

Yearsley Villa

# Yearsley Villa

## Inspection report

Yearsley Villa  
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York  
North Yorkshire  
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Tel: 01904630450

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

# Summary of findings

## Overall summary

We carried out a comprehensive inspection of this service on 1 December 2015. A breach of legal requirements was found. This was because the registered provider had not fully assessed the risks associated with fire safety, the safety of the home environment or how they would deal with an emergency. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook this focused inspection to check that they had followed their plan and to check that they now met legal requirements. This report covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Yearsley Villa on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Yearsley Villa is a small residential home in York which provides support for three adults with a learning disability. The registered providers live at Yearsley Villa and provide all care and support themselves to the three people who have lived at the home on a long term basis.

We inspected this service on 19 December 2016. The inspection was announced. The registered provider was given 24 hours' notice, because we needed to be sure that someone would be in when we visited.

At this inspection we found the registered provider had made improvements with regard to the management of environmental risk and fire safety and was now meeting legal requirements. An up to date fire risk assessment was in place, along with assessments of risk in relation to the internal and external environment. Other checks such as water temperature checks and fire alarm tests took place regularly. The home was clean and well maintained.

The registered provider is required to have a registered manager in post and on the day of the inspection there was a manager registered with the Care Quality Commission (CQC). 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.

We found that people's individual needs were assessed and the registered provider put risk assessments in place to manage and reduce the risk of avoidable harm. The registered providers were aware of their obligations in relation to managing and reporting any safeguarding concerns.

There were systems in place to ensure people received their medication safely.

People using the service told us they felt safe living at Yearsley Villa. We observed warm and positive interactions between people and the registered providers, and people were relaxed and at ease in their home surroundings.

## 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.

There were systems in place to protect people from avoidable harm. The registered providers had received training in safeguarding vulnerable adults and knew how to respond to any concerns. Risks to people were appropriately assessed and managed.

The registered providers completed risk assessments in relation to the environment and fire safety.

There were systems in place to ensure people received their medication safely.

# Yearsley Villa

## **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 registered 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.

We inspected this service on 19 December 2016. The inspection was announced. The registered provider was given 24 hours' notice, because we needed to be sure that someone would be in when we visited.

This inspection was carried out by one Adult Social Care Inspector. Before the inspection, we looked at all the information we held about the service which included notifications sent to us since the last inspection. Notifications are when registered providers send us information about certain changes, events or incidents that occur. We also sought relevant information from City of York Council's contracts and commissioning team.

We did not ask the registered provider to send us a provider information return (PIR) before the inspection. The PIR is a document that the registered provider can use to record key information about the service, what they do well and what improvements they plan to make.

As part of this inspection we spoke with the three people who used the service. We spoke with the registered providers, one of whom was the registered manager.

We looked at two care plans, medication records and a selection of records in relation to the environment and safety of the service. We observed interactions between the registered providers and people using the service.

# Is the service safe?

## Our findings

People who used the service told us, "I feel safe here because of the way I'm treated. It's nice. [Registered providers] are very nice" and "I feel very safe here. I've been here a long time." We observed that people were relaxed and at ease throughout our inspection.

At our last inspection in December 2015 we found that the registered manager did not complete a formal environmental risk assessment to identify and respond to potential hazards within the home environment. There were no personal evacuation plans in place, showing the support people would need to evacuate the premises in an emergency and the registered provider's risk assessment in relation to fire safety had not been updated since 3 January 2008. This was a breach of legal requirements.

At this inspection we found that the registered provider completed an environmental risk assessment which considered internal and external environmental risks, such as lighting, flooring, pathways, stairs and handrails. We found that the risk assessment had been reviewed during the year to include temporary risks at the service, whilst repairs and external decoration work had been taking place. We found that an up to date fire risk assessment was in place. The registered provider had sought advice from the fire service since our last inspection, and was taking action to minimise risks, including four monthly fire drills and weekly fire alarm tests. Consideration of individual risks in relation to evacuation in the event of a fire or emergency had been included in environmental risk assessments. The evacuation arrangements for one person still lacked detail, but overall we concluded that the registered provider was now meeting legal requirements.

The registered providers did not employ staff and carried out all care and support for people who used the service. For this reason, there were no staff recruitment records or staff rotas at the service. The registered providers told us they were available at all times of the day and night. Because the people who used the service did not have significant night time needs the registered providers operated a sleeping night service, responding to incidents where necessary. During the day the registered manager told us that there was always someone in the house to provide support as required. This had not changed since our last inspection.

We found that the registered providers had received Disclosure and Barring Service (DBS) clearance. DBS checks return information from the police national database about any convictions, cautions, warnings or reprimands. DBS checks help prevent unsuitable people from working with vulnerable groups.

At our last inspection, in December 2015, we asked the registered manager what their contingency was in the event of sickness or necessary absences. They told us that they had an agreement with an experienced care worker who could provide short-term assistance and support in an emergency, although this assistance had not been required for over a year. This person did not receive training from Yearsley Villa as they were not a regular member of staff, but they had experience and training as a carer working for another provider. Whilst the registered provider told us they had seen copies of their training certificates, they had not retained these. We recommended that the registered manager obtained copies of this care worker's training certificates in order to ensure and evidence that they were suitably qualified and that their training was up-

to-date, in case they were required to provide support in the event of an emergency. At this inspection we found that the registered provider had not used this care worker during the year since our last inspection, but the arrangement was still in place, should assistance be required in an emergency. The registered manager agreed to send us evidence of the person's training certificates following our inspection and told us they would also record more information about these contingency arrangements in an up to date business continuity plan for the service.

The registered providers had received training on safeguarding vulnerable adults and were knowledgeable about the types of abuse they might see. The registered manager confirmed that there had been no safeguarding concerns since our last inspection of the service. They were though able to describe what action they would take if they had any concerns. The registered providers had an up to date copy of the local authority safeguarding adult's policy and procedures on file to refer to.

At our last inspection we found that people's needs were assessed, risks identified and risk assessments put in place detailing how those risks would be managed. Risk assessments were detailed and person centred and included challenging behaviour risk assessments and epilepsy risk assessments. We checked two care files at this inspection to check this was still the case; we found people's needs were still effectively assessed. We noted two examples where review dates were missed off documentation in error. The registered providers told us they would address this and ensure they were more vigilant about dating all documentation in future, to ensure it was clear when the risks had been evaluated and evidence that the assessment was up to date. However, overall we found risk assessments were detailed and reviewed on an annual basis or more often if people's needs changed. This helped to minimise risks to people living at the service.

There was an up-to-date electrical installation condition report and gas safety certificate. Portable appliance tests had been completed and the fire alarm was tested weekly. Fridge and freezer temperatures were checked daily and water temperatures were checked and recorded weekly. These environmental and safety checks helped to ensure the safety of people who used the service. We found the building was clean and well maintained.

We looked at systems in place to ensure people received their medicines safely. The registered provider had a medication policy, and the registered providers had received training in medicines management within the last 18 months. One person using the service required assistance to manage and administer their medicines. This was recorded in their care plan and an up to date consent form in relation to this was in place. Two people using the service self-administered medicines and this had been agreed with the person and their G.P. We spoke to one of these people and they confirmed they were happy with the arrangements for their medication and told us about how they managed their medicines.

We found that medication was stored in a secure place. Medication administered was recorded on a Medication Administration Record (MAR) and our checks of MARs showed that these were accurately completed and contained no gaps or omissions.