

Yourlife Management Services Limited

Yourlife (Cottingham)

Inspection report

Springs Court
Field Close
Cottingham, Hull
HU16 5GX

Tel: 07764226874
Website: www.yourlife.co.uk

Date of inspection visit:

06 March 2023

07 March 2023

08 March 2023

09 March 2023

Date of publication:

11 April 2023

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 (Cottingham) is a domiciliary care agency providing the regulated activity of personal care to people living in their own flats in a purpose built retirement living development. Not everyone using Yourlife (Cottingham) receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. At the time of the inspection 2 people were receiving the regulated activity.

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

Policies and procedures were in place to guide staff on how to keep people safe and what they had to do if they had concerns. Staff knew how to identify and raise concerns about safety; and were confident the service would take them seriously.

Risk assessments and appropriate care plans had been developed to meet people's needs. People were supported to eat and drink enough to meet their needs and to take their prescribed medicines.

The provider operated safe recruitment and selection processes to make sure staff were suitable and safe to work with people. Staff received an induction and relevant training to help them meet people's needs. There were enough staff deployed at the time of the inspection to meet people's needs.

There were safe infection control procedures in place, including enough supplies of personal protective equipment.

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.

Staff knew people they cared for well due to the consistency of individual support. Staff we spoke with understood how to promote people's independence and ensured the care they provided treated people with dignity and respect.

People's needs were assessed prior to the delivery of care and support, and their needs and preferences were highlighted in their care plans for staff to follow.

The registered manager understood their responsibilities. There were systems to monitor, maintain and improve the quality of the service. The registered manager, supported by other senior staff, monitored standards of care delivery with a range of competence checks and audits. Staff were positive about the support they received from the management team.

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

Rating at last inspection

This service was registered with us on 02 December 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 (Cottingham)

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care and support to people living in 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate the premises used for extra care housing; this inspection looked at people's personal care and support service.

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. Another manager also supported the inspection.

Notice of inspection

We gave short notice of the inspection for the manager to provide us with the documentation we needed to look at. Inspection activity started on 06 March 2023 and ended on 09 March 2023.

What we did before the inspection

We reviewed information we had received about the service since it was registered. We used the information the provider sent us in the provider information return. 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 information gathered as part of a monitoring activity that took place on 14 June 2022 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

During the inspection

We spoke with 2 members of staff, a manager, and the registered manager. We also spoke with the relative of 1 person using the service. We reviewed a range of records. This included 2 people's care records and medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

This performance review and assessment was carried out without a visit to the location's office. We used technology such as telephone and video calls to enable us to engage with staff, and electronic file sharing to enable us to review documentation.

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 good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- The provider had policies and processes in place for staff to follow to raise any concerns and safeguard people from abuse.
- Staff completed safeguarding training and staff we spoke with demonstrated they understood their responsibilities and how to report any concerns. One member of staff told us, "I would feel confident to whistle-blow to any of the managers and I believe they would listen and act."
- The registered manager understood their legal responsibilities to protect people and shared important information with the local authority and CQC.

Assessing risk, safety monitoring and management; learning lessons when things go wrong

- Risks were appropriately identified, assessed, and mitigated to ensure people were safe.
- People's needs were appropriately assessed before any care commenced.
- People's care plans contained risk assessments which included those related to the home environment, mobility, health conditions and the administration of medicines. These guided staff on the actions they should take to promote people's safety.
- Accident and incidents were reviewed by the management team and records we reviewed included actions to prevent recurrences where necessary.

Using medicines safely

- We identified some minor recording issues within medication administration records. We raised this with the registered manager who took immediate action to ensure staff had clear information to safely administer medicines to people.
- People were supported by staff who followed systems and processes to administer and record their medicines.
- The registered manager ensured staff had received appropriate training and their competency to administer medicines was assessed. One member of staff told us, "I have done medicines training online, and my competence is checked by managers."
- People's records contained information about their medicines and how staff should support them to take them. Our checks of records showed people consistently received the medicines prescribed to them.

Staffing and recruitment

- Staff were recruited safely.
- The recruitment processes ensured that staff members were suitable for the work they were undertaking.

This included recruitment checks on their knowledge, identity and competencies as well as induction and training.

- There were enough suitable staff to meet people's needs and to keep them safe.

Preventing and controlling infection

- The service had a clear infection prevention control policy to guide staff.
- Staff told us that they had access to personal protective equipment to help keep them and the people they supported safe.
- Staff had been trained in food hygiene to help them reduce hygiene risks to people when preparing and serving food.

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

- People's needs were assessed before they started using the service and when their needs changed.
- People and others involved in their care were asked for information about their needs and how they would like care and support to be provided.
- People's preferences and choices for their care and support had been recorded in their plans of care. This helped staff to provide support in line with their needs and wishes. One member of staff told us, "I am able to read peoples care plans and they contain all of the persons needs."

Staff support: induction, training, skills and experience

- Staff were provided training to help them meet people's needs. One member of staff told us, "We do our mandatory training online, some face to face, and one to one training for fire safety. Managers spot check our medicines practice, and other areas such as how we greet people, speak to them, and make sure we protect peoples dignity and privacy."
- Staff were required to complete a period of probation at the start of their employment. This included regular meetings and assessments by a manager of their competency to meet people's needs.
- Staff had supervision meetings with a manager to support them in their role and to identify any further training they might need.

Supporting people to eat and drink enough to maintain a balanced diet; supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- People were supported with their nutrition and hydration where required. People's records documented their preferences and guidance for staff on how to support them.
- People's records contained information to guide staff about their health and medical conditions and how they should be supported with these. Staff we spoke with knew people well and what support people needed to stay healthy.
- Staff were observant when people became unwell or when there were changes in people's needs and sought support for this where appropriate. We saw an example where staff noted that a person needed extra support for a deteriorating health condition; a referral was made to an appropriate health partner and additional support from the person's GP was sought.

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.

- The provider was working within the principles of the MCA. They had consulted with people and asked them to consent to their care and treatment.

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 good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

- People were fully involved about the care they received. Care plans had been signed by the people who used the service.
- Staff understood how to deliver care in a way that promoted people's privacy and maintained their dignity. One member of staff told us, "I always leave people alone whilst in the bathroom and let them know I am just outside if they need me."
- Staff understood the importance of encouraging people to maintain their independence. One staff member commented, "It's about helping people to do what they can. I give prompts all the time to people to encourage them to do what they still can for themselves."

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

- People's care plans described their individual routines, cultural needs, and personal preferences.
- Care plans documented how people wanted to be supported, and staff were positive about providing care that met people's individual needs.

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

- People had been supported to express their views and be involved in making decisions. People's care records reflected the choices and decisions they had made about how their care and support was provided.
- People's feedback was obtained by the registered manager to make sure the care and support they received was continuing to meet their needs.
- The management team said they would support anyone who wanted to use the services of an advocate. An independent advocate helps people have a stronger voice and to have as much control as possible over their own lives.

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 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; 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

- People had choice and control over how their care and support was provided.
- People's records reflected their choices and preferences for how they received support. This helped to ensure people received support that was personalised to their needs.
- People's records contained information about their hobbies and interests to help staff get to know people and meet their needs.
- People had access to facilities at the complex which included a bistro, and communal areas.

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's communication needs were assessed, and details of any needs were recorded.
- People using the service did not have any specific communication needs at the time of this inspection; however, the registered manager said they would consider each person individually and would provide any support they needed. For example, easy to follow guides using pictures were given to people when first moving into the development on how to use various appliances within their apartments.
- Any care documents, contracts and information on how to complain could be adapted into larger print should this be required.

Improving care quality in response to complaints or concerns

- There were arrangements in place to deal with people's complaints or concerns.
- People were encouraged to give their feedback on the service to include complaints.

End of life care and support

- At the time of our inspection, the provider was not supporting anyone with end of life care.
- People's preferences and wishes relating to end of life care were explored and recorded in their care plan.
- Staff had received training in end of life care and policies and procedures were in place.

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

- There was an ethos of a person-centred approach to care and treating people as individuals which was consistent amongst the staff we spoke with. A relative told us, "My mum seems to be content."
- The managers were described to us as 'approachable and fair'. Comments about how the service was managed included, "It is managed well [the service]. I get on with the managers and they listen to you. They are always there if we need them."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care; 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 service was managed well. The registered manager had the skills, knowledge and experience to perform their role. They had good oversight of the service and demonstrated a clear understanding of people's needs.
- The registered manager understood their responsibilities to notify CQC and other relevant authorities of any incidents which took place that affected people who used the service.
- There were effective systems for monitoring and improving the quality of the service. The management team undertook a range of audits to make sure people were receiving good quality care. These included asking people and others for their feedback, observing staff caring for people and auditing people's medicines and care records.
- The registered manager understood their duty to be open and transparent when something went wrong.

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

- Care was planned in partnership with people using the service. The provider engaged with people and asked for their feedback. People completed surveys and had regular 'homeowner' meetings with members of the management team.
- Effective communication systems were in place to ensure staff were kept up to date with any changes to people's care and support. One staff member commented, "Staff morale is good. We have WhatsApp group for communication, and a communication book for information sharing."
- There were regular meetings for staff where their views were encouraged. Staff told us they felt their views

were respected.

- The provider celebrated diversity within the staff team. A 'value awards scheme' had recently been introduced where staff could nominate their colleagues for recognition.

Working in partnership with others

- The service worked in partnership with other professionals to achieve good outcomes for people.