

Yourlife Management Services Limited

Your Life (Tettenhall)

Inspection report

Thorneycroft, Wood Road
Tettenhall
Wolverhampton
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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 (Tettenhall) provides personal care to people aged 65 or over who may live with dementia, a physical disability or sensory impairment. People who receive the service live at Thorneycroft, a private housing development. There were five people using the service at the time of our inspection.

People's experience of using this service: People said they had a positive experience in respect of the care and support they received. They told us they received support from staff in a timely way and were not kept waiting for assistance.

People were comfortable in the presence of staff and told us they felt safe. Staff were knowledgeable about potential risks to people and were able to tell us how these would be minimised without compromising people's rights.

People were supported by staff who were caring and expressed empathy and compassion towards them. People told us staff consistently showed respect for their rights, privacy, dignity and independence.

People received effective person-centred care and support which was based on their individual needs and preferences. Staff were knowledgeable about people's needs and preferences and people told us they had good relationships with all staff. People's care records reflected people's involvement and how person-centred care was planned.

People were supported by care staff who had a range of skills and knowledge to meet their needs. Staff understood their role, felt confident and well supported. Staff received supervision and felt well supported by the provider. People's health was supported as staff worked with other health care providers to ensure their health needs were met.

People were supported by staff to have choices, and the provider's policies supported this practice. People told us their consent was always sought by staff. People told us staff responded to their needs effectively and their preferences were known and respected by staff.

People knew how to complain. Staff knew how to identify and respond if people were unhappy with the service. People were confident they could communicate how they felt to staff, who were approachable and listened to what they had to say.

People and staff gave a positive picture as to the quality of care people received and said management and staff were approachable.

Quality monitoring systems were in place, and the provider completed various audits to assist them in monitoring and helping them to identify how to improve people's experiences.

Rating at last inspection: This was the first inspection since the service was registered with CQC.

Why we inspected: This was a scheduled inspection based on the locations date of first registration.

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.

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

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 (Tettenhall)

Detailed findings

Background to this 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 team consisted of one inspector.

Service and service type: Your life (Tettenhall) is a domiciliary service providing personal care to people who live in flats at Thorneycroft, a private housing development.

Notice of inspection: We gave the service 48 hours' notice of the inspection visit because it is small, and the registered manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

Inspection site visit activity started on 20 May 2019 and ended on the same day. We visited the office location on 20 May 2019 to talk to people using the service, see the registered manager and care staff; and to review care records and policies and procedures.

What we did: We visited Your Life (Tettenhall) on 20 May 2019. The service had a manager registered with the Care Quality Commission. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. They were available during our inspection.

We reviewed information we had received about the service since they were first registered with CQC. We looked at details about incidents the provider must notify us about, such as allegations of abuse, and we sought feedback from the local authority and other professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

We spoke with three people who lived at Thorneycroft. We also spoke with the registered manager and three

staff. We used this information to form part of our judgment. We looked at three people's care records to see how their care was planned and delivered, this including their medication records. Other records looked at included three recruitment files to check suitable staff members were recruited and received appropriate training. We also looked at records relating to the management of the service along with a selection of the provider's policies and procedures, to ensure people received a good quality 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

- People were protected from potential abuse and avoidable harm as the provider and staff understood what different types of abuse could be and steps they should take to safeguard people. These were detailed in safeguarding procedures that staff understood. A member of staff told us, "I can report to the manager, human resources, whistle blowing line or outside agencies".
- People told us they knew who to contact if they had concerns about safety. People's comments included, "I could not be safer" and "I'm perfectly safe".

Assessing risk, safety monitoring and management

- Risks to people were identified and staff were aware of these risks and how people should be supported to reduce any avoidable harm.
- People's risk assessments identified what risks may be present for people and what actions staff should take to address these to minimise risk. Staff demonstrated an understanding of these risks and how to follow risk assessments without compromising people's rights.

Staffing and recruitment

- People told us staff responded quickly when they needed assistance, and there was enough staff to keep them safe and meet their needs. People's comments included, "I have a call bell and staff come quickly" and, "Staff are quick [when needed]".
- Staff comments included, "Staffing levels are adequate for what we have in place" and "Staffing has increased as we have had more residents".
- The provider had systems in place to plan for people's care calls to ensure their care was provided at the times they required.
- Staff had been recruited safely. Pre-employment checks had been carried out including Disclosure and Barring Service (DBS) checks.

Using medicines safely

- We saw the provider had clear systems in place to identify the level of support people needed with their medicines and any risks that may be present.
- We saw staff completed medicine administration records for those people where they prompted them to take their medicines and these were well documented.
- Staff awareness as to how people took their medicines reflected the risk assessments we saw.

Preventing and controlling infection

- People told us they were happy with how staff worked to ensure they promoted infection control when providing care.

- Staff understood when they needed to use personal protective equipment (gloves, aprons) and we saw these were used and available. They were also aware of how to promote good infection control.

Learning lessons when things go wrong

- The registered manager had systems in place to identify learning from any incidents, for example they had audits which identified learning from incidents and there were appropriate steps to ensure staff learnt from these.

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.

- Assessments had been completed to identify people's needs and preferences. We saw there was a reassessment where changes in people's care and people's preferences were identified.
- People told us staff knew them well and delivered care as agreed with them. One person told us, "They work well as a team and never miss calls".
- People's assessments reflected information about protected characteristics as defined by equality legislation including for example, how people's disability impacted on the care and support they required in respect of any reasonable adjustments. Staff and managers demonstrated a good understanding of equality.

Staff support: induction, training, skills and experience

- People's comments about staff skills included, "I would have no concerns with how they are trained" and "I would say the staff are marvellous".
- Staff told us they were well supported by managers as needed and through one to one supervision and meetings. Staff comments included, "We have training, meetings, access to fact sheets for information and other learning" and, "We are definitely well supported".

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

- People told us they were satisfied with the support they received with food and drink and said they were able to purchase a cooked meal from the kitchen when needed, and staff would bring this to their flat, or they could eat in the communal areas with other residents.
- People's records identified if people needed any support with nutrition and hydration and this was provided in accordance with people's express wishes.

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

- People told us they saw community healthcare professionals as needed. They said they would contact health professionals themselves but where needed staff would help.
- Contact with healthcare professions was evident in people's records whether routine or in an emergency. People's comments included, "If you get poorly they will get a doctor or the ambulance out" and, "When I needed a dentist staff helped".

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 they were. People told us staff sought their consent before providing any care.
- Staff had a good understanding of how they should gain people's consent. One member of staff told us, "We always get people's consent".

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; respecting equality and diversity

- People told us staff treated them well and showed them respect. Their comments included, "Staff are absolutely wonderful, first class" and, "Staff are very respectful, they have all been in caring work".
- Staff understood how to provide care in a way that respected people's dignity, with their comments including, "You look at providing for people's individual needs and wishes" and, "You always have to ask if you can do people's personal care and is it OK".

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

- People said they were supported to make choices. We were told staff would explain these choices when providing care and explained what they were doing when providing care. One person said, "They always ask about my choices".
- Staff demonstrated they knew what people wanted in relation to their care but told us they would always check to ensure people had choices when visiting them.
- The registered manager told us advocacy services would be sought if a person requested an interest in these. An advocate is an independent person who puts a case on someone else's behalf. People also told us their relatives were supported to maintain existing relationships with them.

Respecting and promoting people's privacy, dignity and independence

- People said they were treated by staff with respect whilst promoting their dignity, privacy and independence.
- People's comments included, "Staff will wait outside the bathroom while I have a shower, I have privacy and reassurance", and "I have my independence".
- Staff told us how they promoted people's privacy, dignity and independence. One member of staff told us, "When you go to a person's flat you knock the door, if no answer I will open door and call out and await permission. You also have to do things the way people want and respect their privacy".

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

- Information about people's needs and preferences was gathered, and care plans were in place. These were reviewed when people's needs changed.
- People told us they were involved in planning their care, and they had access to their individual records when wanted. One person said, "I am involved as much, or as little as I want to be".
- Staff, when asked, were able to tell us in some detail what people's needs, likes and preferences were. This reflected what was in people's records, and what people had told us.
- People said staff were responsive to their needs and their care was centred around their individual needs and wishes. People told us, "I have an individual plan" and, "I have read my care plan and I can talk to staff, and they respond".
- The provider complied with the Accessible Information Standard (AIS). This is a legal requirement to ensure people with a disability or sensory loss can access and understand information they are given. The registered manager showed us a 'dementia box' they used to help people living with dementia communicate their likes and wishes to staff.

Improving care quality in response to complaints or concerns

- People's relatives told us concerns and complaints were listened and responded to by the provider. People told us they felt comfortable approaching staff or the registered manager.
- The provider had a complaints policy and procedure. Written information about how to raise a complaint was available to people. We saw complaints were fully recorded and responded to by the provider or registered manager.
- Staff could tell us how they would know if a person was unhappy and what they would do to try and identify their concerns.

End of life care and support

- The service was not supporting any one with end of life care at the time of inspection although the registered manager was able to tell us how they would look to cater for people at this time of their life with the support of community healthcare services.
- The registered manager had developed an advance care plan to help inform any decisions about a person's care and treatment at the end of their life.

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 well managed and well-led. Leaders and the culture they created promoted an improvement agenda that was aimed at ensuring there was high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The provider had a range of quality monitoring arrangements in place, These tools had been tried and tested by the provider in a number of their other services, and we saw they were effective. We saw actions were formally identified that the registered manager and staff worked to, and at the time of inspection had met.
- People and relatives were positive about the service with their comments including, "They [staff] are over the top, they are too nice", "They are excellent" and "They help in too many ways for me to comment".

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

- The registered manager ensured we were notified of events as required by regulation. They were aware of the requirement to display CQC inspection ratings when received.
- Staff told us about the provider's whistleblowing policy and said they were confident in raising any concerns, they had if necessary. Staff told us they were well supported by management with comments including, "All staff are supportive of each other" and "Staff morale is good".
- The registered manager knew what their responsibilities under their duty of candour were and was honest about areas where they wanted to improve the service.

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

- People told us they were able to talk to staff whenever they wished and said they were all approachable including the registered manager. People had regular reviews of their care that involved them as well as regular residents' meetings.
- Staff told us the ethos of the service was to, "Promote independence" and they said this was a view they fully subscribed too. Staff told us they felt involved and well informed by managers.

Continuous learning and improving care

- We saw the provider was aware of how to use feedback from others, analysis of any incidents and findings from audits to assist this process.
- We found the provider was positive about our inspection and fully embraced the opportunity to receive further feedback and any learning this may offer them.

Working in partnership with others

- The registered manager told us how they worked with other services and professionals. For example, they told us they had organised a day at Thorneycroft for people to have flu jabs as most were registered with the same doctor's surgery, this of benefit to their GP as well as people who may have difficulty getting to the surgery.