

Lifeways Community Care Limited (Avon) Housing Support Service

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Unannounced

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Service provided by:
Lifeways Community Care Ltd

Service provider number:
SP2004006707

Service no:
CS2004079683

About the service

Lifeways Community Care Limited (Avon) is registered to provide a combined housing support and care at home service to adults with learning disabilities living in their own homes. The provider is Lifeways Community Care Ltd.

Lifeways Community Care (Avon) operates from an office base in the east end of Glasgow, where the management team are based. The service supports people who live predominantly in North Lanarkshire, South Lanarkshire, and Glasgow.

The service aims to help people retain their independence whilst providing physical and emotional support to lead fulfilled lives in their own homes. At the time of the inspection, 13 people were accessing the service. Support hours varied from a few hours per week to 24 hours per day.

About the inspection

This was an unannounced inspection which took place between 1 and 4 October 2024. One inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with six people using the service and two of their friends and family members
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People and relatives gave very positive feedback about their experiences with the service.
- People were supported to achieve positive health and social outcomes.
- There was a relatively stable staff team who demonstrated good understanding of people's needs and wishes.
- Staff performance was promoted through comprehensive training, supervision, and support systems.
- The management team was pro-active and completed robust quality assurance to promote the wellbeing of supported people and staff.
- The service was moving from paper to digital support planning which should further improve standards.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We evaluated this key question as very good because there were major strengths which supported positive outcomes for people.

Lifeways Community Care Limited (Avon) had a person-centred approach which focused on people's individual needs and wishes. The service worked creatively to ensure people were supported to achieve very good outcomes and life experiences that were meaningful to them.

For example, we spent time with people who had previously experienced social isolation. They were now supported to develop friendships, attend social clubs, and be active members of their community. People were supported to engage in activities that reflected their own interests, choices, and passions. People attended sporting events, participated in sport and exercise, and engaged in education and voluntary work. This had considerably improved people's health and wellbeing.

People using the service had varied needs which ranged from mild to more profound and multiple disabilities. Each person received appropriate support to ensure they had a full and active life that reflected their wishes. We observed staff interactions with people with complex needs and non-verbal communication. Staff engaged meaningfully with people, connected through their unique gestures and expressions, and used warmth and humour. There was a sense of genuine understanding and care in these interactions which promoted people's inclusion.

People's physical health needs were also met to a high standard. We met people who had various health conditions which required a level of skill, understanding, and planning. This was demonstrated well as the service worked in collaboration with health professionals to meet these needs confidently.

Supported people could express choice and influence over their service. There were regular meetings which brought people together to discuss important issues in their lives and how the service could further improve. This offered an opportunity for people to socialise with their peers whilst offering a sense of inclusion and ownership of their service. The management team now planned to arrange a similar focus group for relatives which would offer increased opportunities for people to be involved in service development.

The service experienced significant challenges in previous years. It was evident that meaningful improvements had been achieved across the service which improved people's lives. An effective management team with a more stable and supported workforce had enhanced people's experiences. A supported person told us "I'm very happy with the support, I love spending time with [staff]". A family member explained "It is night and day to what it used to be. The support we receive now is first-class, and we feel like it's one team working together".

How good is our leadership?

5 - Very Good

We evaluated this key question as very good because there were major strengths which supported positive outcomes for people.

People, relatives, and staff told us about significant improvements in the leadership of the service. The service had worked hard to develop effective systems, which had been lacking in previous years, to promote the wellbeing of supported people and staff. Families praised the management team's communication and

visibility. Staff, many of whom had worked in the service for several years, explained that "This is the most supported we have ever felt". These comments reflected the service's impressive improvement journey, which benefited people.

The management team was robust with a clear structure. A registered manager was supported by deputies, and there was additional support from a regional leader. There was a balanced skill-mix in the management team, with varied experiences, and a shared value-base and commitment to service improvement. This had boosted standards and morale across the service.

Leaders demonstrated insight into the needs and wishes of people and staff. They had a real grasp of what was happening in the service, both in terms of strengths and any areas for improvement. Management closely monitored important issues such as accidents and incidents, medication, support planning, and activities. When issues arose, they were promptly resolved through management intervention or working collaboratively with external health professionals. This insightful approach had been developed through formal quality assurance systems, audits with associated action plans, and the regular presence of the management team across the service. Leaders were able to improve the wellbeing of supported people and staff by getting to know their lived experiences in a meaningful way.

An inclusive culture had been developed that offered people, relatives, and staff opportunities to express their views. This was facilitated through regular meetings, telephone calls, and an open-door policy. Improved communication had developed people's confidence in the service, and all parties felt listened to and valued.

The management team had created a comprehensive service improvement plan which detailed how the service could improve. The identified actions in the plan were insightful and relevant and likely to result in even better practice. However, the plan appeared to be focused on the views of management and data from quality assurance systems. We asked the service to include the voices of people, relatives, and staff in the plan to reflect its otherwise open and inclusive culture. This will offer richer and more diverse perspectives in service improvement.

How good is our staff team?

5 - Very Good

We evaluated this key question as very good because there were major strengths which supported positive outcomes for people.

People receiving support could be assured that their workers were recruited safely in line with national guidance. Staff had appropriate interviews, reference checks, professional registrations, and an induction programme. New workers told us that their induction period was extensive with a mix of classroom learning, online training, and shadowing of experienced staff that prepared them well to meet people's needs.

All staff had access to a robust training programme that covered general and more specialist courses. Training, which had a 100% compliance rate, involved the learning of practical skills and positive social care values. Staff had observations of their practice to ensure they demonstrated learning from training into their interactions with people. This well-rounded approach to training and development resulted in very good practice and rapport between staff and supported people.

Workers benefitted from a regular system of team meetings and one-to-one supervision sessions. This provided opportunities to review staff performance, celebrate good practice, and identify any areas that

could improve. The minutes of these meetings confirmed that the content was meaningful, there were in-depth and reflective discussions which centred on meeting supported people's needs and outcomes. Meetings also focused on the wellbeing of staff which further promoted high levels of morale across the service.

A review of staff rotas confirmed that people were receiving the right amount of support by a stable workforce. There was a consistent pool of permanent workers and a healthy mix of new staff who were inducted well into the service. This continuity meant that people were supported by staff who knew their needs and wishes.

The use of agency workers was limited but was needed at times. The introduction of agency staff was done with the consent of people and their families. The service used consistent agency workers when needed, and ensured they had a comprehensive induction into the service. This ensured that all staff, whether permanent or agency, had an understanding of people's needs, their desired outcomes continued to be met, and minimised any risk of disruption to people's service.

How well is our care and support planned?

4 - Good

We evaluated this key question as good because there were several important strengths which, taken together, clearly outweighed any areas for improvement.

Every person that used the service had a personal plan, known as a support plan. The standard of plans was generally high with clear descriptions of what was important to people, their needs and wishes, and how to meet them.

Plans contained some person-centred information such as people's life stories, their likes and dislikes, and what they wanted to achieve in life using their support. This promoted an outcome-focused approach.

People's health needs were highlighted with appropriate assessments in place that identified needs, and there was guidance for staff to follow to ensure these needs were met. There was input from health professionals which staff followed, demonstrating a multi-disciplinary approach. A system of risk assessments ensured people could access varied life opportunities in a safe and dignified way.

People had six-monthly person-centred reviews to ensure they were receiving appropriate care and support, plans were accurate, and people and their representatives were satisfied with their service. This demonstrated safe and inclusive practice to promote people's wellbeing.

Therefore, the content of people's support plan was of a high standard. However, the organisation of plans was inconsistent. Some people had used the service for many years and their plans were lengthy, contained out of date or duplicated information, and were no longer user-friendly or accessible. There was a risk that people's important person-centred information could be obscured by historic and unnecessary documents.

We were pleased to see that the service was reviewing its approach to support planning, and a digital system was being introduced. A review of the new digital system demonstrated that it will be more accessible and interactive whilst maintaining the strong person-centred content of the existing plans. This improvement project was already underway during the time of inspection, and will rectify the identified issues, to ensure people's needs and wishes are highlighted more clearly. This will help sustain and further

promote the good practice observed across the service with people.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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