

# Independent Options (North West) Shared Lives Scheme - Independent Options (Northwest)

## 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

Shared Lives Scheme – Independent Options (Northwest) is a shared lives scheme providing accommodation and support for people who need support with everyday living. The service provides both short and long-term placements within shared lives carers' homes. At the time of our inspection approximately 50 people were being supported.

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

People were kept safe through assessments of their needs and risks they might be exposed to. Background checks were done on people before they were accepted as shared lives carers. Processes were in place to ensure people received their medicines as they had been prescribed.

The service worked well with other support providers to get to know people before they moved into the shared lives scheme. They also shared information to other organisations when people left the scheme to make the move as smooth as possible. People were encouraged to make the decisions they could about their lives and the support they received.

People were treated with compassion and kindness. People told us they were happy in their placements and felt part of the families they lived with. We saw how shared lives carers had built people's confidence over time enabling them to become more independent.

People were respected as individuals and both office staff and shared lives carers understood the importance of this. People's support records reflected their choices, including those arising from their culture or background. Information was available in a variety of formats so it was accessible and understandable to people.

The registered manager and the staff team understood the importance of monitoring the quality of the service. A variety of methods were used to involve people and their carers in developing the service. The staff team worked to raise the profile of shared lives as an alternative way of supporting some people.

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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 16 December 2016).

#### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Shared Lives Scheme - Independent Options (Northwest)

## **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 team consisted of one inspector.

### Service and service type

Shared Lives Scheme – Independent Options (Northwest) 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 a short period notice of the inspection because some of the people using it could not consent to a home visit from an inspector. This meant that we had to arrange for a 'best interests' decision about this.

Inspection activity started on 11 June and finished on 4 July 2019. We visited the office location on 11 June 2019.

### What we did before the inspection

We reviewed information received about the service since the last inspection. This included information from the general public, other organisations and notifications from the provider about incidents happening in 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 spoke with three people using the service, six shared lives carers, and five members of staff including shared lives managers, the registered manager, the human resources director and the chief executive.

We reviewed a range of records. This included four people's support plans and a variety of records relating to recruitment and management of the service, including policies and procedures.

# 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

- Safeguarding procedures to protect people from the risk of abuse were in place.
- Shared lives carers underwent regular training in safeguarding and understood its importance. A shared lives carer we spoke with told us, "[The service] is big on speaking up if you're concerned about anything."
- A workshop relating to safeguarding had been held for shared lives carers. The registered manager explained, "We wanted to look at the dangers within shared lives and what the safeguarding issues were."

Assessing risk, safety monitoring and management

- People's needs were assessed prior to them moving onto the shared lives scheme to ensure their needs could be met by the shared lives service.
- Risks arising from people's choices were managed to allow the person to do the things they wanted to do in as safe a way as possible. The registered manager told us, "We don't have a problem in saying that we need more information or we can't take the referral if we don't think it's safe."
- A shared lives carer we spoke with explained, "Independent Options have done risk assessments for [the carer's home] and we assess activities together to make sure they are as safe as they can be."

Staffing and recruitment

- Checks were done on the background and previous conduct of people before they were accepted as shared lives carers. These included checks with the Disclosure and Barring Service (DBS). The DBS informs potential employers if people have any convictions or cautions enabling employers to make safer recruitment decisions.
- A manager of the service told us, "We dedicate a lot of time to get to know the potential carers. We need to make sure they are the type of person we can match with our service users. We take into account the person's hobbies and interests to get a good match between them and the service users." The registered manager added, "We want to target LGBT people to offer people a broader choice of placements. We've attended a North West LGBT carers meeting to raise our profile."
- Shared lives carers we spoke with told us they felt their induction had given them the skills and understanding they needed.

Using medicines safely

- Processes were in place to ensure people received their medicines as prescribed.
- Regular reviews were conducted to ensure people were receiving their medicines. People's care plans reflected any changes to their prescribed medicines.
- A shared lives carer we spoke with told us, "We just let the manager know if anything has changed and

they will sort anything that needs doing."

- Where paper records were not appropriate for people, electronic processes had been put in place to ensure accurate records were kept of what medicines people had taken.

Preventing and controlling infection

- Shared lives carers underwent infection control training and were aware of infection control practices.
- Cleanliness of carers' homes was monitored during regular checks by shared lives managers and the homes we visited were very clean.

Learning lessons when things go wrong

- The service used learning from incidents and complaints to improve the service.
- A shared lives manager told us, "Not all placements work and we're quite happy to come back and say it hasn't worked. We look at why it hasn't and learn from it."
- The registered manager said, "Following a safeguarding we identified we needed to do some training. We picked bits out of the care certificate that would give the carers what they needed."

# 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

- People's needs were assessed and regularly reviewed in line with current guidance.
- People's support plans detailed what was important to the person and what they wanted to achieve from their placement. A shared lives manager explained, "Does the person want to get out and about and what sort of things do they want to do? We have some people who want to be busy and want it to feel like a holiday and some who just want to spend time with the carers."
- Information about people's background and cultural choices was recorded enabling carers to support the person in line with their choices.

Staff support: induction, training, skills and experience

- Shared lives carers we spoke with told us they felt they had the skills needed to support people safely.
- One shared lives carer told us, "We used to have to do days out for training but now we can do it online when it suits us. It's much easier for me."
- Part of the regular reviews of placements was to check on the wellbeing of the shared lives carers. Carers we spoke with told us they felt well supported by management.

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

- People were encouraged to eat balanced meals as part of a family environment.
- One shared lives carer we spoke with told us, "When [person] first came to stay with us they wanted to eat in their room but we have encouraged them to eat with the rest of the family."

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

- The service worked well with other organisations to achieve good outcomes for people.
- The managers had built good relationships with other providers to share appropriate information with them when people moved between services. People told us they had moved into their placements over a period of time and hadn't felt rushed.
- People were encouraged and supported by their carers to attend appointments with other healthcare services.
- The registered manager told us, "If someone moves to another service then we will share our documentation with the new provider and the local authority. We make it clear that the new provider can phone and ask questions at any time."

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service was working within the principles of the MCA.
- Appropriate applications were made to authorising bodies when people were deprived of their liberty. These were tracked to ensure applications and authorisations remained current.
- People's support plans emphasised what decisions they could make and what support they required to make decisions for themselves. One example we saw read, "[Person] can't make big decisions but can choose what toys or food they would like if shown and given choices."

# 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

- People told us they were happy and felt well looked after in their placements. A person we spoke with told us, "I came here for a night and I liked it. I've been here eight years."
- People were included in activities and treated as equals to family members. One person we spoke with told us, "We just do normal things like trips to the café. I like to do my own thing." Other people were planning holidays with their shared lives carers and family.

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

- People were given choice in how they were supported.
- We saw people made choices in how they spent their day and what support they wanted. An example of this was a person had an informal agreement with their carer so the person had freedom and independence to go out with their friends but had agreed to let the carer know where they would be and that they would return home at an agreed time.
- Choices made according to people's background and culture were respected and reflected in the way they were supported and the activities they did.

Respecting and promoting people's privacy, dignity and independence

- People told us they valued the privacy their placements gave them. One person we spoke with told us, "When I moved here I finally got my own bedroom. It feels like it's mine; I'm king of my own kingdom."
- People were encouraged to develop their independence. We saw examples where people's confidence had built over time allowing them greater freedom and independence than they previously had.
- Wherever possible, people were encouraged to have responsibility for their own money and budgeting.

# 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

- People were supported as individuals according to their needs and choices.
- Shared lives carers understood the importance of treating people as individuals. One carer who was supporting two people told us, "One is one person, the other is the other. They are just different."
- People's support records were person centred and detailed what the person wanted to achieve and how shared lives carers could support this.

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.

- People's communication needs were identified and recorded in their support plans so the information could be shared with other support organisations to help them communicate with the person.
- Support records were written in an easy-read format with pictures to help people understand them. Policies and procedures were also available in easy-read formats.

Supporting people to develop and maintain relationships to avoid social isolation

- People were well supported to take part in activities that interested them.
- People we spoke with gave us examples of activities they enjoyed and activities they were looking forward to. People's days were busy and when we were arranging home visits to speak to people, it was sometimes difficult to find a time when they didn't have activities planned.
- Many people had been supported to find volunteer roles or paid employment. Other people were attending college courses to learn new skills.
- People were supported to maintain contact with their families, both through the use of technologies like video calling and by visiting them. We saw examples where trips overseas had been arranged so people could see their families.

Improving care quality in response to complaints or concerns

- The service welcomed complaints and viewed them as an opportunity to improve.
- People told us they felt able to raise concerns and were confident they would be dealt with. Shared lives carers we spoke with shared this view. One carer told us, "If I tell them something on a monitoring visit then it gets sorted in a couple of days."

- The service made staff accessible at day services so people could raise concerns away from their shared lives carers. A shared lives manager explained, "They may not want to mention it during a monitoring visit if it's something about the carer so we go to places where people are away from their carer and speak to them."

#### End of life care and support

- The service was able to support people at the end of their lives.
- People's wishes were discussed with them and recorded in their support plans so they could be supported in the way they chose as they approached the end of their life. If people chose not to discuss it, their choice was respected.
- At the time of our inspection, specific paperwork was being adapted from another service run by the same provider to better capture people's wishes.

# 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 requires improvement. At this inspection this key question has now improved to 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

- The service had an open culture with the focus on the people they supported.
- People and staff felt the management were approachable and would listen to concerns or suggestions they had. One staff member commented, "[The registered manager] likes to find solutions, there is always a solution."

Managers and staff being clear about their roles, and understanding 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

- The registered manager understood their responsibilities and regulatory requirements.
- The management team supporting them were experienced and demonstrated a culture of openness and were confident in challenging each other to improve quality within the service.
- Notifications of incidents happening in the service were completed and sent to CQC and other organisations as required.

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

- A number of groups were established to try to engage people in developing the service. Shared lives carers had an encrypted messaging group and met regularly to identify any issues or suggestions they had which they would then be passed to the registered manager.
- The registered manager and other senior members of the organisation had attended a variety of events to help raise awareness of what shared lives means and how it can be an alternative to supported living for some people.

Continuous learning and improving care; Working in partnership with others

- The management team understood the importance of continuous improvement. A number of internal quality assurance checks were in place.
- Relationships were established with nearby local authorities and the registered manager was participating in projects with the Greater Manchester Partnership.
- The registered manager told us, "We are trying to build the relationships further to see how we can improve. We are looking at whether social workers can become a liaison person between us and the commissioning teams at the local authorities."

