

Yourlife Management Services Limited

Your life (Leeds)

Inspection report

Thackrah Court
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Leeds
West Yorkshire
LS17 8FQ

Tel: 01132698365

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10 March 2020

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

Not everyone using Your Life (Leeds) receives 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.

People's experience of using this service and what we found

People said they felt the service provided was safe. Staff understood and were aware of the action to take if they suspected harm or abuse. People were protected from risks associated with their care needs because care plans guided staff to support people in a way that reduced identified risks. People told us that enough staff were available to meet their care and support needs.

There were robust recruitment procedures and checks in place to help ensure staff were suitable to work at the service. People's medicines were managed safely, and people received them as prescribed. Staff had access to cleaning products and equipment such as gloves to support people to keep their homes clean and free from infection.

Staff communicated with people in a kind, caring and respectful manner. Staff had a good understanding of the needs of the people they supported and their likes and dislikes. People were able to choose how and where they spent their day either in their own apartments or together with other homeowners. People were supported to take ownership of activities based on their interests to help reduce the risk of social isolation.

Staff and the management team worked well with other professionals for the benefit of people who used the service. Staff received supervision and competency observations to help ensure they had the knowledge to perform their job roles. 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.

The registered manager and staff knew people and their friends and families well. There were systems in place to monitor and evaluate services provided. The provider's senior management team reviewed concerns, incidents, accidents and notifications to analyse and identify trends and risks, to prevent re-occurrence and improve quality. The service had a complaints and compliments policy in place. People told us they felt they could complain if the needed to and felt this would be dealt with. The provider had a system to analyse incidents and accidents, and this was used to identify themes and learning. The service

worked closely with other agencies to help ensure good outcomes for people.

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

Rating at last inspection

At the last inspection the service was rated as Good. (Last report published 22 September 2017)

Why we inspected

This was a planned inspection based on the previous rating.

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 (Leeds)

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 planned this inspection to check 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

One inspector completed the inspection.

Service and service type

This service is a domiciliary care service. It provides personal care to people living in their own apartments.

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 site visit because we needed to be sure that the provider or registered manager would be in the office to support the inspection. We inspected on 10 March 2020.

What we did before the inspection

Before the inspection, we reviewed all the information we held about the service including previous inspection reports and notifications received by the CQC. A notification is information about important events which the service is required to tell us about by law. We requested feedback from other stakeholders. These included Healthwatch Leeds, the local authority safeguarding team and commissioners. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We reviewed information we had received about the service from the provider since the last inspection. We used the information the provider sent us in the provider information return (PIR). 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.

During the inspection

We spoke with six people who used the service and two visitors about their experience of the care provided. We spoke with four members of staff including the registered manager.

We reviewed a range of records. This included two people's support plans and one person's 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 were reviewed.

After the inspection

We continued to seek clarification from the provider to corroborate evidence found. We looked at training data and quality assurance records. The requested documents were provided in a timely manner and were used to inform our judgements.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were managed safely, although we spoke to the registered manager to ensure items were labelled in relation to open and expiry dates.
- Medicines were ordered, stored and disposed of safely by staff. People told us they were happy with the support they received with their medicines.
- People told us they received their medicines on time. One person said, "Staff are very good. They help me with my medication."

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person said, "We all have pendants on, so we feel safe." Another person said, "You know who is coming in, so I feel safe."
- There was a safeguarding policy in place at the service which guided staff about what to do if they suspected people were at risk of harm and abuse. Posters were also displayed in communal areas which advised people, relatives and staff about who to contact in these situations.

Assessing risk, safety monitoring and management

- People were protected from risks associated with their care needs. People's support plans guided staff to support people in a way that reduced identified risks and met their individual preferences and needs.

Staffing and recruitment

- The provider operated robust recruitment procedures and checks to ensure that staff were suitable to work at the service.
- We observed there were enough staff available to keep people safe. There was a continuous staff presence throughout the service, and we observed staff respond promptly to people during the day.
- People told us there was enough staff. One person said, "There is enough staff. When we need them, they are there."

Preventing and controlling infection

- Staff had access to cleaning products and equipment such as gloves to support people to keep their homes clean and free from infection.

Learning lessons when things go wrong

- The provider had good systems in place to learn from any accidents or incidents. All accidents and incidents were recorded by staff and analysed by the registered manager each month, to try to identify any

themes or trends.

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 the same. 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

- People's needs were assessed and recorded in their support plans. People told us they received care and support as they requested.
- People told us they choose to come and live at Thackrah Court. One person said, "I chose to live here. Best thing I have done. I have my friends coming to see me and I go out to theirs, its lovely."

Staff support: induction, training, skills and experience

- People and their visitors told us staff were trained to do their jobs well. One person said, "They [staff] are all good. They know what I like and what I don't like."
- Staff received regular support and supervision to review their competence, discuss areas of good practice and to consider ways they could continue to improve. Staff told us they felt well supported by the registered manager. They felt able to raise any concerns or questions with them.

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

- People chose to eat their meals in their flat or in the communal dining area.
- People who chose to eat their meals in the communal areas told us they enjoyed the food. One person said, "It's like a restaurant. I get served my food and its lovely."

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

- People were supported to healthcare appointments, when necessary.
- People were actively attending GP, Dentist and Optician appointments.
- People and their relatives were happy with the support staff gave them to access other services. One person said, "When I have had a fall, I press my pendant and they come. I have never had to have a doctor out, but I know they would do this for me."

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

- People told us staff always asked for consent when supporting them.

- Staff received training in the Mental Capacity Act and had a good understanding of how to put this into practice.

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 the same. 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

- Staff communicated with people in a kind and respectful manner. Staff had a good understanding of people they supported.
- People and their visitors told us staff were kind and caring. One person said, "The staff are all lovely and helpful. They do little things like opening a jar for me." A visitor told us, "You are made to feel welcome by everyone, including other home owners and the staff."
- People's diverse needs were respected, and support plans identified people's cultural and spiritual needs. People told us they were treated fairly and were free from discrimination.

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

- People were able to choose how and where they spent their day, either in their own apartments or together with other homeowners in the comfortable communal areas.
- People told us visitors were free to come at any time of the day. We observed this throughout the inspection.
- The service held meetings which supported people to be able to make their own choices and decisions in relation to how the service was run.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected. One person said, "The staff are lovely, they knock on my door." Another person said, "Yes they are very respectful. They ring my door bell."
- People told us they were very independent and only needed a little support with certain things. One person said, "They support me with my medication. They ask me if I need any paracetamol."
- Staff knew how to support people and support plans were written in a way that promoted people's dignity and independence.

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 the same. 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; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People received care that was tailored to their individual needs, likes, dislikes and preferences.
- People were supported to take part in activities based on their interests such as singing groups, art groups, exercise and quiz nights. Home owners decided and took the lead in planning activities. One person was in charge of the display boards that showed pictures of all the activities which had taken place.
- People told us they choose what they wanted to do. One person said, "I go out into the garden a lot, a few of us do." One person said, "I go out to see my friends then come back when it suits me." Another person said, "It's a nice community, we all look out for each other."

Improving care quality in response to complaints or concerns

- The service had a complaints policy in place and people told us they knew how to complain. There had been no complaints.
- People told us they would complain if they needed to. One person said, "If I was unhappy, I would tell the staff or manager." We spoke to the registered manager in relation to one person who had expressed concerns over the building. This was dealt with.

End of life care and support

- There was no one receiving end of life care at the time of this inspection.
- People had been supported to identify their preferences and put plans in place for when their health deteriorated.

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.

- No one at the time of inspection needed any accessible information. The registered manager told us this was available if and when required.

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

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager and staff were all keen to provide high-quality, person-centred care. We observed a positive, welcoming and inclusive culture within the service.
- People we spoke to told us they would recommend the service to their friends and relatives. One person said, "Its lovely here. The only difference from living on your own is you have other people to talk to and someone there if you need them."
- The registered manager and staff really knew people and their relatives well and were observed spending time talking to people. Staff told us they felt they had plenty of time to sit and talk to people.

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 provider was complying with the duty of candour.
- The registered manager knew when information had to be shared with CQC.
- There were systems in place to monitor the care provided to people in their flats.

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 very clear on their role and responsibilities.
 - The provider had developed effective systems to monitor the quality and safety of the service.
- A range of audits were regularly completed, and they were effective at identifying areas for improvement.
- Risks to people's health, safety and wellbeing were effectively managed through the provider's governance systems.

Working in partnership with others

- The service worked closely with other agencies to help ensure good outcomes for people. This included working with health and social care professionals and providers to help ensure people received the care and support they needed.