

Yourlife Management Services Limited

Yourlife (Chislehurst)

Inspection report

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Date of inspection visit:
12 November 2021
16 November 2021

Date of publication:
17 December 2021

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

Yourlife (Chislehurst) is a domiciliary care provider located within the grounds of a retirement living development, designed for people who wish for independent living but who may also require care and support. The service provides personal care and support to people living within the development in their own homes. Not everyone using Yourlife (Chislehurst) receives personal care. CQC only inspects the service being received by people provided with personal care; that is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection the service was providing care and support to five people.

People's experience of using this service

People and their relatives spoke positively about staff and the support they received. There were safeguarding policies and procedures in place and staff had a clear understanding of these procedures. Recruitment checks took place before staff started work and staff received training to meet people's needs appropriately. Risks to people were assessed to ensure their needs were safely met. Medicines were managed and administered safely. There were procedures in place to reduce the risk of infections and staff had enough personal protective equipment.

Assessments of people's needs were carried out before they started using the service. People received support to maintain good health and were supported to maintain a balanced diet where this was part of their plan of care. 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. People were supported by staff who were kind and respected their privacy and dignity and promoted their independence. Staff understood people's diverse and cultural needs and supported them appropriately. People's communication needs were assessed and met. People knew how to make a complaint if they were unhappy with the service.

There were systems in place to assess and monitor the quality of service that people received. The service worked with health and social care professionals when required to deliver an effective service. The provider took people's views into account and used their feedback to help improve the service.

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

Rating at last inspection

This was the first inspection of the service since the provider registered with the CQC.

Why we inspected

This was a planned inspection based on when the service was registered.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Yourlife (Chislehurst)

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 was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Yourlife (Chislehurst) is a domiciliary care agency. It provides personal care and support to people with varying needs living within their own homes. 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

This inspection was announced. We gave the service 48 hours' notice of the inspection to ensure the registered manager and staff would be present and available to speak with.

What we did before the inspection

We reviewed the information we had about the service including notifications they had sent since registering with us. A notification is information about incidents or events that providers are required to inform us about. We asked the local authority for any information they had about the service. We used the information the provider sent us in the provider information return. 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. We used all of this information to help inform our inspection.

During the inspection

We met and spoke with the provider's area manager, registered manager, deputy manager and care staff. We spoke with five people and/or their relatives by telephone to seek their feedback on the service. We

reviewed a range of records including five people's care plans and records and three staff recruitment and training records. We also reviewed records used in managing the service for example, policies and procedures, monitoring records and audits.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at records related to the management 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.

This is the first inspection for this service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of avoidable harm and abuse. The provider had safeguarding policies and procedures in place and staff understood these and how to respond to any concerns. Staff were also aware of the provider's whistleblowing policy and how to report issues of poor practice. Whistleblowing is the act of disclosing information about wrongdoing in the workplace.
- People spoke positively about the care provided and told us they felt safe. One person commented, "I feel safe enough and they [staff] seem well trained."
- The registered manager knew how to report allegations of abuse to the local authority and the CQC where required. There were systems in place to oversee learning from accidents, incidents and safeguarding to ensure concerns were addressed and discussed with staff appropriately.

Assessing risk, safety monitoring and management

- Risks to people were safely managed. Care plans included assessments of risk to people's health and well-being. These provided staff with up to date information about how identified risks should be managed to ensure people's safety; for example, supporting people with mobility needs to safely manoeuvre with the use of equipment.
- Staff demonstrated a good awareness of people's risk assessments and the actions they needed to take to maintain their safety. For example, monitoring people's nutritional needs and daily intake as part of a healthy diet. Risks were regularly reviewed by staff to ensure people's changing needs were safely managed.

Learning lessons when things go wrong

- There were systems in place to monitor and support learning from accidents, incidents and safeguarding. We saw that staff were knowledgeable and knew how to identify risks and understood the importance of reporting and recording accidents and incidents.
- Records demonstrated that staff took appropriate actions to address accidents and incidents and sought support from health care professionals where required.
- Accidents and incidents were monitored on a regular basis to identify themes as a way of preventing recurrence. Lessons learnt were shared with staff through meetings and supervisions.

Using medicines safely

- Medicines were managed safely and people were supported where required to safely manage and administer their medicines.
- Care plans detailed people's prescribed medicines and known risks and allergies. Staff completed medicines administration records (MARs) which we saw were accurate and were regularly monitored and

checked to ensure continued safe practice.

- Training records confirmed that staff had received up to date training to ensure safe practice.

Staffing and recruitment

- Records showed there were enough staff on duty to support people safely as needed. Staffing levels were based on individual's assessment of need and the registered manager told us they were looking to recruit more staff.
- People and their relatives told us they felt generally there were enough staff to meet their needs. One person said, "They [staff] come when I need them, I've never had any issues, they are very helpful." A relative commented, "I think they may be a bit short of staff at the moment. I think a couple of staff recently left and I know they are recruiting but I think there is a perceived shortage of head counts" Staff told us that they felt pressured on occasions as several staff had left the service and more staff were needed to ensure people were supported well. We fed these comments back to the registered manager who told us that the provider was in the process of recruiting more staff.
- There were safe recruitment practices in place including robust pre-employment checks before staff began working at the service. Checks included employment history, identification, references and criminal records checks through the Disclosure and Barring Service (DBS). The DBS helps employers make safe recruitment decisions and helps prevent unsuitable people from working with people who use care services.

Preventing and controlling infection

- People were protected from the risk of infection. The provider had infection prevention and control policies in place to minimise the risk of infections.
- Personal protective equipment (PPE) such as facemasks, aprons and gloves were made available to staff. Training records confirmed that staff had completed training on infection control and food hygiene.
- Staff supported people to understand how to reduce the risk of infection and helped them to maintain good personal hygiene and their home environment. For example, supporting people with domestic tasks.

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.

This is the first inspection for this service. This key question has been rated Good. 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 were involved in planning for their care to ensure the support they received met their individual needs and wishes. One person told us, "I made the decision to come here for my safety, everything is tailored to me."
- People and their relatives where appropriate contributed to the assessment process to ensure all individual needs were considered and planned for.
- Records showed that people's needs and wishes were reviewed on a regular basis to ensure the care they received met their needs, wishes and outcomes.

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

- People's nutrition and hydration needs, preferences and cultural needs were met and supported by staff where this was part of their plan of care. One relative told us, "We know [relative] is looked after because they have their breakfast visit each day with the care staff. I know [relative] enjoys the lunches but can't always get to the communal restaurant and dining room easily at the moment"
- Care plans documented people's nutritional needs, support required with meal preparation, eating and drinking and dietary requirements.
- Staff received training on safe food handling and were aware of people's dietary needs, risks and preferences.

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

- People received support to access services when required to maintain good physical health and mental well-being. A relative told us, "They [staff] keep me informed on how [relative] is doing. It's easy to contact the office, they're easy to get hold of. They are good and responsive and cope with any changes."
- The service worked in partnership with health and social care professionals to meet people's physical and mental well-being, for example, the local authority and visiting GP's.
- Staff knew people well and monitored their well-being at each visit, documenting any issues or concerns. Staff told us they would contact the manager or emergency services if they had any concerns.

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 when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People's consent had been sought in line with relevant legislation.
- Staff understood the need to work within the principles of MCA and sought people's consent before supporting them. The registered manager had a good understanding of the Mental Capacity Act 2005.
- Care plans documented people's capacity to consent to decisions made.

Staff support: induction, training, skills and experience

- Staff had the knowledge and skills to meet people's needs. The provider supported staff through an induction programme, regular supervision and on-going training.
- People told us they felt staff were knowledgeable and appropriately trained. One person said, "The staff seem well enough trained to me, I'm happy here."
- Staff were knowledgeable and told us they received an online training programme to meet people's needs. Training covered areas such as dementia awareness, dignity in care, medicines, moving and handling and safeguarding amongst others. Staff told us that training was good, however they felt face to face training would be beneficial. We feed this back to the registered manager who told us they would discuss future training needs with the provider.

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.

This is the first inspection for this service. This key question has been rated Good. 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

- People told us staff were kind and treated them with dignity and respect. Comments included, "The carers are very good. I think [relative] is in very good hands, they [staff] are so kind and caring", "All the carers are really caring people", and, "The carers are very good, I can chat to them. I am very happy with the care they provide for me."
- Staff had built good relationships with people and their relatives. Staff understood the importance of working within the principles of the Equality Act and supported people in meeting their diverse needs in relation to race, disability, sexuality, sexual orientation and religion.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity, and their privacy and independence was promoted and respected. One person told us, "They [staff] are very good indeed. They help me shower and I get on very well with them. We have laugh and a chat, they are kind and caring. Every now and then they phone to make sure I'm OK, I'm quite independent but it's still good that they check."
- Care plans contained detailed guidance for staff on people's individual abilities to perform certain tasks such as showering and getting dressed. This helped to promote and enhance people's independence.
- Staff knew how to maintain people's privacy and were aware of the importance of maintaining confidentiality.

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

- People were involved in decisions about their care and support. They told us they were provided with information, and their decisions were respected. One person commented, "I choose to have my own cleaner here, that was my choice. They [staff] could have sorted it but I'm OK with my own one."
- People's views and choices were sought and documented within their plan of care. Care plans were reviewed on a regular basis to ensure individual needs and wishes were met and respected.

Is the service responsive?

Our findings

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

This is the first inspection for this service. This key question has been rated Good. 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; end of life care and support

- People received care that was personalised to them. People and their relatives where appropriate were fully involved in the planning of their care to ensure the support they received met their individual needs and preferences. One person told us, "I choose what services I want. I can make my own decisions and have what I want."
- Care plans were personalised and contained detailed guidance for staff to support people in accordance with their needs and wishes. For example, the times they wanted their calls to be completed and the level of support they required with different activities such as meal preparation and medicines management. Care plans documented people's physical, emotional and mental health needs as well as their histories and the things that are important to them. Records were maintained by staff on a regular basis to ensure that people received the support as agreed and planned for.
- People had choice and control over their day to day lives and staff respected and supported their wishes.
- At the time of our inspection no one using the service required end of life care and support. However, care plans documented people's end of life care wishes, where they had chosen to share this information, for staff reference.

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 were supported to avoid social isolation. People told us staff supported them to meet their social needs when requested and to leave their flats to participate in communal activities. One person said, "I've been here a couple of years now and have nothing to grumble about. I go to the lounge for a bit of company which is nice and I've joined the knitting club which I enjoy. There are also quizzes and watching films too." A relative told us, "They [staff] celebrate annual events, like at Halloween they all dressed up and had a tea party. They do Christmas events and of course there's the weekly events like the cheese and wine evenings."
- Care plans documented people's social needs, interests and any support required from staff to meet those needs.

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.

- People's communication needs were identified and documented in their care plan to ensure staff had

relevant information on how best to support them.

- Staff understood the importance of effective communication when supporting people and knew the level of support to provide to ensure they communicated effectively.
- Care plans, the service guide and policies and procedures were available in accessible formats, for example, larger fonts for people who were visually impaired.

Improving care quality in response to complaints or concerns.

- There was a policy and procedure in place for receiving and responding to complaints. This was widely shared with people when they started using the service. This included information on how to report any complaints or concerns and how they would be addressed and respond to.
- People and their relatives told us they were aware of the complaints procedure and how to make a complaint. One person said, "The management is easy enough to get hold of, it's very good here, I've got no complaints."

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.

This is the first inspection for service. This key question has been rated Good. 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; 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

- People received care and support that was person-centred and empowering with the aim of promoting and enhancing individual independence.
- People received good care and support from staff who had the knowledge and skills to carry out their roles and responsibilities. Staff told us they received regular training and supervision.
- The registered manager and deputy managers were actively involved in the day to day running and delivery of care. The registered manager was aware of their responsibilities under the Duty of Candour and acted with openness and transparency. The Duty of Candour is a regulation that all providers must adhere to.
- People and their relatives spoke positively about the staff that supported them. One person said, "The carers are very kind and caring, I try to do most things for myself but they help with the things that are difficult for me." A relative commented, "[Relative] is very happy, [relative] engages with the other residents and gets the support they need."

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

- There was a registered manager in post. They understood their responsibility to meet the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. They were aware of their registration requirements with CQC and the legal requirement to display their CQC rating. The registered manager understood the importance of quality monitoring and continuous learning and improvement within the service.
- There were systems in place to assess and monitor the quality of the service and to help identify service improvements. Checks and audits covered areas such as medicines management, care plans and records and accidents and incidents amongst others.
- Staff understood the responsibilities of their roles and were kept up to date with any service changes through staff meetings and supervision sessions.

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

- There were systems in place to ensure the service sought the views of people through reviews of their care, staff observations and surveys. People and their relatives told us they were happy with the service they

received which was responsive to their needs.

- Staff were provided with regular opportunities to feedback about the service and to share ideas and suggestions at staff meetings and supervisions. Staff told us they worked well as a team to ensure people's needs and wishes were met. One member of staff commented, "We are a good team that works well together to make sure people get the care and support they need. We are short staffed at the moment but we help each other out when we can."

Working in partnership with others

- The service worked effectively with other organisations and professionals to ensure people received good standards of care. Staff had contact with health and social care professionals when required including GP's and district nurses amongst others.

- The service worked in partnership with the onsite catering/restaurant staff and the housing provider to ensure people received good support. The local authority spoke positively about the way the registered manager/staff engaged with them to ensure people's needs were safely and appropriately met.