

Community Care Worker Limited

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Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We carried out unannounced comprehensive inspections of this service on 19 January 2016 and 25 July 2016 and breaches of legal requirements were found. After the comprehensive inspections, the provider wrote to us to say what they would do to meet the legal requirements. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Community Care Worker Limited on our website at www.cqc.org.uk.

As a result of our last inspections, this provider was placed into special measures by CQC. Services that are in Special Measures are kept under review and inspected again within six months. We expect services to make significant improvements within this timeframe. During this inspection the service demonstrated to us that improvements have been made and is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is now out of Special Measures.

Community Care Worker Limited are registered to provide personal care. People are supported with their personal care needs to enable them to live in their own homes and promote their independence. At the time of the inspection the service supported four people in their own homes.

There was a registered manager at the service who was also the provider. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People's risks had been planned for and staff knew how to support people safely. We found that some improvements were needed to ensure that all records contained up to date information about people's risks.

Systems had been put in place to ensure that medicines were administered and managed safely. However, some further improvements were needed to ensure that there was detailed guidance for staff to follow when administering topical creams.

Improvements had been made to the systems in place to assess and monitor the quality of the service. However, some improvements were needed to ensure these were consistently effective and the monitoring of the service was sustained.

People were protected from the risk of abuse because staff understood their responsibilities and actions required to safeguard people from the risk of harm.

There were enough suitably trained staff available to meet people's assessed needs. The provider had safe

recruitment procedures in place and we found that required checks had been carried out on all staff to ensure that staff were suitable and of good character to provide care to people who used the service.

People had been asked to provide feedback about the quality of service they received. Where people had given feedback this had been recorded and acted upon by the registered manager.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve safety.

Further improvements were needed to ensure to ensure records contained details for staff to follow to keep people safe.

Systems were in place to ensure that medicines were administered and managed safely. However, some further improvements were needed to ensure that there was detailed guidance for staff to follow when administering topical creams.

Staff and the registered manager understood their responsibilities to protect people from the risk of abuse.

There were enough staff available to provide support to people when they needed it. The provider had safe recruitment practices in place.

Requires Improvement ●

Is the service well-led?

We found that action had been taken to improve how the service was managed.

Systems that had been implemented to assess, monitor and manage the quality of the service. Further improvements were required to ensure these systems were consistently effective in identifying concerns.

People and staff told us improvements had been made to the organisation of the service and the way that care was provided.

People were asked to feedback their experiences of the service.

Requires Improvement ●

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Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 9 November 2016 and was unannounced. The inspection team consisted of two inspectors.

This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 25 July 2016 had been made. The team inspected the service against two of the five questions we ask about services: Is the service safe? Is the service well led? This is because the service was not meeting some legal requirements.

We reviewed other information that we held about the service. This included notifications we received about incidents and events such as; safeguarding and deaths that had occurred at the service, which the provider is required to send to us by law. We contacted local authority commissioners to obtain a view of their experiences with the service and provider.

We spoke with three people who used the service, four staff and the provider. We viewed four records about people's care, which included medicine administration records. We also viewed records that showed how the service was managed, which included five staff recruitment records.

Is the service safe?

Our findings

At our last inspection, we found that risks to people's safety and welfare were not consistently planned, monitored and managed. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection, we found the required improvements had been made to meet the regulation.

We found that improvements had been made to the way people's risks were monitored and managed. We saw that risk assessments were detailed and contained personalised information about people's needs and how staff needed to manage their risks. Staff we spoke with had a clear understanding of people's risks and knew how to support people safely. However, we found that although one person's management plan for their mobility contained good details of how staff needed to support them with a hoist, the plan did not contain details of how staff needed to move them safely using a board to transfer them from a chair to a commode. Staff were able to tell us in detail how this person was supported to move safely, but the records did not contain this information. This meant this person was at risk of receiving inconsistent care if new staff provided care to this person.

We found that improvements had been made to the way medicines were managed. We saw that the Medicine Administration Records (MARs) had been completed by staff when they had administered medicines. We saw that a medication risk assessments had been completed and there was an up to date list of people's medicines within the records. However, further improvements were needed to ensure that people's topical creams were recorded when administered. For example; we found that there were gaps in one person's skin records. We spoke with the person who told us they always had their cream applied by staff when they needed it and their skin was intact. The records we viewed showed that there were no current pressure areas or concerns with this person's skin. This meant that some improvements were needed to the way people's topical creams were recorded.

People told us that they felt safe when staff provided care. One person said, "The staff are very good, I have no problems and they always treat me well". Another person said, "The staff help me with everything. I couldn't do without them, I wouldn't be safe then". Staff told us how they supported people to remain safe and were able to explain the action they would take if they felt a person was at risk of abuse. One staff member said, "I would speak with the manager if I had any concerns. I also know I can report things to the local authority or CQC if I needed to". We spoke with the registered manager who understood their responsibilities to report abuse to the local authority where concerns were raised.

People and their relatives told us that there were enough staff available to provide care when they needed it. People told us that staff arrived on time and staff stayed for the amount of time they needed. One person said, "The carers come on time and they do everything I need. They even stay longer sometimes if I need them to". Staff told us they felt there were enough staff available and they have more time to provide support for people. One staff member said, "I think there is enough staff and if I have ever felt unwell or unable to carry out the calls, these have been covered immediately to ensure people still receive their care". The communication records and electronic call monitoring records we viewed confirmed that people

received their assessed care as planned.

We found the provider had a safe recruitment procedure in place. Staff told us they had undergone checks to ensure they were suitable to provide care to people. We viewed six staff files which showed that the registered manager had obtained references and staff had undergone criminal checks with the Disclosure and Barring Service (DBS). This meant people were supported by staff that were suitable to provide care.

Is the service well-led?

Our findings

At our last inspection, we found that there were not effective systems in place to assess, monitor and mitigate risks to people's safety. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection, we found improvements had been made to meet the regulation.

We found the registered manager had introduced systems to monitor and assess the quality of care. However, some of the systems in place were not always effective. For example; we saw that two people's skin integrity charts contained gaps in recording. We also saw that some information was missing from a person's manual handling risk plan. We viewed audits that had been carried out and these had not picked up the concerns that we identified at the inspection and therefore action had not been taken to ensure that people were receiving their care as required. The registered manager and care co coordinator were unable to explain why these had not been identified. This meant that further improvements were needed to ensure the checks carried out were effective.

We saw the registered manager had introduced a system to monitor the length of time staff stayed at people's homes. This was an electronic system where staff were required to log in and out of the visits at people's homes. We saw that a report had been completed on a monthly basis to show the percentage of time at people's homes. Staff at the office told us they constantly monitored the system and where staff were 10 minutes late logging in to the system the member of staff would be called to ensure people received their care. We saw that the system was effective and showed that people were receiving their calls on time and staff were staying the amount of time required. This meant improvements had been made to the system in place to ensure people were receiving their planned care.

People told us that there had been improvements in the service they received. One person said, "It is better now and has improved a lot". Another person said, "I am happy with the changes made, the staff are very good and they know exactly what I need". Staff told us that they had seen improvements since the last inspection and they felt the management of the service was more organised. One member of staff said, "There have been a lot of improvements. The management is better and we are providing a good service to people". The registered manager told us how they had improved the systems and organisation of the service by appointing more co-ordinators to undertake some of the office based work. The registered manager said, "We have worked really hard to take on board what you have said in previous inspections. I think we have made a lot of changes. It is important to me that we provide good care". The registered manager told us that they had undertaken training to understand their responsibilities as a registered manager and they had enrolled on a management course to ensure they were continually developing their skills. This meant that the provider had made improvements to the way they led the service.

People told us that they had been asked for feedback about their care. One person said, "The registered manager has been out to see me to make sure I am happy with the carers and I have everything I need". We saw that feedback forms had been sent to people and their relatives to gain their experiences of the care provided. The feedback gained from people was positive and contained comments such as; "All care

workers look after me well" and, "The care workers are very good. They clean and look after me". This meant that the registered manager had gained feedback from people to ensure people were receiving a good standard of care.