

Review of compliance

North West Community Services (Greater
Manchester) Limited
North West Community Services (GM) Limited

Region:	North West
Location address:	Meridian House, 1069 Stockport Road Levenshulme Manchester Lancashire M19 2TF
Type of service:	Domiciliary care service Extra Care housing services Supported living service
Date of Publication:	July 2012
Overview of the service:	North West Community Services provides support and care to people with a learning disability, physical disability and / or mental health difficulties in their own home.

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

North West Community Services (GM) Limited was meeting all the essential standards of quality and safety inspected.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 20 June 2012, talked to staff and talked to people who use services.

What people told us

People who used the service said they were happy with the standard of care and support they received. They said the staff were always friendly and they had never been treated badly. They had no concerns to raise. Their comments included:

"The staff have good manners, they are very nice".

"The staff are always there for you".

"The staff are very hard working, they are the best staff."

"I have known the staff for a long time, I can do what I want, I'm happy with everything".

"The support workers are doing fine, I'm really pleased with them".

"I'm happy with the care I get, the staff are lovely. I have never been treated badly".

"I'm very happy with everything, no problems at all".

"The staff always ring me if they are late".

What we found about the standards we reviewed and how well North West Community Services (GM) Limited was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

The provider was meeting the standard. Peoples privacy and dignity was respected.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

The provider was meeting the standard. People experienced care, treatment and support that met their needs and protected their rights.

Outcome 07: People should be protected from abuse and staff should respect their human rights

The provider was meeting the standard. People were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

The provider was meeting the standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The provider was meeting the standard. The provider had an effective system in place to identify, assess and manage risk to the health, safety and welfare of people using the service.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People who used the service said the staff always treated them with respect. One person said, "The staff have good manners, they are very nice". Another person said, "The staff are always there for you".

Other evidence

The promotion of peoples dignity and including them in the development of their care was fundamental to the philosophy of the organisation. The manager summed this up by stating the agency was there "to support people to live their lives to the full."

Staff were trained to respect and involve people and provided with information about how to promote peoples dignity in their work. During discussion, staff talked about the people they supported in a respectful way and explained how they ensured peoples rights were promoted. During discussion staff talked about the people they supported in a respectful way and explained how they ensure peoples rights are promoted. A development day had been arranged for the people who used the service. The purpose of this was to find out what people thought of the service, what worked well and how things could be improved. Some of the people who used the service received 24 hour care. In these settings regular meetings took place so people had the opportunity to put forward their views of the service and the running of their placement.

Our judgement

The provider was meeting the standard. Peoples privacy and dignity was respected.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

People who used the service said the staff always treated them with respect. One person said, "The staff are very hard working, they are the best staff." Another person said, "I have known the staff for a long time, I can do what I want, I'm happy with everything".

Other evidence

We looked at a selection of care plans for the people who used the service. Each person had their own case file which included information about the agreed plan of support. The care plans were regularly reviewed so that peoples changing care needs were identified and planned for. The people who used the service confirmed they were involved in the review process so they could tell the staff about what was important to them. The manager acknowledged the care plans needed to be developed so that it demonstrated more clearly the details of the actual care being provided.

The inspection of the agency focused on the experience of the people who used the service. We agreed that the written care plans could be further improved as acknowledged by the manager. However, it was clear from peoples comments that the people who used the service received the care and support they needed.

Our judgement

The provider was meeting the standard. People experienced care, treatment and support that met their needs and protected their rights.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

The people who used the service had no concerns to raise about their the way they were treated. One person said, "The support workers are doing fine, I'm really pleased with them". Another person said, "I'm happy with the care I get, the staff are lovely. I have never been treated badly".

Other evidence

The manager was clear about the procedure to follow in the event of an allegation of abuse being made. The agency had a copy of the appropriate safeguarding procedure to support them to consider the action to take regarding any safeguarding allegations.

Systems were in place to monitor staff performance through supervision and spot checks which further safeguarded the welfare of the people who used the service.

Staff were trained on how to safeguard people from abuse and harm when they were first employed and this was part of the ongoing training programme. Information on safeguarding vulnerable adults from abuse was issued to staff so they were clear on their responsibilities and knew what to do if they suspected or knew an incident of abuse had taken place. During discussion, staff demonstrated a good understanding of the different types of abuse that can take place and the signs to look out for. Staff were clear on the meaning of whistleblowing which further ensured people were protected from the risk of harm.

Our judgement

The provider was meeting the standard. People were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

No information was obtained from the people who used the service about this outcome area.

Other evidence

We spoke with several staff who said they enjoyed their work and felt well supported in their role. One staff member said, "My manager is excellent, I can approach her with anything." Another staff member said, "All the senior staff are very supportive. I love my work and we all work well as a team." Staff told us they were provided with intensive training when they were first employed so they were clear on their responsibilities and knew what was expected of them. Ongoing training was also provided which staff said was "interesting" and "relevant to their work". The training programme included training in the following areas: the mental capacity act, mental health, communicating with people with a learning disability and medication procedures. Staff could request specialist training to support people with specific individual care needs and ensure they received the care and support they needed. The ongoing training programme ensured staff were kept up to date with changing care practices and ensured staff could acquire further skills and knowledge relevant to their role. One staff member said, "The training has improved over the years, it is spot on." Another staff member said, "The training is brilliant, I really enjoy it."

Staff met regularly with their line manager to discuss their work and training needs. This provided an opportunity for staff to improve their skills and develop in their role. Staff had an annual appraisal of their work which helped to ensure that they focused on the needs of the people who used the service through the aims and objectives of the

organisation. Regular team meetings took place to ensure good communication amongst the staff team.

Our judgement

The provider was meeting the standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

The people who used the service were happy with the way the service was delivered. One person said, "I'm very happy with everything, no problems at all". Another person said, "The staff always ring me if they are late".

Other evidence

Systems were in place to ensure the ongoing monitoring and improvement of the service and the efficient and effective running of the business. The systems were focused on the needs of the people who used the service.

Staff were monitored and supported in their work and provided with a range of training to ensure they kept up to date with changing care practices and could develop in their role. Disciplinary procedures were in place to manage staffs conduct in the workplace.

The people who used the service were consulted for their views through regular meetings, direct contact with staff, reviews of their care packages and development days.

A business plan was in place. This helped staff to be clear about the future focus and development within the service. The board of d directors were regularly updated about the day to day running of the agency. The manager said she enjoyed her work and was well supported in her role.

Our judgement

The provider was meeting the standard. The provider had an effective system in place to identify, assess and manage risk to the health, safety and welfare of people using the service.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. We ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA