

Yourlife Management Services Limited

Yourlife (Scarborough)

Inspection report

Sycamore Court
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Scarborough
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Tel: 01723367540

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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 (Scarborough) is a domiciliary care service providing personal care to people living in their own homes. At the time of the inspection, the service was supporting 3 people.

People who use the service may not always receive 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 told us they felt safe and well supported. Staff followed procedures to keep people safe. Known risks had been assessed and were regularly reviewed.

Staff received appropriate training and support to carry out their roles. People were supported to take their medicines safely as prescribed and staff followed good infection prevention and control practice.

People provided their consent to, and were involved with, planning their care and support. People's preferences were recorded and wherever possible staff supported people to maintain their independence. One person said, "I have good involvement in my care planning, the staff listen and act on any feedback or suggestions to the way I am supported as my needs continue to change."

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 treated people with respect and upheld their privacy and dignity. People received their support from regular staff who they knew and described staff as kind and caring.

Staff had access to clear and concise care records which were up to date.

Staff were supported by an experienced registered manager who was passionate about providing people with the best care and support. The registered manager completed a range of audits and checks to ensure systems and processes remained effective and to identify any areas that could be improved. People and staff were approached for their feedback and information received was used for the benefit of their care and support.

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

Rating at last inspection

This service was registered with us on 31/03/2020 and this is the first inspection.

Why we inspected

This was a planned inspection to assess the standard of care delivered by the service and award a 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.

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 (Scarborough)

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 was completed by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own private apartments. 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 provider or manager would be in the office to support the inspection.

Inspection activity started on 27 October 2021 and ended on the 1 November 2021. We visited the office location on 27 October 2021.

What we did before the inspection

We reviewed information we had received about the service. We contacted the local authority commissioning and safeguarding team and Healthwatch for their feedback. 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 the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with two people receiving a service, a friend of a person at the service, the registered manger, and two staff. We reviewed three people's care and medicine records and we looked at two staff files including staff training and staff supervision records. A variety of records relating to the management of the service, including survey outcomes, quality audits and service checks were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 for 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; Assessing risk, safety monitoring and management

- People told us they felt safe with staff who supported them.
- Staff we spoke with demonstrated a good understanding of the signs of abuse and had a good knowledge of who to inform and what action to take if they had any concerns. Staff told us they felt assured the registered manager would act on any concerns if raised.
- Initial assessments recorded known risks for people, and these were regularly reviewed. Support plans provided associated guidance for staff to provide safe care.

Staffing and recruitment

- Staff were safely recruited to their roles with appropriate pre-employment checks completed.
- Sufficient numbers of staff were employed to provide safe consistent care to people. One staff member told us, "It's such a great place to work, we are not rushed and have the opportunity to spend time getting to know people to support them with their changing needs on a daily basis."

Using medicines safely

- Where people required support to take their medicines, this was completed safely and as prescribed.
- Staff had received required medicines training and received checks to ensure they remained competent and followed best practice.

Preventing and controlling infection

- We were assured PPE was used effectively and safely.
- Clear guidance was available making sure any infection outbreaks were effectively managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- There were systems to record, review and learn from incidents and accidents that may occur at the service. The process included the provision for actions to be implemented in response, which helped to keep people safe.

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, and preferences were appropriately assessed prior to people using the service for the first time. Information was person centred and people confirmed their choices were respected.
- People were happy with how staff supported them with their individual needs. One person said, "[The registered manager] changed the staff rota to fit for me. It was all done with such a huge dollop of kindness and care."
- Care records were regularly reviewed and updated ensuring staff had the required information to provide effective care and support.

Staff support: induction, training, skills and experience

- Staff received appropriate induction, training and support to carry out their roles.
- New staff were introduced to the people they would support as part of their induction to the service and to ensure their suitability for the role.

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

- People received care and support as assessed to maintain a healthy diet.
- People's dietary needs and preferences were documented in their care plans.
- Daily food and fluid intake were recorded where required and monitored. Staff understood what to do if they had any concerns.

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

- People were supported to live healthier lives and access healthcare when needed.
- Staff recorded their observations during each visit. This information was reviewed, and support adjusted with referrals for further support made where required. For example, if a person became unwell or needed additional support.
- Where people required support to mobilise, they were referred for appropriate assessment to ensure they had the required equipment to remain mobile in and around their own homes.

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.

- Staff obtained people's consent in line with law and best practice guidance. People confirmed they were involved in their care planning and signed their consent in care plans.
- The registered manager and staff understood the requirements of the MCA and the importance of supporting people to make their own choices and decisions wherever possible.
- Staff were not supporting anyone with restrictive practices at the time of this inspection.

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.

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

- People told us they were very well treated by staff who were caring, responsive and respected their individual needs and preferences. One person said, "They [staff] do everything they can. Using a hoist can be difficult but the staff are well trained and considerate of the difficulties."
- Staff had access to up to date records and information and people told us they were consistently treated as individuals. Systems and processes ensured information remained up to date and staff were quick to respond to changing needs.
- Staff knew people and noticed when they were in discomfort or needed emotional support. Information was recorded and swift action taken to provide additional care and support where this was required.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People received care and support that was centred around their individual needs.
- People told us they were routinely asked for their feedback and felt their views and opinions were respected at all times.
- The registered manager ensured people were treated with the upmost dignity and respect. A dignity champion was employed, and staff had completed training in this area. People told us they were treated with dignity and respect at all times and without discrimination.

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

- People told us they were routinely involved in their care planning and staff supported them to make individual decisions.
- Care plans were very detailed with clear information for staff to follow so they could support people safely.
- People's assessments and care plans were reviewed regularly and as their needs changed. This information and concise care notes were accessible to all staff to ensure all planned care was provided.

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.

- The provider ensured information was available in a variety of formats for people. For example, large print or pictures, and in different languages to meet people's needs if required.

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

- Staff supported people in a way that enabled them to stay living as independently as possible in their own apartments. One person said, "I can choose to engage in community life. I have been getting out and about. For example, I have been down to fund raising events where everyone is so very welcoming."

Improving care quality in response to complaints or concerns

- Systems and processes were in place to record and quickly respond to any concerns or complaints raised. The process ensured outcomes were used to help improve the service and prevent recurring issues.

End of life care and support

- At the time of the inspection no one was receiving end of life care. A policy was available which included information to ensure people would be supported to remain comfortable and pain free, following their wishes and preferences

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

- The registered manager promoted a positive culture which was replicated by the staff employed.
- Everybody spoke with enthusiasm about the way the service was managed which resulted in person centred care by staff. One staff member said, "This is the best place to work, we provide quality care and support to meet people's needs and this changes as their needs change."
- People routinely shared their gratitude for the care and support they received which routinely led to positive outcomes.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 their responsibilities in relation to the duty of candour. They understood their responsibilities to be open and honest when things go wrong. They also knew what they needed to report to CQC and other relevant agencies.
- People told us they were confident to contact the registered manager with any concerns. One person said, "[Registered manager] always finds time to talk, in a friendly, calm, listening and positive way. They are clear on any resulting actions and always delivers."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- Feedback was sought through surveys, and from daily chats with people. Information was evaluated for any trends and was used to maintain and improve standards, where required.
- Staff told us they met regularly with the registered manager and their colleagues. Feedback and input including ideas for improvement were listened to and valued. Staff told us the registered manager was a positive lead who shared good ideas and practice, along with communicating any operational changes.
- The registered manager worked closely with other professionals to ensure people received the right care and support to meet people's changing needs.
- A range of audits and checks were in place and reviewed which helped to provide an overview of what was working well and any areas that required improvement.