

# North West Care Cooperative Limited

## North West Care Cooperative - Chester

### Inspection report

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Date of inspection visit:  
21 March 2022  
23 March 2022  
05 April 2022

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### Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

North West Care Cooperative - Chester is a domiciliary care service which provides care and support for its 'members'. 'Members' are people who receive direct payments or personal health budgets; either for their own care or for the care of dependants. People using the service received care and support from personal assistants. The service was providing support to 16 people at the time of the inspection.

Not everyone received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do; we also consider any wider social care provided.

### People's experience of using this service and what we found

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

### Right Support

People were supported to have maximum choice and control of their lives and personal assistants supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People had a choice in who supported them; and when their support would be provided. Personal assistants knew people well and trusting relationships had been formed.

Personal assistants supported people to take part in employment and education opportunities and to pursue their leisure interests in their local area.

### Right Care

People received kind and compassionate care. Personal assistants protected and respected people's privacy and dignity; understanding and responding to their individual needs.

### Right culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the registered manager and personal assistants employed. People received good quality care and support and because appropriately trained personal assistants could meet their needs and wishes.

People receiving support, and those important to them, were involved in planning their care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 04 March 2019 and this is the first inspection.

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook this inspection to assess that the service is applying the principles of Right support right care right culture.

#### Recommendations

We have made a recommendation about the recording of prescribed medicines. We have also made a recommendation about documenting training records.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# North West Care Cooperative - Chester

## **Detailed findings**

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

This inspection was carried out by one inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave a short period notice of the inspection. This was because we needed to seek consent to visit people and speak to them about their views of the service. This was also because it is a small service and we needed to be sure that the registered manager would be available to support the inspection.

Inspection activity started on 21 March 2022 and ended on 05 April 2022. We visited the office location on 05

April 2022.

#### What we did before inspection

We reviewed information we had received about the service since it registered. We also used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided. We also watched a video from one person who had been unable to meet us in person; but wanted to share their views with us using this method of communication.

We spoke with five members of staff including the registered manager and a number of personal assistants.

We reviewed a range of records. This included three people's care and support records and two medication records. We looked at three personal assistant's files in relation to recruitment and supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- Systems were in place to ensure medicines were managed safely. However, the provider policy lacked standardised document templates. This meant different systems were used by personal assistants to record the administration of prescribed medicines. We discussed with the registered manager adopting a standardised approach to recording to promote good governance.

We recommend the provider refers to current guidance when developing standardised templates for recording the administration of medicines.

- People received their medicines as prescribed.
- Medicines were only administered by personal assistants who had the correct training to do so.

### Staffing and recruitment

- Recruitment procedures were safe. Pre-employment checks were carried out to ensure personal assistants were suitable for the role; however, this approach was not standardised. We discussed with the registered manager the need to standardise the approach to obtaining records; in particular, when people joined the service with their personal assistant already employed. We received assurance this would be reviewed.
- People told us they had been involved in choosing their personal assistant. They could also choose when they wanted their support to be provided.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse. Personal assistants received training and understood the actions they must take if they felt someone was being harmed or abused.
- Systems were in place to record accidents and incidents. They were reviewed regularly by the registered manager to look for any trends; and identify whether future incidents could be prevented.

### Assessing risk, safety monitoring and management

- People's needs were appropriately assessed; support plans had been developed to minimise any risk to people's health and wellbeing.

### Preventing and controlling infection

- Systems were in place to manage risk and to prevent and control the risk of infection. Personal assistants had access to appropriate personal protective equipment (PPE) and completed regular testing for COVID-19.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Training records were available; however, a number of personal assistants had received specialised training around one person's needs prior to being employed by North West Care Cooperative - Chester. This training had not always been documented.

We recommend the registered manager reviews the training records of all personal assistants to ensure an accurate record is maintained.

- Personal assistants confirmed they completed an induction when they started employment. One commented, "I had an induction. [The registered manager] was very helpful."
- Personal assistants told us they received ongoing advice and support from the registered manager. Comments included, "Yes I have meetings with [the registered manager]. Any questions I can check out. We don't have formal supervision, but we do have conversations."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's needs were discussed and agreed with them before they received a service. This information was used to develop risk assessments and support plans which reflected best practice guidance.
- Personal assistants worked with other agencies to ensure people received consistent, effective and timely care. People had the equipment they needed and professional guidance was reflected in people's support plans.
- People confirmed they were supported to access their GP and other health services when they needed. One person told us, "[My personal assistant] will take me to doctor or dentist."

Supporting people to eat and drink enough to maintain a balanced diet

- Personal assistants were aware of people's nutritional needs. Information about how people should be supported was clearly documented within support plans.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as



possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- The service was working within the principles of the MCA. Personal assistants had received training and demonstrated an understanding of the principles of the MCA.
- People confirmed their personal assistant always sought their consent before providing care and support.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Supporting people to express their views and be involved in making decisions about their care

- Records demonstrated people were fully involved in decisions about their support. Where appropriate, family members were also involved. One relative told us, "I can inform [the registered manager] if I want any changes."
- People confirmed they were involved in making decisions about their support. Comments included, "My support plan is on the cloud. I can see it. I was involved in the support plan" and, "I enjoy having a personal assistant. I would speak to my personal assistant if I wanted to make changes."

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- We observed warm and friendly interactions. Personal assistants spoke to people in a respectful and caring manner.
- Personal assistants considered characteristics protected under the Equality Act 2010 when developing and reviewing support plans with people.
- People were encouraged to do as much as they could for themselves. Comments included, "I am happy with my support. I have become more confident" and, "I want to be independent and get my own house. I am helped with doing life skills, like cooking." One personal assistant added, "My job is about enabling independence. It's what we are about, to develop skills."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received personalised support which reflected their needs and preferences. Support plans were person centred; people confirmed they had been able to discuss their care needs and wishes. One person told us, "I like [my personal assistant]. She will help me with shopping, cooking and sometimes to have a shower."
- Support plans were reviewed on a regular basis in response to changes in need. One personal assistant told us, "I call [Name] if there are to be any changes to make sure he is happy. It's a partnership. It's their choice."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager had developed a series of videos to inform people about the services they provided. These were accessible on the provider website.
- The communication needs of people had been assessed and reflected within support plans.
- People told us about how they were supported with their communication needs. One person commented, "I have a support plan. I can't read but my personal assistant will explain it to me."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People's social and cultural interests were considered when developing support plans. People were supported to pursue these interests. Comments included, "I did a sponsored walk for where we live to do up the garden," "My personal assistant has arranged a trip for my birthday. I have been involved in planning it" and, "I like going to the cinema, bowling, golf and seeing my friends."
- Personal assistants described how support from the provider had positively impacted on the quality of people's lives. One told us, "[Name] has a new lease of life. North West Care Cooperative - Chester has helped to get a second member of staff. He can go to clubs now."

Improving care quality in response to complaints or concerns

- There was a system in place for recording and responding to complaints.
- People confirmed they knew how to raise concerns.

#### End of life care and support

- At the time of the inspection, nobody was being care for at the end of their life.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- North West Care Cooperative - Chester described itself as a 'user led' organisation. This meant people receiving support, their personal assistants and family members were fully involved in decisions about how the service is run. People we spoke with confirmed this to be the case. Comments included, "[North West Care Cooperative - Chester] have been fantastic. It has been 100% better since [Name] had a previous care provider," "There is so much communication between everyone," and "We have ongoing meetings and chats for a check in."
- One person who received support also described how they were helping to manage the provider's social media pages.
- People were guided by a registered manager who was committed to delivering a person-centred service. One family member told us, "They have taken a huge amount of stress away from me. I would recommend [the provider]. It takes all the stress of employing carers away and I can call on their experience."
- Personal assistants were committed to providing a high standard of care and support. One told us, "We work in partnership with people and family members. We take photographs to evidence what we do."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The provider understood their responsibility for notifying the Care Quality Commission of events that occurred within the service.
- The registered manager demonstrated an understanding of their responsibilities under duty of candour.
- The registered manager demonstrated a commitment to ongoing learning and improving care. We were shown a new system which had been developed to strengthen the quality of record keeping. We found the registered manager and personal assistants to be very responsive to any feedback we shared during the inspection process.