

Independent Lifestyle Options Ltd

Independent Lifestyle Options Domiciliary Care

Inspection report

76 Beddington Gardens Carshalton Surrey SM5 3HQ

Date of inspection visit: 04 October 2022

Date of publication: 25 October 2022

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

Independent Lifestyle Options Domiciliary Care is a domiciliary care agency providing personal care to people living in their own homes in the community. The service provides support to people with physical disabilities. 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. At the time of our inspection the service were providing personal care to four people living together in one house in the community.

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

People were safe. Staff had been trained to safeguard people from abuse and knew how to manage risks to people, to keep them safe. There were enough staff to support people and meet their needs. The provider carried out recruitment and criminal records checks on staff to make sure they were suitable to support people. Staff followed current practice when providing personal care and when preparing and handling food which reduced infection and hygiene risks.

People were happy with the care and support they received from staff. People were involved in planning their care and support and could state their preferences for how this was provided. They received the care and support that had been planned and agreed with them because staff knew them well and understood how their needs and preferences should be met.

Staff received training to help them meet people's needs. Staff were well supported and encouraged to continually learn and improve in their role. They put people's needs and wishes at the heart of everything they did.

Staff helped people to eat and drink enough to meet their needs. Staff understood people's healthcare needs and how they should be supported with these. Staff were caring and treated people well. They respected people's rights to privacy, dignity and independence.

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.

People were supported to undertake activities that reflected their interests and preferences. They were supported to maintain relationships with the people that mattered to them.

The service was managed well. The management team understood how people's needs should be met and monitored and reviewed the quality and safety of the service. They checked with people at regular intervals that the care and support provided was meeting their needs and sought their views about how the service could improve. There were systems in place to investigate accidents, incidents and complaints.

The service worked with healthcare professionals involved in people's care and acted on their recommendations to deliver care and support that met people's needs.

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

Rating at last inspection

The last rating for this service was good (published 9 February 2018).

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 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. | |



Independent Lifestyle Options Domiciliary Care

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

The inspection team consisted of one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes in the community.

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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 this information to plan our inspection.

During the inspection

We spoke with two people using the service who shared their views and experiences about the service. We also spoke with the registered manager, the care coordinator and one care support worker. We reviewed a range of records. This included one person's care records, one staff recruitment file, staff training and supervision information and other records relating 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.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe using the service. One person said, "The staff are very caring and make sure I'm safe." Another person told us, "I feel quite safe with the staff." A senior staff member said, "I trust my staff here and they are here for the people. I can say this because I have a small staff team and they have worked with people a long time and people trust them."
- Staff received relevant training and support to help them safeguard people from abuse and knew how and when to report concerns to the appropriate person or authority.
- The registered manager understood their responsibility to liaise with the relevant agencies if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- The service managed risks to people's safety and wellbeing. People's records contained information about identified risks to their safety and wellbeing and how staff should manage these, to reduce the risk of people being harmed or injured. A senior staff member told us, "We have risk assessments in place for everyone and for every eventuality. I have just reviewed them."
- Staff had been trained to deal with emergency situations and events if these should arise.

Staffing and recruitment

- There were enough staff to meet the needs of people using the service. Staffing levels were planned based on the level of support people needed each day. A staff member said, "The rota is under control and we can give people what they need."
- The provider operated safe recruitment practices. They carried out appropriate checks on staff that applied to work at the service to make sure only those suitable were employed to support people.

Using medicines safely

- None of the people using the service at the time of this inspection needed support from staff to take their prescribed medicines.
- Should this support be required in the future, the provider had systems in place to manage and administer people's prescribed medicines in a timely and appropriate way.

Preventing and controlling infection

- The service managed risks associated with infection control and hygiene.
- Staff had received relevant training and followed current guidance to keep people safe from risks associated with poor infection control and hygiene. They used personal protective equipment (PPE)

effectively and safely.

- The provider's infection prevention and control policy was up to date. The provider had plans in place to make sure that infection outbreaks could be effectively prevented or managed
- Staff had been trained in food hygiene to help them reduce hygiene risks to people when preparing, serving and storing food.

Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents.
- Although there had been no recent accidents or incidents, there were arrangements in place for the registered manager to review these and take appropriate action when required to reduce the risks of these events reoccurring.



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.

At our last inspection we rated this key question good. The rating for this key question has remained 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

- The service had arrangements in place to make sure people's care and support needs could be met by the service. Prior to people using the service the provider undertook assessments of people's needs to make sure these could be delivered in line with standards, guidance and the law.
- People and others involved in their care had been involved in assessments and were asked for detailed information about their needs and how they would like their care and support to be provided.
- People's choices about how and when support was provided had been recorded in their care records. This helped to make sure staff provided support in line with people's wishes and needs. People's care and support needs were reviewed with them at regular intervals.

Staff support: induction, training, skills and experience

- People were supported by staff who received relevant training, to meet their needs. Staff refreshed their training at regular intervals to help them stay up to date and apply best practice.
- Staff received support in the form of regular supervision and an annual appraisal to support them in their role and to identify any further training or learning needs they had.
- •The provider encouraged staff to progress in their role and promoted staff in to more senior roles in recognition of their efforts and achievements. A senior staff member told us, "I hope to be the manager soon...I am being supported in to the role by [the provider and registered manager]."

Supporting people to eat and drink enough to maintain a balanced diet; supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- People were supported to eat and drink enough to meet their needs. One person said, "The meals are good."
- People could choose what they ate and drank. One person told us, "We do a weekly menu and we get to choose what we want."
- Staff understood people's specific dietary needs and preferences and took this into account when supporting people to plan and prepare their meals.
- People were supported to manage their healthcare conditions. People's records contained information for staff about how they should do this.
- People were supported to access healthcare services and attend their scheduled healthcare appointments. One person said, "The staff make sure I get to my appointments on time."
- Staff were observant to changes in people's health and wellbeing and sought the advice and support of

healthcare professionals when needed.

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.

- Staff empowered people to make their own decisions about their care and support.
- The service demonstrated best practice around assessing mental capacity, supporting decision-making and best interest decision-making.



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.

At our last inspection we rated this key question good. The rating for this key question has remained 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 were looked after well by staff. One person said, "The staff are very helpful...they treat us well." Another person told us, "The staff are good. They help me when I need them."
- People received support from the same staff so that the care they received was consistent.
- Staff told us they enjoyed supporting people and said the service was a good place to work. A staff member said, "I think we all work well together as a team. We work really well together with [provider's other service] and we all go out together and socialise together now. I think we are really trying hard to meet people's needs."
- People's wishes in relation to how their social, cultural and spiritual needs should be met were recorded so that staff had access to information about how people should be supported with these.
- Staff received equality and diversity training as part of their role. This helped staff make sure people were always treated fairly. A staff member said, "I treat everyone the same and make sure people are not discriminated against just because they have a disability. I make sure people know their rights to be treated well."

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

- People had been supported to express their views and be involved in making decisions.
- People's care records reflected the choices and decisions they had made about how their care and support was provided.
- People's feedback was obtained at regular intervals to make sure the care and support they received was continuing to meet their needs.

Respecting and promoting people's privacy, dignity and independence

- People were supported to be as independent as they could be. People's care records prompted staff to support people to undertake as much of the tasks of daily living as they could. One person said, "I'm quite independent. I can do things when I want to."
- Staff respected people's privacy and dignity. They obtained people's consent before providing any care and respected their choices and decisions about this. A staff member said, "I ask for people's consent and permission before I do anything. I respect their decisions about what they want. I have a good relationship with people and I respect their privacy when we chat."



Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained 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

- People had choice and control over how their care and support was provided. One person said, "I can do what I want, when I want to."
- People's records reflected their preferences and choices for how and when they received support. This helped to ensure people received support that was personalised and tailored to their needs.
- Staff understood people's needs and gave us examples of how they provided care and support to people in the way people preferred. A staff member said, "I know the guys really well and known them for a long time."
- Staff recorded the care and support they provided to people which helped the provider make sure people received the care and support planned and agreed.
- People's care and support needs were reviewed at regular intervals to check this was continuing to meet their needs.

Support to follow interests and to take part in activities that are socially and culturally relevant to people; supporting them to develop and maintain relationships to avoid social isolation

- People were supported to take part in activities and pursue interests that were important to them. They were encouraged to state their preferences and choices about the activities they did and staff made sure people could do these. One person said, "I help to plan the activities with the staff. I'm going shopping tomorrow and I'm out every day. I also go to college." Another person told us, "I go to college twice a week. I do photography at the moment. I like taking pictures when I can."
- A new minibus had been purchased by the provider which gave the service more flexibility to support people to undertake a wider range of activities and outings.
- People received support to maintain relationships with the people that mattered to them. One person said, "My friends and family can visit and come and see me."
- People had developed close friendships and relationships with people using the provider's other service and there were regular opportunities for people to meet up, have a meal or go out together. One person told us, "I go out and socialise with my friends and I go to [provider's other service] and see my [partner]...or [they] might come here. We have dinner together."

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.

• People's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.

Improving care quality in response to complaints or concerns

- The service had systems in place to deal with concerns and complaints, investigate them, learn lessons from the results and to share learning with the whole staff team.
- The registered manager confirmed the service had not received any formal complaints in the last twelve months.

End of life care and support

- None of the people using the service at the time of this inspection required end of life care and support.
- The registered manager understood how to seek advice and support from the relevant healthcare professionals should this be required. This would help to ensure people received the necessary care and support they would need at the end of their life.



Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. The rating for this key question has remained 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

- The management team were easily accessible, approachable and took a genuine interest in what people and staff had to say. One person said, "I can talk to the manager about anything." A staff member told us, "The managers are good now and the whole place works very well."
- The provider promoted a culture within the service that was focussed on people receiving high quality care and support. Staff were encouraged to put people at the heart of everything they did. A senior staff member told us, "The staff are passionate about their job and 100% there for people." A staff member said, "I am very passionate about what I do and it's important people get treated the right way."
- The management team worked directly with people and led by example. People knew them well.
- Staff were well supported by the management team. A staff member said, "[Senior staff member] is very supportive and approachable...amazing to work with." A senior staff member told us, "I feel so comfortable here and it's a very good environment to work in."
- People were provided opportunities to have their say about the service and how it could improve through regular meetings with staff. Staff used their feedback to plan or make changes to the care and support provided to people.
- Staff were encouraged to give ideas and feedback at supervision and staff meetings about how the care and support provided to people, could continually be improved.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care; 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 management team had the skills, knowledge and experience to perform their role, a clear understanding of people's needs and oversight of the service they managed. A senior staff member said about the registered manager, "The support from [registered manager] is great. They are always there. They will pick up the phone at any time and they jump in and help whenever you need them. I can go to them with any questions. They are always there."
- Staff delivered good quality support consistently. One person said, "I am quite happy with things." Another person told us, "It's a brilliant place. I am happy here."
- The provider undertook audits and checks to monitor and review the quality and safety of the service. These helped to ensure people were safe and experienced good quality care and support.

• The registered manager understood and demonstrated compliance with regulatory and legislative requirements. They also knew when to provide honest information and suitable support and apply duty of candour where appropriate.

Working in partnership with others

• The service worked with healthcare professionals involved in people's care. They made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current best practice in relation to people's specific needs.