

# Sihara Care Limited

# Sihara Care

## Inspection report

10 Osram Road  
East Lane  
Wembley  
Middlesex  
HA9 7NG

Tel: 02084329824

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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 an announced comprehensive inspection of this service on 16 August 2016 at which there were breaches of legal regulations. For two of those breaches we issued the service with a warning notice. These were in relation to the assessment of risks to the health and safety of people using the service not being carried out appropriately. We found that risks were not being identified for people and their specific needs which meant risks were not being managed effectively. There was also a breach in relation to the service not having effective systems and processes in place to assess and monitor the quality and safety of the services provided, to mitigate risks to the health, safety and welfare of people using the service, and to ensure that records relating to service users were accurate and complete.

We undertook a focused inspection on the 15 November 2016 to check whether the service had met the warning notice and to confirm that they now met legal requirements. We inspected the safe and well led domain only at this inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Sihara Care' on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Sihara Care is a domiciliary care agency registered to provide personal care to people in their own homes. The service focuses on providing reablement services to adults with physical and mental health problems. At the time of the inspection, the service was providing care to 15 people.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

At this focused inspection on 15 November 2016, the service demonstrated that they had taken sufficient action to comply with the warning notice and that the legal requirements had been met.

We found that risk assessments included more detail and reflected potential risks to people. We saw evidence that the service had implemented new format moving and handling risk assessments and medication administration assessments.

We also found that the service now had systems in place to assess and monitor the quality and safety of the services provided, to mitigate risks to the health, safety and welfare of people using the service, and to ensure that records relating to service users were accurate and complete.

However, we need to be sure that the service is able to demonstrate that they are able to consistently meet both Regulation 12 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We will therefore look at these Regulations again at the next comprehensive inspection we carry out.

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

We always ask the following five questions of services.

### Is the service safe?

This inspection focused on the warning notice in respect of risk assessments. We found that risk assessments had improved since our inspection in August 2016. The service had reviewed all their risk assessments and had taken sufficient action to comply with the warning notice in respect of risk assessments.

We could not improve the rating for this question to 'good' from 'requires improvement' because the breach in respect of medicines was outstanding. Further, in relation to the risk assessments we need to be sure that the service is able to demonstrate consistent good practice over time.

There was still one aspect of the service that was not safe. This related to medication. We will look at this at the next comprehensive inspection.

We will review our rating for safe at the next comprehensive inspection.

**Requires Improvement** ●

### Is the service well-led?

The service now had systems in place to assess and monitor the quality and safety of the services provided, to mitigate risks to the health, safety and welfare of people using the service, and to ensure that records relating to service users were accurate and complete.

Since the comprehensive inspection in August 2016 we found that the service had taken steps to introduce new quality monitoring systems as well as obtain feedback from people who used the service.

We could not improve the rating for this question to 'good' from 'requires improvement' because to do so requires a demonstration of consistent good practice over time.

We will review our rating for effective at the next comprehensive inspection.

**Requires Improvement** ●

# Sihara Care

## **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 in relation to the warning notices issued to the service following the comprehensive inspection on 16 August 2016.

We undertook a focused inspection of Sihara Care on 15 November 2016. This inspection was completed to check that improvements to meet legal requirements in relation to the warning notices had been made in respect of risk assessments and quality assurance and governance.

The inspection was undertaken by one inspector.

We spoke with the registered manager and the provider. We also reviewed records relating to people's care and the management of the service.

# Is the service safe?

## Our findings

At our inspection on the 16 August 2016, we found that the assessment of risks to the health and safety of people using the service was not being carried out appropriately. Risks were not being identified for people and their specific needs which meant risks were not being managed effectively and this could put people at risk of harm. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. A warning notice was served in respect of this breach and the service was given until the 1 November 2016 to meet the regulation.

The purpose of this focused inspection on 15 November 2016 was to check what action had been taken. We found the service had taken steps to meet the regulation and address our concerns in relation to risk assessments.

At the time of this inspection the service was providing care to 15 people. The registered manager explained to us that since the comprehensive inspection in August 2016, the majority of people they provided care to were no longer receiving care from Sihara. She explained that their care packages had come to an end as they were reablement services. Reablement is a service which aims to encourage and support people to learn or re-learn skills necessary for daily living, following a minor accident, period of illness or stay in hospital. Such care is for a specific period of time and usually a short period.

During this inspection we looked at two people's risk assessments that we had viewed at our inspection in August 2016 as they were still receiving care from the service. We also looked at a further three risk assessments for people who had recently started receiving care.

We noted that care plans included a risk assessment which included information about risk associated with people's home environment and their overall health. Since the last inspection, the service explained that they had introduced moving and handling risk assessment and medicine administration risk assessment for all people. During this inspection on 15 November 2016 we saw evidence of this. We also noted that one person who was at risk of developing urinary tract infections had a risk assessment in place. This risk assessment also detailed what action staff should take if they suspected a urine infection. Where one person had a history of overdose and suicide attempts, we saw that a risk assessment was in place.

The registered manager explained that the service had reviewed all the risk assessments of those people who were receiving care at the time of the inspection and these would be reviewed every six months or sooner to ensure that they reflected people's ongoing changes.

During this inspection we found that risk assessments included more detail and reflected potential risks to people. The service demonstrated that they had taken sufficient action to comply with the warning notice. However, we need to be sure that the service is able to demonstrate that they are able to consistently meet regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 over time and we will inspect this again at our next comprehensive inspection.

## Is the service well-led?

### Our findings

At our inspection on the 16 August 2016, we found that the service had failed to ensure systems were in place to assess and monitor the quality and safety of the services provided, to mitigate risks to the health, safety and welfare of people using the service, and to ensure that records relating to service users were accurate and complete.

This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. A warning notice was served in respect of this breach and the service was given until the 1 November 2016 to meet the regulation.

The purpose of this focused inspection on 15 November 2016 was to check what action had been taken. We found the service had taken steps to meet the regulation and address our concerns in relation to quality assurance.

The comprehensive inspection on 16 August 2016 found that the service was unable to provide us with evidence of checks and audits they carried out in order to monitor the quality of the service provided. They were unable to provide us with documented evidence of audits and there was a lack of evidence to demonstrate how the service monitored the quality of the service provided.

During this focused inspection on 15 November 2016 the registered manager explained to us that they had reviewed all people's care plans and risk assessments and implemented new format risk assessments. She also explained that they had introduced medicine administration charts. She told us that the service had focused on ensuring that care plans and risk assessments included the relevant information and were accurate and complete and we were provided with evidence of this. The registered manager also explained that they had started carrying out audits to ensure that care documentation accurately reflected people's changing needs and provided evidence of this.

At the previous inspection we found that the service had an electronic homecare monitoring system in order to monitor care worker's punctuality and attendance. However, we found that they were not using this system consistently and there was no evidence to demonstrate that they reviewed call logs to monitor care worker's timekeeping. This focused inspection on 15 November 2016 found that the service was now consistently using the electronic system and was able to provide us with evidence that they reviewed call logs to monitor care worker's timekeeping. Where a care worker was late for a visit, there was evidence that the service had identified this and taken appropriate action.

At the previous inspection, we found that the service had not carried out a satisfaction survey. During this focused inspection on 15 November 2016 we saw evidence that the service had sent out satisfaction surveys to people in October 2016 and were waiting to receive completed satisfaction surveys. The service also provided us with evidence to confirm that they carried out regular telephone calls monitoring to check on care worker's attendance and punctuality as well as obtain people's views on the care they receive. The service also carried out quality monitoring visits quarterly to ensure that people who received care were

satisfied with the care they received and asked people to complete feedback forms to obtain further information from people. The registered manager explained to us that these systems enabled them to assess, monitor and improve the quality of the service.

During this inspection we found that the service had systems in place to assess and monitor the quality and safety of the services provided, to mitigate risks to the health, safety and welfare of people using the service, and to ensure that records relating to service users were accurate and complete. The service demonstrated that they had taken sufficient action to comply with the warning notice. However, we need to be sure that the service is able to demonstrate that they are able to consistently meet regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 over time.