

Community Care Worker Limited

# Community Care Worker Limited

## Inspection report

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19 October 2022

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## Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	<b>Inspected but not rated</b>

# Summary of findings

## Overall summary

### About the service

Community Care Worker Limited is a domiciliary care service that provides personal care to people living in their own homes. At the time of our inspection, the service was providing personal care support to 76 people.

Not everyone who used the service 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

This was a targeted inspection that considered the safe administration and recording of medicines. Based on our inspection of medicines management we found people did not always receive their medicines as they were prescribed. People did not always receive their medicines in line with safe practice guidance. People did not always receive their time specific medicines at the correct time. People did not always have accurate guidance in their medicines records to support staff to administer their medicines safely.

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 and update

The last rating for this service was inadequate (published 29 September 2022). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found the provider remained in breach of regulations.

### Why we inspected

We undertook this targeted inspection to check on a specific concern we had about the management of medicines. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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](http://www.cqc.org.uk).

### Enforcement and Recommendations

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took

account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service and will take further action if needed.

We have identified a continued breach in relation to the safe management of medicines at this inspection.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

#### Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

#### Special Measures

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

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

We always ask the following five questions of services.

## Is the service safe?

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

# Community Care Worker Limited

## **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 under the Health and Social Care Act 2008.

This was a targeted inspection to check on a concern we had about the management of medicines.

#### Inspection team

This inspection was completed by three inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was to be sure there would be people and staff

available to speak with us.

Inspection activity started on 19 October 2022 and ended on 20 October 2022. We visited the location's office on 19 October 2022.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We 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. We used all this information to plan our inspection.

#### During the inspection

We spoke with 26 people who used the service and relatives over the telephone. We spoke with 15 staff members. This included care staff, office staff, managers, the registered managers and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with one external consultant the provider had employed to support the service.

We reviewed 49 people's medicine and care records. We also looked at records relating to the management of the service, including audits, meeting minutes and call timings.

# Is the service safe?

## Our findings

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

At our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check a concern we had about medicines management. We will assess the whole key question at the next comprehensive inspection of the service.

### Using medicines safely

At our last inspection the provider had failed to ensure medicines were managed safely and placed people at risk of harm. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection the provider had not made enough improvement and remained in breach of regulation 12.

- People were not always supported to receive their medicines safely. At our last inspection we identified concerns in relation to people's medicines records not containing the correct information, time sensitive medicines being administered against how they were prescribed, and National Institute for Clinical Excellence guidance not being followed. At this inspection we found improvements had not been made and these concerns were continued.
- People did not always receive their medicines as they were prescribed because staff did not follow instructions on medicines records. One person was prescribed medicine for their diabetes twice a day, however staff were administering this three times daily. This placed them at risk of harm of their diabetes not being managed safely.
- When people were prescribed time sensitive medicines, they did not always receive these as they were prescribed. One person was prescribed medicine for pain relief which required doses to be spaced 12 hours apart. However, they did not always receive this medicine at the correct time. This placed them at risk of their pain not being effectively managed.
- People did not always have doses of medicines recorded on the medicine records. This meant there was not always guidance in place for staff to ensure people received their medicines as they were prescribed, placing people at risk of harm.
- When doses of medicines were recorded on people's medicines records these were not always accurate as the medicines were prescribed. One person was prescribed ibuprofen 200mg. However, this had been recorded on their medicines records as 500mg. Staff had signed to say they had administered this dose to the person. Whilst the provider told us staff had only administered the 200mg dose the person was prescribed, they could not be assured of this. This placed the person at risk of harm.
- When people received their medication via a trans-dermal patch the provider had failed to ensure there was sufficient guidance in place around where patches should be placed. This placed people at increased risk of skin irritation from patches being applied in the same place.

The provider responded immediately during and after the inspection. The provider took action including involving other health professionals, to reduce the risk to people we had identified were at risk of not receiving their medicines safely. The provider also took action to make improvements to their medicines records and the support provided by staff completing these.



This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	<p>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</p> <p>Medicines were not administered safely. The provider continued to fail to ensure medicines records reflected accurately what people were prescribed and in line with best practice guidance.</p>