

Your Life Your Support Limited

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Inspection report

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16 October 2018

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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

This announced inspection took place over two days. On the 11 October 2018 we visited the office and spent time with the registered manager and staff working in the office. On the 16 October 2018 we visited a family at their home to seek their views about the service they received. We spoke with three people who used the service. We also contacted staff and healthcare professionals to seek their views and opinions on the service and the care and support provided.

This was the first inspection of the service at these premises. The last inspection on the 6 January 2016 was at the previous address and the service was rated good.

Staff had only moved in to the new premises over the weekend commencing the 6 October 2018 and the registered manager was in the process of registering the new location with the CQC.

Your Life Your Support (YLYS) is a domiciliary care agency that provides care and support to people living in their own homes, as well as access to community resources. At the time of the inspection 47 people were receiving support, 15 where in receipt of support with personal care.

YLYS provides a range of services within the following groups: Older people, adults with mental health problems, people living with dementia, adults with learning disabilities, adults with physical disabilities and adults with learning difficulties in Supported Living Schemes

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen." Registering the Right Support CQC policy

The provider was also the registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.'

As part of our inspection we contacted healthcare professionals who worked with the service. Comments were extremely positive about the care and commitment provided by the agency. Comments included, "I have had quite a lot of contact with Your Life Your Support and I have always found them to be very professional, caring and knowledgeable with regards to their customers and the care they provide. Another person said, "This agency is the most professional that I have encountered in dealing with service users with complex lifestyles".

We saw that a comprehensive assessment was completed with each person using the service and their relatives where appropriate. The assessment formed the baseline of the care records. Each person had a

copy of their care record in their home. Electronic daily logs and observations were completed by staff after each visit and this information was collated in the office.

Care records contained detailed information to guide care staff on the care and support required. The care records showed that risks to people's health and wellbeing had been identified and plans were in place to help eliminate the risk. Assessments were also undertaken around the risks associated with general safety issues within people's home.

We found that suitable arrangements were in place to help safeguard people from abuse. Guidance and training was provided for staff on identifying and responding to the signs and allegations of abuse.

We found that people were supported by sufficient numbers of suitably skilled and experienced staff who received a thorough induction, were adequately supervised and were safely recruited.

The service was flexible which meant that times of visits could be changed if people had appointments and needed staff to accompany them.

The registered manager acted as a role model for the staff team who were motivated to offer care that was kind, caring and understanding.

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.

We found that suitable arrangements were in place to help safeguard people from abuse.

People were supported by sufficient numbers of suitably skilled and experience staff who were safely recruited.

Risks to people's health and well-being had been identified and assessments were undertaken around the risks associated with general safety issues within people's homes.

Good 

Is the service effective?

The service was effective.

There was a detailed induction training programme in place to help ensure the staff understood what was expected of them and what needed to be done to ensure the safety of people.

Staff received essential training and support necessary to enable them to do their job effectively and support people safely. Specialist training was provided as required.

The service was working within the principles of the Mental Capacity Act (MCA) 2005 and staff had a good understanding of the MCA.

Good 

Is the service caring?

The service was caring.

Staff were taught to deliver non-discriminatory practice and cultural awareness to ensure that people's cultural and religious beliefs were respected.

We saw that people were treated with dignity and respect. People were encouraged to maintain their independence and staff assisted when required.

Staff were kind, caring and compassionate to people they

Good 

supported.

Is the service responsive?

Good ●

The service was outstandingly responsive.

Care records were person centred. There was a high level of response to people's health, emotional and social care needs.

The management and staff worked exceptionally hard to ensure people's lives were as meaningful as possible and encourage people to maintain an interesting life.

Systems were in place for the recording complaints and action taken to remedy the concerns raised.

Is the service well-led?

Good ●

The service was well led.

The registered manager acted as a role model for the staff team who were motivated to offer care that was kind, caring and understanding.

The registered manager has systems in place that were organised and effective. The service worked well with other agencies and healthcare professionals. The service had up to date policies and procedures in place to guide staff on their conduct and their practice.

People who used the service and staff were encouraged and supported to share their views and ideas to improve outcomes for people who used the service.

Your Life Your Support Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection was announced. In line with our methodology we gave short notice of the inspection visit. This was because we needed to ensure the registered manager would be available at the office

The inspection was undertaken by one adult social care inspector from the CQC. The inspection site visit activity started on the 11 October 2018 where we spent time speaking with the registered manager and four staff working in the office. We looked at six hard copies of the care files and the electronically held care records. All staff personnel files were electronically held. We looked at three staff records, training records and staff supervisions. We looked at the quality monitoring checks and other records necessary for the management of the service.

On the 16 October 2018, we visited one of the houses that is staffed 24 hours, seven days a week by YLYS staff, to speak with staff and the two-people living there. We also telephoned another person who used the service.

We sent out six emails to the staff asking for their views of the service. We received five replies.

Before the inspection we contacted the local authority commission team and the safeguarding team. No areas of concerns were raised.

We looked at the information we held about the service, including the last inspection report and notifications the provider had sent to us. A notification is information about important events which the

provider is required to send to us.

For this inspection we did not request a Provider Information Return (PIR) form. This is a form that asks the provider to give us some key information about the service, what the service does well and what improvements they plan to make.

Is the service safe?

Our findings

YLYS is registered as a domiciliary care agency that provides personal care and support for people in their own home or in the community. The support ranges from domestic tasks, to escorting people to appointments and caring for people with a range of complex care needs.

Records we looked at showed a comprehensive assessment of holistic needs was completed by the registered manager to determine whether the staff could meet the needs of the person requiring support.

We saw that policies and procedures for safeguarding people from harm were in place. They provided staff with guidance on identifying and responding to signs and allegations of abuse. The training records we looked at showed that all staff had received training in the protection of vulnerable adults and children. All members of staff had access to the whistle-blowing procedures (the reporting of unsafe and/or poor practice).

We found that the staff recruitment system was safe. We looked at three staff personnel files. These were held electronically. We saw that appropriate checks had been made when recruiting new staff. Records contained proof of identity, an application form that documented a full employment history, a job description and references. Checks had also been carried out with the Disclosure and Barring Service (DBS) before the member of staff began working for the service. The DBS identifies people who are barred from working with children and vulnerable adults and informs the service provider of any criminal convictions noted against the applicant.

Risk assessments were in place in relation to assessing whether people had problems with certain aspects of their health, such as being in need of support with moving and handling or needing assistance with their medicines.

We looked to see how the medicines were managed in the home we visited. We found the medicines management system was safe. Where staff assisted people with medicines a Medicines Administration Record (MAR) sheet was in place for staff to record when medicines had been given. The service had a detailed medication policy and procedure in place that gave guidance to staff, about storage, administration and disposal of medicines. Records showed that staff received training and competency assessments before they were permitted to administer medicines.

We saw that accidents and incidents that occurred were recorded and monitored. Monitoring accidents and incidents can assist management to recognise any recurring themes and then take appropriate action; helping to ensure people were kept safe.

We looked at the information that was in place in the service user guide. There was information in the guide to help ensure the safety of people who were supported and of the staff. The guide states, 'Care workers should: Complete the tasks in the care plan, arrive as near as possible to the time stated in the care plan, if, however, they are delayed by an emergency or road conditions every effort to be made to contact the

person. Staff will carry a photo identity card and maintain a good standard of appearance. Staff must keep any personal and financial matters strictly confidential'.

We were shown the infection control policy that was in place. It provided instructions and guidance to staff to refer to when needed. Records showed that staff had undertaken infection control and food hygiene training.

Care staff had access to protective equipment such as disposable gloves and aprons when delivering personal care to people. We saw the office was well stocked with protective equipment for staff to collect when required.

Staff safety was paramount and staff and were provided with a mobile phone that allowed them to log in and out between visits. This registered with the office so the office staff could track where people were and that they were safe. The electronic monitoring system recorded when the visits had taken place and if staff had arrived on time.

Is the service effective?

Our findings

As part of our inspection we visited the home of two people who were being supported by YLYS staff 24 hours per day and seven days a week. It was evident that good relationships had been made between the staff and people at the home. A small team of staff worked at the home so people were comfortable with the staff who they knew and could trust.

We looked to see what was in place for the induction of newly appointed staff. Induction programmes help staff to understand what is expected of them and what needs to be done to ensure the safety of people who use the service and of the staff. We saw there was a detailed induction programme for all staff new to care that included The Care Certificate training. The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life. It provides staff with the knowledge to ensure they provide compassionate, safe and high-quality care and support.

We looked to see how staff were supported to develop their knowledge and skills. Staff told us they had received all the necessary induction and training to allow them to support people safely and ensure their needs could be met. Comments from staff included; "Since coming into the care/support environment I have received a lot of support and help with everything. I have never done this job before. I received my induction with [Name] and it was great I knew I wanted to do this job. I have received all the training that is necessary for the job so I can do it effectively. I've received my moving and handling, percutaneous endoscopic gastrostomy (PEG) training medication, diabetes and stoma training. Another person told us, "I completed an induction on commencing work at the service. I have had all the necessary training to enable me to complete my work effectively. I have regular supervision and I find my manager approachable and supportive at all times. The manager listens well and helps me and my service users in every way. I know if I need my manager for any questions or queries I have no problem approaching her".

A third person said, "As a new member of staff I was given my induction on the day I commenced my employment with YLYS this was very informative and gave me the confidence to carry out my role. I have been given all the training I require to carry out my role to a high standard this has been classroom based and shadowing senior members of staff for several weeks with our client's enabling the same support to be achieved. I have regular supervision meeting with my manager and I obtain feedback on my performance and I can discuss any issues or concerns.

Another member of staff said, "I have worked for YLYS for a number of years. When I first started I was enrolled on the Bolton council social care induction training week which provided me with in depth knowledge of all the relevant training and prepared me well to start work in the community. Throughout the years I have been given regular opportunities to further my knowledge completing a level 2 and then level 3 diploma in health and social care. I have received updates to any training that I've required and I have supervisions and contact with my superiors often. If I have any problems I know who to go to and I feel they are approachable and friendly/supportive and try to help wherever possible. Overall, YLYS is a very welcoming and friendly place and I feel we provide an excellent standard of care and support to individuals in the community".

We checked whether the service was working within the principles of the Mental Capacity Act (MCA) 2005. The MCA provides a legal framework for making 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 make 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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. However, people cared for in their own homes are not usually subject to a Deprivation of Liberty Safeguards (DoLS). Training record showed that staff had undertaken training in MCA and DoLS. The registered manager and staff spoken with had a very good understanding of the MCA and DoLS.

We saw systems were in place to enable people who used the service to give consent to their care. We were told that any care provided was always discussed, explained and agreed with people who were able to consent. The registered manager and staff demonstrated their understanding of the action they would need to take should they have any concerns regarding an individual's capacity to make a decision or give consent.

Some people using the service had moved from children's services to YLYS adult services.

The registered manager and staff had worked closely over a period of time with the children's service to ensure that the transition of care went as smoothly as possible as was not too disruptive for people.

Is the service caring?

Our findings

Two people spoken with said they were very happy with the care they received. One person told us how well the staff team looked after them and what they did for them, this included meal preparation and making sure they had their medication at the right time. Another person told us, "I can't praise them highly enough. They [staff] are very professional and very caring. They have changed my life around, they have become friends".

One healthcare professional told us, "I have done a number of joint assessment visits with [registered manager and staff member] and the outcomes have always been successful. [Names] have been my main contacts over the last few years, and I would say in my experience, overall they have gone the extra mile to support the people in their care".

Staff understood the importance of ensuring privacy and dignity of people and this was covered in the staff induction programme. We were told by one person that the care they received was very person centred and that staff respected their dignity at all times. The induction training also covered choice, equality, rights and independence. This was for both people who used the service and staff. The registered manager had employed a diverse staff team.

We were told the staff offered a flexible service to enable people to attend appointments and other commitments. The registered manager was very 'hands on' and often drove people to different places for appointments and events which, at times meant an overnight stay. We saw that, wherever possible, care staff were 'matched' to the person who used the service, based in the person's preference, religious and cultural beliefs and interests.

We were provided with a copy of the Service User Guide that was given out to people who used the service. The service user guide is a document that contains information about the agency. For example, important contact details and telephone numbers and what standards of care you can expect. This information could be made available in different languages and in large print and in pictorial formats. Some people communicated by Makaton, a system that uses hand signs. Staff supporting these people were also able to use this method of communication.

People who used the service were supported and encouraged to be as independent as possible. Some people were supported by staff to enable them to continue in employment and retain links with the local community. For example, attending a local social club in the evening to meet up with friends.

A discussion with the registered manager showed they were aware of how to access advocates for people who had nobody to act of their behalf. An advocate is a person who represents people independently of any government body. They are able to assist people in many ways such as supporting them with meetings and/or accessing information for them.

The home also supported people who were in residential care setting. For example, taking people out in to

the community for shopping trips and outings to local venues.

We saw that confidentiality was respected by the staff. Records in the office were stored securely and the care staff were given training and support around confidentiality issues.

Is the service responsive?

Our findings

We found that people who used the service received care that met their needs choices and preferences. Care staff understood the support that people needed and were given time to provide it in a safe, effective and dignified way.

The service was responsive when people's needs changed, this was quickly identified and prompt, appropriate action was taken to ensure people's wellbeing was protected. The registered manager worked closely with other healthcare professionals. For example, the mental health team, the neuro rehabilitation physiotherapist, GPs and social workers. This meant that people received safe and effective care.

People felt the service was flexible and based on their personal wishes and preferences. Where changes in people's care packages were requested, these were made quickly and without any difficulties. The service played an active part in the community for seeking additional resources for people who used the service and for identifying and sharing good practice. One healthcare professional told us, "This agency is the most professional that I have encountered in dealing with service users with complex lifestyles. The care packages which the agency provided are tailored to an individuals' unique needs. The agency are innovative and not just task orientated. The manager is always helpful in accommodating changes at short notice, whilst ensuring that it does not impact on other service users. I am always happy to work alongside Your Life Your Support".

A second healthcare professional said, "I have had quite a lot of contact with YLYS and I have always found them to be very professional, caring and knowledgeable with regards to their customers and the care they provide. They take the time to do research into the medical conditions of their customers so they can provide the necessary care and support that person needs, they are especially knowledgeable in people with acquired brain injuries. I know one gentleman in particular who YLYS have completely turned his life around, he has an acquired brain injury, he lives in sheltered accommodation in the community and although his level of support is relatively high, his allocated support workers have built up a great relationship with him to ensure he has quality of life both inside and outside the home". We spoke with a member of staff who supported this person. They told us that this person was from a military background and they had made arrangements for him to be able to take part in parade on Remembrance Sunday which was very special event for him.

We found the service provided care for two adults who were related to be very good. The registered manager against challenged the system to prevent these people being separated from living together as was their wish. The registered manager attended meetings with the local authority and other agencies to support her case for these people to remain together and was successful in achieving this. We found that staff worked tirelessly in supporting these people who now live in the community in together in a home which they were very proud off. The people told us about the holidays they had been on with the staff and were looking forward to planning Christmas. Staff supported one of the people to continue to work and enjoy a social life with friends. They had encouraged and supported this person to become confidant and able to use public transport/taxis on their own. Staff supported these people to be as independent as possible. For example,

helping with shopping and the preparation of meals and with daily living tasks.

We found the service responded positively to people's view about their own care package, or the service. The registered manager ensured that the daily observation notes were monitored every day by a member of the offices staff, to ensure any issues identified were acted upon.

People who used the services were provided with the office telephone and times when the office was open. There was an answer machine to leave message and an emergency on call number was provided.

We found the service worked to promote the wellbeing of people in their care. The registered manager was very active by working to increase awareness and challenge discrimination for people who used the service and for staff.

Quality monitoring systems used across the service were designed to explore the experiences of people who used the service. For example, choices and outcomes. There were systems in place to monitor and analyse any complaints, to ensure that patterns or trends could be identified. There had been no recent complaints regard YLYS.

We asked the registered manager if they could support people who were nearing the end of their life and wished to remain in their own home. The registered manager told us that this would not be an issue and YLYS would work along side the community nursing team and the local hospice. The registered manager told us that staff would be supported and undertake any necessary training.

Is the service well-led?

Our findings

The provider of the service was also the registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Our conversations with staff showed they felt included and consulted with. Staff spoke positively about working with the service. They told us they felt valued and that the management were supportive. One person told us, "Since the day I commenced my employment with YLYS if I have had any concerns or require any assistance I can call at any time for support assistance".

One senior member of staff had been delegated to ensure that all staff supervisions were completed. We saw records of the supervision meetings which were held electronically and the information was password protection to ensure confidentiality.

We saw the service had policies and procedures in place to support staff to carry out their roles safely and effectively.

We asked the registered manager to tell us how they monitored and reviewed the service to ensure that people received safe and effective care and support. We were told that regular checks were undertaken on all aspects of the operation of the business. These included such things as late calls, complaints, care records, medication records, staff training records and accidents and incidents.

Following our inspection, we contacted the local authority commissioning team to seek their views on how they felt the service operated. We were told the council that they only commissioned a small number of care packages with YLYS. However, they had no concerns regarding YLYS. Most of the care packages were through the Direct Payment scheme. Direct payments are Health and Social Trust payments for people who have been assessed as needing help from social services, and who would like to arrange and pay for their own care and support services instead of receiving them directly from the local trust.

We checked our records before the inspection and saw incidents that CQC needed to be informed about, such as safeguarding and accident had been notified to us by the registered manager. This meant we were able to see if appropriate action had been taken by management to ensure people were kept safe.