



Community Lives Consortium



Community Lives Consortium, 23-24, Walter Road, Swansea, SA1 5NN



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www.communitylives.co.uk

The inspection visits for this service took place between 02/02/2026 and 04/02/2026

Service Information:

Operated by:	Community Lives Consortium
Care Type:	Domiciliary Support Service
Provision for:	Supported Living
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The provider promotes, anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:



Well-being

Excellent



Care & Support

Excellent



Leadership & Management

Excellent

Summary:

People receive consistently high-quality, safe and person-centred care that upholds dignity, choice and control. Individuals speak about having positive, trusting relationships with staff, describing them as approachable, respectful and responsive to their needs.

Wellbeing is excellent because people receive respectful, person-centred support and their views are routinely sought and acted upon. Regular meetings, advocacy and tailored communication help people participate in decisions. Coproduction is strong, with staff, tenants and relatives influencing service development. People feel safe and well supported to maintain relationships, pursue meaningful activities, enjoy community opportunities and take holidays. The service adapts creatively when local resources reduce and continues to promote Welsh language and culture.

Care and Support is Excellent due to detailed, outcome-focused planning. Risks are managed proactively, and positive behavioural approaches have reduced the use of medication given only when it is needed. Safeguarding, infection control and medication management are consistently strong.

Leadership and management are excellent, the service shows strong governance, visible leadership, comprehensive quality-assurance processes. Well-trained and well-supported staff, result in consistently high-quality care that enables people to achieve positive outcomes.

Findings:



Well-being

Excellent

People receiving support are consistently treated with kindness, dignity and respect. They are meaningfully involved in decisions that affect their lives, and their choices are listened to and acted upon. People told us they attend regular meetings where they can express their views, and staff respond positively. One person said, "I like the staff, I get on well with them." Advocacy is encouraged in a flexible, person-centred way. Relatives also speak positively, noting they can visit freely and maintain effective communication. Individual communication needs are carefully considered, with staff using specialised techniques to promote understanding and reduce barriers.

The service shows a strong commitment to co-production. Groups such as the Staff Forum, Relatives Forum and Tenants Lives Forum help shape how the service operates, including involvement in recruiting the new Chief Executive Officer. The organisation also leads collaborative work, such as the "Let's Talk About Leaving Hospital" group, which brings together relatives, and the local hospital to improve experiences. A visiting professional told us, "CLC are a pleasure to work with."

People feel safe, and safeguarding procedures are well understood. Risks are identified and managed effectively and reduced 'as required' medication use has been achieved through positive communication approaches.

Support focuses on enabling people to live well and pursue outcomes that matter to them. People access a wide range of technology, equipment that enables them to undertake meaningful activities, including surfing, horse riding, hydrotherapy, shows, and social opportunities. They are supported to take holidays and maintain important relationships. When community resources reduce, such as local day centre closures, the service adapts creatively by adjusting staffing and developing new in-house activities.

The service demonstrates a strong commitment to Welsh language and culture through visible promotion, targeted recruitment, and the consistent use of Welsh language practices in staff meetings and daily work.



Care planning across the service is highly person-centred, with detailed documents describing who each individual is, what matters to them, and how best to support them. Reviews clearly link to personal outcomes, showing progress and ongoing consultation with individuals and relatives. Specialist needs—including epilepsy, communication, mobility, and behaviour support—are addressed through comprehensive risk assessments, PBS plans, health profiles, and timely referrals. Meaningful activities, community participation, and individual preferences are consistently supported, demonstrating care designed around personal aspirations while managing risks proactively and safely.

Relatives report positive relationships with the service, describing open communication, flexible visiting and meaningful involvement in decisions. They value being listened to, participating in forums and collaborative groups, and feel reassured that staff prioritise safety, dignity and personalised support for their family members.

Individuals are supported to pursue meaningful activities and personal interests, including drama groups, discos, art, community events, holidays, coffee mornings and social clubs. Staff encourage independence, maintain hobbies and support people to access education, volunteering and community participation. People consistently report enjoyment, purpose and happiness in daily life.

The service demonstrates strong safeguarding mechanisms through clear policies, accessible guidance, and well-trained staff who confidently recognise and report concerns. Staff describe knowing safeguarding thresholds, routes for escalation, and whistleblowing expectations, with real examples of concerns being raised and acted upon. Safeguarding information is given to individuals and representatives on admission, and records of referrals and outcomes are well maintained for oversight. A visiting professional told us the service provider has a “*very robust approach to safeguarding – strong provider who adopts a collaborative and transparent approach within the multi-agency forum.*” Risk assessments, including PBS, environmental, and health-related are routinely updated to prevent harm. Regular supervision, audits, and Responsible Individual (RI) oversight further strengthen accountability, ensuring people consistently receive safe and protected care.

The service shows strong, safe medicines management through clear policies, secure individual storage, accurate MARs with no gaps, and weekly stock audits. Staff complete six-monthly competency checks, combining classroom training, e-learning and observed practice to ensure safe administration. A structured medication-error response checklist and quarterly analysis have reduced errors, demonstrating learning and improved safety. Temperature checks for medication storage are routinely recorded, and disposal processes follow required procedures.



The service demonstrates robust governance through regular RI visits, twice-yearly quality-of-care reviews, and comprehensive auditing systems covering medicines, care planning, staffing, infection control and safety. Leadership is highly visible, with the RI actively engaging in safeguarding training and quality oversight. Policies are current, reviews scheduled, and quality assurance processes are embedded, using feedback from people, relatives and staff to drive improvement. Strong systems for complaints, whistleblowing, risk management and staff training ensure consistency, accountability and high-quality care that supports individuals to achieve personal outcomes.

The service operates a well-structured quality assurance framework, including biannual quality-of-care reviews and regular RI visits, ensuring continuous oversight and regulatory compliance. Auditing processes are wide-ranging—covering medicines, infection control, care planning, staffing, and safety—and findings are used to drive improvements. Feedback mechanisms such as tenant, staff and relatives' forums ensure views are routinely gathered and acted upon. Leadership is visible and proactive, with clear governance, up-to-date policies and responsive action plans that address gaps promptly. These systems collectively support ongoing development and consistently high standards of care.

Infection control practice across the service is strong and well evidenced. Staff show clear knowledge of Public Health Wales guidance, using PPE correctly with well-organised stock in all homes. The infection control policy is up to date. Cupboards containing harmful substances are locked, data sheets current, and clinical and domestic waste disposed of appropriately. Temperature checks for fridges, freezers, and medication storage are completed and recorded. Staff training includes infection control and remains fully compliant.

The service demonstrates strong staffing arrangements, with robust recruitment, vetting and induction, ensuring staff are fit and suitable for the role. Comprehensive training—covering Positive Behaviour Support, epilepsy awareness, first aid, and the Mental Capacity Act/Deprivation of Liberty Safeguards., medication and specialist needs—ensures staff hold the competency and qualifications required. Regular supervisions and annual appraisals support continuous development, with previous gaps now fully achieved. Staff report feeling well-supported, receiving clear direction and benefiting from visible leadership and responsive training tailored to individuals' needs. Staffing levels are monitored, rotas are usually covered, and experienced long-term staff promote consistent, high-quality support that enables people to achieve their outcomes. One person using the service commented *“The staff are lovely, helpful, loving and I can tell them about my problems.”*

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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