

Yourlife Management Services Limited

Your Life (Royston)

Inspection report

Goodes Court
Baldock Road
Royston
Hertfordshire
SG8 5FF

Tel: 01763256810

Date of inspection visit:
28 September 2016

Date of publication:
27 October 2016

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

The inspection took place on 28 September 2016 and was announced to make sure that the people we needed to speak with were available. We gave the provider 48 hours' notice of our inspection to make sure that the appropriate people were present. At our last inspection on 13 November 2013, the service was found not to be meeting the required standards in Care and welfare. However at this inspection we found that the service had made the required improvements. The service provides support to people who live independently in their own homes. At the time of our inspection there were 45 people living at Goodes Court. However, only six people required the regulated activity, personal care.

There was a registered manager in post who had registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC 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 and associated Regulations about how the service is run.

People were supported by Your Life Royston to live in their own homes at Goodes Court with staff that supported people's needs.

People felt safe, happy and were looked after in their homes. Staff had received training in how to safeguard people from the risk of abuse and knew how to report concerns both internally and externally. Safe and effective recruitment practices were followed to help ensure that all staff were suitably qualified and experienced.

Staff completed regular health and safety checks that included security and fire safety. Staff received training and refresher updates relevant to their roles and had regular supervision meetings to discuss and review their development and performance. People and their relatives were positive about the skills, experience and abilities of the staff.

People were supported to maintain good health and had access to health and social care professionals when necessary.

Staff made considerable efforts to ascertain people's wishes and obtain their consent before providing personal care and support, which they did in a kind and compassionate way. Information about other care

providers was available to people to ensure people had choice.

Staff had developed positive and caring relationships with the people they supported and clearly knew them well. People were involved in the planning, delivery and reviews of the care and support provided. The confidentiality of information held about their medical and personal histories was securely maintained throughout their home and in the office.

Care was provided in a way that promoted people's dignity and respected their privacy. People received personalised care and support that met their needs and took account of their preferences. Staff were knowledgeable about people's background histories, preferences, routines and personal circumstances.

People were supported to pursue social interests and take part in meaningful activities relevant to their needs, both at their home and in the wider community. They felt that staff listened to them and responded to any concerns they had in a positive way. Complaints were recorded and investigated thoroughly with learning outcomes used to make improvements where necessary.

Relatives and staff were complimentary about the registered manager and how the service was run and operated. Appropriate steps were taken to monitor the quality of services provided, reduce potential risks and drive improvement.

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.

People were kept safe by staff trained to recognise and respond effectively to the risks of abuse.

Safe and effective recruitment practices were followed to help ensure that all staff were fit, able and qualified to do their jobs.

Sufficient numbers of staff were available to meet people's individual needs at all times.

People were supported to take their medicines safely by trained staff.

Potential risks to people's health and well-being were identified and managed effectively in a way that promoted their independence.

Good 

Is the service effective?

The service was effective.

People's wishes and consent was obtained by staff before care and support was provided.

People were supported by staff that were well trained and received the appropriate support.

People were assisted with a healthy balanced diet which met their needs.

People had their day to day health needs met with access to health and social care professionals when necessary.

Good 

Is the service caring?

The service was caring.

People were cared for in a kind and compassionate way by staff that knew them well and were familiar with their needs.

Good 

People were involved in the planning, delivery and reviews of the care and support provided.

People's privacy and dignity was promoted.

People had access to independent advocacy services and the confidentiality of personal information had been maintained.

Is the service responsive?

Good ●

The service was responsive.

People received personalised care that met their needs and took account of their preferences and personal circumstances.

Detailed guidance made available to staff enabled them to provide person centred care and support.

People were given extensive opportunities to help them pursue social interests and take part in meaningful activities relevant to their needs.

People and their relatives were confident to raise concerns which were dealt with promptly.

Is the service well-led?

Good ●

The service was well led.

People and staff were all very positive about the managers and how Goodes Court operated.

Effective systems were in place to quality assure the services provided, manage risks and drive improvement.

Staff understood their roles and responsibilities and felt well supported by the registered manager.

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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 was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2012, to look at the overall quality of the service and to provide a rating for the service under the Care Act 2014.

The inspection took place on 28 September 2016 and was carried out by one inspector. We reviewed information we held about the provider including, for example, statutory notifications that they had sent us. A statutory notification is information about important events which the provider is required to send us.

During the inspection we visited people in their own homes. We spoke with three people who lived at Goodes Court, two relatives, three staff members, the registered manager and the care compliance manager. We looked at care plans relating to two people and two staff files. We looked at policies and procedures the service used and reviewed records related to the management and quality assurance of the service.

Our findings

People were safe and protected from harm. People told us they felt safe and that they were treated well. One person told us, "I feel safe here. They test the fire alarms once a week and staff are always here even during the night." One relative said, "One hundred percent feel they are safe there; staff will contact us if there are any problems."

People were supported by staff that were of good character and were suitable to work in the care environment. All staff had been through a recruitment procedure which involved obtaining satisfactory references and a criminal records check before they were employed by the service. The registered manager told us that people who lived at the service were introduced to potential new staff and had the opportunity to give their feedback about the suitability of the person.

There was enough suitably experienced, skilled and qualified staff available at all times to meet people's needs safely and effectively. One person told us, "Staff here are excellent they fall over backwards to look after you." The registered manager confirmed that people's needs were looked at regularly. Staff completed regular health and safety checks to help ensure people were cared for in a safe environment. For example, daily checks throughout the home were completed to keep people safe. These included security checks, staff spot checks and observations, weekly fire alarm testing and health and safety checks were completed and documented.

People and staff had good working relationships that enabled them to communicate honestly and without fear of repercussions. Staff were knowledgeable about protecting people from avoidable harm and felt confident to report concerns to managers or to the local authority if they felt it necessary. One staff member told us that they had a person that had previously been scammed over the telephone. They became concerned after the person had disclosed that they hadn't paid money to someone they had been speaking to over the phone. The staff member reported the concerns immediately and the outcome had been that the person had been targeted again to take money from them and this was stopped. This demonstrated that staff were aware of how to report concerns and mindful of different types of abuse. Another staff member told us, "I would always report concerns to my manager." Staff we spoke with were also aware of how to escalate concerns and report to other professional bodies such as the police or CQC if required.

People were supported to be independent. People told us they felt supported to do what they wanted and staff were extremely positive and encouraging for people to be as independent as possible. One person said, "I am rather independent, I am supported to remain independent and I am happy living here." Risk

assessments were in place to identify areas where people needed additional support to keep them safe. For example, one person who required support with getting up in the morning had this in place; this helped support them to remain independent.

Where potential risks to people's health, well-being or safety had been identified, these were assessed and reviewed regularly to take account of people's changing needs and circumstances. This meant that staff were able to provide care and support safely but also in a way that promoted people's independence and lifestyle choices wherever possible. For example, one person, who had lived at Goodes Court, had begun to show signs of confusion and disorientation. This deteriorated quite rapidly; the decision was made by the family and other professionals that the person required 24 hour care. The outcome was they were moved into a specialised dementia care home. This meant that people changing needs were reviewed ensuring people were safe.

Information gathered in relation to accidents and incidents that had occurred were reviewed by the registered manager who ensured that learning outcomes were identified and shared with staff. All incidents were documented by staff. We saw that where people's needs had changed action to reduce the reoccurrence was taken, for example, referrals to GP

People's medicines were managed safely. There were suitable arrangements for the safe storage, management and disposal of medicines. People were supported to take their own medicines by staff that were properly trained and had their competencies checked and assessed in the workplace. Staff had access to detailed guidance about how to support people in a safe and person centred way. A staff member told us, "We support people to take their medicines and record this information." One person we spoke with confirmed they are supported to take their medicine. We saw that medicines were audited regularly. People knew about the medicines they took and what the medicines were for.

Our findings

People received support from staff that had the appropriate knowledge, experience and skills to carry out their roles and responsibilities. There were support plans in place that gave appropriate guidance to staff. One person told us, "We get to choose what we like." Another person commented, "Staff are well trained here."

Staff completed an induction programme during which they received training relevant to their roles and had their competencies observed and assessed. Staff received training and regular updates in a range of subjects designed to help them perform their roles effectively. This included areas such as dementia, medicines, first aid and moving and handling. Staff told us that the training they received was appropriate and enabled them to support to people. We saw that staff had completed national vocational training. One staff member said, "I had an induction and four weeks shadowing. (Shadowing means that new staff will work alongside qualified staff until proficient to work independently)."

Staff felt supported by the registered manager and were actively encouraged to have their say about any concerns they had. The registered manager confirmed that their door was always open. There were regular supervisions where staff performance and development were reviewed. Staff confirmed that they had regular meetings. One staff member said, "We have a good team here and we communicate well. We receive supervisions quite regularly, we talk about any new stuff and they ask if I am happy with my job. I get feedback about myself and I am starting my level three national vocational qualifications (NVQ)." We saw evidence that staff had been supported to develop further in their roles. Another staff member said, "The [registered] manager is approachable I am always asking them things." A relative commented, "The [registered] manager is very approachable, I visit the home weekly and always chat with the manager."

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. We checked whether the service was working within the principles of the MCA and found that they were.

Staff understood the importance of ensuring people gave their consent to the care and support they received. One person told us, "Staff always asks me what I want." All people who lived in their homes were

able to make daily choices and were supported by staff to be independent. Another person commented, "We have a lot of choice."

Throughout our inspection we saw that staff sought to establish people's wishes and obtain their consent before providing care and support. The guidance provided to staff showed that people had been consulted about and agreed to the care provided and all support plans had agreed outcomes with people's goals. A staff member said, "The guidance in the support plans were clear." One person said, "I know the staff here and they know me including the chef." Another person commented, "I feel listened to staff are helpful and pleasant."

People were supported to have sufficient food and drink and to maintain a balanced diet. We saw in people's homes that they had everything needed to cook their meals. Where required people had their breakfast with support from staff and people could have dinner in the communal dining area. People told us that there was plenty of choice. We observed a relaxed atmosphere and people told us they enjoyed the food and the company of the staff and other home owners. One person told us, "I have my own kitchen but there's no need to cook the food here is lovely. I do my own breakfast."

People's healthcare needs were met by healthcare professionals. One person told us that they were supported to see their GP. We saw that where required professionals were involved to support people's health needs. For example, one person who had had their medicines changed had experienced confusion, disorientation and not able to rest at night time which gradually worsened over a couple of days. Several members of the staff team had noticed this and reported this to the registered manager. The family and the GP were contacted and the outcome was that the person had been put back on their medicine and the symptoms settled down.

Our findings

People were cared for and supported in a kind and compassionate way by staff that knew them well and were familiar with their needs. One person told us, "It's very nice here there is good companionship." One relative said, "They [Relative] are getting the most superb care, the staff are excellent. The standards are high, they have great relationships and they respect [Relative's] dignity."

Staff helped and supported people with dignity and respected their privacy at all times. One person told us, "Staff always knocked on my door. Staff are respectful and listen to me." Another person said, "Staff communicate what's going on, they ring my bell before coming in. They are always polite and caring; you couldn't live in a better place actually, because staff are lovely and care about you."

We saw staff interacted with people in a respectful and caring way. Staff had time to communicate with people and we saw they took the time to speak with people in an unhurried manner. One relative said, "They [Staff] do a lot of extra things, when my [Relative] gets home with their shopping they seem to just start to chat and before you know where you are they have carried [their] shopping to [their] home. They help [Name] without [them] even feeling [they're] being helped. They have a really good relationship with [Name]."

Staff had developed positive and caring relationships with people they supported and were knowledgeable about their individual needs and preferences. One staff member said, "We know all the home owners really well it's like one big family." One person said, "Staff are very good and very kind." We saw that people's needs and preferences were met. One relative told us that they visited on a regular basis and they confirmed that they always observed good interaction between people and staff, they said, "There is always good communication and my [Relative] is happy here." People were supported to maintain positive relationships with friends and family. One person told us, "My family can come see me when they want." A relative commented, "There are no restrictions for visiting."

All the people were positive about the staff that provided their support. The registered manager confirmed that people were introduced to their potential support staff to make sure that they were happy and people could choose their own support staff if required. The registered manager told us that they had a try before you buy scheme. This involved meeting with people to discuss and answer any questions people might have. They told us that they have recently spent several hours with one person and they have also been invited to lunch here to meet people and sample the food. They have since been back with relatives for lunch and have put in a request to have the toilet seat adapted which has been approved. This

demonstrated that people were supported with information and time to make an informed choice.

We found that people and their relatives had been fully involved in the planning and reviews of the care and support provided. This was reflected in the guidance made available to staff about how people wanted to be supported. One person said, "I am involved in my care." The registered manager and staff confirmed care was reviewed regularly. One relative said, "We get together with the [registered] manager and discuss my relatives support and they [relative] are very involved with the decisions about their care. The involvement is what keeps them going."

Confidentiality was well maintained by staff and information held about people's health, support needs and medical histories were held securely.

Our findings

People received personalised care and support that met their individual needs. One person said, "Staff are kind and caring and always have time to speak to me."

People's care and support needs were reviewed every three months or when required. People confirmed they were involved in all decisions about the support they needed. Where appropriate a family member could attend the meetings. We saw that people's support plans were reviewed regularly and people had signed to agree their support needs. One person said, "Staff are very helpful and tell you about anything you want to know. They help me get up in the morning they are very respectful and listen to me." People's support plans we looked at described all of the person's care needs and gave guidance about how to support them. People were supported to maintain their culture and beliefs. This was reviewed and included as part of the assessment process. People's preferences were documented. For example, one person had decided that they only wanted a female staff member to support with their personal care. Another person commented, "They [Staff] call me by my preferred name." We found that people used other care agencies to support their needs and the registered manager confirmed that if they were unable to meet someone's preferred routine they would support them with finding another care agency that could. This meant that people could choose who they wanted to provide their support in their own homes.

People enjoyed being involved with activities. One person said, "I like to get involved in the quizzes and movie nights. It feels like a community here." Goodes court produced a monthly newsletter that gave information to the home owners on up and coming events. For example, coffee mornings, crafting afternoon, film nights, scrabble and exercise groups. We saw there was information on the local cinema with details on what was showing. Wine was available at quiz nights and people we spoke with felt part of a community. There had been cheese and wine evenings and cake decorating for people who wanted to be involved. All the people at the time of our inspection were independent and able to access the community. One person said, "We all look after one another here, it's a good community." We saw in one person's care plan that they wished to maintain their independence and one of the agreed outcomes was to remind the person of the activities that were taken place due to their forgetfulness. This meant that the person was supported to attend events that interested them and promoted their independence.

People told us they were encouraged to have their say. They felt listened to and told us that staff and the management responded to any concerns raised in a prompt and positive way. For example, we saw minutes from tenants meetings that discussed a varied range of topics. In one meeting people were discussing the option of having new communal washing machines and the costs involved. We saw that different options

were considered and people made informed decisions. One person said, "The support here is excellent I go to the home owners meetings about once a month. We discuss the general run of the home and budget meetings are held." Another person said, "Home owner meetings are informative and we can ask any questions. I feel listened to." This showed that people had a voice and that they were involved in decisions about where they lived.

We saw that information and guidance about how to make a complaint was displayed for people who lived in their home. People were provided a service user guide that covered complaints and compliments. People knew how to complain but told us they had nothing to complain about. This was reflected in the complaints and compliments log we reviewed. There had been no complaints but we saw lots of compliments that had been received. The registered manager told us that they had not received any complaints since starting they also explained that although the complaints information is within the user's guide they always discuss this with people and ensure people were aware of how to complain. They said, "My door is always open." One person said, "The [registered] manager always has time to speak with me and if I had any problems I would go see the manager." Another person said, "The [registered] manager showed me everything I needed to know about the place before I moved in."

Our findings

People who used the service, their relatives and staff were all positive about how the service was run. They were complimentary about the registered manager who they described as being approachable and supportive. One relative said, "[registered manager] is very good at communicating any changes to us. We can just pop our heads in for a chat or pick up the phone, they are very approachable." One person said, "The [registered] manager is great, they will always make time to chat."

Staff told us and our observations confirmed, that the registered manager led by example and demonstrated strong and visible leadership. They were clear about their vision regarding the purpose of the support provided and level of care. The registered manager told us, "I just love my job; we have a good team here."

People were supported by the management team to establish and maintain strong links with the local community. For example, two people who lived at Goodes Court had a personal tutor who came round to teach them French and the registered manager had supported this with the use of a room. People who lived at Goodes Court were independent and were able to access the community if they wanted to. One person told us, "I like going into the garden and going out locally. We have a French tutor that comes here. I feel free here I have no worries I have freedom and safety."

People's views and experiences had been actively sought and responded to. We saw copies of the home owner's survey that had been returned for March 2016 and people were very satisfied with living at Goodes Court and the services available to them. People confirmed they were involved in home owners meetings and budget meetings.

Systems were in place to monitor the service. These included regular audits carried out in areas such as medicines, infection control and health and safety. The registered manager was required to gather and record information and complete regular audits. The registered manager also carried out daily walks around Goodes Court to ensure that people received the support they required. We saw examples of action plans that had been compiled following audits. For example, there had been a medication count sheet recently implemented across all the services to improve the way stock levels were monitored. This showed that where areas of concern were identified, there had been action implemented to ensure best practice. We also saw that care plan formats had changed to ensure they were more person centred.

The registered manager told us that they felt supported and had regular supervisions. They had regular

monthly meetings with other managers from the organisation to discuss any relevant issues and ideas. This helped to ensure that all managers kept up with best practice. There was a dementia champion and health and safety lead to support people's knowledge and best practice. The care compliance manager and other managers completed random audits of the home to help ensure best practice. The care compliance manager told us that they used a system to rate the individual services they supported and this helped determine where higher support needs were required. They also confirmed their door was always open and people could just pick up the telephone for advice.