

Yourlife Management Services Limited

YourLife (Shrewsbury)

Inspection report

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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

YourLife (Shrewsbury) is a domiciliary care agency which provides assistance with personal care to people living in their own flats within an assisted living complex. At the time of this inspection six people were receiving support with personal care needs. Not everyone who used the service 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

People felt safe with the staff who supported them. Staff understood their responsibilities in relation to protecting people from the risk of harm. Where risks to people had been identified, assessments were in place to manage and mitigate these. People received their medicines when they needed them. People were supported by adequate numbers of staff who were safe and competent to work with them. People were protected from the risks associated with the control and spread of infection.

People were supported by staff who were well trained and competent in their role. People were assessed before they used the service to ensure their needs and preferences could be met. Staff understood the importance of ensuring people's rights were understood and respected. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's health care and nutritional needs were monitored and understood by staff.

People told us staff were kind and compassionate. People were treated with respect and their right to privacy was understood and respected by staff. People were fully involved in decisions about the care they received.

People received a service which met their needs and preferences. People's communication needs were assessed and understood by staff. People were provided with information in a format which met their needs. People felt confident that any concerns would be taken seriously, and action would be taken to address them.

The service was effectively managed by a team who were committed to providing a high standard of person-centred care. The provider promoted an open and honest ethos and learned from mistakes. People's views about the service were valued and there were effective procedures in place to continually monitor and improve the quality of service people received.

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 rated good at our last inspection (report published August 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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	Good ●
Is the service effective? The service was effective	Good ●
Is the service caring? The service was caring	Good ●
Is the service responsive? The service was responsive	Good ●
Is the service well-led? The service was well-led	Good ●

YourLife (Shrewsbury)

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

This inspection was carried out by one inspector. An expert by experience made telephone calls to people and their relatives. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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 we needed to be sure that someone would be in the office to support the inspection. We also needed to obtain people's consent to contact them.

Inspection activity started and ended on 3 February 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with two people and a relative about their experience of the care provided. We spoke with three members of staff which included the registered manager and care support staff. We reviewed a range of records which 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 were also reviewed.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 with the care they received and with the staff who supported them.
- One person said, "I feel very safe with the staff, they are all very good. When I have my shower, the carer makes sure I am sat comfortably and always stays with me."
- Staff were trained to recognise and report abuse, and they were confident action would be taken to keep people safe. A member of staff said, "I've never seen anything. If I did I would report it straight away."
- People were supported by a small team of staff who were familiar to them. One person told us, "I normally have the same lady to shower me, we get on very well and she never rushes me. I feel that it is all about me."
- Regular meetings were held for people where they were provided with information about how to keep safe.

Assessing risk, safety monitoring and management

- Risks to people were considered and there were plans in place to manage and mitigate risks. These included environmental risks, moving and handling, falls and eating and drinking.
- Risk assessments and care plans were regularly reviewed to ensure they remained effective.
- People's equipment was regularly checked by staff to ensure it remained safe and well-maintained.

Staffing and recruitment

- People were protected by the provider's recruitment procedures which ensured only staff who were suitable to work with people were employed.
- There were sufficient numbers of skilled and experienced staff to meet people's needs.
- People told us staff had never missed a visit and they arrived on time and stayed for the allocated time.

Using medicines safely

- People were supported to take their medicines by staff who were trained and competent to carry out the task.
- One person said, "They [staff] will make sure we have remembered to take our tablets. Sometimes we have forgotten so it's good to know someone will remind us."
- Medication administration records (MAR) provided information about people's prescribed medicines, the dose and time the medicines should be administered.

Preventing and controlling infection

- People were protected from the risks associated with the spread of infection.
- Staff were trained and had access to sufficient supplies of person protective equipment (PPE) which they

wore when assisting people.

Learning lessons when things go wrong

- Records of accidents or incidents were maintained and reviewed when they occurred. This helped to identify any trends.
- Where things went wrong, the management team were keen to explore the reasons and to take steps to reduce the risk of it happening again.
- There was a culture of learning from accidents and incidents which was shared with staff.

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.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. 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 were assessed before they used the service to ensure their needs and preferences could be met.
- Assessments of people's diverse needs were discussed prior to using the service. These included religion and sexuality.
- Assessments were used to formulate a plan of care. This provided staff with the information they needed to meet the person's needs and preferences.

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

- Where required, people received support to eat and drink at the times that suited them.
- Staff ensured people received food and drinks which met their needs and preferences.

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

- Where required staff monitored people's health and worked well with external professionals to ensure people's health care needs were met. This meant the agency could make prompt referrals and seek advice where concerns were identified.
- A person who used the service said, "If we needed a doctor and couldn't get to ring ourselves, they [staff] would organise it for us. We have a cord we can pull which alerts the office plus we wear a buzzer that we can press at any time. It is all very organised and I feel well looked after."
- Care plans were reviewed and updated to reflect any changes or recommendations from healthcare professionals.

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.

- Staff had received training about the MCA and understood the importance of ensuring people's rights were protected.
- One person told us, "The carers are all very good and know what to do although I usually have the same lady for my shower. It really is up to me though if I want one and they will always ask. There is no problem if I don't feel like it. I can ask another day when I am feeling up to it."
- Care plans had been signed by people or their legally appointed representative confirming their consent to the care they received.

Staff support: induction, training, skills and experience

- People were confident staff had the skills and knowledge to meet their needs. One person said, "I think they have good enough skills."
- Staff were positive about the training they received, and they were confident they had the right skills to meet people's needs. A member of staff said, "The training is very thorough and we get regular refresher training."
- Before staff started working at the agency they completed an induction programme which gave them the basic skills and knowledge to work with the people who used the agency.
- New staff worked alongside and shadowed more experienced staff before they worked alone with people.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 were supported by a team of staff who were kind, caring and considerate.
- One person said, "The carers are lovely, very caring and we have a nice relationship. They are always asking if we need anything or they can do anything to help when they call in."

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

- People told us they were fully involved about the care they received. Care plans had been signed by the people who used the service.
- One person said, "There is a care plan which is very comprehensive. They take it to the office at times to update it and bring it back. I don't often look at it to be honest but see the staff write in it regularly."

Respecting and promoting people's privacy, dignity and independence

- People told us staff always respected their privacy and dignity.
- Care plans detailed how staff could help people maintain a level of independence. For example, one person had stated in their care plan, "I would like to remain independent with taking my medicines. I am able to open packets but like staff to be there so I feel safe and secure."

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Care planning and delivery was person-centred. Person-centred planning is a way of helping someone to plan their life and support they needed, focusing on what was important to the person.
- One person said, "We get on very well and they [staff] never rush me. I feel that it is all about me."
- Care plans contained important information for staff about people's life, work and social history. A member of staff told us, "It's really helpful to have this information as you can chat with people about their past and things that interest them."
- A relative told us, "We have good communication so if I need anything I can just ask and if they [staff] have any concerns, they will contact me or my [relative] immediately. I have never anything untoward, my [relatives] are very settled and get on well with the carers."

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.

- Care plans contained information about people's communication needs. This meant staff could support people to express their needs and views where the person experienced difficulties.
- Documentation could be produced in accessible formats, such as large print for people who required this.

Improving care quality in response to complaints or concerns

- None of the people we spoke with had any concerns about the care they received.
- One person said, "We've not needed to make any complaints it has all been very good. I would let the duty manager know if there were any problems and I am sure they would sort them out."
- The service had not received any complaints since our last inspection.
- Each person had been provided with a copy of the agency's complaints procedure.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 spoke highly about the care they received and of the way the service was run.
- One person said, "I know [name of registered manager]. They are very nice, very approachable and they make sure everything is working well. They are outgoing and very easy to get along with."
- Another person told us, "We are extremely happy and would certainly recommend being here to others."
- Staff at all levels were committed to providing people with a high standard of care which was tailored to their needs and preferences.

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

- People were supported by staff who were trained and motivated to carry out their role.
- Staff received regular supervisions where they had the opportunity to discuss their role and performance.
- Staff training, skills and competence were regular monitored through observations of their practice and regular refresher training.
- Staff were aware of the whistleblowing procedure and said they would use this if the need arose.
- In accordance with their legal responsibilities, the provider had informed us about significant events which occurred at the agency within required timescales.

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 provider promoted an ethos of openness and transparency which had been adopted by all staff.
- There was learning where things went wrong and open discussions with people and their relatives.

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

- There were annual satisfaction surveys which provided people and their relatives to express a view about the quality of the service provided. The results of a recent survey showed a good level of satisfaction.
- A person who used the service told us, "We have one [survey] here which we are in the process of completing. It is very long but comprehensive. I think it has been sent out by a third party and is anonymous which I think is very important."
- People's views were sought daily when receiving support and through regular care plan reviews.

- There were regular meetings for staff where their views were encouraged. Staff told us they felt valued and their views were respected.

Continuous learning and improving care

- There were effective procedures in place to monitor and improve the quality and safety of the service provided. These included a range of audits, seeking the views of people who used the service and monitoring the skills, training and competence of the staff team.
- The provider's policies and procedures were regularly reviewed to ensure they complied with current best practice and legislation.

Working in partnership with others

- The agency worked in partnership with other professionals and organisations to achieve good outcomes for people.
- These included healthcare professionals and hospitals.