supported to be as independent as possible. Care plans reflected what people were able to do for themselves and how to encourage them to do this.
- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.

Is the service responsive?

Our findings

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

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 told us that staff provided them with all the care and support they required; they said they felt very well cared for and were always consulted about what they needed and how they wanted this to be done for them.
- The staff team were knowledgeable about people's personal history which enabled them to have meaningful conversations. A member of staff told us, "There is plenty of information in the care plans for us."
- Care plans were personalised and detailed exactly how the person wanted their needs and preferences to be met. Each person's plan was regularly reviewed and updated to reflect their changing needs.

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.

- People's communication needs were assessed and detailed in their care plans. This documented the person's preferred method of communication, any impairments that could affect communication, and guided staff on the best ways to communicate with them.
- The registered manager confirmed they could provide large scale print of any documents if required and advised that some of the communal areas in the building were fitted with an induction loop. This is a piece of equipment that supports and improves the quality of sound heard by people who use hearing aids.

Improving care quality in response to complaints or concerns

- People were given information about the service and how to complain when they first started to receive support from the service.
- People told us they knew how complain if they needed to and felt confident that they would be listened to. One person said, "if I wasn't happy, I would say so. I would speak to [registered manager's name]. I've never had to complain."
- The complaints procedure explained how to make a complaint and set out how people could expect any concerns or complaints to be dealt with.
- One complaint had been recorded regarding the provision of personal care to a person in July 2018. The registered manager was still in the process of investigating this and was able to demonstrate that they were following the service procedure.

End of life care and support

- The service was not supporting anyone with end of life care needs at the time of our inspection.
- People's wishes regarding their end of life care were documented. This would ensure people received care and support in the way they wanted at this time of their life.

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.

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

- The registered manager and staff were motivated to provide the best possible person-centred care and support for people. A member of staff told us, "It's all about maintaining people's independence for as long as possible."
- People and staff told us that the registered manager was very approachable and that they would have no hesitation in raising concerns or making suggestions.

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 registered manager promoted the ethos of openness and learning from mistakes. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.
- The registered manager showed us accident and incident reporting processes that included prompts for appropriate reporting to other agencies such as safeguarding and the health and safety executive

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

- The registered manager and staff were clear about their roles and responsibilities and felt well supported by the registered provider.
- People and staff said there was a clear management structure in place and that they were always responsive to any issues raised.
- Staff spoke positively about teamwork. A member of staff told us, "We are all bonded as a team and work well together." Another member of staff told us, "It's so friendly and relaxed. I don't wake up and dread coming in. Nothing is an issue."
- There was a schedule of audits in place to ensure the quality of service was maintained and any shortfalls identified were acted upon.
- The registered manager was aware of their responsibilities to notify the CQC as required by the regulations but no such notifications had been required.

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

- People were encouraged to express their views and suggestions about the service via face to face with staff, surveys or reviews. This information was used to improve the service and to highlight good practice or

care.

- Staff felt comfortable to put forward any ideas they may have to improve the care, support or wellbeing for people and were confident these would be acted upon.
- Staff meetings were held regularly. These covered a range of topics including: supporting people with dementia, use of social media, care planning, health and safety and learning from incidents and accidents.

Continuous learning and improving care

- There was a process of continual improvement and quality assurance in place. There was a variety of audits completed to ensure the quality of the provision was maintained.
- There was evidence that learning from incidents and investigations took place and appropriate changes were implemented.

Working in partnership with others

- The registered manager told us, and records supported that the service had established good working relationships with health and social care professionals. This enabled the service to ensure the best possible outcomes for the people they supported.