



*Making Social Care
Better for People*

inspection report

DOMICILIARY CARE AGENCY

Kelly Park Caring Agency Limited

**Suite 54
Derwentside Business Centre
Consett Business Park
Consett
Co Durham
DH8 6BN**

Lead Inspector
Hilary Stewart

Unannounced Inspection
15th and 25th July 2008 10:00

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this agency are those for *Domiciliary Care*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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SERVICE INFORMATION

Name of service	Kelly Park Caring Agency Limited
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Provider Web address	www.kellypark.co.uk
Name of registered provider(s)/company (if applicable)	Kelly Park Caring Agency Limited
Name of registered manager (if applicable)	Richard Bird
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 16th July 2007

Brief Description of the Service:

Kelly Park Caring Agency Ltd provides Domiciliary Care to younger adults and older people, between the hours of 7 am & 10.30 pm, 7 days a week.

The Agency provides care services to people across a range of care needs including people with physical disabilities; sensory impairment; mental health problems; and other specific health needs and illnesses.

The Agency is run from a well-equipped office premises at Consett Business Park. The Agency contracts with the local authority and will provide care to both privately funded and local authority funded clients.

Fees charged by the Agency are £10.70 to £11.10p per hour; this includes Bank Holidays and week-ends.

SUMMARY

This is an overview of what the inspector found during the inspection.

The quality rating for this service is **2 star**. This means the people who use this service experience **good** quality outcomes.

Before the visit:

We looked at:

- Information we have received since the last visit.
- How the service dealt with any complaints & concern.
- Any changes to how the agency is run.
- The views of people who use the service, the staff & other professionals.

The Visit:

An unannounced visit was made on 15th July 2008 and visits to people who use the service were carried out on the 25th July 2008.

During the inspection we:

- Talked with the staff and the manager.
- Looked at information about the people who use the service & how well their needs are met,
- Looked at other records which must be kept,
- Checked that staff had the knowledge, skills & training to meet the needs of the people they care for,
- Spoke to some of the people who use the service
- Looked at the surveys that had been returned from the staff and people who use the service.

We told the office manager what we found.

What the service does well:

Information is available to help people make an informed choice about the service before they decide to use it.

The agency carries out individual assessments for each person who uses the service. This means that they can be sure that the staff at the agency can meet the person's needs before they are offered a service.

All of the people who use the service have plans of care and risk assessments. This is so staff have the information they need to support each person and keep them safe.

There are procedures for staff to follow about the administration and recording of medication. This is to make sure the people who use the agency receive their medication when they need it and at the correct times.

The agency has procedures in place to make sure that only suitable people work for them so the people who use the agency are kept safe.

The agency has adult protection policies and procedures for the staff to follow. At the time of these visits to the service staff knew how to safeguard and protect the people who use the agency.

Complaints about the agency are taken seriously and are looked into so that any problems or grievances can be resolved and people can be satisfied their concerns are listened too and acted upon.

Appropriate management of the agency's financial affairs means that it operates on a sound financial basis, so people who use the service can be assured that the support from the agency will continue.

What has improved since the last inspection?

The agency are in the process of implementing an electronic monitoring system that will be enable them to monitor the times of visits by carers. This will help to make sure people receive the service when they should.

Risks associated with a person's mental or physical health are now assessed so that people who use the service can be supported and kept safe.

Staff now receive training in the use of bed-rails and the action to take when any conditions change so they can protect the people who use the service.

An appropriately trained member of staff now undertakes moving and handling risk assessments. When staff are required to support a person with any manual handling tasks, as required under the Manual Handling Operations Regulations 1992 details are kept in individual care plans to make sure the staff know how to support them so they are kept safe.

All of the people who use the service now have care plans so staff have more information to enable them to meet each person needs.

New staff have received training in all the statutory health and safety areas, and been made aware of relevant policies and procedures. This is before they work in areas where these are needed so that neither they, nor the service users, are put at risk.

Adult protection policy and procedure documents have been amended to reflect local protocols, contact arrangements, and the initial action to be taken if an allegation of abuse arises. New staff receive training on abuse and adult

protection as part of their induction so they know how to protect the people they are supporting.

The agency has a key safe policy, which gives people who use the service the opportunity to alter their key code when staff, who have had the code, leave the agency. Staff do not use people's PIN cards to access money. This means that they are protected and their property is kept secure.

There agency now has a system to make spot checks on the finance and visit records that staff make so they can ensure they are accurate and that staff are following the agency's procedures.

What they could do better:

If all of the people who use the service had enough detail in their plans of care and risk assessments, this would make sure that staff have the information they need to support each person and keep them safe.

More detailed risk assessments which are individualised and more person centred would make sure that staff are able to keep the people who use the service as safe as possible.

If more detailed records were kept of complaints and the outcomes the agency could use the information to improve the service.

Training for staff in how to support people with a learning disability would give them more skills and make them more aware of how to meet the needs of people who use the service.

As far as possible, the agency should keep the same care staff for each service user so they have continuity of care and feel safe with people they know.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

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Personal Care (Standards 7-10)

Protection (Standards 11-16)

Managers and Staff (Standards 17-21)

Organisation and Running of the business (Standards 22-27)

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

User Focused Services

The intended outcomes for Standards 1 – 6 are:

1. Current and potential service users and their relatives have access to comprehensive information, so that they can make informed decisions on whether the agency is able to meet their specific care needs.
2. The care needs requirements of service users and their personal or family carers when appropriate, are individually assessed before they are offered a personal domiciliary care service.
3. Service users, their relatives and representatives know that the agency providing their care service has the skills and competence required to meet their care needs.
4. Each service user has a written individual service contract or equivalent for the provision of care, with the agency, except employment agencies solely introducing workers.
5. Service users and their relatives or representatives know that their personal information is handled appropriately and that their personal confidences are respected. In the case of standards 5.2 and 5.3, these do not apply to employment agencies solely introducing workers.
6. Service users receive a flexible, consistent and reliable personal care service. In the case of standards 6.3 and 6.4 these do not apply to employment agencies solely introducing workers.

The Commission considers Standard 2 the key standard to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

2

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

Each person's care needs are assessed before they are offered a service. This is so the staff can be sure that they can meet their needs and provide them with a flexible and supportive service.

EVIDENCE:

The manager said that when a person is referred for a service they are assessed to make sure that the agency can meet their needs. A homecare coordinator visits the person at home to carry out a care needs assessment and a risk assessment. A care plan is then agreed between the coordinator and

the person using the service. The assessment looks at the individual needs of the person, what type of support they need such as practical support and personal care. Moving and handling risk assessments are carried out to determine the safest method of transfers where required. Access to the property, key holders and security are discussed. The manager said that a person is not offered a service unless they are sure that the agency can meet their needs.

Personal Care

The intended outcomes for Standard 7 – 10 are:

7. The care needs, wishes, preferences and personal goals for each individual service user are recorded in their personal service user plan, except for employment agencies solely introducing workers.
8. Service users feel that they are treated with respect and valued as a person, and their right to privacy is upheld.
9. Service users are assisted to make their own decisions and control their own lives and are supported in maintaining their independence.
10. The agency's policy and procedures on medication and health related activities protect service users and assists them to maintain responsibility for their own medication and to remain in their own home, even if they are unable to administer their medication themselves. In the case of standards 10.8 and 10.9, these do not apply to employment agencies solely introducing workers.

The Commission considers Standards 8 and 10 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

7,8 and 10

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

Each person has their own care plan to make sure that they receive the care they need, in a way that respects their privacy and at the same time promotes their independence and right to make their own decisions. This means that they know they are valued as individuals. Care plans lacked enough detail to fully inform staff about how to meet the person's needs.

EVIDENCE:

The manager said and records showed that each person who uses the service has a plan, which is reviewed every year. Each care plan contains a schedule, which list the tasks the care worker needs to carry out. There is a copy of the Local Authority assessment of need, areas of risk assessment forms and

moving and handling information. A copy of the care plan is kept in the office and another is kept at the person's home so the care worker can use it.

Records showed and people said that they have a care plan in their home and the care worker makes daily recordings. One person said that the carer writes things down when they visit them. Staff said that each person has a copy of their care plan kept at their home, which tells them how they should meet the needs of the person who is receiving the service.

Not all care plans have enough detail to fully show how the needs of the people are met. For example one plan said to "prepare lunch" but did not give staff details of how to do this or if the person wanted to be supported or what their food preferences were. Another care plan at a person's home did not have any risk assessments or details about how staff should manage risk.

The manager said that care plans are personalised by providing the choice of gender of care worker the service and times of visits requested. It was not clear in the care plans looked at what the assessed needs and required outcomes of the people being provided with a service were, or how they were being met. Staff could describe how they would support the people they worked with and whether it was male or female staff that carried out personal care, but this was not written down in the care plan. One member of staff said that they thought there was enough in the care plans of the people they visit, as they know the person and are familiar with their needs. However records showed and some people have said that they have had frequent changes of carer. This means that some carers do not know the people they are supporting very well and are not familiar with their needs or how to meet them.

The agency provides information to people who use the service. This includes information on what they can expect from the agency; how to make a complaint; the skills and competencies of the agency. People are provided with a written agreement, which describes the responsibilities of the agency and the level and type of support offered to them. Records showed that people are given information about the service and a copy of the contracts are kept in the office copy of the file.

Most people said that they have good relationships with the staff that support them. Their care worker arrives when arranged at the appropriate time and they have the skills and knowledge to provide them with the care they need in the way that they prefer. One person said, "this agency is much more flexible than the last agency", another said, "they are always nice to me and treat me with respect". One person said, "I really like the manager he is really funny". Copies of care plans were seen during visits to people's homes. A relative said "they introduce the carers very well, and so far they have been very reliable".

Comments from the people who use the service were mainly positive such as

“They treat me with dignity” and “they are champion”. Another said they were happy with the service and felt safe with the workers. One person said that one care worker had been rude to them and they had asked the agency not to send them back to them, but unfortunately they had returned. The manager said that this issue has now been resolved.

The manager and staff said that the workers do not administer medication to people but will prompt them. One person said that staff would remind them to take their medication another said, “ they ask me if I have taken my tablets”. Records showed that staff do not administer medication but are asked to prompt people to remind them to take their own medication.

Protection

The intended outcomes for Standards 11 - 16 are:

- 11.** The health, safety and welfare of service users and care and support staff is promoted and protected, except for employment agencies solely introducing workers.
- 12.** The risk of accidents and harm happening to Service Users and staff in the provision of the personal care, is minimised, except for employment agencies solely introducing workers.
- 13.** The money and property of service users is protected at all times whilst providing the care service, except for employment agencies solely introducing workers.
- 14.** Service users are protected from abuse, neglect and self-harm, except for employment agencies solely introducing workers.
- 15.** Service users are protected and are safe in their home, except for employment agencies solely introducing workers.
- 16.** The health, rights and best interests of service users are safeguarded by maintaining a record of key events and activities undertaken in the home in relation to the provision of personal care, except for employment agencies solely introducing workers.

The Commission considers Standards 11, 12 and 14 the key standards to be inspected at least once.

JUDGEMENT – we looked at outcomes for the following standard(s):

11,12 and 14

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

The agency has health and safety management policies and practices that make sure that the people who use the service and staff are kept safe and that the rights and best interests of the people who use the service are promoted. People are supported to retain their independence but risks need to be more effectively assessed for each individual, so staff can keep the people who use the service as safe as possible.

EVIDENCE:

The manager said and records showed that the agency has policies and procedures for staff to follow such as health and safety and moving and handling. Records showed and staff said that they are aware of the procedures and they go through an induction period when they start to work for the agency. They shadow another more experienced worker at first. Staff said that they are provided with a copy of the agencies procedures when they start to work for them. They are supervised and do not work alone until they are assessed as being confident and competent to do so. One member of staff who had been employed by the agency for a few weeks said, " I have had more training with this agency than I have in the three years I worked in my last job." A senior member of staff said, "All staff get induction and they go through all of the policies and procedures."

The agency has policies and procedures to minimise risks to people who use the service and the staff. A general risk management plan looks at ways of minimising the risk during the visits. The manager said that the agency carries out detailed risk assessments around moving and handling and the person's home. The risk assessment now includes identifying any risks to the person's mental or physical health. General risk assessments had been carried out but some had not been signed or dated so it was not clear if they were up to date and accurate. One risk assessment was dated 2006. Staff said that they were aware of the measures they must take to ensure that they and service users are not at undue risk and said a copy of the risk assessments are kept in the care plans at peoples homes. Risk assessments were not in one persons care plan at their home.

The managers said that all staff have had training in how to protect people from harm. Staff said that they had received training with this agency. Staff could describe what to do if they suspected abuse was taking place. One person who uses the service said, "Yes, I feel safe with the staff"; another said, "The staff do listen." The manager said that the agencies adult protection policy and procedure was written in conjunction with the local authority and they are already aware of it's content. Fire drills and fire tests are carried out in the offices where the agency is based.

Managers and Staff

The intended outcomes for Standards 17 - 21 are:

- 17.** The well-being, health and security of services users is protected by the agency's policies and procedures on recruitment and selection of staff.
- 18.** Service users benefit from clarity of staff roles and responsibilities, except for employment agencies solely introducing workers.
- 19.** Service users know that staff are appropriately trained to meet their personal care needs, except for employment agencies solely introducing workers.
- 20.** The personal care of service users is provided by qualified and competent staff, except for employment agencies solely introducing workers.
- 21.** Service users know and benefit from having staff who are supervised and whose performance is appraised regularly, except for employment agencies solely introducing workers.

The Commission considers Standards 17, 19 and 21 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

17,19 and 21

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

The staff recruitment procedures protect the people who use the service by making sure that only suitable people are employed by the agency. Supervision and training is available to staff. This helps to make sure they know how to give the people who use the service good care and support when they need it.

EVIDENCE:

The people contacted said that the agency provides them with a good service. One person said, "Generally the service provided by the agency meets my requirements well and the carers are friendly and supportive." Another said, "They have been good so far and very reliable". When asked what could improve the service, one person said that the carers should have more time for some tasks; another said, "It would help if the same carer came every week,

too many changes in carers". One person said, "Personally, there is little room for improvement, in my case".

The agency has processes for the selection and recruitment of staff. Records showed that staff have been CRB (Criminal Records Bureau) checked at an enhanced level and have gone through the agency's recruitment process to make sure they are suitable people to work for the agency. The manager said that the agency takes the recruitment process very seriously and all staff are thoroughly vetted before they start to work for the agency. Some records showed that gaps in employment history had been explored. The manager and staff said that they had all gone through the recruitment process before they had started to work for the agency.

Records showed and staff said that they receive training, which helps them with their work. The manager said and records showed that 23% of the staff have vocational qualifications. One member of staff said, "The training is really good." Another said they had received training whilst working for the agency. The agency has a training suite in their main office and one of the managers carries out some of the training. It has equipment for moving and handling training and other personal care tasks.

Staff said they felt supported by their manager, one member of staff said about the agency "the manager is very supportive" another said, " I really like working for the agency".

Policies and procedures are in place for staff supervision. The manager said and records showed that all staff receive individual formal supervision at the required intervals. Staff said that they have supervision with their manager. One senior member of staff said, "All staff have four supervisions." Another member of staff said that they had received a supervision session.

In answer to the question, "What the agency does well?" a staff member said, "We give a friendly professional service".

Organisation and Running of the Business

The intended outcomes for Standards 22 – 27 are:

- 22. Service users receive a consistent, well managed and planned service.
- 23. The continuity of the service provided to service users is safeguarded by the accounting and financial procedures of the agency.
- 24. The rights and best interests of service users are safeguarded by the agency keeping accurate and up-to-date records.
- 25. The service user's rights, health, and best interests are safeguarded by robust policies and procedures which are consistently implemented and constantly monitored by the agency.
- 26. Service users and their relatives or representatives are confident that their complaints will be listened to, taken seriously and acted upon.
- 27. The service is run in the best interests of its service users.

The Commission considers Standards 22 and 26 the key standards to be inspected at least once.

JUDGEMENT – we looked at outcomes for the following standard(s):

22 and 26

Quality in this outcome area is **good**

This judgement has been made using available evidence including a visit to this service.

The agency is well managed so it provides a generally good reliable service which safeguards and promotes the well being of the people who use it. Any complaints are taken seriously so any issues are taken care of which helps good relationships to be maintained. Records of complaints lacked detail.

EVIDENCE:

The people contacted mainly said that the agency provides a good service. They said that the agency have supplied them with extra support when they have needed it. One person said that the care they have received has always been "up to standard" and "I have never had to complain". Some staff and people who use the service said that at times insufficient time is allocated to staff to complete tasks and get to the next call. This meant that they were late to the next person's house.

The agency has a complaints procedure. People said that they had been given information about this. The manager said that any complaints are taken seriously and dealt with quickly. They have had 51 complaints since the last visit 31 of which were upheld. The manager said and records showed that complaints are kept on the agencies database, which they can use to analyse and identify any patterns of complaints. However this method of recording did not clearly show the outcome of the investigation into the complaint or if the person who made the complaint was satisfied with this outcome. Records of complaints are not kept on the personal files of the people who use the service.

The manager said that the agency has a quality assurance system. People are asked their views about the service. They are visited every six months by a home care coordinator to review the person care plan or monitor the performance of the care worker. Surveys are sent out every year to people who use the service, their relatives and staff to ask for their views on the agency and the service it provides. All of this information is collected and the outcomes are made available to the people who use the service if they request it.

Almost all service users contacted by the CSCI indicated that the agency provides a reliable, flexible and efficient service to them. Many commented on the good quality of support provided by care staff.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Domiciliary Care have been met and uses the following scale.

4 Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion
 "N/A" in the standard met box denotes standard not applicable

User Focused Services	
Standard No	Score
1	3
2	X
3	X
4	X
5	X
6	X

Managers and Staff	
Standard No	Score
17	3
18	X
19	3
20	X
21	3

Personal Care	
Standard No	Score
7	2
8	3
9	X
10	3

Organisation And Running Of The Business	
Standard No	Score
22	3
23	X
24	X
25	X
26	2
27	X

Protection	
Standard No	Score
11	3
12	2
13	X
14	3
15	X
16	X

No

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Domiciliary Care Regulations 2002 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1.	DO7	14	Care plans must set out in detail the identified needs of each person who uses the service and how those needs are to be met by staff. The information and details provided in the plan must be appropriate for the complexity of the service to be provided.	01/10/08
2.	DO12	14	The registered person must make sure that risk assessments are appropriate to the individual and they are up to date, accurate and contain enough detail.	01/10/08
3.	DO26	20	Records of complaints must contain details of the investigations made, the outcome and any actions taken in consequence.	01/10/08

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1.	DO19	Staff should be given training or advice before working with service users who have special needs. See Appendix E in the National Minimum Standards.
2.	DO22	As far as possible, the agency should keep the same care staff for each service user.

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