

Lifeways Independent Living Alliance Limited

Independent Living Alliance

Liverpool

Inspection report

Laurie Courtney House
23 Greenland Street
Liverpool
Merseyside
L1 0BS

Tel: 01517082940
Website: www.ila.uk.com

Date of inspection visit:
05 March 2021
10 March 2021
11 March 2021

Date of publication:
30 March 2021

Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Independent Living Alliance Liverpool is a service that provides personal care and support to people in their own homes. The service provides support to people who have physical disabilities, sensory impairment, mental health support needs, a learning disability or autism. At the time of the inspection the service supported over 200 people however just 11 people received personal care. CQC only inspects where people receive personal care.

The monitoring systems in place did not identify the issues we highlighted during the inspection regarding some aspects of record keeping. The registered manager acted quickly to address the issues raised during the inspection.

Medication systems and procedures were regularly reviewed. People received their medicines as prescribed, by trained and competent members of staff. However, some areas of record keeping needed improvement to ensure staff appropriately signed records.

Each person had a detailed support plan stating their needs and requests how they wished to be supported. They were supported to take risks and to make decisions which reflected their preferences and individual needs. However, some aspects of their records needed further review to ensure record keeping was accurate and consistently maintained.

The outcomes for people using the service reflected the principles and values of 'Right care, right culture, right support' and other best practice guidance. However, some staff had no knowledge of this guidance. We have made a recommendation for all staff to have training and awareness in these values.

People were positive about the service and the staff supporting them.

Staff were very positive about the management of the service and felt well supported. Staff felt they received lots of relevant training necessary for their role. Training records and quality checks were submitted by the registered manager who agreed to review information to show improved clarity how they monitor staff records.

We were assured that infection prevention and control (IPC) measures were appropriately followed. Staff had access to regular training and supplies of protective equipment (PPE) to help keep people safe from cross infection.

There were sufficient numbers of staff recruited who were safely recruited. Management of staffing levels and rotas were not fully available initially. The registered manager has submitted information to show they have safe oversight to check people have enough staff in place to support them.

Rating at last inspection and update

The last rating for this service was rated 'good' published (4 September 2019.)

Why we inspected

We carried out an announced inspection to follow up on concerns we had received following a safeguarding referral to the Local Authority. The information The Care Quality Commission (CQC) received indicated that there were concerns around governance procedures. Please see the safe and well-led sections of this full report.

Our report is only based on the findings in those areas at this inspection. The ratings from the previous comprehensive inspection for the effective, caring and responsive key questions were not looked at during this visit. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used to calculate the overall rating at this inspection.

We looked at infection prevention and control measures under the 'safe' key question. We look at this in all services even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively

The overall rating for the service has remained 'good'. This is based on the findings at this inspection. We found evidence that the provider needs to make improvements. under well-led.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Independent Living Alliance Liverpool on our website at www.cqc.org.uk

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 well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

Independent Living Alliance Liverpool

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was undertaken by two inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in their own homes and supported living houses so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was announced. We gave 24 hours' notice for the inspection because we needed to be sure that staff would be in the office to support the inspection. Also, we wanted to gain the consent from some

people, to be able to visit them in their homes.

Inspection activity started on 5 March 2021 and was completed on the 11 March 2021.

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 local safeguarding team. 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.

We used all of this information to plan our inspection.

During the inspection

We spoke with eight people who used the service about their experience of the care provided. We spoke with four members of staff, a service manager as well as the provider and registered manager.

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

After the inspection

Due to the impact of the COVID-19 pandemic we limited the time we spent on site, Therefore, we requested records and documentation to be sent to us and reviewed these following the inspection visit.

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, learning lessons when things go wrong

- People said they felt safe and well supported by their staff team.
- Systems were in place to safeguard people from potential abuse. Staff had completed training and there was a policy in place to guide them in their practice. The registered manager understood their responsibility to report any safeguarding issues.
- A recent safeguarding review by the local authority found no concerns around the safety of people being supported by the service. However, they did find that some aspects of monitoring and checks within the service needed improvements. The registered manager and provider shared information about what actions they had taken to improve fire safety records and management of maintenance within people's own homes.
- Safety measures in place meant that incidents were minimised or prevented. The registered manager reviewed this information to ensure lessons were learned and steps taken to prevent recurrence, when necessary.

Using medicines safely

- Medication processes were regularly reviewed however we noted some aspects of record keeping needed improving such as staff accurately signing and dating documents. Managers were taking action in regard to improving staffs recording with medication records.
- The provider made sure that appropriate staff were trained and competent to support people with their medicines.

Assessing risk, safety monitoring and management

- Staff understood when people required support to reduce the risk of avoidable harm and people were involved in those decisions. However monitoring of records did not always identify issues with some aspects of staff record keeping.
- Emergency plans were recently updated to ensure people were supported in certain events, such as a fire safety.

Staffing and recruitment

- There were enough staff with the right skills to support people with their needs. People were positive about the staff and told us, "Yeah there's enough. No, no risks", "Yes enough staff." and "I like the staff I always have."
- The provider used safe recruitment practices to make sure staff were suitable to work with people within the service.

Preventing and controlling infection

- We were assured that the provider was promoting safety through hygiene practices and appropriate training with infection control for all staff. .
- We were assured that staff were provided with the appropriate PPE and essential COVID19 guidance.

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 deteriorated to 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.

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

- Systems were in place to monitor the quality and safety of the service. . However, these systems required further improvement to ensure they effectively identified all aspects of accurate record keeping of the quality checks of people receiving personal support.
- Further work was required to ensure that the provider has clear systems in place to oversee all checks and records completed by other members of the staff team to ensure they are completed robustly.
- The registered manager had worked to address most issues raised at the inspection. They acknowledged that record keeping was in place but needed further clarity to show governance arrangements for the 11 people supported within the service.
- The registered manager was aware of events and incidents that needed to be notified to CQC and these had been submitted appropriately.

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

- The culture of the service helped ensure good outcomes for people. Although we found no evidence of poor outcomes some staff were unaware of the principles and values of 'Right care, right culture, right support' and other best practice guidance. We also noted the use of an office within a supported living service. The provider agreed to review their use with all staff teams as they identified them as communal rooms rather than an office.

We have made a recommendation for the provider to review published guidance with all staff to ensure these values are imbedded and raise awareness within their staff teams.

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

- Accidents and incidents were reviewed and acted upon to ensure the service acted in a transparent way. The registered provider has agreed to share all actions, and recommendations from the local authorities' recent reviews. They showed a positive response in their reflection and motivation to continue improving the service.
- Records showed people's family members were updated and informed of any relevant incidents..
- Staff told us that they would not hesitate to inform the registered manager of any issues or concerns they

had.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The staff carried out regular reviews to gather peoples feedback about the service.
- Recent feedback received from other social care professionals was positive about the support people received. The service worked well in partnership with external agencies.
- Satisfaction surveys were circulated as a measure of capturing thoughts, views and suggestions relating to the provision of care. Although further clarity was needed to help identify the dates of the surveys carried out.
- People shared positive comments such as, "Yes I am involved in making decisions with them" , "The staff and manager are excellent, anything I could want I have" and ""Yes, did a feedback form, 6 months ago. May have been the first one? No reviews for a while. But I could be wrong."