

Livability

Livability North East

Inspection report

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Date of inspection visit:

31 October 2023

03 November 2023

06 November 2023

07 November 2023

17 November 2023

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11 December 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Livability is regulated to provide personal care and support to adults with learning disabilities and autistic people living in their own homes. At the time of the inspection there were 30 people using the service.

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.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

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 communicated with people in ways that met their needs. Staff focused on people's strengths and supported people to achieve their goals. People were supported safely with medicines. Infection prevention and control practices reflected current guidance. Risk assessments were in place and clearly outlined all presenting risks. It was very evident staff had ensured they fully understood the needs of people.

Right Care

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to people's individual needs. Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe. The service worked well with other agencies and were regularly complimented on how well they engaged with healthcare professionals and supported people to receive the healthcare they needed. People's care, treatment and support plans reflected their range of needs, and this promoted their wellbeing and enjoyment of life.

Right culture

People were supported by staff who understood best practice in relation to the wide range of strengths, impairments or sensitivities people with a learning disability and/or autistic people may have. This meant people received compassionate and empowering care that was tailored to their needs. Staff placed people's wishes, needs and rights at the heart of everything they did. People told us they were involved in recruiting

people who were to work with them and found this very useful. People and relatives were confident staff had the ability to meet their needs. Staff were aware of and were working to best practice guidance for supporting people with a learning disability and/or autistic people.

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 7 September 2018).

Why we inspected

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

This report only covers our findings in relation to the key questions safe and well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Livability North East on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Livability North East

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

An inspector carried out the inspection.

Service and service type

Livability North East provides personal care to people living in their own houses and flats. This service also provides care and support to people living in 30 'supported living' settings, 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.

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 were 2 registered managers in place, who oversee services in the different geographical areas.

Notice of inspection

This inspection was announced. We gave a short period of notice of the inspection because we needed to ensure the management team were available and to contact people to gather their feedback.

Inspection activity started on 31 October and ended on 17 November 2023. The inspector visited the office

location on 31 October and 17 November 2023. During the inspection we also visited people living in 'supported living' settings.

What we did before the inspection

We reviewed information we had received about the service. We also sought feedback from partner agencies and healthcare professionals. These included the local authority's contracts and commissioning services. We used all this information to plan our 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.

During the inspection

We met 6 people who used the service and received feedback from 2 relatives and 3 external healthcare professionals. We spoke with the 2 registered managers, 4 service managers and we received feedback from 66 care staff. We looked at people's care records, medicine records and a variety of management and quality assurance records for 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. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Using medicines safely; Preventing and controlling infection; Learning lessons when things go wrong

- Risk assessment were in place. Staff understood when people required support to reduce the risk of avoidable harm. The risk assessments were detailed and staff ensured they effectively planned for all potential risks. We discussed how these could be enhanced to make them more specific about people's needs and the registered manager immediately acted to put this in place.
- The provider had safeguarding systems in place. Staff had training and a good understanding of what to do to make sure people were protected from harm or abuse. People confirmed they felt safe using the service. One person told us, "It is great here, as I get to choose exactly how I want to live."
- People's medicines were managed in a safe manner. Staff were trained in medicines management and were assessed as competent to administer people's medicines.
- Effective systems were in place to mitigate the risk of people and staff catching or spreading infections.
- The registered managers critically reviewed the operation of the service and actively made changes as and when these were needed.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA.

Staffing and recruitment

- The provider operated safe recruitment systems to ensure suitable staff were employed. The provider had systems in place to ensure safe recruitment practices were followed. People told us they were involved in interviewing new recruits and in making decisions about who worked with them.
- There were enough staff to safely care for people. Staff found they could meet people's need throughout the night and day as well as being able to spend meaningful time with individuals.

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. At this inspection the rating 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; Continuous learning and improving care

- The registered managers promoted a positive, person-centred culture. The registered managers and staff put people's needs and wishes at the heart of everything they did. One external professional said, "I have always found Livability to be very professional and I think that they match their staff up with individual services users well according to service user needs. I have always found that the staff and management at Livability have a good knowledge of the people they support. And, on occasions, I believe that they have gone above and beyond for my clients. I would definitely say that the staff and management team do everything that they can to ensure that the clients' quality of life is promoted".
- People told us the registered managers were approachable and acted swiftly to address any issues. They ensured people and their families were involved in discussions about their care and support needs. People told us they were confident staff had the skills they needed to provide them with the right care.
- The registered managers consistently gathered people's views and ideas about the operation of the services, which were, where possible, acted upon.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements; 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; Working in partnership with others

- The provider and registered managers regularly reviewed the systems and processes in the service to determine if improvements were needed and where enhancements could be made. The provider's quality team also regularly completed audits of the service and again these were used to make continuous improvements.
- Reports had been sent to alert the CQC and local authorities when incidents occurred. The registered managers closely reviewed all incidents and ensured all relevant parties were involved in this process.
- Staff were passionate about providing good care outcomes and took ownership of their practice. They understood their roles, responsibilities and they were accountable for their actions.
- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing. These links had led to staff being able to support people make lifestyle changes to improve their health, which in turn improved their quality of life.