

# Review of compliance

Kelly Park Caring Agency Limited Kelly Park Caring Agency Limited	
<b>Region:</b>	North East
<b>Location address:</b>	Suite 54, Derwentside Business Centre Consett Business Park Consett Co Durham DH8 6BN
<b>Type of service:</b>	Domiciliary care service
<b>Date of Publication:</b>	April 2012
<b>Overview of the service:</b>	Kelly Park Caring Agency are registered to provide personal care and support for people living in their own homes. They provide care to people living in County Durham, Gateshead and Newcastle.

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

## Our current overall judgement

**Kelly Park Caring Agency Limited was not meeting one or more essential standards. Improvements are needed.**

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 to check whether Kelly Park Caring Agency Limited had made improvements in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 12 - Requirements relating to workers
- Outcome 14 - Supporting staff

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 7 March 2012, talked to staff and talked to people who use services.

### What people told us

People said that the agency had fully included them in all aspects of their care before starting the service. They said that they had discussed and signed agreements with the agency about the support that they needed. Everyone we spoke with made positive comments such as "very pleased", "absolutely great" and "very satisfied" with the care and support they received from this agency

### What we found about the standards we reviewed and how well Kelly Park Caring Agency Limited was meeting them

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

Overall, Kelly Park met this essential standard. Individual care and welfare needs were generally met by the service.

#### **Outcome 12: People should be cared for by staff who are properly qualified and able to do their job**

Overall, Kelly Park met this essential standard. Staff were provided with training to give them the skills and knowledge needed to care for people.

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

Overall, Kelly Park met this essential standard. Staff received appropriate supervision.

**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.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

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

## 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

One person commented very positively on this and said, "The manager wrote down very specific information about my condition and how it affects me. She has put it in my care folder so that any staff visiting me can read it and understand it."

Another person commented that they had been given all the information they needed from the agency.

One person said that they felt fully in control of their care package and commented, "I have a team of regular staff who know my needs very well. This works well because I choose who does what and they understand my needs."

One person said, "I can let them know what I need and they understand. We have a very good working relationship and they are very flexible to meet my times and needs."

Another person said, "I was in hospital a few months ago. When I returned home I was provided with extra visits until I was fully recovered, and the extra care I received was given by my regular carers."

People told us, "It's a good service and I'm well looked after with my meals."

One person said, "They are a big help with my meals. I like things done in a particular way so I tell the carers how to do it. They are very good, and no matter what I ask them to do, they do it the way I want."

Several people commented positively on the joint work between the agency and social services department to make sure they received the support they needed. One person said, "My care manager helped me to arrange my care with the manager of Kelly Park. I'm very pleased with the service, all the girls are canny."

People said that they had been given information from the agency about how to raise any concerns. One person said, "They gave me a booklet with all the information in."

People said that they would feel comfortable about contacting the manager or office staff to discuss any concerns. All the people we spoke with commented that they had no real concerns about the service; one person said, "They are sometimes late but they usually ring and let me know. Once a new worker turned up and she wasn't very friendly, when I told the manager about this, she never came back."

Several people expressed concerns about how little time their support workers were allocated time between each visit, for example, one person described how their support worker had a visit scheduled between 6.30am and 7.00am in Newcastle, and even though they lived approximately 4 miles away, their own visit was scheduled from 7.00am till 7.30am.

#### **Other evidence**

When we last visited this service, we asked for improvements to be made because care plans were not person centred.

Between 13/03/2012 and 16/03/2012 we visited nine people who used the service and looked at the care records held in peoples' homes, these matched the electronic records held at the agency's head office. Not all plans were person centred. (Person centred means that they were written in a way to describe the person's abilities and how they preferred their care needs to be met). However, we saw some good examples of person centred care plans when we visited Kelly Park on 07/03/2012. The acting manager told us that it is the provider's intension to eventually have all care plans written in this way.

#### **Our judgement**

Overall, Kelly Park met this essential standard. Individual care and welfare needs were generally met by the service.

## Outcome 12: Requirements relating to workers

### 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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

### What we found

#### Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

#### Our findings

##### What people who use the service experienced and told us

The staff we met with told us that they received "enough training to meet the needs of clients."

##### Other evidence

When we last visited this service we made a compliance action because there was little evidence that staff had received ongoing training following their induction training; this was because training records had not been kept up to date.

When we visited on 7 March 2012, we spoke with the acting manager and the registered provider and asked them about the actions they had taken to make improvements since our last visit. They told us that the human resources manager now keeps a record of the training staff have had and that a staff training programme had been devised to run throughout the year. They were able to tell us the mandatory topics that they expected staff to complete. We asked to see evidence of this and were shown the records held on computer along with a copy of the staff training programme that had been organised.

When we visited on 19 March 2012, we met with eight staff and asked them to complete a questionnaire about their training. In general staff told us that they felt that they had received enough training to meet the needs of the people they cared for. They listed the training they had received about health and safety, medication and dementia care, they also told us who had given them the training. For example training that was done in house or through a college. Training was taking place on the day we visited.

**Our judgement**

Overall, Kelly Park met this essential standard. Staff were provided with training to give them the skills and knowledge needed to care for people.

## 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

The staff we met with told us that they had received supervision.

##### Other evidence

When we last visited this service we made a compliance action because staff were not receiving regular supervision and support to enable them to provide care and treatment appropriately to people who use services.

When we visited on 7 March 2012, we spoke with the acting manager and the registered provider and asked them about the actions they had taken to make improvements since our last visit. They told us what the company policy was on staff supervision and that they were able to monitor who had and who had not received supervision. They told us who was responsible for supervising staff and what arrangements they had in place to ensure that holidays and sickness did not prevent people from receiving supervision.

We looked at the supervision records for fifteen staff and saw that they had been completed in some detail and signed by both the supervisor and supervisee.

When we visited on 19 March 2012, we met with eight staff and asked them to complete a questionnaire about their supervision. All but one person (who had not been employed long enough to receive supervision) confirmed that they had received supervision and were able to give the name or job role of the person who had supervised them. Most people told us that they had received supervision in the last two – three months.

**Our judgement**

Overall, Kelly Park met this essential standard. Staff received appropriate supervision.

# 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.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, 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

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