



Inspection Report on

Community Lives Consortium

COMMUNITY LIVES CONSORTIUM

23-24

WALTER ROAD

SWANSEA

SA1 5NN

Date Inspection Completed

22/10/2020

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About Community Lives Consortium

Type of care provided	Domiciliary Support Service
Registered Provider	Community Lives Consortium
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	First RISCA inspection of the service
Does this service provide the Welsh Language active offer?	No

Summary

Community Lives Consortium Ltd (CLC) is a domiciliary support service for people with learning disabilities and physical disabilities over the age of 18. The head office is in Swansea. Support is provided in supported living settings where people have their own tenancies in Neath Port Talbot and Swansea, which is within the Swansea Bay partnership region. The Responsible Individual (RI) is Lynda Rosselli and there are registered network managers and deputy managers that cover various network areas. People receive a good service from CLC with a team of care staff who are well trained and dedicated to their work. The management team are visible in the running of the service. There are systems in place to ensure there is oversight of the quality of domiciliary support service delivered. However, improvements are needed to ensure the service meets all of its regulatory requirements in relation to care plan reviews.

Well-being

People contribute to and have a voice in decisions that affect them. People informed us that they participate in a wide variety of household and leisure activities. There are activity plans and care plans, which people contribute to, and care staff actively promote in the supported living settings. Care staff stated that they understand the importance of maintaining and developing people's skills and abilities. Although care planning reviews take place this process needs to be further strengthened by ensuring people's own outcomes are clearly detailed and measured. Feedback obtained from people using the service, relatives and professionals is positive regarding good communication across the service. However, reviews of personal care plans do not currently fully evidence the involvement of the person and their representatives.

People are protected as far as possible from abuse and neglect. There is a detailed safeguarding policy, although this needs to be updated and referenced to the Wales Safeguarding Procedures. All care staff told us that they understand and have received training in relation to safeguarding. The RI oversees the safeguarding processes and supports the organisation in relation to this. Regional and locality managers have a good understanding of the safeguarding process.

The service is well run and managed. There is clear oversight from the RI and management team. All care staff told us that they have a positive working relationship with their manager's feeling supported and listened too. Relatives we spoke to informed us that communication is good, one stating, "*communication with staff is very good*". We saw that RI checks are completed, senior management meetings are taking place regularly and that there is good communication across the organisation.

Care and Support

The service provides a good standard of care and support to people. We spoke to six people receiving a service and two relatives. All spoke highly of the care staff and managers. One person told us "*the staff are lovely*" and another said "*I like the staff they make me laugh*". We also spoke to a care coordinator in the Local Authority who said "*the staff do everything they can to make sure the individuals they care for are well looked after*". All of the people spoken to told us that they get along well with the others that they share their home with. Two people informed us that they chose to move there. We saw

evidence of participation in relation to independent living tasks and a manager told us that they are *“passionate about active support”*. A person using the service stated, *“I do cleaning, hoovering, polishing, sewing, I like to do everything”*. People informed us that they participate in a wide variety of leisure activities such as virtual coffee mornings, craft activities and board games. Some external activities such as attendance at day centres has been post-poned due to current Covid-19 restrictions. However, alternative in-house activities have been introduced to ensure that people remain active and engaged such as virtual exercise classes. Care staff spoken to have good knowledge of the people they support and many have worked in the same setting for many years.

The service provider considers a wide range of information to confirm that the service is able to meet people’s needs. We viewed seven care files that mostly contained detailed and thorough information regarding people’s care and support needs. There is evidence of person centred planning documentation such as one page profiles and “All About Me” information. There are active support plans and monitoring charts. There are also more specific documents such as communication passports, behavioural and risk plans, health communication information and pain management guidance. The service is in the process of introducing new care planning and reviewing documentation based on the Welsh Governments National Outcomes Framework. However, there is not sufficient evidence of people, their representatives and the placing authority contributing towards the review process and some documentation within the personal care plans is unsigned.

People are safe and risks to their health and wellbeing minimised as much as possible. Assessment and risk planning information is contained in individual care files located in each supported living unit. There is a detailed Positive Behaviour Support Policy emphasising an active and preventative approach and culture across the organisation. Care staff informed us that they are trained in relation to this although some of the physical intervention training has been delayed due to current restrictions.

The infection control policy has been updated recently. There is separate very detailed information regarding Covid 19 and links to relevant external guidance. All care staff observed during the inspection were wearing appropriate Personal Protective Equipment (PPE). A relative informed us that they are *“very impressed with Covid 19 measures in place”*.

Leadership and Management

The service is managed well by an experienced and dedicated RI, Chief Executive Officer

and network structure of registered managers. Policies and procedures are reviewed and updated as necessary. The current Safeguarding Policy needs updating in respect of the Wales Safeguarding Procedures and shared with all care staff. The service is currently going through change in respect of some supported living settings and the Statement of Purpose (SOP) will need to be updated to reflect this. The current SOP uses pictures and clear language to help ensure that people understand its content. There are appropriate quality assurance systems in place and the RI completes regular three monthly checks of the service provision and six monthly quality of care reports that were read during the inspection. There are processes in place to ensure that senior managers have good oversight of the service and we saw minutes of a recent board meeting that take place every three months.

Care staff receive training to ensure they are skilled and competent to deliver the service. Care staff told us of online training that they had completed in recent months. We viewed the training matrix and saw that most training for care staff is current and in date. One member of staff informed us *"I think CLC offers the best training going"*. The majority of the care staff we spoke to have worked for CLC for many years. A relatively new member of care staff informed us that she had received a good induction and this followed the All Wales induction framework for health and social care. We looked at eight staff files and all recruitment documentation was in place including Disclosure and Barring (DBS) checks, which were all current. Supervision records were all in date, completed three monthly, and appraisals were nearly all in date.

We spoke to six care staff and three managers. All spoke highly of the support they receive. A member of care staff informed us that *"we always get support from the managers at all times, brilliant company to work for"*. We saw evidence that the RI is visible throughout the service and that a recent visit to a supported living unit had resulted in improvements made. We spoke to external professionals who informed us that they have a positive working relationship with the RI. We saw evidence that people's views are taken into account both on a local and regional level. A recent senior management meeting had included documented discussion regarding a new "What we Think" tool. This was to seek people's views about their experiences and future wishes which also linked to the quality reviews.

Environment

The quality of environment is not a theme that is applicable to a domiciliary support service. However, the service operates from a self-contained secure office with good facilities for staff and some off road parking. Rooms seen are clean and well equipped, with suitable space for record keeping and locked filing cabinets for the storage of confidential information.

Areas for improvement and action at the previous inspection

None

Areas where immediate action is required

None

Areas where improvement is required

Regulation 16 - Review of personal plans. The inspection established that there was not sufficient enough evidence to fully meet this regulation.

16(4)

We have not issued a priority action (non-compliance) notice on this occasion. This is because there is no immediate or significant risk to or poor outcomes for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection

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