

Lifeways Community Care Limited (Avon) Housing Support Service

Templeton Business Centre
62 Templeton Street
Templeton Business Centre, 62 Templeton Street
Glasgow
G40 1DA

Telephone: 01413 201 904

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Unannounced

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Service provided by:
Lifeways Community Care Ltd

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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. Support hours varied from a few hours per week to 24 hours per day. At the time of the inspection, 10 people were accessing the service.

About the inspection

This was an unannounced inspection which took place between 24 and 27 February 2026. 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 four people using the service
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People gave very positive feedback about their experiences with the service.
- People were supported to achieve positive health and social outcomes.
- There was a stable staff team who demonstrated good understanding of people's needs and wishes.
- A new management team needed time to implement their vision and improvement planning.
- The management team should prioritise including the views of people and staff in service development.
- People's support plans needed to be updated more frequently, and the service needs to ensure every person has a six-monthly review.

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?	4 - 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) demonstrated a strong person?'centred approach that prioritised people's individual needs and wishes. The service worked creatively to ensure people were supported to achieve very good outcomes and meaningful life experiences.

We spent time with people who had previously experienced social isolation. They were now being supported to form friendships, attend social clubs, and become active members of their local community. People were empowered to pursue activities that reflected their personal interests and passions. This included attending sporting events, participating in exercise and recreational activities, and engaging in education or voluntary work. These opportunities had a positive impact on people's health, wellbeing, and overall quality of life.

People using the service had a wide range of needs, from mild support requirements to profound and multiple disabilities. Each person received tailored support that enabled them to lead full and active lives in line with their wishes.

We observed staff interacting with people with complex needs and non?'verbal communication. Staff engaged with warmth and humour, connecting through people's individual gestures, expressions, and communication styles. These skilled interactions reflected genuine understanding and care, promoting inclusion and ensuring that everyone was valued.

People's physical health needs were also supported to a high standard. We met individuals with a variety of complex health conditions requiring specific skills, planning, and insight. Staff demonstrated this well, working collaboratively with external health professionals to ensure people's health needs were met confidently and consistently.

These positive outcomes were achieved by having a consistent workforce. A review of rotas confirmed that people were supported by regular staff. This continuity promoted a thorough understanding of people's needs and wishes. New staff were inducted well into the service and welcomed into teams. This further promoted consistency for people receiving care, achieving very good outcomes.

How good is our leadership?

4 - Good

We evaluated this key question as good because we found several important strengths which, taken together, outweighed the areas for improvement identified.

A new management team had recently taken responsibility for the service and presented a positive vision for future development. They demonstrated an understanding of the service's priorities and had produced an improvement plan aimed at strengthening people's experiences and supporting staff wellbeing. The team now required time to implement these changes fully.

Most staff had worked within the service for a considerable period and had experienced several changes in management in recent years. This had created a degree of uncertainty and had impacted staff cohesion and

confidence. Staff were committed to providing high standards of care, but several changes had influenced morale.

We asked the leadership team to prioritise actions that would rebuild and strengthen team morale. This included bringing teams together more regularly, facilitating development sessions, and creating opportunities for staff to share their views. A more connected and positive culture could be achieved through routine team meetings, regular communication, and purposeful staff involvement in shaping service improvements.

It was reassuring that the management team had already recognised these issues and included them within their improvement plan. They acknowledged the impact of change on staff and the presence of some unresolved matters. While these issues had not affected the quality of care or outcomes for people, there was a risk that, if left unaddressed, they could have longer-term consequences. Management demonstrated a genuine commitment to meeting with all staff teams, listening to their concerns, and addressing outstanding points. This approach should support improvements in morale and ensure that people continue to experience high-quality care.

People could be confident that the service was operating safely. The staff and leadership teams completed comprehensive quality assurance at a local level, which included oversight of accidents and incidents, medication, equipment, and health and safety matters. This ensured that people's immediate needs were monitored effectively and that risks were managed well.

However, while governance at an individual level was robust, there was limited quality assurance at a wider service level. With ten people supported across different locations, the service relied on local checks but had not yet started to bring information together in a meaningful way. We asked leaders to strengthen governance by collating and analysing trends across all developments (See Area for Improvement 1). This will help identify patterns, highlight what is working well, and pinpoint areas where improvement is needed. Strengthening service-wide oversight will support more strategic decision-making and help the management team drive consistent, positive outcomes across the whole service.

Areas for improvement

1. To promote people's health and wellbeing, the service should strengthen its service-wide quality assurance systems. This should include completing regular audits, analysing findings across all teams, gathering structured feedback, and using this information to identify improvement priorities and inform the overall service improvement plan.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

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, outweighed the areas for improvement identified.

Every person supported by the service had a personal plan, referred to locally as a support plan. The content

of these plans was impressive. They were person?'centred, comprehensive, and reflected a strong understanding of each individual. However, some plans required more frequent updating to maintain accuracy.

Support plans contained a wealth of information about people's life histories, preferences, routines, and what mattered most to them. This level of detail provided real insight into people's unique personalities and wishes, helping staff engage meaningfully and provide care that felt personal and respectful.

All aspects of people's daily lives and associated support needs were well documented. How people wished to be supported with personal care, medication, nutrition, communication, and other key areas was written clearly and tailored to the individual. Potential risks and the measures needed to minimise them were appropriately captured. Importantly, risk management promoted positive experiences, enabling people to lead active, fulfilling lives rather than restricting opportunities.

While the content of plans was strong, some were not being updated as regularly as required. Although staff demonstrated good knowledge of people's needs, support plans should be reviewed routinely to ensure they remain accurate and aligned with any changes in people's circumstances.

Similarly, not every person had received a six?'monthly review. The reviews we sampled were thorough and person?'centred, offering a comprehensive overview of people's health and social needs as well as a space for them to express their views. However, reviews must take place more consistently to ensure that support remains effective and that people's voices are heard regularly. We recognised that recent changes in management had affected some quality assurance tasks, including review planning, and we were reassured that actions were already being taken to address gaps.

We asked the service to prioritise the regular evaluation and updating of support plans, alongside consistent, person?'centred review meetings (See Area for Improvement 1). Strengthening these processes will ensure that people continue to experience very good outcomes and the person?'centred ethos of the service is sustained.

Areas for improvement

1. To promote people's health and wellbeing, the service should ensure that people's support plans are frequently updated, and every person has a six-monthly review.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

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?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How well is our care and support planned?	4 - Good
5.2 Carers, friends and family members are encouraged to be involved	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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