

Your Autumn Years Ltd

YOUR AUTUMN YEARS LTD

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

YOUR AUTUMN YEARS LTD is a domiciliary care service based in Heysham, Morecambe. The service specialises in providing palliative care to people in need of end of life care. The service operates from Morecambe and across north Lancashire. At the time of our inspection visit the service supported 15 people with palliative care.

YOUR AUTUMN YEARS LTD provides personal care and support to individuals within their own homes. CQC only inspects the service received by people provided with their personal care and help with tasks related to personal hygiene and eating.

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

People's care and support had been planned proactively and in partnership with them. People felt consulted and listened to about how their relatives care would be delivered. Care plans were organised and had identified the care and support people required.

People were positive about the service and said staff were kind and caring. People were treated with dignity and respect and were fully involved in their care planning and delivery. People's right to privacy was upheld.

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.

The service worked in partnership with other organisations to ensure they followed good practice and people in their care were safe and received the best possible care.

The service was flexible and care packages were changed and adapted to meet people's changing needs and choices. There was excellent communication between the service and people they supported to ensure they received the care and support they needed.

Healthcare professionals told us the service provided person centred care focusing on people's needs as an individual and giving them the opportunity to make informed decisions about their care. They said the standard of palliative care provided by staff was very good and they were impressed with the level of professionalism provided throughout the service.

Staff had been recruited safely, appropriately trained and supported. People told us their visits were well managed and staff who visited them knew and met their care needs.

Procedures were in place to record safeguarding concerns, accidents and incidents and take necessary action as required. People told us they had no concerns about their safety whilst in the care of staff supporting them.

The service had a complaints procedure which was made available to people and their family members. People told us they were happy with their service and had no complaints.

The service used a variety of methods to assess and monitor the quality of the service. These included regular audits and satisfaction surveys to seek people's views about the service provided

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

Rating at last inspection (and update)

This service was registered with us on 25/06/2018 and this is the first inspection.

Why we inspected

This was the services first planned inspection.

Follow up:

The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

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 AUTUMN YEARS LTD

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

The inspection team consisted of one inspector.

Service and service type

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

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 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

Inspection site visit activity started on 11 June 2019 and ended on 11 June 2019. We visited the office location on 11 June 2019 to see the registered manager; and to review care records and policies and procedures.

What we did before the inspection

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service.

We checked to see if any information concerning the care and welfare of people supported by the service

had been received. We also sought feedback from professionals who work with the agency.

As part of the inspection we used information the provider sent us in the Provider Information Returns. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

We used all of this information to plan our inspection.

During the inspection

We spoke with 11 relatives of people who used the service and five healthcare professionals about their experience of the care provided. We spoke with five members of staff including the registered manager, senior office manager and three palliative support workers.

We reviewed a range of records. These included the care records of two people, staff training records, arrangements for staff recruitment, supervision and appraisal, medication procedures and records relating to the management of the service.

Is the service safe?

Our findings

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

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 and their human rights were respected and upheld. Effective safeguarding systems were in place and staff spoken with had a very good understanding of what to do to make sure people were protected from harm.
- People told us their relatives received safe care and they had no concerns about their safety. One person said, "No concerns about [relatives] safety. The girls are really kind, caring and patient. They have my complete trust."

Assessing risk, safety monitoring and management

- The service managed risk through effective procedures. Care plans confirmed a person-centred risk-taking culture was in place to ensure people were supported to take risks and promote their own self development.
- Each person had a risk assessment and risk was managed and addressed to ensure people were safe. These had been kept under review by the registered manager and updated where required to ensure staff had access to information to support people safely.
- Staff understood where people required support to reduce the risk of avoidable harm.

Staffing and recruitment

- Suitable staffing arrangements were in place to meet the assessed needs of people in a person-centred and timely way. People told us staff were reliable and didn't let their relatives down. One person said, "Very reliable service. They have never let us down once. We have the same group of carers and they always work in two's. We are very happy with them."
- Staff told us their visits were well managed and they were able to support people without feeling rushed or under pressure.
- Recruitment was safe and well managed. Relevant checks had been made before new staff had commenced their employment. One recently recruited staff member confirmed their recruitment had been thorough with checks undertaken to confirm their suitability to work with vulnerable people.

Using medicines safely

- Medicines were managed safely and people received their medicines when they should. Where people were supported, we saw medicines were managed in line with good practice guidance.
- People told us they were happy with the support their relatives received with their medicines. One person said, "No issues whatsoever. They are very efficient and know what they are doing."

Preventing and controlling infection

- The service had effective infection control procedures. Staff had access to and used protective personal equipment such as disposable gloves and aprons. This meant staff and people they supported were protected from potential infection during the delivery of personal care.
- Staff received training and regular audits were undertaken to ensure standards were maintained.

Learning lessons when things go wrong.

- Systems were in place to record and review accidents and incidents. We saw evidence any accidents and incidents were investigated and actions put in place to minimise future occurrences. Lessons learned were shared with staff to improve the service and reduce the risk of similar incidents.

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 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

- The registered manager completed assessments which were comprehensive to ensure people's needs could be met. Expected outcomes were identified, discussed and agreed. Following assessment the service had provided a holistic approach towards providing person-centred care. Records were consistent and staff provided support that had been agreed during the assessment process. People confirmed this when we spoke with them.
- We saw evidence the provider was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported the service to ensure people received effective, safe and appropriate care which met their needs and protected their rights.
- The senior office manager regularly reviewed care and support and updated care plans where people's needs had changed. This ensured people received the level of care and support they required.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. Discussion with staff and observation of training records confirmed they received training that was relevant to their role and enhanced their skills. All new staff had received a thorough induction on their appointment to ensure they had the appropriate skills to support people with their care. People told us they felt staff were well trained. One person said, "The staff who visit us are very efficient, professionally trained and competent. The standard of care they provide is excellent."
- Staff told us they felt well supported and had access to management when they needed them. One staff member said, "The managers are great, really supportive and helpful. They are a brilliant company to work for."

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

- People's nutritional needs were well managed where required. Care plans confirmed people's dietary needs had been assessed and support and guidance recorded. People told us they were happy with the arrangements in place to support their relatives with their dietary needs. One person said, "They provide good nutritional support and think about varying [relatives] diet. I am very grateful for the support they provide."
- Staff confirmed they had received training in food safety and were aware of safe food handling practices. One staff member said, "The training we receive is really good. It makes us think about preparing meals safely, giving people choice and ensuring we have prepared meals they can enjoy."

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

- The service worked effectively with healthcare professionals to ensure people received a good standard of

palliative care. We saw the service worked closely with health care services including GPs, district nurses, speech and language therapists, physio and occupational therapists. This ensured people were supported by healthcare services in a timely manner.

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

- People's healthcare needs were carefully monitored and discussed with the person or family members as part of the care planning process. Care records seen confirmed staff worked closely with and liaised with healthcare professionals to ensure people received the appropriate level of care as their needs changed. One person said, "Our girls are so caring and professional. They work extremely well alongside all healthcare professionals supporting [relative]. We are delighted with the care they provide."
- Healthcare professionals told us how impressed they were with the service and said staff were caring, courteous and provided really good standards of care. They said staff worked alongside them well and they were always delighted when they knew they would be supporting their patients.

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 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 with appropriate legal authority. Where people are deprived of their liberty in their own homes applications must be made directly to the Court of Protection.

- Records contained evidence to demonstrate care planning was discussed and agreed with people and their representatives. Consent documentation was in place and signed by the person receiving care or their relatives who had legal status to provide consent on their behalf.

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 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 caring and respectful staff. People told us their relatives had the same small group of carers who knew and understood their needs. Comments received included, "Very caring girls and they always show a genuine interest in [relative]. They are professionally trained, competent and the standard of care they provide is excellent. [Relative] accepted the carers very easily and is relaxed with them." And, "Absolutely superb and outstanding service. They have been a god send to us, don't know how I would manage without them. They are brilliant. They engage with [relative] as friends and they love them coming."
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. Care records seen had documented people's preferences and information about their backgrounds. One person told us how their relative had reverted to their native language because of their dementia. The person said, "Every member of the team has learnt phrases to communicate with [relative]. Through this all their anxieties have melted away."
- The service had carefully considered people's human rights and support to maintain their individuality. Documents for future service users included information of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. The registered manager told us they had systems to ensure people's human rights were upheld.

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

- The service supported people with decision making. Care records contained evidence the person who received care or a family member had been involved with and were at the centre of developing their care plans.
- People supported by the service or a family member had been encouraged to express their views about the care required. One person told us, "Really well managed care package. I am fully involved in all decision making about [relatives] care."
- Information was available about local advocacy contacts, should someone wish to utilise this service. An advocate is an independent person, who will support people in making decisions, in order to ensure these are made in their best interests. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity and consent was sought before staff carried out any support tasks. They told us they were always treated with respect and their human rights were

respected.

- Staff described to us in detail how they supported people with personal care and ensured the curtains were closed and people remained covered up to support their dignity.

Is the service responsive?

Our findings

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

This meant people's needs were met through good organisation and delivery.

End of life care and support

- The service demonstrated an extremely compassionate awareness and understanding for people being supported at the end of their lives. The registered manager told us the service was committed to ensuring people who received palliative care were in full control of their choices of care. All staff had received palliative care training and people told us their relatives were supported by professional, caring and compassionate staff. The relative of one person said, "They are all wonderful. Always friendly and chirpy. They keep [relatives] spirits up with their humour when they are feeling down. Their care cannot be faulted." Another relative said, "Honestly nothing negative to say about them. It's been a pleasure having them support [relative]. They invest in people so they understand how you are feeling. I think they are wonderful."
- The service worked closely with healthcare professionals including district nurses and GP's. This ensured appropriate pain management systems were in place and all relevant equipment to support the person to remain comfortable and pain free at end of life.
- Healthcare professionals consistently told us the service worked very well with them and staff were professional and caring. They said staff reported healthcare concerns to them and stayed and helped them attend to the person.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The service provided care and support that was focused on individual needs, preferences and routines. People told us how their relatives were supported by staff to express their views and wishes. This enabled them to make informed choices and decisions about their care. One person said, "They always speak with [relative], explain what they are going to do and get [relatives] agreement before they commence providing care. They are very professional."
- The care files we saw were person-centred and individualised documents. They contained detailed information, providing staff with clear guidance about people's specific needs and how these were to be best met. These included people's personal care needs and nutritional support. Staff spoken with were able to describe people's individualised needs and the support they were providing.

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.

- We saw people's communication needs had been assessed and where support was required this had been met. The registered manager had provided large print information for people with visual impairment and sought guidance and training from healthcare specialists so they could support people with their

communication needs.

Improving care quality in response to complaints or concerns

- There were processes in place to ensure all complaints would be dealt with appropriately. The registered manager told us they used issues, complaints or concerns as a positive experience and learning opportunity to improve the service.
- People told us they were happy with the service their family member received and had no reason to complain about anything. Everyone we spoke with said they were very confident if they ever had any concerns these would be dealt with quickly and professionally.

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 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

- The service planned and delivered effective, safe and appropriate person-centred care. We saw all current and relevant legislation along with best practice guidelines had been followed. This was to ensure the diverse needs of everyone who used their service were met.
- The service's systems ensured people received person-centred care which met their needs and reflected their preferences.
- The service was well-organised and there was a clear staffing structure. People spoke positively about how the service was managed. One person said, "Really well managed care service. I would happily recommend them to anyone."

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 understood legal obligations, including conditions of CQC registration and those of other organisations. We found the service had clear lines of responsibility and accountability. People spoke positively about how the service was managed. They informed us the registered manager was visible and had a good understanding of their relatives needs and backgrounds.
- Policies and procedures provided guidance around the duty of candour responsibility if something was to go wrong.

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

- The registered manager and staff team were experienced, knowledgeable and familiar with the needs of the people they supported. Relatives were very positive about the quality of service their family members received. One person said, "Cannot fault how the service is managed. They are always focussed on what they are doing."
- Discussion with the staff confirmed they were clear about their role and between them and management provided a well run and consistent service.

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

- The service provided an open culture and encouraged people to provide their views about how the service was run. The service had sought the views of people they support and family members through care plans reviews, staff assessment visits and telephone monitoring. People told us they felt consulted about the

service they received and listened to. One person said, "They are constantly looking to improve on what is already a very good service. They are very interested in our views and I am happy to provide my positive comments."

- Staff told us they could contribute to the way the service was run through team meetings, supervisions and anonymous surveys. They told us they felt consulted and listened to.

Continuous learning and improving care

- The provider had systems in place to ensure the quality of service was regularly assessed and monitored. The service had a wide range of effective audits such as medication and care records. We saw evidence the service had acted upon any findings from the audits. This demonstrated improvements were made to continue to develop and provide a good service for people supported by the service.

Working in partnership with others

- People received safe and coordinated care. The service worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. These included healthcare professionals such as GPs, district nurses and occupational therapists. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.