

Leeds City Council

Leeds Shared Lives

Inspection report

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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?

Good ●

Summary of findings

Overall summary

About the service

Leeds Shared Lives Service is a shared lives scheme which provides people with short breaks and respite care, within shared lives carers own homes.

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. At the time of our inspection 21 people (referred to as customers) received personal care support.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

Customers were protected from the risk of abuse and avoidable harm by staff and carers who understood how to recognise and respond to concerns. Staff are employed by the local authority. Carers provide short breaks and day support in their own homes. Risk assessments had been developed to minimise the potential risk of avoidable harm. Carers had suitable training to ensure customers received their medicines as prescribed. The registered manager had robust safe recruitment procedures.

Relatives were positive about the service and said carers were kind and caring. Carers were respectful when discussing customers and promoted their independence. The care and support had been planned in partnership with customers and their relatives. One relative told us, "[Shared Lives] it's good, it works well and the carers care."

Staff had received regular training and supervision to support them in their roles. Carers also received regular training to update their knowledge and promote best practice. Customers were supported to have maximum choice and control of their lives and staff and carers supported them in the least restrictive way possible and in their best interests.

Customers received person-centred care which was responsive to their needs. Customers' communication needs had been assessed and where support was required these had been met. The registered manager managed any concerns and complaints appropriately.

The service worked in partnership with a variety of agencies to ensure customers received all the support they needed. Relatives and carers were happy with how the service was managed. Staff felt well supported

by the registered manager.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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

Rating at last inspection

The last rating for this service was good (published 23 September 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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.

Leeds Shared Lives

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Leeds Shared Lives is a shared lives scheme, they recruit, train and support self-employed shared lives carers (SLC) who offer accommodation and support arrangements for vulnerable adults within their own family homes in the community.

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

We gave the service 5 days' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection and carers and customers are often out and we wanted to be sure they would be available to speak with us.

Inspection activity started on 03 March 2020 and ended on 04 March 2020. We visited the office location on both dates.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection. The provider was not asked to complete a provider information return

prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with two relatives about their experience of the care provided. We spoke with seven shared lives carers and four staff. These included the registered manager, one social worker and two wellbeing workers.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Customers, carers and staff were safe and protected from abuse and their human rights were respected and upheld. Everyone told us training was provided and regularly updated. One relative commented, "[Family member] is completely safe, very safe.

Assessing risk, safety monitoring and management

- Staff assessed risks around behaviour, customers' health and carers' homes to keep customers safe. Staff and carers had up to date knowledge of areas of risk to keep customers safe. Risk assessments within the support plans supported a person-centred, positive, risk taking culture. One relative told us, "[Family member] is completely safe, very safe. I understand the need for protection and safeguarding. These people [carers] are very experienced."

Staffing and recruitment

- The registered manager followed safe staff recruitment procedures. All the necessary background checks, including criminal records checks being carried out with the Disclosure and Barring Service were carried out. This ensured only suitable people were employed as staff and carers to support customers who may be vulnerable.

Using medicines safely

- Customers received their medicines when they should. Carers who administered medicines had completed relevant training yearly. Carers told us the training gave them the necessary skills to administer medicines safely.

Preventing and controlling infection

- Staff completed environmental checks of carers' homes to ensure they were suitable for customers to stay in. Carers had access to personal protective equipment (PPE) such as gloves and aprons.

Learning lessons when things go wrong

- Accidents and incidents were appropriately recorded. The registered manager reviewed all falls and incidents to look for patterns and themes to minimise the risk of further incidents.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Customers had their needs assessed before they were matched with a carer. Information gathered during assessment was then used to create the customer's support plans.
- We saw the registered manager was aware of current legislation and guidance to achieve effective outcomes. This ensured customers received effective care which met their needs and protected their rights. Care and support for customers was reviewed regularly or when their needs changed.

Staff support: induction, training, skills and experience

- Staff and carers were competent, knowledgeable and carried out their roles effectively. Staff told us they regularly updated their training. Staff told us induction training allowed them to get to know their role. Carers said their training was refreshed yearly and regularly reviewed. One carer told us, "There is all sorts of training. It is very good. It keeps you up to date and consolidates what you know."

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

- Customers were supported to maintain a balanced diet. Support plans identified customers' favourite foods and regular brands of food customers liked. Carers supported customers to participate in the making of family meals and snacks.

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

- Carers supported customers to maintain their personal routines and attend their established activities. Staff liaised with local authority transport to ensure customers had consistent support to access services.
- If required, carers would support customers to scheduled healthcare appointments to maintain the customers health and wellbeing.

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.

- Staff and carers had completed training on the MCA. Carers were able to share examples of how they protected and empowered customers. The registered manager shared an example of advocating on behalf of a customer and supporting their right to make unwise decisions, following the appropriate capacity assessment.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 and carers had completed training in promoting equality and diversity. Carers gave examples of how they supported customers to use community-based services.
- Staff told us the service did not currently support anyone who identified as LGBT+ but they had received training to ensure their approach was appropriate. 'LGBT' describes the lesbian, gay, bisexual, and transgender community. The '+' stands for other marginalised and minority sexuality or gender identities. One staff member told us, "The training was really useful, gave me confidence and taught me not to assume things."
- Relatives and carers formed positive relationships through long lasting regular contact. One relative told us their family member enjoyed staying with their carer, "They see it as a holiday, and it has transformed my life." A second relative commented, "It is enormously successful, it's great. It has enriched two families."

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

- Customers met with carers before any care and support was agreed. Customers then met with carers for a drink, then for a meal and finally an overnight stay. This was a flexible, getting to know you process that allowed the customer to see if the carer is suitable. It also gave the carer the opportunity to see if the customer would fit with their home life.

Respecting and promoting people's privacy, dignity and independence

- Carers gave examples of how they promoted customer's independence. One carer said, "If you have a learning disability it doesn't mean that's it. Part of our role is about making customers more independent. It may take longer but it gives them an 'I can do that', attitude."
- All customers had their own private bedroom in the carer's home.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Leeds Shared lives used a matching process to ensure customers received support from carers who were able to meet their needs. One staff member said, "It is all about relationships, we cannot rush it. It's about the right customer with the right carer."
- Customers' care plans were personalised and written with customer's and their relatives' or main care provider's input as much as possible. Carers were familiar with customer's likes in terms of interests and social activities.
- The support plan format had been reviewed by the Leeds Shared Lives team. The registered manager told us, "We had document review workshops, gained feedback from staff and made changes so the support plans are more useable for everybody."

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.

- Customers' communication needs were part of their initial and ongoing assessments. Support plans identified what aids and support customers' required. For customers with limited verbal communication staff recognised the importance of face to face contact. One staff member said, "It's about getting to know the person and their non-verbal prompts. You see them at home and see them with the carer."

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

- Carers supported customers to develop and maintain relationships that mattered to them. There was a clear emphasis on helping customer's feel part of their carers' families. Carers and customers' relatives spoke warmly about seeing customers in these terms and how customers were supported to socialise with carers' families. One relative told us, "Customers are like an extended family." A second relative said, "[Customer] looks forward to spending time with carer's children and grandchildren."
- Carers enabled customers to maintain their employment and take part in valued activities. These included baking, bus rides, meals out and visits to the pub and theatre.

Improving care quality in response to complaints or concerns

- There were processes to ensure all complaints would be dealt with appropriately. Relatives told us they were happy with the care and had no reason to complain. Everyone we spoke with said they were very

confident if they ever had any concerns these would be dealt with professionally.

End of life care and support

- Leeds Shared Lives service did not currently support anyone with end of life care. The registered manager explained it would be difficult for specialised equipment to be in the customer's home and at the carers home. It would also have to take into consideration the ability of carers to support customers and the impact that level of care and support would have.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Leeds Shared Lives staff engaged with carers and customers to ensure everyone's needs were consistently met. One relative told us, "[Family member] has been to places and seen things she wouldn't have got to see without her carers." One carer said, "We see [staff member] on a regular basis. They communicate very well, it's like a circle of communication, you get to know people very well." A second carer commented, "I've got a lovely staff member, she is a really, really nice lady. If I have a problem, she's there with me, she's a good colleague to have."
- Staff spoke positively about the registered manager and the service provided. One staff member said, "I think [registered manager] is fabulously supportive. I cannot fault her." A second staff member commented, "This is a positive service, and everyone gets something out of it; which makes me happy."

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 knew how to share information with relevant parties, when appropriate. They understood their role in terms of regulatory requirements. For example, the provider notified CQC of events, such as safeguarding concerns and serious incidents as required by law. The previous inspection rating was conspicuously displayed.

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

- The service was in the process of recruiting additional team members. The registered manager said, "We have had approval to change the structure of the service. We will have additional wellbeing workers." The roles and duties of staff had been reviewed.
- The registered manager's quality assurance systems included regular monitoring visits and telephone calls with carers and relatives to evaluate the care and support customers had received. One relative said, "Usually after a visit I get a call to see how the visit has gone."
- The registered manager and staff worked alongside each other to provide care and support. There was a weekly meeting for staff to review carers skills and availability and customers' needs and plan the support required.

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

- The registered manager provided an open culture and encouraged carers to provide their views about how the service was run. The service had sought the views of carers and family members through care plan reviews and questionnaires. Relatives and carers told us they felt consulted about the service and listened to. A carer said, "They [Shared Lives staff] are very good, any problem they are there to help us."
- Staff said they had opportunities to make suggestions and pass on opinions through regular supervisions and team meetings. One staff member said, "We get to add to the agenda and it's a chance to share your views."

Continuous learning and improving care; Working in partnership with others

- The registered manager had procedures in place to respond to concerns about customers' care should they arise. Policies and procedures had been reviewed and updated based on feedback received.
- The registered manager was a member of an online Shared Lives group that promoted best practice. They told us, "It's a really good network. You can ask questions, there is shared learning with policy updates being posted."
- Customers received safe and coordinated care. Leeds Shared Lives Service worked with other services to ensure customers received ongoing support to meet their needs. For example, people moving from children to adult services and people who required support during a crisis.