

Siban Ltd

SIBAN LTD

Inspection report

595 York Road
Leeds
LS9 6NW

Website: adminsibancare.co.uk

Date of inspection visit:
05 May 2022

Date of publication:
23 May 2022

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	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.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of the inspection there were 16 people using the service of whom 13 were receiving the regulated service of personal care.

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

There were systems in place to help safeguard people from the risk of abuse. Risks were assessed, monitored and reviewed regularly. Medicines were managed well at the service. Measures were in place to help prevent and control the spread of infection.

People's needs were thoroughly assessed and care plans included clear information around how care and support should be delivered. Referrals were made to other professionals as needed.

Staff were recruited safely and there were sufficient staff to meet the needs of the people who used the service. Staff were given a thorough induction and training was on-going.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People told us they were well cared for and respected and were involved in decisions around their care and support. Care was person-centred and reflected people's choices and preferences. Individual communication methods were recorded and adhered to.

The service had an appropriate complaints procedure, which was included within the service user guide. The provider understood the need to be open and honest in responding to concerns. People reported that communication with the service was good.

The service was committed to continuous learning and improvement, informed by a number of audits and quality checks. The service worked well with partner agencies.

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

Rating at last inspection

At the last inspection the overall rating was inspected but not rated (published 9 September 2020). This is

the first full inspection for this service.

Why we inspected

This was a planned inspection to look at all five domains and to rate the service.

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 safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

SIBAN 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 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. 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.

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 four relatives of people using the service about their experience of the care provided. We spoke with five members of staff, including the registered manager, the care coordinator and three care workers. We contacted two health and social care professionals for their feedback about the service.

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. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The service had systems in place to help safeguard people from the risk of abuse.
- The safeguarding policy and procedure were appropriate and up to date.
- Staff had completed safeguarding training, and refreshers were completed annually. Staff we spoke with demonstrated an understanding of safeguarding issues.

Assessing risk, safety monitoring and management

- Individual and general risks were assessed, monitored and managed well by the service.
- Care plans included risk assessments around issues such as mobility, falls, medicines and nutrition. The information was reviewed and updated as required.

Staffing and recruitment

- The service had a robust recruitment procedure to help ensure employees were suitable to work with vulnerable people.
- Staff files included all relevant documentation and checks of new staff.
- Staffing levels were sufficient to meet the needs of people who used the service. A staff member told us, "There are enough staff and we have time to do all the tasks needed."

Using medicines safely

- Medicines were managed safely at the service.
- Clear information about medicines was included within people's care files.
- Staff had completed medicines training. Staff's competence was checked regularly to help ensure they remained proficient in this area.

Preventing and controlling infection

- Measures were in place to help prevent and control the spread of infection.
- Staff had completed training in infection prevention and control and were supplied with personal protective equipment, such as masks, to help ensure compliance with requirements.

Learning lessons when things go wrong

- There were robust systems in place to ensure lessons were learned when things went wrong.
- Accidents and incidents were investigated thoroughly and any recurring issues identified and followed up with appropriate actions.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed thoroughly prior to commencing the service.
- Care plans evidenced clear information around how care and support should be delivered.
- People's support needs were reviewed regularly to ensure care continued to be delivered as required.

Staff support: induction, training, skills and experience

- Staff were given a thorough induction prior to commencing work, which included completing the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors.
- As part of the induction, staff shadowed an experienced member of staff until they felt confident. One staff member told us, "The registered manager told me I could shadow other workers for as long as it took for me to be comfortable. I did this for about two or three weeks, much longer than usual."
- A comprehensive programme of training was on-going for all staff.

Supporting people to eat and drink enough to maintain a balanced diet

- People's nutritional and hydration needs, where relevant, were clearly documented. A relative told us, "They maintain the notes very well and I can submit them to the hospital when needed. There are records of all food and drink taken and elimination to ensure the hospital are aware of everything."
- Staff had completed appropriate training to ensure they were able to assist with meal preparation, eating and drinking where required.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked with other agencies, such as district nurses and social work teams, to help ensure good joined up care for people.
- Referrals were made to other professionals as needed, and this was recorded within people's care plans. One health care professional told us, "The company was always willing to carry out joint visits, regarding any issues we had re moving and handling or concerns over equipment. They would come to me if they needed me to review any issues or concerns regarding moving and handling or equipment."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to

take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- The service worked within the principles of the MCA.
- Staff we spoke with demonstrated an understanding of the principles of the Act and how to work in people's best interests.
- Consent forms, signed by the person who used the service if appropriate, were included within people's care files.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us they were well cared for and respected. One relative said, "Staff are very respectful." Another relative told us, "I am very happy, of course I am. They are extremely good and very helpful."
- The service user guide included information about the service's values and commitment to equal opportunities.
- Staff completed training in equality and diversity and were aware of the importance of treating people equally.

Supporting people to express their views and be involved in making decisions about their care

- People were encouraged to be involved in all the decision making around their care and support. A relative told us, "I have been very involved with the care arrangements and they [the service] communicate well."
- Care plans evidenced people's participation in their support planning. One care plan included the direction for staff; 'Carers to listen carefully to instructions from [person]'.
- People's feedback, both verbal and written, was sought through regular reviews of care, surveys and telephone audits.

Respecting and promoting people's privacy, dignity and independence

- People's privacy was promoted by ensuring their information was kept confidential and only shared when necessary, in line with legal requirements.
- People felt their dignity was respected. One person told us, "The staff are very considerate and very professional. I am very comfortable with them."
- Care plans outlined people's level of independence and the importance that this should be promoted whilst offering support.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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

- Care was person-centred and reflected people's choices and preferences. A relative told us, "My [relative] has been given a very high standard of care and they [the service] work with the family."
- Care plans included information about people's likes and dislikes, family relationships, routines and lifestyle choices.
- People told us staff went above and beyond expectations to help them. One relative said, "They have helped with other issues around health needs and paperwork and other professionals to contact to ensure everything we needed was in place."

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.

- People's communication methods and needs were recorded within a specific communication care plan.
- Staff were aware of how to understand people they supported.
- Printed information could be sourced in alternative formats, such as large print or other languages to make it accessible to as many people as possible.

Improving care quality in response to complaints or concerns

- The service had an appropriate complaints procedure in place, and this was included within the service user guide.
- There was a complaints file, but there had been no recent complaints or concerns received.

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 good. The rating for this key question has remained 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

- The service promoted a positive culture with training, supervision and open conversations with staff around unconscious bias, discrimination and equality issues.
- People's individual goals, strengths and achievements were documented and included in care and support plans.

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 the duty of candour.
- Discussions with the management team evidenced a commitment to being open and honest in all their dealings with people, relatives, staff and other agencies.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Managers and staff we spoke with demonstrated an understanding of their roles and responsibilities.
- Quality performance was important to the service and they explored different avenues to ensure standards remained high.

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

- The service engaged well with people who used the service, relatives and staff. A relative told us, "They are very supportive, I would give them ten out of ten. It is an exceptional service, they are a great team, fantastic." A health care professional commented, "I had no issues with communication, they would get back to me within a day."
- Staff felt well supported. One staff member said, "They are supportive, I wouldn't complain. The manager and care coordinator are on hand all the time if you need them."
- A regular newsletter kept staff up to date with events. A WhatsApp group ensured all staff were given any updates and guidance in a timely way.

Continuous learning and improving care

- The service was committed to continuous learning and improvement.
- A number of audits and checks provided information which was used to inform improvements to areas of

work, such as record keeping and care delivery.

- Spot checks were completed with staff to help ensure they continued to provide care as required.
- Regular surveys were undertaken to gain feedback from people who used the service.
- Reviews uploaded to the provider's website were positive and included the comments; 'Excellent service. Staff go above and beyond their duty for the client'; 'They provided excellent service and were always reliable', and 'This team of people are absolutely amazing. They looked after my [relative] like he was family to them.'

Working in partnership with others

- The service worked well with partner agencies and one health and social care professional told us, "SIBAN is my go-to care agency because I know they will do their utmost to accommodate, and I find them to be very reliable. I have never had any complaints about the care and support they provide."