

Yourlife Management Services Limited

Your Life (Northallerton)

Inspection report

Malpas Court
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Nothallerton
North Yorkshire
DL7 8TG

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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 (Northallerton) is an extra care housing facility. They provide personal care support to people in their own homes. The service was providing personal care to five people aged 65 and over at the time of the inspection.

People at Your Life (Northallerton) lived in apartments that were situated in the grounds. People had access to a restaurant, communal areas and a garden.

People's experience of using this service: People told us they were happy and felt staff had an excellent understanding of their care and support needs. Support was delivered in safe way by staff who had the skills, knowledge and relevant training.

People received support at a time they preferred from a consistent team of staff. They were treated with dignity and respect and their independence was promoted. Staff understood the importance of social interaction and this was encouraged.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Choices people made were respected.

Systems were in place to continuously monitor and improve to ensure people received a good quality service. People were clearly at the heart of everything and regular feedback on the service provided was requested. People described a high level of satisfaction with the service provided.

People and staff spoke positively of the management team. The service was well-run by a registered manager who was passionate about ensuring people received the support they required. There were good links with the local community and other professionals to promote and improve people's health.

More information is in the Detailed Findings section below. For more details, please see the full report which is on the Care Quality Commission's (CQC) website at www.cqc.org.uk.

Rating at last inspection: At the last inspection the service was rated Good. (Report published 3 August 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 (Northallerton)

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide 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 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 a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: We gave the service 48 hours' notice of the inspection visit. We needed to be sure the registered manager would be available to facilitate this inspection.

Inspection site visit activity started on 30 January 2019. We visited the office location to see the manager and office staff; and to review care records and policies and procedures. We also visited people in their own homes.

What we did: Before our inspection, we looked at information we held about the service. The provider sent us a Provider Information Return. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the information we held about the service, such as notifications we had received from the registered manager. A notification is information about important events which the service is required to send us by law. We sought feedback from the local authority contract monitoring team prior to our visit. We used this information to plan the inspection.

During the inspection we spoke with three people who used the service. We spoke with the registered manager, regional manager, deputy manager and two care staff.

We looked at a range of documents and records related to people's care and the management of the service. We viewed three people's care records, medication records, two staff recruitment, induction and training files and a selection of records used to monitor the quality and safety of the service.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- The provider had a safeguarding policy and procedure; staff were suitably trained to identify and respond to any safeguarding concerns. Staff demonstrated a good awareness of safeguarding procedures and knew who to inform if they witnessed or had an allegation of abuse reported to them.
- People told us they felt safe. Comments included, "I know I am safe here. It is my own home and I am reassured as there is always staff on duty day and night should I need them" and "I have settled well here. Staff are extremely supportive which makes you feel safe."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong.

- Risk assessments were in place to guide staff on how to safely meet people's needs.
- Risk assessments had been regularly reviewed to ensure they remained relevant and corresponded with people's current support needs.
- The environment and any equipment had been assessed for safety.
- Accidents and incidents had been recorded. Action had been taken to reduce the risk of accidents or incidents reoccurring, such as referrals to relevant professionals. The registered manager used any accidents as a learning opportunity.

Staffing and recruitment.

- The service operated a safe recruitment process. This ensure suitable staff were employed and appropriate pre-employment checks had been completed.
- There was enough staff available to support people with their care needs.
- Staff arrived for people's care visits on time and they received support from a consistent staff team. One person said, "I have got to know all the staff. I never get a staff member who I am not familiar with."

Using medicines safely.

- Medicines were stored and administered safely. People who had the ability to administer their own medicines were encouraged to do so.
- Protocols for 'as and when required' medicines were not used. We discussed this with the registered manager who told us they would address this.
- People received their medicines when required and were happy with the support they received. One person said, "I get my medication at the same time every day."

Preventing and controlling infection.

- Staff followed good infection control practices and used personal protective equipment to help prevent the spread of infections.

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.

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.

- Assessment of people's needs was completed to ensure an appropriate service could be provided for them.
- People were involved in making every day decisions and choices about how they wanted to live their lives. One person told us, "Staff don't take over, they just support me. I am free to do whatever I wish."

Staff support: induction, training, skills and experience.

- Staff had the skills and knowledge to support people. Refresher training had been provided to ensure staff were up to date with current best practice guidance. People told us staff were well trained.
- Staff felt supported within their role and had completed an induction when they joined the service. Regular one to one supervisions had taken place.
- Staff used supervisions as an opportunity to raise any concerns and discuss their training and development needs. One member of staff told us, "Training really is excellent here. We can do any additional courses we have an interest in."

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

- People were supported with their meals, in a way which ensured the person used their skills as much as possible to maintain independence. Information about their dietary requirements and preferences was included in their care plan.
- An on-site restaurant was available for people to access if they wished. Relatives were welcomed and encouraged to dine with people.

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

- People had access to health care professionals; staff sought medical advice for people where required. Information about people's health needs was recorded in their care plan.
- Staff followed professional guidance. Information was shared with other agencies if people needed to access other services such as hospitals and GP's.

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 with appropriate legal

authority. Applications must be made to the Court of Protection when people live in their own homes. None were required for the people supported by the service when we inspected.

- People who used the service did not lack capacity to make their own decisions. The registered manager and staff were clear of action they would take if they had any concerns in relation to this.
- People were actively involved in decisions regarding their care and support. Consent was clearly recorded.

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.

People were supported and treated with dignity and respect; and involved as partners in their care.

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

- People told us staff were kind and caring in their approach. Comments included, "Staff treat me very well. They know my needs and respect my home. They really are a lovely bunch" and "I cannot say a bad thing about staff. Such caring natures. I enjoy their visits."
- People were supported by a consistent team of staff who knew them well including their likes, dislikes and preferences. One person said, "Staff are more like my friends now."
- Staff were knowledgeable about when people may become low in mood and what the triggers for this could be. People had been provided with emotional support when this was needed.

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

- People were supported to live according to their wishes and values; they had access to advocacy support as needed. An advocate acts to speak on a person's behalf to make sure their views and wishes are known.
- People were able to choose a time they would like staff to visit and this had been accommodated where possible.
- People were supported to make decisions about their care. Staff understood the importance of effective communication whilst maintaining confidentiality.

Respecting and promoting people's privacy, dignity and independence.

- The registered manager and staff showed genuine concern for people who used the service; they were keen to ensure people's rights were upheld and they were not discriminated against. The provision of a dementia workshop had helped people, and the wider community, to better understand this health condition.
- People told us staff treated them with dignity and respect.
- Staff understood people's abilities. One person told us, "I am a little unsteady getting in the bath. Staff help me get in and then leaves me to have a nice soak as they know I can manage. They will wait outside until I am ready to get out."
- People were encouraged to maintain relationships and build their friendship circles. Staff made the time and effort to introduce people new to the service to other people to ensure they felt welcomed.
- The management team provided guidance to people on aids available to help them remain independent.

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control; End of life care and support.

- People were encouraged to make choices and have as much control and independence as possible. One person told us, "Staff respect me as a person and the choices I make. They do what I ask them to. My care plan reflects this."
- Care plans contained person-centred information that focused on each individual. These had been regularly reviewed to ensure they remained relevant. A member of staff told us, "Care plans are a work in progress and are updated as we begin to know more about people."
- People's likes, dislikes and preferences were clearly recorded. Staff were extremely familiar with the people they supported.
- Feedback from people who used the service indicated staff were responsive to their needs and preferences. Additional support had been provided when people were unwell, or their care and support needs increased. One person told us, "I have extra time on a morning as I am not as good on my feet as I used to be."
- People's social interests and hobbies were recorded. Staff supported people to access activities available in communal areas if they wished. One to one support prevent social isolation.
- Information was presented to people in a way they could understand, as required by the accessible information standard.
- People were supported to make decisions about their preferences for end of life care. Staff understood the importance of meeting people's preferences and ensuring they were comfortable and pain free in their final days.

Improving care quality in response to complaints or concerns.

- The provider had an effective complaints policy and procedure in place. A copy of this was provided to people when they joined the service.
- People knew how to make a complaint. They told us any complaints or concerns would be addressed appropriately. One person told us, "I have no complaints, but I would have no problem raising any issues with staff."

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.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics.

- The registered manager engaged with everyone using the service and those relatives and professionals involved; this ensured the service provided person-centred, high-quality care.
- The service had a positive culture that was open, honest and inclusive. Staff and people provided positive comments about the management team. One person said, "This place is run very well indeed. We are well informed and always told of things that are happening." A staff member told us, "We are all one team and work together" and "I feel valued working here. The registered manager is extremely supportive and involves us in everything."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care.

- The registered manager was aware of their role and responsibilities and kept up to date with best practice.
- The provider had a comprehensive quality assurance system in place to monitor, and where required improve the service. Action plans were in place when shortfalls were found.
- Feedback from people, relatives and staff had been used to continuously improve the service. Prompt action had been taken when areas of improvement were identified.
- The registered manager worked to develop their team so that staff at all levels understood their roles and responsibilities. Managers were accountable for their staff and understood the importance of their roles. Staff were held to account for their performance.
- All appropriate reporting had been carried out to alert the CQC and local authorities when incidents occurred.
- Confidential information was stored securely.
- Daily staff 'handover meetings' ensured effective communication about key issues and made sure staff were clear about their tasks and responsibilities.

Working in partnership with others.

- The service had good links with the local community and key organisations. Information on events taking place in the community were available within the service.
- The registered manager attended regular provider meetings to share best practice with other managers, for the wider benefit of others.

