

Sipi Care Agency Limited

# Sipi Care Agency Ltd

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Sipi Care Agency Ltd is a domiciliary care agency. It provides personal care and support to adults living in their own homes in the community, in the London Boroughs of Brent and Harrow. At the time of our inspection the service was providing care to 55 people.

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

People received care that was personalised and made them feel safe. A person told us, "Staff are very kind and helpful, I'm happy". Care plans set out information for staff about people's care needs and how to meet them.

There were systems in place to monitor the quality of the service and recognise when improvements were required. People and staff were asked to give feedback about the service. People and their relatives knew how to make complaints and managers responded to these.

The provider worked in partnership with other services to help provide people with joined up care.

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 requires improvement (published 7 May 2020). 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 improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We carried out an announced comprehensive inspection of this service on 10 March 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve governance of the service. We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions responsive and well-led.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Sipi Care Agency Ltd on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next

inspect.

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

We always ask the following five questions of services.

### **Is the service responsive?**

**Good** ●

The service was responsive.

Details are in our responsive findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Sipi Care Agency Ltd

## 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was conducted by 1 inspector and 1 Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this

#### 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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 15 December 2022 and ended on 16 January 2023. We visited the location's office on 16 December 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 the care coordinator and the business manager. We looked at the care records of the 3 people who used the service and a variety of records to do with the running of the service, such as complaints and quality checks. We received feedback from 2 professionals who have worked with the service. We spoke with 2 people who used the service, 10 people's relatives and with 2 staff.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- At our last inspection we found some people's care plans did not always reflect the care they received. At this inspection we found the provider had addressed this.
- People received planned care that was personalised and responsive to their needs.
- People and relatives told us the care met their needs in the way they wanted. One person told us, "[Staff] are very kind and helpful, I'm happy with what I am getting." Relatives commented, "Definitely [the person] feels very safe and we are satisfied" and "The care staff are very helpful and cooperative."
- Care plans set out basic information about people's care needs and how staff should meet them and some of their likes and preferences. For example, how a person preferred to be supported with managing their dental hygiene. Another person's plan set out how to support a person to mobilise slowly and the personal grooming effects they liked to use.
- Staff told us there was enough information in people's plans to help them understand a person's care needs and how to support them.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The service supported people to meet their communication needs.
- People's care plans set out simple information about their communication or sensory needs. For example, how a person indicated their food choices or when a person needed to use a hearing aid.
- A relative told us staff spoke the same language as their family member and this helped with communication. The care coordinator told us they were also looking to translate some people's plans where English was not their first language. This would continue to make their plans more accessible for them.

Improving care quality in response to complaints or concerns

- There were systems in place for handling complaints, although there had not been any over previous year. The provider recorded and responded to complaints or concerns and used learning from these to improve the service.
- People we spoke with knew how to raise a complaint or concern and felt they were listened to when they did. One relative told us, "We can contact them in case of any issue and they listen very well."

- The provider used periodic audits to check people knew how to raise issues if they needed to.

# 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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection we found the provider's audit systems for monitoring the quality and safety of the service were not operated effectively to identify and address improvements to the quality of care provision. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider carried out a range of checks and audits to monitor safety and quality and make improvements when needed. This included checking to make sure people's care plans were regularly reviewed.
- However, we found one person's care plan did not clearly record if they had agreed to their care arrangements or a relative had agreed on their behalf. We discussed this with the provider and they promptly updated the plan with the person to address this.
- The provider periodically checked on care staff by visiting them in people's home to assess their performance and the care they provided. We saw records of these checks and staff confirmed they were not told when they were taking place.
- People and relatives knew who the manager or senior care staff were and could contact them. A relative told us, "We know who the manager is, they do listen. We always make sure to have proper communication with the manager."
- Staff said the registered manager was approachable. A member of staff said, "[The provider] says, 'Whatever we need, let us know' and they do listen to us."
- The provider displayed the service's inspection ratings at the office and on their website. This informed people about the service.

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

- There was a positive, open culture focused on providing good care to people.
- People and relatives told us their care was meeting their needs well. One relative told us, "They are very, very good and we are happy." Another said, "They are already giving us a high-quality service. So I think there is not any other room for improvement. If we need something out of the way for us."
- Staff felt supported in their roles and liked working for the provider. A care worker told us they could call senior staff when they needed, "At any time, 7 days a week and they always pick up," and this helped them

to feel confident they were supported in their role.

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

- The provider understood their duty of candour responsibilities and how to respond in a transparent, honest manner if something went wrong.

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

- People, their relatives and staff had opportunities to be involved in the care provision.
- The provider called people and relatives periodically to ask for their feedback about the service. The provider also sent people a questionnaire twice a year to ask for feedback. Responses we saw were positive. One respondent had written, "I have the same carers and I have bonded with them."
- Care staff told us they felt supported in their roles by the registered manager and office staff. Staff could discuss the service at occasional team meetings and individual meetings with the registered manager or their supervisors. Staff said they found these supervisions were helpful.

Working in partnership with others

- The service worked in partnership with other agencies, such as social workers and healthcare professionals, such as physiotherapists, to help to provide coordinated care to people. During our visit we observed staff liaising effectively between a relative and professionals to help the relative coordinate their family member's discharge from hospital.