

## Yourlife Management Services Limited

# Your Life (Stony Stratford)

### 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 Life (Stony Stratford) is a domiciliary care agency based in Elizabeth House retirement housing complex in the heart of Stony Stratford, Milton Keynes. The service provides personal care to people living in their own apartments.

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 our inspection three people were receiving personal care from the service.

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

People received safe care and were protected against avoidable harm, neglect and discrimination. Risks to people's safety were assessed, staff were aware of the risks, and care plans detailed how the risks were to be appropriately managed.

Staff were appropriately recruited and there were enough staff to meet people's assessed needs. Where the provider took on the responsibility, people's medicines were safely managed. Systems were in place to control and prevent the spread of infection.

People had good relationships with staff. People were supported to express their views and be involved in making decisions about their care. Staff maintained people's privacy and dignity and treated them with respect.

People's needs, and choices were assessed. Staff received induction training and ongoing training and support that enabled them to have the skills and knowledge to provide effective care.

People were supported to maintain good nutrition and hydration. Staff supported people to access healthcare services when required.

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.

People and their families were fully involved in the care planning and reviews of their care. The provider had a complaints procedure which was accessible to people using the service.

Quality assurance systems were in place to ensure all aspects of the service delivery were continuously assessed and monitored.

Why we inspected:

This service was registered with us on 10/09/2018 and this is the first inspection.

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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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 Life (Stony Stratford)

## 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 carried out by one inspector.

#### Service and service type

This service provides personal care to people living in a retirement living complex, which is purpose-built accommodation on a shared site. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises this inspection only looked at the personal care provided for people using the service.

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

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

The inspection activity started on 5 September 2019 by visiting the office location, and we conducted telephone interviews with staff on the 9 and 10 September 2019.

#### What we did before the inspection

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. This information helps support our inspections. We also reviewed

notifications received by the Care Quality Commission from the service. A notification is information about important events, which the provider is required to tell us about by law. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke with three members of support staff, the registered manager and the area manager.

We reviewed a range of records. They included three people's care records and relevant medication records. We looked at three staff files in relation to recruitment, training and supervision. Also, a variety of other records relating to the management of the service, including policies and procedures and quality assurance monitoring records.

# 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

- Staff received training on safeguarding people from the risks of abuse. All staff were aware of the procedures to follow to report any concerns they may have about the safety and welfare of people using the service.
- The registered manager understood their responsibilities in relation to safeguarding and knew how to raise any potential or alleged safeguarding concerns with the local safeguarding authority and the Care Quality Commission (CQC).

Assessing risk, safety monitoring and management

- People's risks were assessed and provided staff with the information they needed to manage any identified risks. For example, people at risk of falls.
- Risk assessments were up to date, accurate and available to relevant staff. This meant staff were able to follow guidance to help ensure people were consistently supported safely.

Staffing and recruitment

- All the people we spoke with confirmed staff always attended their calls in a timely manner.
- Staff were allocated to meet people's assessed needs at the times people had chosen. The staff said the shift patterns worked well for them. They all confirmed they liked working in a complex where people lived under 'one roof' and they did not have the complications of having to travel from person to person within the community.
- Safe staff recruitment procedures were carried out by the service. The staff files contained evidence of completed background checks. For example, proof of identification and right to work in the UK, a disclosure and barring service (DBS) check, professional and character references. These checks ensured only suitable staff were employed to work at the service.

Using medicines safely

- Staff received training in medicines administration. We reviewed the medicines records for one person that required staff to administer them and found the records were completed appropriately.
- Staff that took on the responsibility of administering medicines had received appropriate medicines training.

Preventing and controlling infection

- An infection control policy was in place. Staff understood their role and responsibilities in relation to infection controls. They said they used personal protection equipment (PPE) when providing personal care

and food handling. In addition to their caring roles staff took on cleaning duties that included using cleaning chemicals. All staff confirmed they received training on the controls of substances hazardous to health (COSHH) to ensure that cleaning products were used safely.

Learning lessons when things go wrong

- Staff understood their responsibilities to raise concerns in relation to health and safety and near misses.
- All aspects of the service were effectively monitored. People's care plans and risk assessments were reviewed to ensure appropriate risk management measures were in place 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 were assessed before they started using the service to ensure their individual needs could be met. The care records showed that people and their relatives were involved in the assessments.

Staff support: induction, training, skills and experience

- Staff received induction training and on-going training in the essential elements of delivering care. All staff confirmed they staff they had worked alongside experienced staff as part of their induction to get to know the needs of the people they were providing care for. One member of staff said, "[Registered manager] showed me the ropes, I have learned from the best."
- The registered manager and the area manager closely monitored the staff training and knew when staff were due to complete update training. One member of staff said, "We do lots of e-learning on the skills for care academy, it keeps us up to date with everything to do with caring for a person."
- Staff told us, and records showed they received regular one-to-one supervision meetings. They said the meetings were used as opportunities to discuss their training and development needs. ● Staff team meetings took place to give all staff the opportunity to discuss any issues they may have.

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

- People using the service often used the on-site restaurant for their main meals and required little assistance from staff in preparing meals and support to eat and drink. Staff sensitively observed people received sufficient food and drink and ensured people had a fresh drink of their choice when leaving the calls.

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

- The service had good working relationships with the local surgery and visiting healthcare professionals.

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

- People had access to healthcare professionals as required and supported to attend any hospital appointments as scheduled. When required people were supported with access to their GP and healthcare professionals. When appropriate this was discussed the with person and their relatives, to ensure everyone was involved and kept up to date with any changes.

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.

- The people receiving care from the service all had capacity to consent to their care. They all confirmed that staff consulted them about choices and respected their wishes.
- Staff had received training on the MCA and could demonstrate how they helped people to make decisions on a day-to-day basis, following the MCA principles.

# 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 spoke highly of the compassionate care they received from the staff. One person said, "Through aging you lose many things, but with the help I receive I feel I have also gained many things."
- Staff understood the importance of promoting equality and diversity. Care plans contained information about people's religious beliefs and personal relationships with their circle of support.

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

- People and their relatives were actively involved in making decisions about their care and support. People told us they had been involved in putting together their care plans and they felt involved in the care plan reviews.
- The provider had information available to refer people to an advocacy service for additional support to make decisions. Advocates are independent of the service and who support people to decide what they want and communicate their wishes.

Respecting and promoting people's privacy, dignity and independence

- People told us they were treated with dignity and respect and their privacy was respected. They confirmed that staff ensured door and curtains were closed when providing their personal care and that staff spoke to them with respect. The staff induction training covered the core principles of treating people with dignity and respect.
- People's independence was promoted. Staff ensured people were encouraged to do as much as they could for themselves.
- People's records were stored in a locked office and staff were all aware of the importance of keeping information about people using the service confidential.

# 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

- The registered manager met with people, their families to plan and discuss people's support to ensure the service was able to meet their needs.
- Comprehensive assessments of people's needs were carried out before any support was provided.
- People's care plans were detailed and reflected a person-centred approach.
- People told us the care they received enabled them to remain in control of their lives. They said that staff were flexible in enabling them to choose when to get up and go to bed and when they wanted to have a shower or bath.
- Staff encouraged choice, autonomy and control for people in relation to their individual preferences about their lives, including friendships with each other, and in maintaining interests.

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 registered manager understood their responsibility to comply with the Accessible Information Standard to provide information about the service in different formats to meet people's diverse needs.
- The care plans detailed people's language and communication needs and how best to communicate with people effectively.

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 to maintain relationships and practice their cultural and religious practices.
- People receiving care were supported by staff to join the range of activities that took place within the complex and to join friends and family for lunch in the on-site restaurant.

Improving care quality in response to complaints or concerns

- The complaints procedure was made available to all people using the service.
- Staff knew how to follow the complaints procedure by passing on complaints to the registered manager
- People's records were stored in a locked office when not in use, and staff were all aware of the importance of keeping information about people using the service confidential.

#### End of life care and support

- The care records included people's preferences relating to protected characteristics, and their cultural and spiritual needs.
- No people were receiving end of life care. However, the registered manager was in the process of exploring ways to obtain people's preferences and choices in relation to end of life care.

# 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

- People benefited from a staff team that were supported by a registered manager that kept them up-to-date with information about their changing needs, to keep them safe and deliver good care.
- People and staff were very complimentary about the registered manager. People said they were very friendly and approachable. One member of staff said, "[Registered manager] is the best manager I have ever had, [Name] always listens to me and never judges." Another said, "I love working here, I feel I have good relationships with everybody, I would definitely recommend others to work for this company."

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 demonstrated their awareness of being open and transparent in all dealings they had with people using the service and relatives.
- We observed the registered manager had good relationships with people and relatives, who during the inspection were comfortable approaching the registered manager for guidance and advice.

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

- Effective quality assurance systems were in place, which were also overseen by the company area manager.
- The registered manager was aware of their duty to notify the Care Quality Commission (CQC) of events at the service that may fall under the notifications reporting criteria.

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

- People and staff had opportunities to provide feedback on the service they received. Recent satisfaction survey questionnaire had been sent out to people and staff and the provider was awaiting feedback.
- People said they felt at ease discussing any issues with the registered manager and the staff.

Continuous learning and improving care

- Information from audits and feedback from people using the service was used to drive improvement to the quality of care people received.

### Working in partnership with others

- Good communication systems were in place to share information about people's changing needs with the relevant healthcare professionals.