Name of Supported Living:	Care London(Iman House)
CQC ID:	Not Applicable
CQC rating:	
Date of Visit	13/07/2023
LBN Officer:	Abiodun Ojo

Summary of Actions

1. Provider to ensure all service users have a medication risk assessment completed within 48 hours.

Area	SCORE
Staffing	100%
Health & Safety	100%
Care Plans	95%
MCA & DOLS	100%
Resident Observations & Discussions	
Staff Observations & Discussions	
Medication	100%

Final RAG rating

Guidance to QA Officer	Home details	Officer Input
Clial, have to accom	Name of Service :	Care London(Iman House)
Click here to open - www.cqc.org.uk	CQC ID:	
	CQC rating:	
SIP = Service Improvement	SIP plan in place	NO
	Address of Care Home:	56 - 64 Bushey road E13 9EN
	Care Home Phone:	0203 859 0945 / 0203 859 7337
	Name of Manager:	Sanawaz Dilmahomed
	Managers E-Mail address:	nawaz@Ihccgroup.co.uk
	Name of Regional Manager:	Yusouf Mahamed
	Regional Manager's E- Mail address:	yusouf@lhccgroup.co.uk_
	Name of Owner of Home:	
	Date of Previous Visit:	13/12/2022
	Date of Visit	13/07/2023
	Start Time	10:00
	End Time	
	LBN Officer:	Abiodun Ojo

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Guidance to QA	Is there evidence of	_	D	Score	NOTES & Actions;	ACTIONS;
Officer		Α	В	Score	Staffing	Staffing
	Staff initials -	LBO	AB			
	Appication fully completed and includes full employment history	YES	YES	100%	LBO - 29/04/21 AB - 21/07/2022	
	Contract signed and dated	YES	YES	100%	LBO- 01/04/2022 AB - 01/11/22	
Is a DBS for staff in file less than 3 years old	DBS - valid and in date	YES	YES	100%	LBO - 05/06/2021 AB - 24/10/22	
	Evidence of completed induction	YES	YES	100%	LBO- 26/07/21 AB - Provider to send	
	Evidence of regular appraisals	YES	YES	100%	LBO- 14/07/22 AB - Not due	
	Health questionnaire completed	YES	YES	100%	LBO - 29/04/21 AB - 21/07/2022	
	Interview notes singed and dated	VES	YES	100%	LBO- 26/05/21 AB- 22/07/2022	
	Proof of Identity	YES	YES	100%	LBO- British passport AB - Indian passport	
	Right to work	YES	YES	100%	LBO- British passport AB - Resident permit	
	Supervision notes - regular and up to date		YES	100%	LBO- 21/06/23, 11/04/23 AB - 12/06/23, 05/04/23	
	Team meeting have taken place, minutes are available, and up to date	YES	YES	100%	Evidence of team meeting minutes viewed during visit.	
	Training Matrix shows annual training has taken place	YES	YES	100%	Training matrix is up to date.	
	Two references on file	YFS	YES	100%	2 references on file	

Guidance to QA Officer Is there evidence of:	Y/N	NOTES; Health & Saftey
Incident, accident & Safeguarding Logs	YES	Serious incidents reported to all satkeholders and managed effectively by the service. Service user (KC) currently staying with family at the time of visit No open or current safeguarding concerns.
H&S procedures	YES	Domestic electrical installation, 31/05/20 (valid for 5 years), PAT (due on 05/01/24) Business continuity plan indate (2022 - 2025)
H&S audits	YES	Daily health &safety checks completed, weekly Fire alarm test 10/07/23, monthly emergency lighting records completed 03/07/23, monthly Fire equipment check (July), monthly first aid box check (July)
Fire Risk assessment	YES	22/04/2023
Fire Drills and outcomes	YES	08/06/2023 completed monthly.
Manager's audits	YES	3 monthly Service user notes audit 03/07/23 ,
Managers spot checks	YES	17/06/2023
IPC process in place and being followed	VFS	Not applicable
Area manager's last report	YES	16/01/2023
Home environment	YES	The service environment is

SCROLL to TOP	Total	100%

to QA Is there evidence of :	Α	В	Score	NOTES; Care Plans
Intial of residents	ET	мс		ET - signed consent form, Profile page, Completed outcome star, Monthly key working sessions completed. MC - signed consent form, Profile page, Completed outcome star, Monthly key working sessions completed 09/07/23. Service user Survery completed once annually.
Daily notes	YES	YES	100%	Detailed and evidenced how support was provided to service user.
repositioning	N/A	N/A	87%	Residents can reposition without needing support.
fluid	N/A	N/A	87%	Residents can make fluid of choice.
Nutrition	YES	YES	100%	independently 15/05/23 MC - Can prepare meal however Staff prompt with making healthy meal.
Mobility	N/A	N/A	87%	ET - No issue with mobility
Persoanl Care	YES	YES	100%	ET - can manage all areas of personal care independently MC - can manage personal care and hygiene , staff verbally prompt 02/03/23
transfers	N/A	N/A	87%	service users can transfer without needing support.
Skin integrity	N/A	N/A	87%	No issues or concerns with skin integrity.
Waterlow	N/A	N/A	87%	Residents can weight bear without needing support.
weight chart	YES	YES	100%	ET - 111kg (July) , 109kg (June) MC - 81kg (June) ,
person centred evidence	YES	YES	100%	Personalised support provided to be more indepepndent in the area of managing personal hygiene and making healthy meal.
Resident's view captured and reflected	YES	YES	100%	Residents meeting held every month and signed consent form in place.
family involvement and Advocacy	YES	YES	100%	ET - Sisters are involved in care MC - Daugter is involved in care
choking risk	N/A	N/A	87%	Residents can swallow without issues.

communication	N/A	N/A	87%	service users communicates verbally
body mapping	N/A	N/A	87%	No body related incident.
Risk assessments including - mobility , choking, skin , infection, etc	YES	YES	100%	ET - Relapse in mental health, physical violence and aggression, harm to self 15/05/23 MC - Relapse in physical 2/03/23
Medication info documented	YES	YES	60%	medication information documented. No medication risk assessment completed ?
PEEPs	YES	YES	100%	ET - Staff to prompt service user to evacuate in the event of a fire emergency.18/05/23 MC - Staff to prompt service user to evacuate in the event of a fire emergency. 18/05/2023
Continence care	N/A	N/A	87%	Service users can access the toilet without needing support.
Activities	YES	YES	100%	Activity plan in place MC - Not willing to involve in any form of activities. 02/03/23

95%

Guidance to QA Officer	Is there evidence of :	Y/N	NOTES; MARS
	РОА	N/A	
	Deputyship	N/A	
	MCA	N/A	Signed consetn form in place.
	IMCA / RPR involved where required	YES	Client affairs manages finance.
	Finance/Rent	N/A	
	Best interest	N/A	
	DOLs	N/A	
	DNACPR	N/A	
	Family contact	YES	ET - Sisters make contact MC - Daugter keeps in touch
	professional contact	YES	GP, Social worker,
	outcomes	YES	Placement review are completed

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Guidance to QA Officer	Initials	Notes; Resident Discussions

Guidance to QA Officer	Initials	Notes; Staff Discussions
understanding of co		
MCA, Safeguarding		

Guidance to QA Officer	Is there evidence of :	Α	В	Score	NOTES; Medication	ACTIONS; Medication
	Is MARs sheet		мс			
	completed	ET	IVIC			
	All medication		YES	100%		
	prescribed	YES				
	administered					
	errors noted	YES	YES	100%	No errors identified on	
	cirois noted				Mar chart	
	PRN record	YES	YES	100%	Not applicable	
	completed					
	PRN protocols		YES	100%	Not applicable	
	Medication	YES	YES	100%		
	administration				Competency training	
	/competency				completed	
	training completed					
	MARs sheet	YES	YES	100%	information on mar	
	information clear	ILJ			sheet is clear	
	Signed covert medication Dated		YES	100%		
			YES	100%	Not applicable	
			YES	100%		
	Medication count				Medication in blister	
	complete and		YES	100%		
	correct				packs.	

100%

About the Service

Care London (Iman House) is a supported living providing 24 hours' forensic mental health service to people. The service can support up to 21 people in this purpose built property. At the time of inspection, there were 17 people living in the service, 13 males and 4 females. All residents belong to London Borough of Newham.

Actions for Service

1. Provider to ensure all service users have a medication risk assessment completed within 48 hours.

Drop Down List	CQC Rating			
N/A	Awaiting 1st CQC Inspection	RED	Amber	Green
YES	Outstanding	< 65%	66% to 99%	100%
NO	Good	0.649	0.9999	1
	Requires improvement	64.90%	99.99%	100.00%
	Inadequate	65%	99%	100%

75 - 85