

Wigan Link

Wigan Link

Inspection report

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Ratings

Overall rating for this service

Outstanding



Is the service safe?

Good



Is the service effective?

Good



Is the service caring?

Outstanding



Is the service responsive?

Outstanding



Is the service well-led?

Outstanding



Overall summary

This was an announced inspection carried out on the 07 and 08 September 2015. The inspection was announced so that the manager would be available at the office to facilitate our inspection.

The service was last inspected on 13 August 2013 and at the time was meeting all regulations assessed during the inspection.

Wigan Link, is a local registered charity that provides support services for adults whose primary need for care is due to their learning disability. Support is provided for people, with varying complex needs, who choose to live

alone or who share a home with others. Wigan Link provides support to people living in Wigan and Leigh. At the time of this inspection there were 28 people who used the service.

There was a registered manager in post. 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.

Summary of findings

Wigan Link provides a range of support, from people receiving a few support hours several times a week, to 24 hour support for people in their own home. People live in shared ownership housing, private rented or local authority housing. This means they have tenancy agreements with a landlord and a separate agreement to receive their care and support from Wigan Link. As the housing and care arrangements are entirely separate, people can choose to change their care provider without losing their home.

The registered manager was one of the founders of Wigan Link 15 years ago and it has remained a family led service. Wigan Link demonstrated a strong emphasis on empowering people to voice their opinions and views. The management committee of Wigan Link was made up of people receiving support, parents with sons/daughters described as people with “learning disabilities”, working with other parents, and advisors from the Local and Health Authorities.

People receiving support, relatives and care staff consistently told us that the service was well run and provided positive leadership. There was a strong emphasis on people pursuing full, active lives in their own communities. The registered manager was involved in the local drama group and empowered people receiving support to be involved and engage in activities of their choosing in the community. People receiving support, relatives and staff had a positive and affectionate regard for the registered manager and the management team at Wigan Link.

We looked at how the service managed risk. The registered manager told us the service had developed a person centred approach to risk that was assessed in conjunction with the people who used the service, their families and staff. It was based on listening to what was important to people. We found individual risks had been completed for each person and recorded in their guidelines. The guidelines were reviewed and updated when there was a change in risk.

We looked at 10 personnel files and found people were protected against the risks of abuse because the service had robust recruitment procedures in place. We found appropriate criminal records bureau (CRB) disclosures or Disclosure and Barring Service (DBS) checks had been undertaken and appropriate references obtained before new staff commenced employment with the service.

We looked at how the service ensured there were sufficient numbers of staff to meet people’s needs and keep them safe. We looked at the staff rotas. We found the service had sufficient skilled staff to meet people’s needs. People receiving support and staff told us any shortfalls, due to sickness or leave, were covered by existing staff which enabled continuity of service and ensured people were looked after by staff who knew them.

People receiving support were involved in recruitment and we found that all new members of staff underwent a comprehensive induction programme, which was designed to welcome them to the service and support them during the probationary period. We reviewed training records, which were up to date and included refresher training courses to enable staff to develop their skills and knowledge. Care staff confirmed they received regular supervision and appraisals, which we verified by looking at staff personnel records.

We considered the Mental Capacity Act (MCA), Deprivation of Liberty Safeguards (DoLS) and obtaining consent from people. We saw that the service had been involved with the Local Authority undertaking mental capacity assessments. There was nobody in service subject to DoLS and although staff had not attended training around the Mental Capacity Act they demonstrated a good understanding of obtaining consent and best interest decisions.

The feedback we received from people was positive. Those people who used the service expressed great satisfaction and spoke highly of the registered manager and staff.

We asked people and their relatives how they felt about the caring approach of the staff. Without exception, people and relatives praised the staff for their caring and professional approach. One relative said, “We call them the A team, I can’t fault them. They’re always on time. Very regular. All work as a team. They take care for the person and they are also friends.”

People were at the heart of the service, which was organised to suit their individual needs and aspirations. People’s achievements were celebrated and their views were sought and acted on. People were supported by staff that were compassionate and treated them with dignity and respect. We spoke with five people receiving

Summary of findings

support from Wigan Link and nine relatives. Without exception, people who used the service and their relatives were complimentary and positive about the staff that supported them.

People were active members of their local community and led busy and fulfilling lives. There was evidence of positive outcomes for people, and that people had pursued new opportunities, progressed over time, gained new skills and increased their independence. People were enabled through positive risk taking, to challenge themselves to achieve and fulfil their ambitions. One relative told us, “The essential lifestyle plan captured our hopes, dreams and fears. How we wanted support to be. This is updated and tested regularly.”

People told us that the service had made a real difference to people’s lives. Three people we spoke with told us their

relatives were living better lives than previously; they were doing more and becoming more independent. Three people told us their relative had previously lived at home leading a protected life and not going out much. They had nothing but praise for the service in enhancing their relative’s lives.

People told us the service engaged consistently and meaningfully with families. The nine relatives that we spoke with reported feeling involved and being part of an extended family. They reported the service to be responsive, open and transparent and feeling actively involved in all aspects of care. A member of staff told us, “Everything is flexible and responsive; it’s down to us having a good knowledge, information and understanding of the person.”

Summary of findings

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. People were protected from harm. People had confidence in the service and told us they felt safe.

There were safe and robust recruitment procedures in place.

Management and staff had a good understanding of what constituted abuse and were able to describe the action they would take if they witnessed or suspected abuse or neglectful practice.

People's medicines were managed safely by staff who had received appropriate training.

Good



Is the service effective?

The service was effective. We found all new members of staff underwent a comprehensive induction programme.

We looked at supervision and staff training records and spoke with staff about the training and supervision received

The service was meeting the requirements of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS) and people were able to make safe choices and decisions about their lives.

People were involved in discussions, decisions and relevant training about their health needs and lifestyle choices and were supported to reach their goals.

Good



Is the service caring?

The service was caring. Without exception, people and relatives praised the staff for their caring and professional approach.

People and staff had high expectations of what people could achieve and achievements were celebrated.

People and relatives told us they were involved in making decisions about their care and were listened to by the service. They told us they had been involved in determining the care they needed and had been consulted and involved in their care.

Outstanding



Is the service responsive?

The service was responsive.

People told us the service engaged consistently and meaningfully with them and their families.

People's care was based around their individual needs and aspirations. The service had creative ways of ensuring people led fulfilling lives. People were supported to make choices and have control of their lives.

Outstanding



Summary of findings

People were consulted and involved in the running of the service, their views were sought and acted on. People were encouraged to make friends, learn new skills and be involved in their local community.

Is the service well-led?

The service was well led by an open and approachable team.

The management group was made up of parents, sons/daughters.

We found the service promoted an open culture, was person centred, inclusive, open and transparent. As part of the recruitment policy, people who used the service and families were able to participate in the interview process to determine the suitability of new staff.

Outstanding



Wigan Link

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 07 and 08 September 2015 and was announced. We provided 48 hours' notice of the inspection to ensure management were available at their Hindley office to facilitate our inspection. The inspection was carried out by two adult social care inspectors from the Care Quality Commission.

We reviewed information we held about the service in the form of statutory notifications received from the service and any safeguarding or whistleblowing incidents which may have occurred. We also liaised with Wigan Council.

We had not asked the provider to complete a Provider Information Return (PIR), which is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

At the time of our inspection there were 28 people living in the Wigan and Leigh area who used the service. The service employed 84 members of staff. During the inspection, we spent time at the office and looked at various documentation including eight guidelines for people receiving support and 10 staff personnel files. We looked at policies and procedures, staff rota, staff recruitment, audits, supervision notes, the training matrix and compliments/complaints.

We met three people receiving support at home and two people who used the service at the agency office. We spoke with nine relatives. We spoke with seven staff and observed people's interactions with staff in the homes we visited. We also spoke with the registered manager, operations manager and nominated individual.

Is the service safe?

Our findings

We spoke with five people who received support from Wigan Link and nine relatives. Without exception, people who used the service and their relatives were complimentary and positive about the staff that supported them. One person who used the service told us, “I feel a lot safer with Wigan Link than I did in the past. I was messing with the wrong people and in trouble with money. I would still be in a mess if it wasn’t for Wigan Link.” A relative told us, “I have never had any concerns regarding [person’s name] safety.”

The provider’s risk management policies and procedures showed the ethos of the service was to support people to have as much freedom of choice in their lives as possible. Team meeting minutes, life plans and the guidelines in place showed the management empowered people to make their own decisions. Relatives told us that risk assessments were completed with the person and their relatives. The team meetings showed that people were encouraged to take holidays and partake in activities of their choice. A member of staff told us, “At Wigan Link, the person we support is at the heart of everything. It is how I always imagined support should be.” A family member also told us, “When [person’s name] goes on holiday everything is in place: Risk assessments, back up staff, the GP is aware and the local GP surgery and hospital is identified. The operations manager, my relative, staff and I all discuss the risks and how they will be managed. I sign documents in agreement.”

People were enabled to lead more fulfilling lives, choosing their own daily structure with staff supporting them to manage any risks. One person informed us, “I go to coffee mornings, swimming, voluntary club where I meet my friends.” Their relative told us, “Without Wigan Link, [person’s name] would be isolated. The risks are life threatening. At Wigan Link, [person’s name] has a team of four people and they all know and understand him, his needs and they manage the risks. I have never had any cause for concern for my relative’s safety whilst they have been supported by Wigan Link.”

We found individual risk assessments had been completed for each person and recorded in their guidelines. The registered manager told us that people who received support from Wigan Link had a life plan and the guidelines detailed how Wigan Link would provide support to meet

the person’s goals. The guidelines were essentially a care plan but people who received support had requested to call them guidelines. The guidelines were reviewed and updated when there was a change in risk. There were detailed management strategies to provide staff with guidance on how to safely manage risks and also ensure people’s independence, rights and lifestyle choices were respected. We were told, “Without Wigan Link, I wouldn’t be able to function; it is as basic as that.” Their relative told us “[Person’s name] risks are life threatening but they are updated and tested against current things and the guidelines are amended to fulfil [person’s name’s] needs and to provide him with an enriched life.”

During our inspection, we checked to see how the service protected vulnerable people against abuse. We found suitable safeguarding procedures in place, which were designed to protect vulnerable people from abuse and the risk of abuse. We looked at the service safeguarding adult’s policy and saw how the service managed safeguarding concerns. We found that all the staff had completed training in safeguarding vulnerable adults, which we verified by looking at training records. We spoke to seven staff members and discussed safeguarding procedures with all the members of staff we spoke with. All the staff spoken with told us that they had received appropriate safeguarding training, had an understanding of abuse and were able to describe the action they would take if they witnessed or suspected any abusive or neglectful practice. One member of staff said, “I have known the person I support for a long time. I would see changes in their behaviour, attitude, body language and the things that they said. I would talk to them, reassure them and report it back to the office.”

A member of staff also told us that Wigan Link “promote a positive culture.” One member of staff told us, “I’m confident that if I had any concerns, those matters would be addressed and I would be listened to with regard to safeguarding in particular.” Another member of staff said, “I have had training in safeguarding. I would speak to my team leader or the operations manager straight away if I had any concerns.” We also found a copy of the safeguarding policy and procedure in the three care files at the houses that we visited of people receiving support.

We looked at 10 personnel files and found people were protected against the risks of abuse, because the service had robust recruitment procedures in place. We found

Is the service safe?

appropriate criminal records bureau (CRB) disclosures or Disclosure and Barring Service (DBS) checks had been undertaken and appropriate references obtained before new staff commenced employment with the service. The operations manager told us that the person being supported and their family made the final decision whether somebody was recruited. We spoke with nine relatives and they confirmed this. A relative told us, "Yes, I met the team first. The team hasn't changed for some considerable years now though." Another relative said, "We met the permanent carer first and said yes. If a few weeks passed and [person's name] had changed their mind about the person, we'd be happy to go back to the operations manager and tell them that we'd changed our mind. It wouldn't be a problem." A member of staff said, "They genuinely match people to people, the team member to the person being supported. I met the person and family before providing any support."

We looked at how the service ensured there were sufficient numbers of staff to meet people's needs and keep them safe. We looked at the staff rotas. We found the service had sufficient skilled staff to meet people's needs. Staff spoken with told us any shortfalls, due to sickness or leave, were covered by existing staff, which ensured people were looked after by staff who knew them. A person receiving support from Wigan Link told us, "I feel safe because when people are off, they cover each other." A relative said;

"Continuity of staff is outstanding. If there are too many changes amongst staff it causes problems for people with learning difficulties. This is one of the big benefits of Wigan Link. It gives it a personal touch."

We looked at how the service managed people's medication and found that suitable arrangements were in place to ensure the service was safe. We looked at three care files at three different houses and found that the guidelines detailed where medication was stored in people's homes. It identified who was responsible for ordering and collection of stock and specific guidance on administration for each person who used the service. Each person's individual assessment showed the support they needed to take their medication, and information about medication was provided to each person and discussed with staff. People kept their own medication secured. Care records had detailed information about each medication, what it was for, times of administration, dosage and any side effects.

We found all staff administering medication had received training, which we verified by looking at training records. One relative told us, "Staff always check the medication after each shift. [Person's name] always gets them on time". A second relative said, "I collect the medication from the doctor once a month. They keep an accurate record of anything. When I look after [person's name], they ask me to sign to say I am doing medicines. No issues with it."

Is the service effective?

Our findings

Everyone that we spoke with said the staff were well trained and were competent in their work. One relative told us, “I know they are well trained and receive continued training. They do a wonderful job.”

We looked at the training and professional development staff received to ensure they were fully supported and qualified to undertake their roles. We looked at 10 personnel files and found that all new members of staff had undergone a comprehensive induction programme prior to commencing in employment. This included a review of policies and procedures, initial training to support them with their role, shadowing experienced staff to allow them to develop their role and regular monitoring to make sure they had a good introduction to the role. One member of staff said, “My induction was important and worthwhile. It involved going through the policy and procedures, meeting the person I was going to support and understanding their needs. I received safeguarding, health and safety and first aid training. Within three months of providing care, I had received all the training.” Another member of staff told us, “I had some understanding of the paperwork but there was always somebody there. I felt safe and supported through induction.”

We looked at how the service trained and supported their staff. The management told us that the training was classroom based and provided by an accredited external provider. From our discussions with staff and from looking at records we found all staff received a range of appropriate training applicable to their role and the person that they were supporting. This gave them the necessary knowledge and skills to look after people properly. We looked at the training matrix, which showed staff had access to training such as: health and safety, first aid, medication, food hygiene, safeguarding, autism awareness, and challenging behaviours. Staff also told us they were able to identify training that they wanted to attend and this was accommodated. Some staff had completed manual handling, PEG training and sign and timeline due to the needs of the person that they supported. Staff training was maintained and there were clear records to indicate refresher training courses in order to allow staff to develop

their skills and knowledge. All the members of staff that we spoke with told us they were satisfied with the training and support they had available to them. One member of staff said, “We have lots of opportunities to do further training.”

Staff told us they were supported and provided with regular supervision and had an annual appraisal of their work performance and we saw 10 personnel files and records to support this. This should help identify any shortfalls in staff practice and identify the need for any additional training and support in a timely manner. One member of staff said, “We usually have our supervision monthly but I could ask for further supervision if needed.”

People’s mental capacity to make decisions was assumed unless there was concern to suggest otherwise. The registered manager demonstrated a good understanding of the Mental Capacity Act (2005) and told us that if they had any concerns regarding a person’s ability to make a decision they worked with the local authority to ensure appropriate capacity assessments were undertaken. This was in line with the Mental Capacity Act (2005) Code of Practice (MCA), which guided staff to ensure practice and decisions were made in people’s best interests. Staff spoken with demonstrated some understanding of the Mental Capacity Act and one member of staff told us, “The person I support can consent to things. The person has an understanding of some things but lacks an understanding of money. The person has a court appointed deputy.” Mental capacity and DoLS training had not been included in the training programme for staff but the registered manager said that he would make arrangements with the Local Authority for staff to receive training around this.

The registered manager told us that the only pre-requisite to receiving support was that the person wanted to engage with the support provided. The five people receiving support that we met confirmed that they had consented to the care they received. One person told us, “They ask me before doing anything.” Another person told us, “I feel involved, I like that very much. We have team meetings regularly.”

We asked a staff member to explain how they sought consent from people who had difficulty communicating. They told us, “The person I support would soon let me know if they didn’t want to do anything with non-verbal

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communication. I have worked with them a long time so I know them well.” Another member of staff said, “I speak to the person and then their mum and the office before doing anything.”

We looked at how the service supported people with a healthy diet. The guidelines detailed the support each person required in respect of food, drink and nutrition, which included the level of supervision required when cooking or using the oven. People and relatives raised no concerns about the quality of food and nutrition during our visit. One person told us, “I get help with preparing meals and making menus. I used to eat very badly but they’ve got me eating better. I have vegetables and proper meals. I like vegetable curry.” Another person told us, “I used to be very big. I’ve lost three stone.” Their relative told us; “[Person’s name] requires a specific diet rich in oily fish to support their condition. Wigan Link ensures he gets this and monitors his weight weekly.” Another relative told us, “The

care staff are well trained. [Person’s name] was diagnosed with diabetes and the staff attended a training day with him on diabetes. It was a full day and the team leader and the staff team all attended. They also support him to slimming world weekly.” Another relative told us, “[Person’s name] likes the same things at the same time. They need routine and would be very upset without it. He likes a beer and staff support it. He used to drink a lot of coke but staff have successfully encouraged him to drink more water. He is weighed weekly and supported to circuit training.”

Staff were available to support people to access healthcare appointments if needed and liaised with health and social care professionals involved in their care if their health or support needs changed. People’s care files included evidence that the agency had supported them to access the GP, district nurses, occupational therapists and other healthcare professionals based on individual needs.



Is the service caring?

Our findings

We asked people receiving support and their relatives how they felt about the caring approach of the service. Without exception, people receiving support and their relatives praised the staff for their caring and professional approach. One person who used the service told us, "It's a good team, that's one of the best things." Another person who used the service said, "I cannot fault them at all." One relative said of the approach by staff; "We call them the A team, I can't fault them. They're always on time. Very regular. All work as a team. They take care for the person and they are also friends." Another relative said, "They are brilliant. Focussed. Sensible. Reliable. Professional and know what they are doing. If I didn't trust them we wouldn't use them." Another relative told us, "Anybody that wasn't caring or right for the job, they'd be sent on their way."

Other relative comments included, "I know all the staff by name. It has a personal touch. The staff treat [person's name] like one of their own.", "We have trust. The person being supported, the staff and the family are the team. We are always welcome. We feel as though we are part of a support group. The staff provide emotional and spiritual support to us all.", "Personally, I can't praise them enough. They are just brilliant with [person's name]. I have a tear in my eye when coming away. I remember what it was like for [person's name] a few years ago. He's in a good place now and that makes him happy and it makes me happy."

Staff understood how to support people with dignity and they respected them. Staff clearly valued the contributions people had made in their own lives and told us they respected them as individuals. This was further supported from our observations of the way staff engaged with people

and in the discussions they had. They respected people's privacy and their right to make their own decisions about how they wanted to spend their day. People receiving support from Wigan Link and their relatives told us they were involved in making decisions about their care and were listened to by the service. They told us they had been involved in determining the care they needed and had been consulted and involved in their care. One relative told us, "People are encouraged to bring ideas to the service and it's never a No. It's looked at and risk assessed and then it goes ahead."

The service had a strong, visible person-centred culture. One member of staff told us, "We look at people individually. Individual requirements, individual needs and individual interests." A relative explained to us that they had two family members receiving support from Wigan Link. They explained how staff recognised that their family members had completely different personalities and that Wigan Link staff promoted them being relatives but also promoted and encouraged them to be individuals. They explained that staff supported each person receiving support to pursue different opportunities based on their interests and identified that one person who used the service enjoyed going to rugby matches, football matches and the cinema whilst the other person enjoyed farms and going out for meals. They explained that both their family members enjoyed swimming and ten pin bowling so they were supported to do these activities together. They told us that the two people receiving support did not have verbal communication but that staff understood when they wanted to do things together as they would put their arm around each other and staff would respond to this. They told us "My relatives' lives are full considering and I am very happy."

One person using the service told us, "I am invited to team meetings but I don't want to attend. I go shopping instead and my mum attends. I still get to know what people said at the team meeting." A relative told us, "We have regular team meetings, which includes [person name], all the staff that support him, team leader, family and management. That allows us to regularly communicate with the service." Another relative told us, "We are involved and invited to team meetings." A member of staff told us, "We aim for a team meeting once a month but it would be sooner if required."

We looked at how the service promoted people's privacy and dignity. Each person we spoke with confirmed staff always treated them or their loved ones with dignity and respect. One relative told us, "[Person's name] is encouraged to make their own choices. Staff are humorous and kind. [Person's name] needs to be humoured, which is respectful towards them. Washing and doing their teeth needs prompting. Staff talk to [person's name] all the time. They are always clean and tidy. We have never noticed them being neglected in any way." Staff we spoke with were able to identify how they maintained people's privacy and dignity. They told us they gave people privacy whilst they undertook aspects of personal care, but ensured they were



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nearby to maintain the person's safety, for example if they were at risk of falls. With regard to personal care one member of staff explained, "We always knock on the door; you don't just walk in to somebody's room or home." Relatives told us, "[Person's name] is treated like a queen. They have routines for washing, clothing and bathing. It's always spotlessly clean. [Person's name] is included, they always looks good and wear the correct clothes. Staff do the washing, ironing and change bedding with them."

We spoke with people about how they were encouraged to be independent when receiving care and support. One person receiving support told us, "I work for a charity and I do the stage props at the local drama group. I also like to go to a Western night each Thursday." A relative informed us, "As far as possible through team meetings they find out what [Person's name] would like to do. They always encourage [person's name] to do things for themselves. Gentle coercion but he is given a choice. [Person's name] has a weekly timetable which he devises with staff. [Person's name] needs to be encouraged with food prep and washing, baking and cooking. Staff prompt all the time though and encourage him to do the bits that he can do for himself." Another relative told us, "They push her to be independent, I will give them that. On occasions they develop her life skills. She goes to the supermarket and will prepare her own meals with support. Normal household chores can assist with, which gives her independence."

Staff consistently told us that as a service, they always considered how they could do more to support people including encouraging more independence. One member of staff explained to us "The person I support is unable to prepare meals but they like to hold a potato and peeler when we are cooking so we encourage this. They like to be involved and pass us things."

In one household, the person using the service, staff and family were seated in the lounge. The atmosphere was relaxed and friendly, and everyone was included in the conversation. Staff encouraged people to tell us about their achievements, and to show us their care files and photographs and tell us about them. Staff listened attentively to what people had to say, demonstrated positive regard for each person and supported them at a pace and in a way that suited them.

Staff spoke with pride about the people they supported, Staff we spoke with told us that they considered the people they cared for as part of their family, one staff member said, "It's wonderful, it's just a dream. It's how I imagined support should be. One big family." Another member of staff said, "I find it very rewarding. [Person's name's] family say how their life has changed since being supported by Wigan Link but it is [person's name] that has altered mine for the better. You get back what you put in."

People told us that the service had made a real difference to their lives. We spoke with five people using the service and nine relatives. People told us that they felt like they belonged and were part of their communities. Relatives told us that the person receiving support had previously lived at home and led quite protected lives. People had nothing but praise for the service in enhancing people's lives. One relative said, "He was an isolate before coming to Wigan Link." Another relative said, "It's lovely, when I see [Person's name] out in the community. It just looks normal. Like a group of young men in the community." Four out of the nine relative's spoken with said, "I can die happy knowing my relative is safe and is well cared for at Wigan Link."



Is the service responsive?

Our findings

People's care and support was planned proactively in partnership with them. Everyone that we spoke with, without exception said that when their care was being planned at the start of the service the registered manager spent a lot of time with them finding out about their preferences, what care they wanted/needed and how they wanted their care to be delivered. From then forward the relationship between the registered manager and each person was interactive and operated on an 'open door' policy, which required a phone call to the office to change or adapt the care needed. One person said, "I feel involved, I like that very much." A relative said, "From the word go, I've been involved. The plan was developed for the transitional period and it's continually been developed in consultation with me. My family members were in their late teens when they started receiving support from Wigan Link. They are now in their 30s. They've grown and changed. They have actually done things that I would never have expected them to do. The service is constantly exploring opportunities to develop them further." The same relative informed us that they could make suggestions and they were actioned. They told us that they thought [Person's name] would enjoy going to a soft play centre. They explained the management risk assessed it and now their relative is supported to go there fortnightly and really enjoys it.

People received personalised care that was responsive to their individual needs and preferences. We saw the essential lifestyle plan for every person that was receiving support. It listed what was important to the person and how support needed to be delivered. One relative told us, "The essential lifestyle plan captured our hopes, dreams and fears. How we wanted support to be. This is updated and tested regularly."

People told us that the service was responsive and was flexible in accommodating last minute appointments when needed. Staff were knowledgeable about the people they supported. They were aware of their preferences and interests, as well as their health and support needs. One member of staff told us, "What Wigan Link do as a company, well, the person we support is at the heart. Everything is flexible and responsive; it's down to us having a good knowledge, information and understanding of the person."

People told us the service engaged consistently and meaningfully with families. One relative told us, "I really think they are very good. They are very responsive. He is on your side and will fight our corner. They ring the person every morning at 7.30 to check everything is ok. If something happens overnight it gets sorted there and then because of that call. It's only a little thing but it makes a difference."

The service actively built links with the local community that enhanced people's sense of wellbeing and quality of life. People told us that the registered manager and staff had an excellent understanding of their social and health needs. One relative told us, "Definitely meet care and support needs." Another relative told us, "Everybody is invited to celebrate events such as birthdays. Wigan Link invites everybody and keeps people involved". We are part of the family. We all get on well. It's an extended family."

Other comments included, "We have been really pleased. We wouldn't have stayed otherwise. It is a family orientated company. They keep us up to date with what is going on and if there is involvement with other agencies they let us know.", "Wigan Link is the best company we have ever had. It comes up to our expectations in all areas. They seem to get the correct staff which is important. The fact we have kept them for a long time, it speaks for itself. If I want to talk there is always somebody available." One member of staff told us, "Wigan Link is family led, nothing is segregated. Everybody is invited."

Each person had their own weekly planner, which showed they lived busy and varied lives. Each planner was different and was made in conjunction with the person and how they wished to fulfil their time. One person told us, "I work backstage at a local drama group, I go walking and cycling, I work for a charity, I attend a Western night, I am going to the cinema tomorrow and next month I'm going to Glasgow." A relative said, "He goes on bike rides. He goes to the cinema. They make sure he has a choice of what he wants to do. They treat him well." Staff supported people to pursue a wide variety of interests and hobbies, and to access community groups. The registered manager explained that the ethos of the service was integration, not segregation and that people attended mainstream activities. The registered manager found it difficult to



Is the service responsive?

identify 'activities' and explained, "We are talking about people's lives, we see them as the norm, every day things that people do. We don't refer to them as activities in our own lives."

The registered manager supported a local community drama group. Some people who received support were involved backstage or in productions. The service accessed local arts and crafts projects, card making, pottery, dance and singing. They had annual carol singing, which was inclusive and visited Llandudno every March. People took holidays at different times of the year of their choosing and whilst conducting the inspection there were two people receiving support abroad. One person was skiing and the other person was in Greece. There were fundraising activities for help the heroes and the registered manager emphasised supporting people's community presence and active involvement in people's communities for those people supported by Wigan Link.

People were supported to meet up with friends and make new friends. One person told us, "I have lots of different friends. I meet friends at Link on Monday and on Tuesday I go to a church coffee morning." Without exception, people were talking about an upcoming 60th birthday party for somebody receiving support and people, staff and relatives expressed their excitement for the celebration.

Staff supported people to achieve their ambitions. For example, one relative told us that Formula 1 had been a big interest of their families. They told us; "Wigan Link arranged for [person's name] to experience a formula 1 simulator." They also told us, "The staff also accompanied [person's name] to a formula 1 event. I don't know how they did it but they found out where one of the formula 1 driver's was staying and he got to meet them and shake their hand. They have a large framed picture of it. He had a wonderful time. It was 100% risk assessed and a 100% success." Another relative told us, "With previous support, we've had problems arranging breaks or holidays. Our family member wanted to go to Blackpool. It's no problem. Its risk assessed and they are going."

Relatives told us they had regular contact with the service, were kept constantly informed about their family member and were able to provide feedback. A person receiving support told us, "I have never had to make a complaint. I'd tell them as a group if there was anything that I wasn't happy about." Another person receiving support told us, "I would feel comfortable and confident to raise concerns/complaints." Relatives told us, "If anything crops up I can always contact the office. It gets put right." I've made one complaint in 20 years. I had an issue with a member of staff. They swapped the member of staff immediately. They take notice of staff and people they support to make sure they are the correct match for each other.", "The staff are excellent. Some blips now and then but they get sorted. The fact that it is run by a group of people with similar experiences to us is excellent. They have a vested interest in making sure things are right. They can relate to how we feel because of what they have been through. Management is consistent. The registered manager really understands."

People knew they could contact the registered manager or operations manager if they needed to. One relative told us, "Concerns and complaints would absolutely be dealt with. They are so open. I would pick up the phone and there wouldn't be a problem." Another relative informed us, "I've never had to make a complaint. My family member is happy. Far happier than he has ever been. They know how to support him and get his confidence." One person receiving support told us if they had any worries that they would speak to the registered manager and it would be dealt with promptly." We found the service also kept in touch with families through regular team meetings.

The service policy on comments, compliments and complaints provided clear instructions on what action people needed to take in the event of wishing to make a formal complaint. We looked at the formal complaints received and they had all been actioned and responded to within a short timeframe. People we spoke with confirmed they had been satisfied with the outcome.



Is the service well-led?

Our findings

There was a registered manager in post. 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. The staffing structure in place made sure there were clear lines of accountability and responsibility.

The registered manager was an excellent role model who actively sought and acted on the views of people. The service had been operating for 15 years and they had sustained their positive culture at Wigan Link throughout this time.

Without exception, people we spoke with told us that Wigan Link upheld their philosophy. The philosophy of Wigan Link is, "The basic approach adopted by all those involved with the organisation is based on an established values framework, aimed at creating environments within an individual's own community that are not only accepting and welcoming, but also empowering." We found evidence of this throughout the inspection. Relatives and people receiving support from Wigan Link provided enriched examples of how the service had achieved and sustained this to provide a high quality service.

There was a registered manager and an operations manager who shared the responsibility for the daily operation of Wigan Link. The registered manager was one of the founders of Wigan Link and it has remained a family led service. Wigan Link demonstrated a strong emphasis on empowering people to voice their opinions and views. The management committee of Wigan Link was made up of people receiving support, parents with sons/daughters described as people with "learning disabilities", working with other parents, and advisors from the Local and Health Authorities. We spoke with two people receiving support from Wigan Link and one relative that were on the management committee. They told us that they were fundamental in the decisions made in the interests of Wigan Link. One person told us, "I go to meetings and things and I come to the office twice a week. It keeps me busy." Another person told us, I asked the registered

manager to vote me in which happened. We meet every so often and what is said in the room stays in the room. The registered manager leaves when we discuss management. I am involved and I like that."

People using the service, relatives and staff all spoke highly of the management. One relative said, "Other companies had different staff and that was not what we wanted. You get that consistency with Wigan Link. [Person's name] has his own team. I can go to them and things get sorted. I know all the staff very well. All complaints will be dealt with. They made sure I was coping following my wife's death which they didn't have to do."

Other relative comments included, "The support we've had is unbelievable. They know everything that is going on. They are very knowledgeable and replicate their mission statement." They all told us they would recommend Wigan Link to anyone who wanted care and support in their own home. One person said, "Definitely. I did recommend them in the past and they ended up using them. I would recommend 110%. All I can say is that I can't recommend them enough. We are all like a family. Not a client or customer." Another said, "I have done in the past. Basically they go that extra mile for anything to make us happy. They are who we want to look after our family member."

We found the registered and operations manager promoted an open culture, were person centred, inclusive, open and transparent. As part of the recruitment policy, People who lived at Wigan Link were included in the recruitment process. People who used the service and families were able to participate in the interview process to determine the suitability of new staff. One person told us that their relative had been involved in recruiting their care staff. They told us, "If you don't like them or you have concerns, they don't get appointed. The person appointed is on three months' probation too."

Staff demonstrated they understood the principles of individualised, person centred care through talking to us about how they met people's care and support needs. They spoke about their commitment and used words like "individual" and "personalised" when they talked about the people they supported. One staff member said, "What Wigan Link do as a company, well, the person we support is at the heart."

We looked at the service training and development strategy. The service provided a comprehensive induction



Is the service well-led?

programme and staff development was a high priority for the service. Staff told us they were proud to be part of the organisation, they were supported and felt valued. One member of staff told us, “100% I can’t think of anything negative to say about Wigan Link. Even if I sat here for the next 10 hours, I couldn’t think of anything. Wigan Link is wonderful, it’s like a family.” Staff were clear about their roles in supporting people to be independent with access to the local community and were always looking at how they could improve peoples’ lives.

Comments from other staff members included, “I feel that Wigan Link is organised and well-led. I feel quite confident that I can come in to the office and ask for support.” “It’s brilliant working for Wigan Link. I’ve been here eight years and never looked back since leaving another company.” “I’m happy with the management. They know everything inside and out. They are very fair and they listen to you.” “I have been here 16 months. I have no issues. I enjoy the job. There’s a positive culture.” “I love my job. Management is supportive and I am very happy.” “I have had to make a complaint in the past against a team leader. It was responded to with satisfaction. They are very good.” “Management listen. The priority is for the service user to receive excellent support.”

We found that regular reviews of life plans and risk assessments were undertaken. Regular consultation / supervision of staff were also undertaken by the management. The registered manager used a range of systems to monitor the quality of the service provided to people. Locally, staff undertook a range of weekly and monthly checks which included medication, food safety,

health and safety checks and receipts for people staff supported with their money. All checks were documented. Locality managers also undertook regular ‘spot checks’ in supported living settings, talked to people and staff, and looked at records and audits undertaken. Any improvements identified were followed up.

We looked at the minutes from various team meetings which had taken place. We saw actions had been set and then followed up at the next meeting with any progress that had been made. The service had policies and procedures in place which covered all aspects of the service. The policies and procedures were comprehensive and had been updated when legislation changed. Staff told us policies and procedures were available for them to read and they were expected to read them as part of their induction and training programme.

There was a strong emphasis on people pursuing full, active lives in their own communities. The registered manager was involved in the local drama group and empowered people receiving support to be involved and engage in activities of their choosing in the community. People receiving support, relatives and staff had a positive and affectionate regard for the registered and operations manager. Relatives told us, “There have been a lot of things over the years that I have not understood. He is just a phone call away. He explains things so that I understand. I look on people as friends now.” “We’ve had problems over the years. The support we’ve had is unbelievable. They’ve always been there when I’ve needed them.” “The parties, they are lovely. Everybody getting together. It’s like a big family.”