

Kayla Supported Living Ltd

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Inspection report

St. John's Resource Centre
29 St. John's Road, Birkby
Huddersfield
HD1 5DX

Date of inspection visit:
24 June 2022

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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?	Requires Improvement ●

Summary of findings

Overall summary

About the service

Kayla Supported Living Ltd is a domiciliary care service providing personal care and support to people living in their own homes.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. CQC only inspects this kind of service 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. At the time of our inspection, there was one person receiving personal care from the service.

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

The application of prescribed topical creams was recorded in daily notes, but following our inspection, the registered manager introduced a medicine administration record as well as a system of auditing.

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. There was no formal recording of mental capacity. Following our inspection, a suitable assessment of capacity and best interest decision were put in place.

The staff team understood how to recognise the signs of possible abuse. We were not fully assured that appropriate reporting procedures were understood correctly, but steps have been taken to address this.

Feedback from a relative demonstrated they were very pleased with the care provided by both the registered manager and nominated individual. This was person-centred and recognised the need to promote independence. Staff placed importance on maintaining privacy and dignity when providing personal care, and the relative said they were happy with this.

Issues found at this inspection had not been identified by the provider beforehand. The service was well run by a registered manager who was enthusiastic and eager to learn. Following our inspection, they made contact with a local registered managers' network which showed their interest in developing and expanding their service.

Risks had been assessed, monitored and reviewed and staff understood what these were. There were sufficient numbers of staff who always arrived on time and stayed the full duration of the call. Staff always wore PPE to reduce the risk of passing on infectious diseases, including COVID-19.

Both staff members were capable of addressing healthcare needs. They were able to spot signs of health deterioration and shared this with their relatives.

Staff had been trained in key subjects, although the nominated individual needed refresher dementia care

training. This was dealt with following our inspection.

Care records were person-centred and suitably reflected individual needs and preferences.

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

Rating at last inspection and update

This service was registered with us on 27 April 2021 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?

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 safe findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our safe findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our safe findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

Kayla Supported Living Ltd

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 checked 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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by one inspector.

Service and service type

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post. Following our inspection, we spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. Please see our comments recorded in the well-led section of this report.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 24 June 2022 and ended on 7 July 2022. We visited the location's office on 24 June 2022.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us 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.

During the inspection

During the site visit we spoke with the registered manager. We reviewed a range of records. This included one person's care plan and training records.

After the inspection

We continued to seek clarification from the service to validate evidence found. We spoke by telephone with a relative whose loved one received this service as well as the nominated individual.

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.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people, although the process for reporting concerns appropriately was not fully understood.
- Both the registered manager and nominated individual received safeguarding training and could identify signs of possible abuse. However, we were not assured the nominated individual fully understood the correct procedure for reporting safeguarding concerns. This understanding has since been clarified.
- A relative we spoke with told us they felt confident that the person receiving this service was safe and protected from harm.

Using medicines safely

- Medicines were administered as prescribed, but recording of this needed improvement.
- A relative we spoke with confirmed they worked together and shared responsibility with the service to ensure medicines were given safely as prescribed.
- The registered manager said they recorded the administration of prescribed creams in the daily care notes. We discussed the need to record this on a topical medication administration record (TMAR). The registered manager said they had considered introducing TMARs to ensure this process was more robust.
- Medication needs were recorded within the care plan, although some information needed to be more specific which the registered manager addressed immediately.

Assessing risk, safety monitoring and management

- Individual risks had been assessed and monitored.
- Care records contained a clear moving and handling risk assessment. This provided information on the different types of moving and handling assistance needed, equipment required and how this should be done safely. We looked at a suitable falls risk assessment.
- The registered manager knew how to promote healthy skin integrity by ensuring prescribed topical creams were applied. Body maps were used to record and monitor skin integrity.
- A home risk assessment had been carried out which looked at risks both within and outside the home environment.

Staffing and recruitment

- There were sufficient numbers of safely recruited staff.
- A relative we spoke with said they were satisfied with the staffing arrangements. They added that staff were always punctual and stayed for the duration of the visit time. They said, "They (staff) are absolutely spot on with the timing."
- Both staff members were registered with the Care Quality Commission. Relevant background checks had

been completed to ensure they were suitable to work with vulnerable people.

- The registered manager had worked with the local authority in an effort to expand their workforce. They planned to attend an upcoming recruitment fayre.

Preventing and controlling infection

- Infection control was suitably managed.
- The registered manager said they had always managed to maintain an adequate supply of PPE.
- The registered manager was testing for COVID-19 on a weekly basis. A relative we spoke with confirmed staff always wore PPE correctly when they attended visits.
- Both staff members had received training in infection prevention and control.

Learning lessons when things go wrong

- The registered manager said they had agreed in advance with the relative they could have a short break at the beginning of June 2022. Although this was agreed, this emphasised why the registered manager wanted to recruit additional staff.
- The registered manager also said they wanted to start more formal meetings with the nominated individual to discuss the current service and plans to expand it.

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

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 MCA 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.

- The service had not carried out any formal mental capacity assessments, although worked closely with information provided by relatives.
- Following our inspection, the registered manager sent us a copy of a MCA assessment along with a best interests decision. Both were appropriately completed.
- Staff demonstrated a strong understanding of how important it was to empower people to make their own decisions, where this was possible. A relative told us, "They've (staff) been really good. When they've not been able to ask (person), they ask me."
- Consent to care had been recorded and was signed by the person's relative.

Staff support: induction, training, skills and experience

- Steps were in place to ensure staff received formal support. A relative we spoke with said they felt confident staff were capable and suitably trained.
- Training records we looked at showed staff had received training. However, the nominated individual received training in dementia care, but this expired in July 2020. The registered manager was arranging this following our inspection. We found both staff members demonstrated a good understanding of dementia care and how to appropriately support people living with this illness.
- The registered manager had a training provider who they used for this support.
- At the time of our inspection, the registered manager did not have a staff team. However, they said they wanted to ensure staff received formal support through training and monthly supervision when the service started growing. They also wanted to introduce an annual appraisal.

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

- The registered manager was qualified in ensuring people received a suitable dietary intake. This meant they were able to recognise and respond to people's assessed needs and ensure this knowledge was passed on to staff.
- At the time of the inspection, staff did not support anyone with meals. The registered manager was committed to ensuring people received a balanced diet. A relative confirmed staff encouraged their loved one to have enough to drink.
- Where people had specific healthcare needs around eating and drinking, the registered manager said they would make a referral to a speech and language therapist for additional support.

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

- People were effectively supported to achieve good health and staff identified when assistance from healthcare agencies was needed.
- The registered manager showed a good awareness of spotting the signs of potentially deteriorating health. They shared examples with us which showed they identified these needs and communicated effectively with relatives to ensure appropriate action was taken. A relative told us, "(Registered manager) tells me at the time about things (areas of concern)."
- The registered manager shared examples of helping to get support from a district nurse and a chiropodist when this was needed. The registered manager described how they supported oral care needs.
- Individual health conditions were recorded in care plans and staff were familiar with these.

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

- There was a clear process in place to ensure people's needs were fully discussed and assessed before care was provided, to ensure the service could deliver suitable care.

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 newly registered service. This key question has been rated as 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

- Staff delivered compassionate care which met the people's individual equality needs. • A relative told us, "They (staff) are both very calm and caring. We've been very fortunate."
- The registered manager clearly knew the needs of the person they were supporting. This meant they were able to ensure the person was well treated based on how they liked to receive care.
- The registered manager understood how to support people's religious beliefs. Both staff members had received up-to-date training in equality and diversity.

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

- A relative confirmed they were able to express their wishes and be involved in the planning of care delivery.
- A relative told us they were fully consulted about what the care package would involve before the service started. They added, "When you get good carers, it's an absolute boon. We've always worked together."
- The relative also said they and the registered manager were openly communicating about the person's changing needs. They said, "(Registered manager) talks about (person's) changing needs. We're talking all the time."

Respecting and promoting people's privacy, dignity and independence

- The registered manager described in detail how they ensured individual support for people's privacy and dignity.
- For example, when staff provided personal care, they ensured this was done in private. Doors were closed as were blinds. When providing personal care, they ensured they provided towels to keep the person warm and to protect their dignity. A relative we spoke with confirmed this happened.
- The registered manager knew the importance of supporting people to remain independent with tasks they could manage themselves or with minimal assistance. The nominated individual shared these values and said, "I try and promote people to do things for themselves for as long as they can."

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 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

- Care records showed in sufficient detail how care needs were to be met.
- Step by step guidance was provided around tasks staff needed to complete to ensure suitable assistance was provided.
- The care plan we looked at was personalised and contained information about the person's likes and how they interacted with others.
- The registered manager was able to describe the life history of the person they supported and how they wished to be assisted with their presentation. They showed a good understanding of the person's likes and interests.
- Although a date was missing, we could see the care plan had been reviewed as the person's needs changed.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Communication needs were covered in sufficient detail in the care plan we looked at.
- The registered manager said they would continue to assess people's communication needs. As an example, where a person's first language was not English, they said they would involve relatives or other representatives as well as translation services.

Improving care quality in response to complaints or concerns

- People and their representatives were made aware of the complaints procedure.
- At the time of our inspection, there had been no formal complaints raised. We spoke with the registered manager about how they would deal with a complaint if this was about them. They told us they would ask for support from the local authority.
- The registered manager told us they provided a service user guide for people or their relatives. This included information on how to make a complaint if they were dissatisfied. The relative we spoke with confirmed they received this.

End of life care and support

- We carried out monitoring of this service in April 2022 and found the provider had not looked at end of life care needs.
- At this inspection, care records showed future wishes had been established around hospital admissions and receiving specific medicines.

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 this newly registered service. This key question has been rated requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- We identified improvements were needed in the recording of medicines management and mental capacity. The registered manager had not identified these issues before our inspection, but they were responsive to our feedback and took action.
- We were not fully assured about how the provider maintained confidentiality as they were sharing office space with another homecare provider at the time of our inspection. The registered manager said they only needed to visit the office infrequently and they had a dedicated locked cabinet to store written records.
- During our inspection, we established the nominated individual was incorrectly registered as they were not someone who had oversight of this service, although they provided cover when needed. The registered manager was going to look to register as the nominated individual.
- At the time of our inspection, the service was not of a sufficient size where audits could reasonably be expected to have been completed. The registered manager planned to introduce audits for medication, falls, assessments, complaints and daily records.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The relative we spoke with felt this service had helped their loved one achieve good outcomes.
- They ensured the person was well looked after and able to stay at home. They told us it was important that the person was clean, wearing fresh clothes and showered daily. The relative had described the same desired outcomes to us.
- The relative commented, "We've been very pleased. We're impressed. I like that (registered manager) is nice and calm. She talks to (person) and doesn't shout."
- The registered manager told us they promoted an inclusive culture where staff felt valued and were treated with trust, integrity and respect.

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

- We asked a relative if they felt listened to by the staff. They told us, "Yes, and they're prepared to communicate back."
- In May 2022, the registered manager had asked for feedback from a relative regarding the care they provided. The feedback we saw noted, "(Registered manager) is very caring. Has a quiet and calm manner which suits (name of person) very well."

- The relative we spoke with said they were happy with the level of involvement they had in their loved one's care.
- The registered manager was in contact with the nominated individual to discuss the service provided.

Working in partnership with others; Continuous learning and improving care

- The registered manager was eager to learn and improve.
- They were responsive to our feedback and committed to providing a high standard of care for those receiving this service.
- The registered manager said they had been in discussions with the local authority regarding accessing additional training for staff.
- Following our inspection, the registered manager linked in with a recognised registered managers' network to access support from this forum.

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

- At the time of our inspection there had not been a need to formally notify us of any specific events. However, the registered manager was able to describe the different events which are reportable to the Care Quality Commission.
- The registered manager was committed to being open, honest and transparent when mistakes occurred.