

Young Hearts SM Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This announced inspection took place on 12 and 14 September 2017. This service is a domiciliary care agency which supports people with their personal care needs in their own homes. At the time of our inspection five people were receiving care from Young Hearts SM.

There was a registered manager in post. 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.

The service demonstrated, without exception, the caring and compassionate elements of their care. All of the staff and management team worked together to ensure they regularly went above and beyond people's expectations to deliver personalised care which had a positive impact on their lives.

People were supported to be safe whilst they used the service. Staff were reliable and did not let people down. The staffing team had a good understanding of how to keep people safe and had a strong commitment to their safeguarding responsibilities. People were supported to take assessed risks which helped to develop their independence.

Staffing levels ensured that people could receive responsive and person centred care at all times and the provider's recruitment procedures minimised the risks of employing unsuitable staff. People were supported to take their medicines safely and when they were required.

People and their relatives were positive about the skills and competencies of the staff. The training staff received reflected the needs of the people that used the service, and this was to a positive impact. Staff were able to gain an insight into some of the conditions and experiences of the people they supported and this enabled them to tailor people's care to meet these needs.

The management team had an understanding of the Mental Capacity Act and worked within the boundaries of it. Each person was given as much information as they could understand in order to support them to make decisions. Throughout everything the service did, people were asked for their consent and were fully involved in deciding how they wanted their support.

People were encouraged to maintain a balanced diet and eat well. People's healthcare needs were recognised and staff were efficient at identifying when people required additional support with these needs.

Staff built caring and compassionate relationships with people. People and their relatives were grateful for the support, kindness and generosity of the staff that supported them. There were clear professional boundaries in place however staff were able to maintain warm and endearing relationships with people. Staff took an empowering and empathetic attitude to support people and their personal development.

Without exception, people were supported in a person centred manner.

Staff showed genuine interest and concern in people's lives and people were listened to and encouraged to express their views. People's individuality was respected and supported, and people were supported by staff to maintain relationships that were important to them. People had access to advocacy services, if they had little input or support from anybody outside of the service.

People's needs were fully assessed in a person centred way to ensure the service could fully meet people's needs and expectations. The transition for people to begin to use the service put people in control, and it was tailored to meet each individual's needs and circumstances.

Staff were responsive and flexible and able to adapt their approach to get the best out of people even when they were anxious or upset. The service did not shy away from people with complex needs or challenging backgrounds and showed they could be successful in providing positive outcomes for people.

People had care plans in place that were reflective of people's current needs. The care people received was supportive and encouraging to reflect people's independence and development. People were empowered to lead fulfilled lives regardless of their limitations and there was an open and empowering approach to complaints.

The registered manager demonstrated passion and enthusiasm for providing people with good care. The ethos throughout the service clearly demonstrated that people should be empowered to live their lives exactly as they wished, within a caring and nurturing approach from staff.

The service had an inclusive and team approach to ensure that people received the support that was right for them and the management team demonstrated clear leadership to ensure people received the best care possible. People, relatives and staff were given a number of opportunities to provide feedback and this was responded to and acted on wherever required. Staff were valued and their commitment and dedication to the people they supported was recognised by the management team.

People thrived whilst using the service and relatives were extremely proud and grateful of the progress and development that each person had made since using the service.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good 

The service was safe.

People felt safe and comfortable with the staff that supported them.

Risk assessments were in place and were managed in a way which enabled people to be as independent as possible and receive safe support.

Appropriate recruitment practices were in place and staffing levels ensured that people's support needs were safely met.

There were systems in place to manage medicines in a safe way and people were supported to take their prescribed medicines.

Is the service effective?

Good 

The service was effective.

People were actively involved in decisions about their care and support needs and how they spent their day. Staff demonstrated their understanding of the Mental Capacity Act, 2005 (MCA) and the implications of this.

People received personalised support. Staff received training which ensured they had the skills and knowledge to support people appropriately and in the way that they preferred.

People's physical health needs were kept under regular review. People were supported by a range of relevant health care professionals to ensure they received the support that they needed in a timely way.

Is the service caring?

Outstanding 

The service was very caring.

People were supported by caring and compassionate staff that had a genuine interest in people's lives.

Without exception people were supported with person centred

care. People were supported to maintain personal relationships that were important to them and staff provided additional support when required.

Staff promoted peoples independence in a supportive and collaborative way.

Is the service responsive?

Good ●

The service was responsive.

Pre admission assessments were carried out which put people in control of their care.

Staff were responsive and able to adapt to bring out the best in people, even in difficult circumstances.

The service was able to meet the needs of people with complex needs and challenging backgrounds.

People had care plans that were reflective of their needs.

Is the service well-led?

Good ●

The service was well-led.

The registered manager worked as an ambassador for good care and acted as a positive role model for the staff.

The ethos of the service clearly demonstrated that nothing was too much trouble and people were at the heart of everything the service did.

The management team recognised and encouraged feedback from everyone with involvement of the service and used this to drive continuous improvement.

Young Hearts SM 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 was planned to check 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.

This inspection took place on 12 and 14 September 2017 and the service was given notice of the inspection beforehand to ensure that a member of staff would be available at the time of the inspection. The inspection was completed by one inspector and one expert by experience that helped to make telephone calls to people and their relatives at home. An expert by experience is a person who has personal experience of using a service like this, or has experience of caring for someone who uses a service like this.

We reviewed the information we held about the service, including statutory notifications that the provider had sent us. A statutory notification is information about important events which the provider is required to send us by law. We also contacted health and social care commissioners who place and monitor the care of people living in the home, and Healthwatch England, the national consumer champion in health and social care to identify if they had any information which may support our inspection.

During our inspection we spoke with five people's relatives, three members of care staff and the registered manager.

We looked at care plan documentation relating to three people, and three staff files. We also looked at other information related to the running of and the quality of the service. This included quality assurance audits, training information for care staff, staff duty rotas, meeting minutes and arrangements for managing complaints.

Is the service safe?

Our findings

People told us they always felt safe using the service because they trusted the staff and the management and they never let them down. One person's relative said, "My relative has [health conditions]. I managed to look after them for a long time on my own, but I got to a point where neither of us were safe anymore. He now has two carers come in three times a day and I now sleep well, for the first time in ages, knowing that he is well cared for and importantly, safe." The staff told us they had a very good understanding of each person and knew their capabilities and where they might need some extra support.

People were protected from the risks of harm as they were supported by staff who understood how to keep them safe. Care staff attended training in safeguarding and were clear on their responsibilities to report any areas of concern. One member of staff told us, "If we have any concerns we know we must report them." Records showed that the registered manager understood their safeguarding responsibilities and made appropriate reports to the appropriate authorities when required. This ensured that any allegation was investigated thoroughly and lessons were learnt to ensure people were kept safe.

People were supported to take risks to support their independence and own wellbeing. People were encouraged to maintain their independence as far as each individual wished. One person's relative said, "[Name] loves where she lives and just hates the idea of leaving it any time soon. This is the compromise for us as a family, that she accepts carers coming in to support her being independent." Staff told us they got to know people really well and there were good plans in place about how they could keep people safe. Staff told us the value of people's independence and encouraged people wherever they could. We reviewed people's risk assessments and saw that there were plans in place to help maintain people's safety.

People were always able to receive the support from staff when they needed it as the service had suitable staffing levels in place to accommodate people's person centred care. One person's relative said, "We get a rota that arrives every week so that we know who is going to be coming and when they should be here. Considering [where we live], it is only very rarely that the carers run late at all." Another relative said, "They always turn up, they've never missed a visit. If the carers are running late, they will usually give us a call so we know what time to expect them and if we need somebody in an emergency before then, we can phone the office and organise that as well. We have never been let down so far." The registered manager was mindful that they consistently had enough staff to manage everybody's needs in a person centered way.

Recruitment procedures were in place to minimise the risks associated with staff working with vulnerable people. Staff confirmed that they were required to be successful in an assessment process before they were employed. The registered manager completed checks on each new member of staff's work history and obtained references from previous employers. They also checked whether the Disclosure and Barring Service (DBS) had any information about any criminal convictions before people were able to provide independent care to people.

People were supported to have their medicines safely. One person's relative said, "They help [name] with all of their tablets. The staff give them to [name] out of the dosset box, then hand them a drink and once they

have taken them, it gets written up in the charts so there is a daily record of everything that they have taken." Staff told us they had training about how to give people their medicines and the manager completed checks on them to make sure they were doing it properly. One member of staff said, "I feel like I know what I'm doing. When we give people their medicine we always write down what they have had. The Supervisor has watched me doing it to make sure I'm doing it right." We saw that regular checks were made on people's medicines and the records that the staff completed, the Medication Administration Records (MAR) to ensure they had been completed correctly.

Is the service effective?

Our findings

People and their relatives were happy with the competencies of the staff to give them the support they needed. One relative said, "As far as I have observed, their skills are adequate. I'm no expert, but [name] uses a standing aid to get in and out of bed and the two carers are really supportive and always talk to her and ensure she's feeling safe before they use it." Another relative said, "We've never had any jobs that they haven't been capable of doing for [name]." Staff told us they had good training when they started working for the service, and this was supported by the Care Certificate. The Care Certificate facilitates staff to provide compassionate and safe care to 15 required standards.

People received support from care staff that had the skills and knowledge to meet their needs effectively. The induction programme covered all aspects of care, and included shadowing experienced members of staff, reading people's care plans and getting to know people and how they liked their care. This enabled staff to understand the needs of the people they were supporting. One member of staff said, "I am happy that I have had the training which has helped me with my job."

Staff had the guidance and support when they needed it. Staff were confident in the registered manager and were positive about the level of support and supervision they received. One member of staff told us, "The registered manager comes to do spot checks. They make sure we're doing it right." Another member of staff said, "We do have regular meetings with the manager. They listen to what we say and try to help us." We saw that staff had regular supervisions and the registered manager was aware when staff appraisals would be due.

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 Mental Capacity Act 2005 (MCA). We checked whether the service was working within the principles of the MCA and we saw that they were. The 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.

The management team had a clear understanding of the MCA and of the requirements to obtain people's consent for the care they received. We found that staff were knowledgeable about ensuring people provided consent for their care and when staff had identified that people's mental capacity may be limited, mental capacity assessments had been completed. The service considered where necessary, that best interest decisions could be made if people were unable to make a decision for themselves.

People were supported to eat well, and to eat regularly. One person's relative said, "[Name] really can't make them self a drink these days, so I know when the carer comes in, they always make a hot drink first of all and then another hot drink when they go, together with a glass of water on the table next to the chair. Thankfully they do come back three more times during the day, so that I think, actually, they drink more now than they did before the carers started." Another relative said, "Because they are here for breakfast dinner

and tea, they don't really need to leave her anything other than perhaps a couple of biscuits with a cup of tea if she fancies it." We saw that staff were alert to people's eating habits and made sure people had their nutritional needs met.

People were supported to manage their healthcare needs. Staff knew the people they supported well, and understood when they may be feeling unwell. Staff were quick to update people's relatives, or the registered manager, and people's changing healthcare needs were responded to. One person's relative told us they were always kept informed if their relative's health changed, and they were grateful for the support the staff provided during these times.

Is the service caring?

Our findings

People could not speak highly enough of the compassion and caring approach of the staff. One person's relative said, "I have never heard anyone being anything other than polite, considerate and understanding around my [relative]." Another person's relative said, "My relative says that [the staff] are all like good friends who she looks forward to seeing everyday." When we spoke with staff they spoke about the people they cared for with fondness and joy. Staff told us they enjoyed their jobs and loved spending time helping people.

The registered manager went above and beyond expectations and took on challenging circumstances. For example, one person had been refused care by a number of agencies due to the circumstances of their living arrangements. The registered manager created a team to work in partnership with the person to have a clean and homely living environment that they could have pride in and want to spend time in. The registered manager explained that they felt compelled to help and could see the frustration and distress the circumstances had on the person and when they had supported the person, this had made a significant impact on their attitude to life. The service supported people with a diverse range of needs and ensured that people's diversity was respected and celebrated.

People were truly grateful for the staff's support and generosity and there were a number of examples of the staff and registered manager going the extra mile for people. One person's relative said, "In my experience, they go over and above what they should do. My relative had a hospital appointment which meant they weren't going to be at home to have a hot meal. The manager knew this and organised for the carer to be at home when [name] came back from the hospital and the carer was able to settle [name] back in and then get a hot meal even though it was halfway through the afternoon. I didn't ask the agency to do that, it was the manager who suggested it and I was really grateful that they were able to organise it." A member of care staff told us, "Sometimes I bring people flowers. Some people really like that."

The registered manager understood what was important to people and took action to ensure they were content. For example, one person was rushed to hospital and the registered manager took care of their dog at their own home without hesitation. Following one person's death the registered manager also made arrangements for the person's dog to attend their funeral and the person's family were extremely grateful for this, and understood how much the person would have appreciated this.

The registered manager had a strong understanding of the detrimental impact loneliness and social isolation could have on people and made significant efforts to prevent this. On a regular basis the registered manager made arrangements to collect people from their homes and take them out to a venue of their choice, for example, to a garden center, or tea room. They also helped people enjoy their birthdays and brought people who used the service together to help them celebrate.

Staff had an empowering and empathetic attitude to support people and their personal development. Staff had a detailed knowledge of the people they were supporting and understood when it was appropriate to offer additional support and guidance, and when people needed to assess and resolve situations with little

support or gentle guidance. The attitude and motivation of staff to see people flourish was shared by a team approach which genuinely put people at the heart of everything they did. This strong commitment to providing people with person centred care and support was evident in every aspect of care provided by the staff, and it was evident from care records that this attitude and the efforts staff went to was maintained at all times. For example, one person was keen to maintain their independence and the staff embraced this and offered a supportive and encouraging role for this to flourish. One person's relative recognised that staff supported their relative to maintain their independence and was grateful this had prevented them from needing to move to a care home. They said, "Put it this way, [name] wouldn't still be in their own home were it not for the support and excellent care they get from their carers."

There was a person centred approach to everything the service offered and people were treated with dignity and respect. People were supported to maintain their privacy when they were unable to do so independently. For example, one person said, "The curtains always get closed and they stay that way until I'm all properly dressed each morning." Another person's relative said, "My [relative's] bedroom door is always closed before they start dressing/undressing him so he maintains his privacy."

People valued their relationships with the staff team and staff referred to people as like an extended family. People commented that staff often stayed for longer than their allotted time as they had a good chat together and relatives were extremely pleased with the relationships people and staff had together. Staff showed genuine interest and concern in people's lives and about their health and wellbeing. Staff looked forward to seeing the people they supported and offered kind and gentle support for people. We saw that the staffing team were strong and reliable and the registered manager used the 'mum test' i.e. would I be happy to let these staff care for my mum, as part of their considerations for whether staff had the right approach to care. People had a core group of carers that they saw regularly and this further facilitated people and staff to develop caring relationships together.

People had access to an advocate to support their choice, independence and control of their care. The people currently using the service all had a supportive relative that was fully involved in their care however the registered manager had a good understanding of when people may need additional independent support from an advocate.

Is the service responsive?

Our findings

People's care and support needs were assessed in a person centred manner before they began to use the service to ensure the service could fully meet all aspects of each person's care. One relative explained that they had lots of time with the registered manager whilst they identified what their care needs were. They said, "We talked about everything to do with my [relative's] health and what they needed help with. The manager asked us lots of questions, particularly about what time we would like the calls, whether we preferred male or female carers and exactly what we wanted to be done at each call. The manager turned our discussion into a care plan which is at home in the folder. I don't think we could've been much more involved in the planning of their care than we have been, to be honest." We saw that the management team completed a full assessment, and people's needs and preferences were used to generate a person centred approach to their care.

People had a care plan which recorded their needs and the support they required with their personal care. People had developed their care plans with the support of senior staff. One member of staff confirmed, "Each person has a care plan in their house and it tells us what care they need, but we know everyone very well already." People's care plans covered all aspects of their care and provided care staff with the guidance they needed to provide people with their care. The registered manager had given thought to people's care plans and ensured they covered small but important issues for people. For example, one person liked their remote control in a specific place and this was documented for staff to remember.

People's care needs were reviewed when their needs changed. Staff were aware that they had a responsibility to recognise when people's needs changed and to report this back to the office. One member of staff said, "If there are any changes we tell the manager straight away and she sorts everything out."

Staff were responsive to people's changing needs and they were able to adapt their style and support to get the best out of people. We saw feedback that showed that one person had been supported to change from a reclusive lifestyle to one where they were had been confident and able to access the wider community. The registered manager explained that it had been a slow process but the team were extremely proud of the developments the person had chosen to make with the staff's support and encouragement. Another relative said, "I think because [name] has regular carers, who they know well and importantly they know [name] as well, they understand [name's] likes and dislikes and some of the quirky ways that they like things to be done. They [the staff] are very good and will adapt to [name] and I'm sure if they didn't, I would soon hear about it!"

People received care that was individualised and tailored to meet their needs. Staff had a great understanding about people's likes and dislikes and were empowered to ensure people received the best care they could. For example, if people were having a bad day or were low in mood, the registered manager encouraged staff to offer them the option of going out, or popping up to the office for a change of scenery, a drink and a chat. The registered manager told us, "Sometimes if they're having a bad day, just getting out of the house can help. They sit here and have a drink or whatever and it helps. I like it when they come here."

The management team took an open approach to complaints and were keen to learn if they had made mistakes or got something wrong. People were provided with a copy of the complaints procedure in their handbook so they had access to this in their homes and the registered manager maintained good communication with the people that used the service. People told us that if they did have any concerns or feedback they would feel very comfortable talking to the registered manager. One relative said, "[The registered manager] has been nothing but open and honest so far, and I'm sure if I had any problems these would be dealt with in the same way." Another relative said, "I would have no hesitation in going straight to [the registered manager] if we had any issues at all."

Is the service well-led?

Our findings

The registered manager ran the service as a positive role model. They demonstrated passion and thought towards the service that they ran and brought their own personal experience of the care sector to ensure that people received the kind of service they would want for people they cared about. People who used the service spoke highly of the management team and felt they had made a massive difference to their lives. One person's relative said, "We'd have no hesitation in recommending the service to other people." Another person's relative said, "[The registered manager] couldn't be more visible and they even pick up some shifts so they better understands the client's needs."

The clear ethos throughout the service was to support people in a caring and empowering way. People were encouraged to be as independent as possible and staff took time getting to know people so they could help them in a person centred way. The management team and the staff were happy to go above and beyond expectations and did what they could to help people lead a fulfilled life. People and their relatives gave positive feedback about the service and staff enjoyed working there.

People, their relatives and staff were encouraged and supported to provide feedback about the service, and there were a number of opportunities to provide this. One person's relative told us, "I filled in a survey recently and I did ask a couple of questions in it and [the registered manager] came straight back to me with the answers which I was very grateful for, because often when I've completed surveys in the past, regardless of whatever I've written, I've never heard anything about it thereafter." We saw that the registered manager supported open relationships with people and focussed on the needs and wishes of the people using the service. Questionnaires were sent to everybody using or involved with the service and if any unhappy or negative comments were received the management team were committed to truly understanding the concerns and working on a joint approach to resolve the concerns.

Quality assurance systems were in place to review the quality of care people received. The registered manager spent time reviewing people's care records to ensure they had received the care they required. The staff had a strong commitment to providing quality care and if there were any delays, they phoned the manager who took suitable action, for example, by letting people know if their care may be delayed.

The management team completed medication audits on a regular basis to ensure that people were supported correctly with their medicine needs. The registered manager understood the importance of people having their medicines at the correct times and made frequent checks to ensure there were no concerns.

The service had policies and procedures in place which covered all aspects relevant to operating a care agency which included safeguarding and recruitment procedures. Staff had access to the policies and procedures and staff were expected to read and understand them as part of their role. The registered manager submitted notifications to the Care Quality Commission (CQC) as and when required. The registered manager understood the importance of transparency and openness and ensured the CQC were informed of incidents whenever necessary.

