

Siban Ltd

SIBAN LTD

Inspection report

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Website: adminsibancare.co.uk

Date of inspection visit:

25 August 2020

26 August 2020

27 August 2020

28 August 2020

01 September 2020

02 September 2020

Date of publication:

09 September 2020

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Siban Ltd is a domiciliary care agency which provides personal care to people in their own homes in the Leeds area. It mainly provides care to older people, some of whom are receiving palliative or end of life care. At the time of the inspection five people were using the service.

People's experience of using this service and what we found

Relatives told us the service provided high quality care which met individual needs. They said staff were kind, caring and treated people well. Relatives said they were confident their relatives were safe under the care of Siban Ltd.

People received care from a small group of staff which helped ensure staff were familiar with people and the risks they presented. Staff demonstrated a good understanding of the people they were supporting. Risks to people's health and safety were assessed and well managed. Medicines were managed safely although some minor improvements were needed to some documentation. Staff followed safe infection prevention practices.

There were enough staff to ensure people received a reliable and timely service. People received calls at a consistent time each day. Staff were recruited safely. Relatives told us that staff were all very kind and compassionate.

There was a visible, person centred culture within the home with all staff and the management team committed to delivering high quality care. People, relatives and staff were fully involved and engaged in people's care and how the service operated. A range of audits and checks were undertaken.

The service acted positively on the minor areas of improvement we suggested. They had plans to improve management systems and documentation as the service grew, demonstrating a service committed to continuous improvement.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 19/06/2020 and this is the first inspection.

Why we inspected

This was a planned inspection in line with our inspection programme. We have made changes to the way we work due to Covid-19. This is to avoid putting pressure on services that are caring for people. We completed a focussed inspection. During this inspection we looked at two key areas Is the service safe? and Is the service well-led? We do not look at all the five key questions during a focussed inspection. Therefore, the service was not given an overall rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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 and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Notice of inspection

We gave the service 24 hours' notice of the start of the inspection. This was because we needed to make arrangements for the service to send us contact details of people who use the service and staff and send some key documentation through to us.

Inspection activity started on 25 August 2020 and ended on 2 September 2020. We visited the office location on 2 September 2020.

What we did before the inspection

We reviewed information we had received about the service since its registration. We sought feedback from the local authority and local clinical commissioning group.

During the inspection

We spoke with three relatives of people who used the service, about their experience of the care provided. We spoke with four members of staff including the registered manager and care workers.

We reviewed a range of records. This included two people's care records and medication records. We looked

at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse and avoidable harm. Relatives said care staff were kind and treated their relatives well. They said they were confident Siban Ltd kept their relatives safe. People were cared for by staff they were familiar with, which helped build safe relationships. Staff had a good understanding of how to identify and report abuse. They had received training in safeguarding and had various mechanisms to raise concerns with the management team.
- Since the service started delivering care in September 2019 there had been no safeguarding concerns. However, we were assured the registered manager was familiar with procedures and would take appropriate action to keep people safe.

Assessing risk, safety monitoring and management

- Risks to people's health and safety were appropriately mitigated. Relatives told us staff worked safely. One relative said, "They are very reliable, I trust them, they use equipment appropriately." Staff were very knowledgeable about the people they supported, this was because each person received care from a very small staff team, who got to know them well.
- Risk assessments were completed by the registered manager in conjunction with people prior to providing care and support. These provided clear information on people's needs, although some, for example medicine risk assessments needed more detail to reflect staff and management knowledge. We raised this with the registered manager and felt assured it would be addressed.
- Where falls had occurred, these were clearly documented, and actions recorded including liaising with professionals to reduce the likelihood of a re-occurrence.

Staffing and recruitment

- Overall, we concluded there were sufficient staff to ensure people received a safe and reliable service. Relatives told us staff were reliable, arrived on time and stayed with people for the required time, not rushing. Daily records of care showed people consistently received calls at the same time each day with very little variation.
- Rotas showed there was sufficient staff capacity to cover shifts. We noted some inaccuracies in the staff rota which once pointed out were addressed by the registered manager. The registered manager had also worked a large number of care hours during a period in August 2020, which was not sustainable. However, we saw this had now been addressed with the registered manager providing assurance that measures had been put in place to ensure this did not happen again.
- Robust recruitment procedures were in place which provided assurance the required checks were undertaken on staff before they started work. People praised staff and said they had the right attributes to work in care. New staff received an induction to the service and received face to face training in key subjects

including manual handling.

Using medicines safely

- Medicines were managed in a safe and proper way. At the time of the inspection, the service was only providing limited medicine support. We saw clear records were in place which demonstrated people had received their medicines as prescribed. Where people refused medicines, this was clearly documented. On some medicine administration records, the full prescription description was not always present. We reminded the registered manager of the need to ensure this information was recorded to aid safe working practices.
- Staff received training in medicines management and had their competency to give medicines assessed annually.

Preventing and controlling infection

- The service had systems in place to help prevent and control infection. Staff had received training in donning and doffing personal protective equipment (PPE) and the registered manager understood the national COVID-19 guidance, providing assurance it had been implemented effectively. Spot checks were undertaken by the management team to ensure staff worked to infection prevention guidance.
- Relatives told us staff were very mindful of good hygiene and always wore the required PPE.

Learning lessons when things go wrong

- There was a culture of continuous learning. A system was in place to log, investigate and learn from incidents. One incident had taken place since the service started operating, we saw clear measures were put in place following it to help reduce a re-occurrence. The registered manager had identified improvements were needed in some other areas such as record keeping and was in the process of implementing electronic management systems. This demonstrated a commitment to continuous improvement.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a visible person-centred culture which achieved good outcomes for people. Relatives all provided excellent feedback about the service. One relative said, "Excellent carers, they are the best we have ever had, they are the unsung heroes and heroines." Feedback from another relative said, "Excellent support and care. The carers also went above and beyond in terms of coming out to see [person] when needed and provide support and advice to the family when needed. Would definitely recommend Siban Ltd to others."
- The registered manager demonstrated an excellent knowledge of the people they were supporting and visited them regularly to ensure the service was meeting their needs. Relatives and staff said communication was good and care was very well organised. We concluded the service delivered high quality care, in part due to each person receiving care from a small and consistent staff team which got to know their needs very well.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was an open and transparent culture within the service. When incidents had occurred, we saw these had been fully documented and the service had worked transparently with others to help improve the safety of the person involved.
- The registered manager understood regulatory requirements and had met them. Audits and checks were undertaken in a range of areas to help maintain and improve the standard of care. Enhanced audits in infection control were taking place as a result of the COVID-19 pandemic.
- The registered manager was very "hands on" and delivered care and support regularly. This resulted in very positive relationships with the people they supported. However, some documentation needed further development such as the training matrix and rotas. We discussed this with the registered manager and felt assured they would allocate suitable time to developing and maintaining management systems going forward.
- The registered manager was committed to continuous improvement. They fully took on board the minor areas of improvement we suggested and told us how they were going to introduce electronic systems to help support better monitoring of call calls and staffing matters.

Engaging and involving people using the service, the public and staff, fully considering their equality

characteristics

- People were listened to, engaged and fully involved. Relatives told us they had been fully involved in the assessment and care planning process and had opportunities to give their feedback regularly. They told us that their feedback was acted on. For example, a relative told us minor concerns were raised about a care worker, additional training was then provided, and their performance had improved.
- The registered manager and care coordinators demonstrated they regularly talked to people and made changes to care based on people's feedback. A significant number of compliments had been received about the service showing people's feedback was consistently positive. The service was to send surveys to people to gain formal feedback about its performance in the coming months.
- Mechanisms were in place to engage with staff. This included the use of technology to keep in touch and share ideas. Regular staff and management meetings took place and topics such as training, COVID-19 and the results of any audits and checks were discussed
- The service demonstrated it made reasonable adjustments to meet the needs of both the staff and people who used the service. This involved ensuring people were cared for by the gender of staff they preferred. The provider adjusted for staff to work flexibility dependant on their characteristics and personal circumstances.

Working in partnership with others

- The service reported good working relationships with others which included occupational therapists, district nurses and the local clinical commissioning group. Their advice and instruction was used to help formulate appropriate plans of care. The service also liaised with the local authority over topics such as training opportunities.