

Lifeways Community Care Limited

# Lifeways Community Care Limited (Bolton)

## Inspection report

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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

### About the service

Lifeways is a national supported living scheme. Lifeways Community Care Limited (Bolton) provides support for people living in the community in 26 group home settings and caters for people with a diverse range of needs, such as learning disabilities, autism and acquired brain injuries. The office is located in Bolton.

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

People said they felt safe at the service. Systems were in place to address any safeguarding concerns and staff were aware of the procedures. Risks were thoroughly assessed and managed. Health and safety checks and certificates were in place and up to date.

Systems for managing medicines were safe and staff had completed appropriate training. Infection control and prevention systems were appropriate and all guidance was followed.

People were well treated and interactions with staff were friendly and relaxed. Staff supported people to reach their personal goals. There was evidence of people's involvement and inclusion in all aspects of their care and support. People were well presented and staff supported them sensitively with personal care tasks.

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.

The provider responded openly and honestly to complaints and concerns. Notifications were submitted as required to CQC.

Staff were recruited safely and staffing levels were sufficient to meet people's needs. Staff induction was thorough and training was on-going and of a good standard. Management were supportive towards staff.

The service completed a number of audits and checks to inform improvements. The service worked well with other agencies and professionals.

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 statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. The model of care, with small group settings, ensured people were able to have

choice and control. Care was person-centred and people's dignity and privacy promoted. Management and staff demonstrated values and behaviours that confirmed the right culture.

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 2 November 2018).

#### Why we inspected

We received concerns in relation to general care and treatment. As a result, we undertook a focused inspection to review the key questions of safe, caring and well-led only.

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.

The overall rating for the service has remained good. This based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern.

#### 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 caring?**

The service was caring.

Details are in our caring findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-led findings below.

**Good** ●

# Lifeways Community Care Limited (Bolton)

## **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 carried out by two inspectors.

#### Service and service type

This service provides care and support to people living in 26 'supported living' setting, 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 a short period notice of the inspection because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

### 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. 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 five people who used the service about their experience of the care provided. We spoke with 15 members of staff including the registered manager, two service managers, two team leaders and ten support workers.

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

### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We contacted two health and social care professionals who regularly visit the service for their feedback.

# 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

- There were appropriate systems and processes at the service to help safeguard people from the risk of abuse.
- People said they felt safe and from our observations they were comfortable and relaxed with staff.
- Any safeguarding concerns were logged and escalated appropriately, with clearly documented actions, outcomes and learning.
- Staff we spoke with were confident in how to recognize, record and report concerns around safeguarding or poor practice. A staff member said, "If I saw ill practice or I didn't think people were getting proper support, I'd feel confident raising it."

Assessing risk, safety monitoring and management

- The service ensured risks were thoroughly assessed and safety issues were monitored and managed.
- All required health and safety risk assessments, regular checks and audits were complete and up to date.
- Certificates relating to fire, gas and electrical safety were in place.
- Care files included individual risk assessments with guidance on how to minimize the risks presented.

Staffing and recruitment

- Staff were recruited to the service safely and staffing levels were sufficient to meet people's needs appropriately.
- Staff told us their teams were supportive of each other and they enjoyed their work. One staff member said, "It is nice to get up in the morning and come to work."
- One staff member said, "We have two and three people in the morning and we can meet everybody's needs. I think it would be nice sometimes to have a third person in the afternoons so we can do more activities."
- Some staff felt they struggled if asked to cover in a property they were unfamiliar with. Discussions were on-going with management on how to manage this best, to ensure staff were confident in all settings.

Using medicines safely

- Medicines were managed safely at the service, with good systems in place for all aspects of medicines governance.
- Some topical creams needed to be stored below a certain temperature and it was unclear if this was the case. The registered manager addressed this immediately.
- Staff had completed medicines training and regular competence checks were undertaken to ensure their skills remained appropriate. One staff member told us, "I give them (medicines) first and sign for them after, I'll check the Medicines Administration Records MAR's first though, so I know I'm giving the right thing."

- The Bolton service had won the provider's internal gold award for medicines competency in November 2020 and they were very proud of this achievement.

#### Preventing and controlling infection

- There were good systems in place to prevent and control infection.
- There was a procedure in place to ensure visitors to the service followed current guidance. Temperatures were taken on arrival, people were required to sign in, sanitize their hands and wear appropriate personal protective equipment (PPE), such as a face mask.
- Staff had received all relevant infection control guidance and training and were aware of how to use the PPE needed during the COVID-19 pandemic.
- The service was aware of where to access further information, guidance and advice if required.

#### Learning lessons when things go wrong

- The service ensured lessons were learned from any incidents, accidents or safeguarding concerns.
- Learning outcomes were shared with staff to help prevent further similar 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. 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 were well treated and supported and their diversity was respected.
- We observed positive interactions between staff and people who used the service throughout the day.
- People were happy and felt they were supported well. One person said, "I do like it here, staff are very kind."
- Care files included information about people's diverse needs, wants and preferences. Personal goals and outcomes were documented and these were unique to each individual. For example, one person was proud to have learned to cook their favourite meal.
- In one property we saw some goals which were more concerned with positively addressing behaviours that challenged. We discussed this with the management and they immediately changed the format so that these targets were moved to another section of the care plan.

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

- People were supported to express their views and be involved in decision making around their care.
- It was clear from the minutes of tenants' meetings and newsletters that people were very much included in all aspects of their care and support.
- Support plans were written from the individual's perspective, with easy read information to assist their understanding and inclusion.
- We saw evidence of people who used the service being involved in interviewing potential new staff. There was easy read guidance on assisting with the interview and evaluation to help the person assess what worked well or could be improved at the next interview.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- People were well presented and staff supported them sensitively with personal care tasks. One staff member said, "With the people we support, the first thing is make sure you stay with the person throughout. Then planning when you go out, where the facilities are, taking clothes and pads with you. Working at their pace."
- Dignity posters were displayed in the registered office and, prior to lockdown, people and staff had participated in a dignity day with quizzes and discussions. This had been a great success and people had engaged fully in all aspects of the day.

# 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 culture of the service was positive and care files evidenced person-centred support.
- There was documentation of how people communicated and engaged with others, for example, 'I do not like to be asked too many things at once' and 'I like to be asked one question at a time'. This helped ensure positive engagement with individuals.
- Goals were realistic with regard to people's level of ability. For example, one person wanted to join a gym. When goals were reached these were celebrated within meetings and in the regular newsletter.

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 provider was open and honest and ensured they responded promptly and candidly to complaints and concerns.
- Safeguarding issues were reported immediately and the service cooperated fully with any investigation. A health and social care professional told us, "The speed and transparency in which Lifeways as an organisation have dealt, and continue to deal with these situations, actually suggests to me an open and honest approach, with full and transparent disclosure."
- Notifications were submitted as required to CQC.

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

- Managers and staff were aware of the requirements of their roles and the importance of quality standards.
- Staff induction and training was of a good standard and staff received ongoing support via individual supervisions and staff meetings.
- A new quality checkers initiative for 2021 was being implemented, to include people who used the service, working with the compliance officer, to assess and feedback on their own and others' lived experience. This was to inform change and improvement going forward.

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

- Assessments ensured any protected characteristics were identified so that the service could support each individual appropriately. A health and social care professional commented that, in assessing an individual recently, "Lifeways demonstrated an excellent understanding of the positive impact of approaches and

support on individuals in what were difficult circumstances."

- Quarterly newsletters ensured people, their relatives and staff were kept up to date with celebrations, stories, news about staff, activities, upcoming events and the latest COVID-19 guidance.
- Staff felt well supported by the management. One staff member said, "They're very supportive about staff concerns." Another staff member commented, "I was nervous about coming here, but have felt supported from the word go."
- The registered manager had recently commenced a weekly video call with staff where they could ask questions, share good news stories and make suggestions for improvements to service provision.

Continuous learning and improving care

- The service ensured continuous learning and improvement via audits and checks.
- Regular spot checks of the individual properties were carried out by the registered manager.
- Positive feedback was given and any issues or concerns evaluated to look at how these could be addressed.
- Quality audits were completed on a monthly basis and all aspects of the service were included in this.

Working in partnership with others

- The service worked well in partnership with other agencies, such as the local authority teams, the Clinical Commissioning Group, mental health teams and district nurses.
- One health and social care professional told us, "Anything I ask the registered manager for, they are straight on to it."