

Lifeways Community Care Limited

Lifeways Community Care (Sunderland)

Inspection report

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23 November 2020

25 November 2020

16 December 2020

17 December 2020

19 January 2021

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Lifeways Community Care (Sunderland) provides a supported living service to people within their own homes or shared houses. The service provides personal care and support to 94 people with learning disabilities, autism spectrum disorders and mental health needs.

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.

The service had a registered manager who was working their notice at the start of inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, 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 providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting some of the underpinning principles of Right support, right care, right culture. Systems were being introduced or strengthened across the organisation to ensure the right culture was being promoted.

A governance system was in place to monitor the quality of the service through audits and feedback received from people, their relatives, staff and external agencies. However, some improvements were needed. External audits were not carried out to check the effectiveness of the audits carried out and to observe staff practice.

We have made a recommendation about continuing to strengthen systems, including quality assurance systems, to ensure an open culture across the organisation.

The vision of the service ensured people with learning disabilities had opportunities to be part of the community. They were supported to make choices and achieve their aspirations. Staff adopted the ethos to provide person-centred care that enabled individuals to develop skills and behaviours to live more independent lives.

Information was accessible to involve people in decision making about their lives. 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 knew the people they were supporting well. People's care records were well-personalised and up-to-date. There was clear evidence of joint working and strong communication with other professionals to help meet people's needs.

Systems were in place to protect people from abuse. One person told us, "I feel safe because I have privacy and the protection of very good staff." There were enough staff available to provide individual care and support to each person. Due to the pandemic there had been some changes to the usual staff team supporting people but this did not poorly impact people's care.

Arrangements for managing people's medicines were safe.

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 10 July 2017).

Why we inspected

We had received concerns in relation to management and culture at another of the provider's services where we found improvements were required. As a result, we undertook a focused inspection at this service to review the key questions of safe and well-led and parts of the caring key question to check the culture of the domiciliary and supported living services.

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 in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. However, the quality assurance system needed to be strengthened as described above. Please see the safe, caring and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lifeways Community Care Sunderland on our website at www.cqc.org.uk.

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 caring?

Good 

Inspected not rated.

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question where we had specific concerns.

Is the service well-led?

Good 

The service was well-led.

Details are in our well-led findings below.

Lifeways Community Care (Sunderland)

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. This was a focused inspection

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 site visit was carried out by one inspector. Two inspectors visited people in their supported living accommodation. An Expert-by-Experience supported the inspection remotely. 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 a number of '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.

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 48 hours' notice of the inspection. This was because it is a large service operating during

the pandemic 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 23 November 2020 and ended on 17 December 2020. We visited the office location on 25 November 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We communicated with 17 people who used the service, and 15 relatives about their experience of the care provided. Not everyone who used the service, communicated verbally or wished to speak on the telephone. Therefore they gave us permission to speak with their relative. We spoke with 14 members of staff including the acting area manager, registered manager, service manager, administrator and nine support workers.

We reviewed a range of records. This included nine people's care records and multiple medicine records. We looked at six staff files in relation to recruitment. A variety of records relating to the management of the service including policies and procedures were also reviewed.

After the inspection

We looked at training information and 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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Improvements had been made to medicines management since the last inspection.

Using medicines safely

- Medicines were managed safely. Where people required support to take prescribed medicines, up to date risk assessments and care plans were in place to ensure staff understood how to provide this support in a safe managed way. One person commented, "I take my medicine myself but I can check with staff if I need to."
- Where people were prescribed 'when required' medicines, guidance was available for staff to follow.
- Systems were in place for the ordering, storage, administration and disposal of medicines.

Assessing risk, safety monitoring and management

- Risks were assessed to ensure people were safe and staff took action to reduce the chances of them occurring. One person told us, "I was falling regularly at home, but I've had no falls here."
- Care plans contained explanations of the measures for staff to follow to keep people safe, including how to respond when people experienced behaviours that may challenge.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff were trained in safeguarding and had access to guidance about what to do to report any concerns about abuse.
- People and relatives said people were kept safe. One person commented, "I feel safe because I have staff here to help me."

Staffing and recruitment

- There were enough staff to support people flexibly. Some people received individual support from one or two staff members. The registered manager told us staffing capacity was determined by the number of people using the service and their needs.
- The provider helped ensure people received support in the event of an emergency. Managers were able to be contacted outside of office hours should staff or people require advice or support.
- Systems were in place to ensure only suitable people were employed.

Preventing and controlling infection

- Staff had received training in infection control practices, including working safely during the pandemic to reduce the spread of infection.
- Protective equipment, (PPE) including masks, was provided for staff. We observed PPE was not worn

appropriately by staff in one household and this was addressed by the area manager and action was taken.

- Staff encouraged people to learn how to keep their home clean. One person commented, "I like hoovering, I'm good at it, I wait for staff to help me."

Learning lessons when things go wrong

- Accident and incident reports were analysed, enabling any safety concerns to be acted on.
- De-briefings took place with staff and reflective practice at staff meetings to analyse any incidents.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question where we have specific concerns.

Ensuring people are well treated and supported; respecting equality and diversity

- People were provided with kind and compassionate care. People and their relatives were positive about the care provided. One person commented, "The staff are great, I can talk to them about anything."
- Records contained information of people's likes, dislikes and preferences. One person told us, "I have a lovely flat, I'm learning to cook, I sometimes just want a sandwich and make that myself."
- People's equality, diversity and human rights were respected. People were supported to follow their faith and live their lives the way they wanted to.
- Staff worked with people investing time in ensuring they were given the right level of support to promote their understanding and to decrease behaviours that could be considered challenging.
- Most staff communicated with people in a caring, patient way. An unsympathetic interaction, we observed, was followed up and immediate action was taken by the provider.

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

- People were supported to express their views so that staff understood their preferences, wishes and choices. One person told us, "Staff are really helpful and support me to do anything I choose." People were directed to sources of advice and support or advocacy.
- People who may need support with decision making were encouraged to make choices about their day-to-day lives and staff used pictures and signs for some people to help them make choices and express their views.
- Information was accessible and was available in a way to promote the involvement of the person.
- People were supported to get involved in the running of the households. They selected their menus and leisure activities.

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

- The ethos of the organisation promoted openness and inclusivity.
- Improvements to some systems had been recently made, as a result of findings at inspections, in some other of the provider's services. However, they needed to be consistently maintained and embedded to ensure that a positive, person-centred culture was available across the whole organisation.

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

- The registered manager understood their role and responsibilities to ensure most notifiable incidents were reported to the appropriate authorities if required.
- Regular internal checks and audits were completed to monitor service provision, but external checks were not taking place to check the effectiveness of the audits carried out internally and to observe staff practice. The acting area manager told us this was planned.

We recommend the provider continues to strengthen systems, including governance, to ensure that an open, person-centred culture prevails across the organisation.

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

- The registered manager promoted an ethos of involvement to keep people who used the service involved in their daily lives and daily decision making.
- People were involved in decisions about their care. They were encouraged to be involved in the running of the service. Regular group meetings also took place with people.

Continuous learning and improving care; working in partnership with others

- There was a focus on learning and improvement.
- Staff communicated effectively with a range of health and social care professionals and advocated when necessary to ensure that the person's needs were considered and understood so that they could access the support they needed.

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 understood the duty of candour responsibility, a set of expectations about being open and transparent when things go wrong.