

Yourlife Management Services Limited

Yourlife (Weybridge)

Inspection report

Campbell House
24 Queens Road
Weybridge
KT13 9UX

Tel: 01932842007
Website: www.yourlife.co.uk

Date of inspection visit:
06 July 2023

Date of publication:
11 August 2023

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 (Weybridge) provides personal care and support to people living in their own homes in Campbell House, a retirement living complex of 43 flats. The service is registered to provide care to older people, including people living with dementia, people with a physical disability, and people with sensory impairment.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. The service supported 18 people at the time of our inspection, 2 of whom received personal care.

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

People received a reliable service from staff who knew how to provide their care in a safe way. Staff understood their responsibilities in protecting people from abuse and knew how to report any concerns they had. The provider's recruitment procedures helped ensure only suitable staff were employed.

Risk assessments had been carried out to identify and mitigate any risks involved in people's care. Staff helped keep people's homes clean and wore personal protective equipment when they provided personal care.

People received person-centred care that reflected their individual needs. They were supported by consistent staff who knew their preferences about their care. Staff monitored people's health effectively and highlighted any changes in people's needs so action could be taken to address these.

Staff were kind and caring and treated people with respect. People had established positive relationships with the staff who supported them. Staff encouraged people to be as independent as possible and provided support in a way that promoted this.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Staff had access to the training and support they needed to carry out their roles. They said they worked effectively together as a team and supported one another well. Regular team meetings ensured staff were kept up to date about any changes to people's needs.

People had opportunities to give feedback about their care through regular meetings, reviews and satisfaction surveys. The provider's quality monitoring systems enabled the registered manager to maintain an effective oversight of 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 service was registered with us on 11 May 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

Yourlife (Weybridge)

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Inspection team

One inspector carried out the inspection.

Service and service type

This service is a domiciliary care agency. It provides personal care and support to people living in their own flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave a short notice period of the inspection because we needed to arrange visits to people who used the service.

Inspection activity started on 30 June 2023 and ended on 6 July 2023. We visited the service's office on 6 July 2023.

What we did before inspection

We reviewed information we had received about the service since its registration, monitoring activity we had carried out with the provider and feedback forms we received from people who used the service and their

families. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We talked with the registered manager about how the service was run. We spoke with 1 person who used the service and 2 family members to hear their feedback about the care the service provided. We received feedback from 6 staff about the training, support and information they received. We reviewed risk assessments and care plans for 2 people, recruitment records for 4 staff, policies and procedures, training records and quality audits.

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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People told us they felt safe when staff supported them. They said staff ensured they were comfortable when providing their care.
- Relatives said staff were vigilant regarding their family members' safety. For example, 1 relative told us staff checked on their family members when they had not had any contact with them for a while, saying, "They went and gave them a knock because they had not seen them during the day."
- Relatives said they were reassured that their family members received the support they needed to stay safe. For example, a feedback form from a relative stated, 'I cannot rate this McCarthy and Stone home highly enough. It provides a lovely home with support as required for the residents and complete peace of mind for their families.'
- Assessments had been carried out to identify and manage any risks to people in areas including moving and handling, nutrition/hydration and continence. If risks were identified, a support plan was developed which contained guidance for staff about how to minimise them.
- No accidents or incidents had occurred since the service began providing care to people but there were systems in place to record and learn lessons from these if they happened.
- The registered manager told us any accidents or incidents would be recorded and reported to the operations manager and the provider's health and safety team. The registered manager said accidents or incidents would be reviewed to identify any actions that could be taken to prevent a recurrence.

Staffing and recruitment; Systems and processes to safeguard people from the risk of abuse

- The service had enough staff with appropriate skills to ensure people received a safe and reliable service. Staff were on-site 24-hours a day and people told us staff were always available when they needed them. One person said, "There is always somebody here, even at night. [Family member] had a fall and we called them. I just rang the bell and they were here within minutes. They waited and let the ambulance men in. [Member of staff] was calm and helpful, and very supportive to me afterwards."
- The provider made pre-employment checks on staff to ensure they were suitable for their roles. This included obtaining proof of identity, references and a Disclosure and Barring Service (DBS) certificate. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staff attended safeguarding training and knew how to report any concerns they had about potential abuse. One member of staff told us, "I understand the safeguarding procedure, although we have not had a safeguarding concern. I feel confident in approaching my manager should I have any concerns." The registered manager was aware of the need to report any safeguarding concerns or allegations to the local authority and CQC.

Using medicines safely

- The service was not supporting anyone with their medicines at the time of our inspection. Staff attended medicines training and the registered manager told us their practice would be assessed before they were signed off as competent to administer medicines. The registered manager said medicines administration records would be maintained for anyone receiving support with medicines, and that these would be audited regularly.

Preventing and controlling infection

- People told us staff helped them keep their flats clean and hygienic. Everyone who lived at Campbell House received weekly cleaning visits as part of their rental agreement. The communal areas of the building were cleaned regularly, including daily disinfection of high touch points, such as handrails and the building's front door.
- Staff received training in infection prevention and control (IPC) and wore personal protective equipment (PPE) when they provided personal care.

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 of this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff received the training and support they needed to carry out their roles. All staff had an induction when they started work, which included mandatory training and shadowing colleagues to understand how people preferred their care to be provided.
- Staff told us the induction process had prepared them well for their roles. One member of staff said, "I had an induction when I started my job at Campbell House, completing a number of shadowing shifts alongside other employees before I felt confident enough to work on my own." Another member of staff told us, "I did several shadow shifts with different members of staff when I started and was able to ask lots of questions and take plenty of notes."
- The mandatory training staff attended during their induction was refreshed annually and staff had access to any additional training they needed to provide people's care. Staff had opportunities to achieve further relevant qualifications, including the QCF (Qualifications and Credit Framework) Level 3 Diploma in Health and Social Care. A member of staff told us, "[Registered manager] has put me forward for my NVQ3. I have started reading through everything. She has said if there is anything I am not sure of, she is here to support me."
- Staff met regularly with their line managers for supervision, which gave them the opportunity to discuss their performance and further training needs. A member of staff told us, "The purpose of supervision is to ensure everything is being done correctly and that I feel confident in my role. It enables us to report any concerns or talk about any training we may need."

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

- Relatives told us staff were observant of any changes in their family members' healthcare needs. They said staff let them know about any concerns in order that they could seek medical advice. One relative told us, "They told me that the skin on [family member's] back was very dry. They always tell me if they have got any concerns."
- People's healthcare needs, including the support they needed to maintain good oral health, were considered at their assessments and detailed in their care plans. None of the people using the service at the time of our inspection had healthcare conditions which required ongoing input from healthcare professionals.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs had been assessed before they used the service to ensure staff had the relevant skills and training to provide their care safely. Assessments addressed areas including mobility, continence and

personal care. People who used the service and their relatives told us the assessment process had been comprehensive and that their views had been sought and recorded.

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 care was provided in accordance with the MCA. People were asked to record their consent to the care they received and confirmed staff asked for their consent before providing their care on a day-to-day basis. Staff had training in the MCA and understood how its principles applied in their work.
- All the people using the service had capacity to give informed consent to their care. The registered manager said if there was any doubt about people's capacity, they would carry out a mental capacity assessment and, if necessary, involve all relevant people, such as families and professionals, to ensure decisions were made in people's best interests.

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

- People's needs in relation to nutrition and hydration were discussed at their assessments and recorded in their care plans, including any allergies. No one using the service had risks associated with eating or drinking and all were able to eat a regular diet.
- Campbell House had a restaurant which was available to everyone who lived there. People told us they used the restaurant regularly and enjoyed the food provided. One person said, "We use the restaurant several times a week. It is very convenient and the food is very good."
- Relatives told us their family members benefited from having a restaurant on site as their family members could choose whether to cook their own meals at home or to use the restaurant. One relative said, "Having the restaurant there is a real boon. There is a chef there, not for breakfast but for lunch, and if you want an evening meal, he will put it on a tray for you."
- A feedback form from a relative stated, 'The catering facilities are lovely and the head chef is fantastic with the residents and adapts portion sizes and ingredients according to residents' needs. He and his team create regular themed lunches and a variety of different meals to celebrate occasions, and to provide a community feel for anyone wanting to join in.'

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 of this newly registered 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 and their relatives said staff were kind and caring. One relative told us, "Everyone here is very caring; they are nice people with a good attitude." Another relative said of staff, "They are all quite lovely." A feedback form we received from a relative stated, 'The staff are attentive, friendly, warm, reliable and exactly what you would wish for to assure elderly residents are looked out for.'
- People said they got on well with staff and relatives told us their family members had established positive relationships with the staff who visited them. One relative said, "[Family member] looks forward to their visits because they have a good chat."
- Relatives provided examples of the efforts staff had made to ensure their family members enjoyed events at the service. One relative told us, "We had a family party on Sunday and one of the girls came in and painted [family member's] nails on the Saturday. I think she came in specially." Another relative said, "At Christmas they all got dressed up; it made for a good fun atmosphere."
- People received their care from consistent staff, which they said was important to them. A relative told us, "They have been very consistent. There have hardly been any changes, which makes a big difference; it makes [family member] feel more comfortable." Another relative said, "It is one of 2 people in the week, and another at weekends. [Family member] knows them all and she is comfortable with them." Staff recognised the benefits to people of receiving their care from regular staff. One member of staff told us, "I believe we provide a good consistency of care to homeowners, which means we can build good relationships with them."

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People told us staff listened to their views and respected their choices about their care. One person said, "They do things the way I like them done."
- People said staff maintained their dignity when providing care and relatives confirmed staff treated their family members with respect. One relative told us, "They are incredibly respectful and very friendly."
- Staff encouraged people to be as independent as possible. Relatives said staff understood the benefits to their family members of maintaining their independence and provided care in a way which promoted this. The registered manager told us staff recognised the value of supporting people to maintain their skills and abilities, saying, "We don't want to take anyone's independence away; we encourage people to do what they can for themselves."

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 of this newly registered 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

- Each person had a care plan which had been developed from their initial assessment which included details of how the person wanted their needs to be met and information for staff about the care they needed to provide at each visit. Care plans recorded the outcomes the person wished to achieve from their support and outlined what the person could do for themselves in addition to the areas in which they needed support. People's care plans were reviewed regularly to ensure they continued to reflect their needs.
- People and their relatives told us the service was flexible if they needed to increase or reduce their scheduled care visits. One relative said, "They were amazing when [family member] was unwell and needed to go into hospital. They gave extra care, they delivered all his meals." Another relative told us, "They have always been responsive when we wanted to scale up the care or reduce it back down again."
- Relatives said the registered manager knew people's needs well and demonstrated a flexible approach to ensure these needs were met. A feedback form from a relative stated, "[Registered manager] knows the individual residents' needs well and has been flexible and supportive in supporting my elderly parents and continually thinking of new ways to foster a cohesive and supportive community."

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 recorded in their initial assessments and reflected in their care plans. No one using the service at the time of our inspection had communication needs that required augmentative and alternative communication (AAC) strategies, such as sign language, objects of reference or pictorial formats.
- The registered manager told us important information could be made available to people in formats which were accessible to them, including large print and easy read formats.

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

- The registered manager and staff organised a range of activities and events in which people could participate if they wished. A relative told us, "[Registered manager] does lots of things that try to involve people. They have movie nights, there is a coffee morning every week, they have had music evenings, poetry evenings, quizzes. Every week they produce a list of activities that are on."
- Relatives' feedback highlighted events at the service as opportunities for people to socialise and for their

friends and families to spend time with them. A feedback form stated, 'There are regular activities/events taking place, many of which are put on by the homeowners themselves and which are supported by staff to enable them to take place. Events include regular craft afternoons, film nights, game evenings and music nights. One-off events, such as the King's Coronation, are created as special days with family/friends being encouraged to join in and photos taken to create memories.'

- Staff recognised the benefits to people of taking part in activities to avoid potential social isolation. A member of staff told us, "We do not want anyone to become socially isolated. [Registered manager] welcomes new ideas for events and social activities. We all have chats with the homeowners regularly when on shift so we can also gain ideas from them."

Improving care quality in response to complaints or concerns

- None of the people we spoke with had complained but all said they would feel comfortable doing so if necessary. People and their relatives were confident any concerns they raised would be addressed. One relative told us, "I have not needed to complain but if I had any concerns I could speak to [registered manager]. I am sure she would want to put things right." Another relative told us the registered manager ensured action was taken to address a maintenance issue in their flat. The relative said, "I felt very reassured the manager was onto it; she is the sort of person who does things immediately."

End of life care and support

- No one using the service was receiving end of life care at the time of our inspection, although end of life care had been provided to people in the past. Staff had training in the provision of end of life care and the registered manager told us the service had access to advice and support from specialist palliative care professionals if needed.

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 of this newly registered 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics;

- People and their relatives said the registered manager was always available if they needed to discuss their care and demonstrated a positive approach to working with them. One relative told us, "When [family member] was unwell, I needed to speak to [registered manager] quite often and she always made herself available." A feedback form from another relative stated, "[Registered manager's] approach is friendly and practical and her good sense makes a trusting relationship between both residents and their families easy."
- People using the service and their relatives had opportunities to give their views about the care provided. Satisfaction surveys were distributed every 6 months and people were asked for feedback during 6-monthly reviews. People were also able to give feedback and raise concerns at bi-monthly meetings and at weekly coffee mornings.
- Team meetings took place quarterly and were used to ensure staff were kept up to date about any changes to people's needs. One member of staff told us, "We have staff meetings every quarter where we are updated on any changes we need to be aware of and so we can also raise any concerns if we have any."
- Important information was also shared through daily handovers and a communication book. A member of staff said, "We communicate regularly via our communication book and daily handovers, which is very useful to make sure we are kept up to date."
- Staff told us they worked well as a team and supported one another well. One member of staff said, "I feel very lucky to be a part of a wonderful team who support one another regardless of their job role."

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

- There were systems in place to monitor the quality and safety of the service. Key areas of the service were audited regularly and staff practice was observed to ensure they were providing care safely and in line with good practice.
- An operations manager had carried out a comprehensive service audit on 1 June 2023 which involved speaking with people who received care and checking records including care plans, risk assessments, care notes, staff files, team meeting minutes, supervisions, and competency checks.
- The registered manager met weekly via Microsoft Teams with the provider's other registered managers in the region to share good practice and any learning from events.

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 registered manager understood their responsibilities under the duty of candour, saying, "It is about being open and transparent, apologising if necessary, and actively listening to complaints."