

Yourlife Management Services Limited

YourLife (Urmston)

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 (Urmston) is a domiciliary care service that provides personal care to people in their own homes. The service is based within a private assisted living housing development.

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. At the time of the inspection there were three people receiving support.

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

The service had appropriate systems and procedures in place which sought to protect people from abuse. People told us they felt safe. Accidents, incidents and untoward events were reported and recorded appropriately and in a timely way. Where support with medicines was part of an assessed need, these were managed safely; this included systems for ordering, storage, administration and disposal of medicines.

Before a person started using the service their needs were comprehensively assessed. The assessment included people's likes, dislikes, personal preferences and understanding people who were important. Staff received effective induction, training and supervision to ensure they were skilled and competent to carry out their roles. Feedback from people who used the service confirmed they felt staff were well trained. Staff told us they felt supported and were sufficiently trained to fulfil their roles.

The service benefited from an onsite bistro and dining area. A wide range of hot and cold meals, snacks and drinks were available for people to buy.

Support was provided to people around eating and drinking where this was part of an assessed care need. Staff were trained in food safety and were familiar with people's needs and preferences.

The housing development benefited from communal facilities that were well presented, spacious, with modern furnishings and fittings and decorated to a high standard. People had access to a communal garden and patio area.

We observed interactions between staff and people in communal areas and found these to be kind, caring and respectful. Staff working in the service were confident with difference. Equality and diversity training had been provided. Staff understood the importance of involving people in decisions about their care and people told us they were involved in discussions and plans about their ongoing care and support needs.

The service benefited from an experienced registered manager who was committed to providing high-quality, person-centred care. The registered manager led by example and staff clearly mirrored these values. This had a positive impact throughout all aspects of the service.

Systems and processes for audit, quality assurance and questioning of practice were operated effectively.

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

Rating at last inspection:

The last rating for this service was good (published 03 July 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 reinspection 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 ●

YourLife (Urmston)

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 service was inspected by one inspector.

Service and service type:

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

The service had a manager registered with the Care Quality Commission (CQC). 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 the service is provided to people in their own homes and we wanted to be sure people were available to speak with us.

What we did before the inspection:

We reviewed information we had received about the service since the last inspection. We also sought feedback from partner agencies including the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

Due to technical problems, the provider was not able to complete a Provider Information Return. 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 three people who used the service and one visiting relative about their experience of the care provided. We spoke with the registered manager, area manager and three members of staff.

We reviewed a range of records. This included three care plans and records associated with the quality, safety and 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse:

- The service had appropriate systems and procedures in place which sought to protect people from abuse. People told us they felt safe. Comments included, "It's a very safe community and the staff keep us safe."
- Staff had received safeguarding training and were able to describe to us how they would recognise and respond to signs of potential abuse.

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

- Systems were in place to identify and reduce the risks associated with the delivery of care to people. For example, assessments were completed for environmental risks, falls risks and medicines management.
- Care records contained guidance for staff about how to support people in the safest possible way.
- In the event of an emergency, people who used the service could press their personal pendant alarm. Staff were available onsite between the hours of 7.00am and 11.00pm, after this time, alarm calls would be transferred through to a call centre.
- Accidents, incidents and untoward events were reported and recorded appropriately and in a timely way. Effective systems were in place to review incidents for wider learning, and to reduce the likelihood of such events occurring again in future.

Staffing and recruitment:

- There were sufficient numbers of staff to meet people's needs. People told us they received care and support when they needed it and staff were punctual and did not rush. Comments included, "My carers take their time with me and visit when they're meant to."
- Pre-employment checks had been carried out to ensure the suitability of prospective new employees.

Using medicines safely:

- Where support with medicines was part of an assessed care need, these were managed safely. This included systems for ordering, storage, administration and disposal. Where appropriate, people were encouraged to administer their own medicines to remain as independent as possible.
- Staff were trained in medicines management and competency assessments were completed before staff provided support to people with their medicines.
- Staff kept accurate records of the medicines they administered. Regular checks were completed by managers to ensure staff were following correct procedures.

Preventing and controlling infection:

- Staff had completed infection control training and understood their collective and individual responsibilities. This was supported by appropriate policies and procedures.
- Personal protective equipment such as disposable gloves and aprons were readily available at the point of care.

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 remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience:

- Staff received effective induction, training and supervision to ensure they were skilled and competent to carry out their roles.
- The training and development needs of staff were assessed on an individual basis, according to their previous experience. Comments from staff included, "The training has been great, and I feel very supported by the manager."

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

- Before a person started using the service their individual needs were comprehensively assessed.
- Staff champion roles had been introduced to help ensure care and support was provided in line with current best practice. These included a falls champion, a dementia champion and a medication champion.

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

- Support was provided to people around eating and drinking where this was part of an assessed care need. Staff were trained in food safety and were familiar with people's needs and preferences.
- The service benefited from an onsite bistro and dining area. A wide range of hot and cold meals, snacks and drinks were available for people to buy.

Adapting service, design, decoration to meet people's needs:

- YourLife (Urmston) provided care to people within their own private apartments. However, the housing development benefited from communal facilities that were well presented with modern furnishings and fittings and decorated to a high standard. People also had access to a communal garden and patio area.

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

- Where appropriate, people were supported to access a range of health and social care services such as GP, district nurse, physiotherapist, or social services.
- Care plans were regularly reviewed with people to ensure all needs were identified and met.
- Instructions and recommendations from professionals were recorded in people's care plans, along with updates to the relevant sections of the care plan.

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- At the time of this inspection, no one who used the service was subject of an order made by the Court of Protection that resulted in the care being provided restricting their liberty, rights and choices.
- Staff received training and understood the principles of the MCA and how they applied this to their day to day work.
- People were supported to make their own decisions and choices and staff only provided care with consent where people had capacity.
- Should a person show signs of a deterioration in their mental capacity, the service had effective systems and processes in place which meant they could respond in a timely way.

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 now 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:

- We observed interactions between staff and people in communal areas and found these to be kind, caring and respectful.
- Equality and diversity training had been provided. Staff working in the service were confident with difference.
- Staff talked with us about how they would always seek to get to know a person when they first started using the service including relationships that were important to them and personal preferences. This helped to shape how care and support would be provided in a way that was personalised to the individual.
- People who used the service told us staff were caring and treated them with dignity and respect. Comments included, "The carer comes each day and they are always polite, caring and respectful."

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

- Staff understood the importance of involving people in decisions about their care and people told us they were involved in discussions and plans about their ongoing care and support needs.
- The registered manager was highly visible in and around the service and had daily contact with the majority of people. This allowed for more informal and relaxed discussions to take place, that people clearly appreciated.

Respecting and promoting people's privacy, dignity and independence:

- Staff understood how to support and promote people's independence and how to respect their privacy. This was confirmed by the people we spoke with.

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.

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:

- A range of services and activities were available to all residents living with the housing development. The onsite bistro, dining area and communal lounge, provided daily opportunities for people to socialise.
- There was an active residents' social group which organised a wide range of events throughout the year.
- Guest rooms could be booked by visiting relatives which meant they could spend quality time closer to their loved ones.
- Staff supported people who were less mobile or lacked confidence, to be full and active members of the community.

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

- People who used the service were fully involved and consulted in all aspects of service provision, including regular reviews to discuss what was working well, not so well, and any changes that were needed.
- The service benefited from a core of regular staff who had a good understanding of people's likes, dislikes and personal preferences; this was confirmed by the people we spoke with.
- The service benefited from a specialist dementia adviser who worked across the providers portfolio of services. Staff could call upon their expertise at any time to ensure care and support provided to people with dementia or memory problems, was delivered in a safe and person-centred way.

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.

- Information obtained by the service as part of a holistic assessment of need, captured people's communication needs. This meant the service could tailor information in a way that was accessible. For example, care plans and correspondence provided in large print.

Improving care quality in response to complaints or concerns:

- The service had a detailed policy and procedure which told people how they could complain and what to expect in response to a complaint, including timescales. It also gave people details of managers and other organisations they could contact if they were not happy with how their complaint had been dealt with.
- The registered manager operated an open-door policy. Everyone we spoke with confirmed they felt comfortable and at ease in raising any concerns.

End of life care and support:

- No one was in receipt of end of life care at the time of the inspection.
- Care plans included a section for people to indicate their advanced wishes in relation to end of life.
- Should a person nearing the end of life of their life choose to remain within their own home, the registered manager described to us how this would be facilitated, for example, with support from a range of external health and social care professionals.

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:

- The service benefited from an experienced registered manager who was committed to providing high-quality, person-centred care. They led by example and staff clearly mirrored their values. This had a positive impact throughout all aspects of the service. A member of staff told us, "It's a lovely place to work and we all work as one team for the benefit of all our residents."
- People and their relatives were consistent in describing a high level of satisfaction with the service. Comments included, "I see the manager most days and all the staff are great." and "My [relative] is really well supported here. I know they are in safe hands. Its really reassuring."

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 and registered manager understood their responsibilities around duty of candour. This was underpinned by an open, inclusive and transparent culture that operated within the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care:

- The registered manager had a good understanding of their role and legal responsibilities. This included submitting information to CQC that is legally required, in a timely way.
- Systems and processes for audit, quality assurance and questioning of practice were operated effectively.

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

- The registered manager was highly visible and engaging. Throughout the inspection visit we observed multiple positive interactions between the registered manager and people who used the service. People clearly responded well to these daily interactions that were professional, yet informal.
- Residents' meetings were held on a regular basis. We saw these were well attended and appropriate records were maintained. Staff meetings were also held on a regular basis. Staff told us they felt able to contribute ideas to help improve the quality of the service provided.
- Through our discussions with the registered manager, area manager and wider staff team, we were confident the service was delivered in a non-discriminatory way. This was supported by policies and procedures around equality and diversity, and training provided to staff.

Working in partnership with others:

- The registered manager recognised the importance of working in partnership with others. We saw multiple examples of how they had been proactive in making timely referrals to external agencies and implementing plans that helped people to remain living in their own home for as long as possible.