

Yourlife Management Services Limited

Your Life (Ipswich)

Inspection report

Booth Court
Handford Road
Ipswich
Suffolk
IP1 2GD

Tel: 01473221505

Date of inspection visit:
04 June 2019
05 July 2019

Date of publication:
01 August 2019

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 (Ipswich) operates an assisted living scheme in a purpose-built private development called Booth Court. This service is a domiciliary care agency. It provides personal care to older people living in their own flats. The development within central Ipswich consists of 60 flats privately owned and occupied by older people who also share some communal areas and facilities; such as a dining rooms, lounges and gardens.

Not everyone using Your Life (Ipswich) received a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; 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 comprehensive inspection of 12 June 2019, there were eight people in receipt of the regulated activity of personal care.

People's experience of using this service:

Effective systems were in place to ensure people's safety. Risks were assessed and monitored, sufficient staff were deployed, and safe recruitment procedures were followed.

Staffing levels enabled people to maintain choice and involvement in their care and daily routine.

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 were treated with respect and their privacy and dignity was protected. People were supported and encouraged to remain independent.

The provider had instilled quality assurance systems to monitor the quality and safety of the care provided. People were asked for their views and their suggestions were used to improve the service and make any necessary changes.

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

Rating at last inspection

The last rating for this service was Good (published 22 December 2016)

Why we inspected

This was a planned inspection based on the previous rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Your

Life (Ipswich) on our website at www.cqc.org.uk.

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 ●

Your Life (Ipswich)

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

This inspection was undertaken by one inspector.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

The service had recently had a manager registered with the Care Quality Commission however they had left and a new manager was in the process of being recruited. A registered manager 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 visit because we needed to make arrangements to meet people to seek their feedback.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 used all of this information to plan our inspection.

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During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with seven members of staff including the duty manager, the quality assurance officer, the area support manager, the area manager and care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Inspection site visit activity started on 12 June 2019 and ended on 5 July 2019. It included a visit to the provider's office location on 12 June 2019 to meet with the provider and staff and to review care plans and other records. In the following days we attempted contact with additional staff and relatives of people who used the service, however we received no response.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We left our contact details for any further people, relatives or staff who wished to share their experiences however no one got in touch.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Requires Improvement because improvements were needed to how people were protected from financial abuse and safe medicine administration. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Improvements had been made to safeguarding practices to ensure the risks to people of financial abuse were reduced. The improvements also included assurance systems to ensure that people were receiving their medicines as prescribed. The provider employed a quality assurance manager who also undertook the role of safeguarding and monitored for any trends or learning required and ensured the necessary actions were taken.
- People told us they felt safe with the support that they received. One person said, "I feel safe here, I happily let them in my home, that's how much I trust them." A relative told us, "[Family member] is very happy here and is now in a regular routine, which the staff are good at maintaining, and make [family member] feel safe."
- Staff we spoke with demonstrated a good understanding of the types of abuse and harm people could be at risk of and the action they would need to take to address this.
- Staff had received training on how to recognise abuse and what to do in the event of a concern being raised.

Assessing risk, safety monitoring and management

- Potential risks to people's health, safety and wellbeing continued to be assessed and staff took steps to reduce the likelihood of harm occurring.
- Risk assessments were in place in areas such as staff supporting people with moving and handling and environmental considerations such as slips, trip and falls within people's own environments.
- Risk assessments included any action staff needed to take and provided detailed information on how to support people safely.

Staffing and recruitment

- People continued to tell us there were enough staff available to support them and meet their care needs. All people we spoke with told us staff arrived at their flats at the arranged time and stayed for the agreed length of time. One person commented, "The carers always turn up when they should do. I could also get help at other times if I needed to. I did have a fall once and when I called them they came straight away. They even waited with me whilst I waited for my family and the ambulance." Another person said, "If I press the call bell they come quickly."
- Safe and effective recruitment practices were followed to make sure that all staff were of good character.

Using medicines safely

- Where people required support with administration and management of their prescribed medicine this was detailed in their care plan.
- Staff had received training. People who were supported with their medicines continued to be supported by trained staff. Prior to undertaking the administration of medicines staff undertook training and had their competency assessed. Staff completed medicine administration records (MARs) to record when people's medication had been administered.

Preventing and controlling infection

- Staff continued to have access to protective equipment, for example, gloves and aprons, to reduce the risk of cross infection when providing personal care and support to people.

Learning lessons when things go wrong

- The staff and provider responded appropriately when accidents or incidents occurred and used any incidents as a learning opportunity.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Good. At this inspection this key question has remained 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

- Prior to a person being supported by the service a full care needs assessment was carried out. This included gathering important information about the person's health, physical, mobility and social needs.
- This information was used to create a care plan in order that the person's identified needs could be met.

Staff support: induction, training, skills and experience

- People spoke positively about the training and skills staff had to deliver their care. One person said, "Staff are well trained, they know what they are doing."
- Staff continued to receive regular training to ensure they had the knowledge and skills to provide effective support.

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

- People received the support they wanted to meet their nutritional needs. As people lived in their own flat their food was purchased by themselves or their relatives.
- The service had a large restaurant accessible to people which provided meals during the day where people opted to purchase these.
- At other times people received support from care staff to prepare light meals and snacks.

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

- People received the care and support they needed. Staff supported people where required with any healthcare referrals and appointments.

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.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own

homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty

We checked whether the service was working within the principles of the MCA

- People were involved in decisions about their care and treatment and staff supported them to have maximum control of their lives.
- Staff asked and explained to people before giving care and support records demonstrated people had consented to their support plan and were involved in discussion about their care.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

At the last inspection this key question was rated as Good. At this inspection this key question has remained 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 supported by kind and caring staff. One person said, "The staff are respectful, they are very nice."
- Staff spoke about people in a caring manner and told us they enjoyed the role they played in supporting people.

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

- People were supported to express their views and be actively involved in making decisions about their care and support.
- People told us that they continued to have plenty of opportunities to speak to staff and express their views and opinions.

Respecting and promoting people's privacy, dignity and independence

- People told us that the service supported them to maintain their independence along with providing support to ensure they remained safe. One person commented, "They are respectful when they help me with my personal care and they don't do everything for me, they help me keep my independence."
- People's privacy was respected by staff. One person said, "Oh yes, they respect my privacy, they are very good like that."
- Staff were aware of maintaining people's dignity and explained to us how they ensured that this was respected during personal care by ensuring that people were covered up as much as possible.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained 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

- Detailed care plans were in place to show the support people needed and these were reviewed regularly.
- Care plans were personalised and included information such as the person's history, skills and interests to aid staff in building a professional relationship and rapport with the person.
- Staff were familiar with people's needs and their preferences and what was important to them. This enabled them to deliver people's care in a person centred way. One person commented, "Nothing is too much trouble for the staff, mostly I have the same [staff member] to help me with my shower. That is important to me. Staff are very helpful and 'keep an eye' on me."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Information was provided in alternative formats such as pictorial format and large print to ensure that this was available to people in a way they could understand and access.

Improving care quality in response to complaints or concerns

- The provider continued to have a complaints process in place and people knew who to speak to if they had any concerns. One person said, "I've got no complaints, if I did I could comfortably speak to the staff."
- There had been no complaints received at the service since our last inspection. The last complaint was from September 2016 and not related to the care people received.

End of life care and support

- There was no one receiving end of life care when we visited the service however people's preferences for their advanced care wishes had been considered as well as any decisions not to engage with this as well.
- A document referred to as 'Wishes and Preferences for My Future Care' were in place. Whilst some people had opted to complete this, others had declined to have these discussions with staff and this had been respected.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as Good. At this inspection this key question has remained rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager had recently left the service and a new manager had been appointed and was waiting to start in the role following pre-employment checks.
- The service had an effective system to monitor the safety and quality of the service. We spoke with the quality assurance officer for the provider company who had a role in oversight of all the audits completed and reviewed any trends and identified improvements and learning needed.
- Audits identified actions required to ensure full compliance with the provider's objectives and regulations.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The current registered manager leaving had resulted in some people mentioning that they were keen to know how the changes would impact the service. People spoke positively about how the service had been run. One person said, "I always found the [previous registered manager] approachable. I wouldn't change anything about here [Booth Court] and I would recommend it."
- A relative commented, "[Family member] often says how lucky they are to live at Booth Court and what a good job we did to find this place. I couldn't imagine [family member] moving to anywhere else."
- Staff were clear about the ethos of the service and the aims they were working towards.

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 manager and providers understood the requirement and were open and honest about the care and support people received.

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

- People's feedback was obtained, and their views listened to. Regular meetings were held for people living at the service and people could choose what topics they wanted to discuss.
- Systems were in place to involve people, relatives and staff in the running of the service.
- Surveys and meetings were carried out. Feedback from these surveys and meetings was analysed and action taken if any issues were identified.
- Regular staff meetings were held so the provider could effectively communicate any changes within the organisation, training updates and information about changes in peoples care.

Continuous learning and improving care

- The service worked in partnership with people, relatives and health professionals to seek good outcomes for people.

Working in partnership with others

- The service worked in partnership with people, relatives and health professionals to seek good outcomes for people.
- Staff reported that working relationships were good with other partners such as the local GP and pharmacy.