

Unique Community Services Ltd

Unique Community Services Manchester

Inspection report

Suite 22, Parkway Two
Parkway Business Centre, Princess Road
Manchester
M14 7LU

Date of inspection visit:
21 December 2022

Date of publication:
20 January 2023

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

Unique Community Service Manchester is a domiciliary care provider. It currently provides personal care to people in their own homes. 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 our inspection the service supported 5 people with personal care.

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

Unique Community Services Manchester provided person-centred care and this was reflected in the feedback we received about the service. There was a high level of satisfaction with the service. Relatives, staff and health and social care professionals provided excellent feedback during the inspection about their experience of the service. One relative told us, ""The [staff] are absolutely amazing".

People received safe care and support. Staff understood how to safeguard people and when to raise concerns. Staff were recruited safely. Risks associated with people's care were assessed and monitored. Staff followed infection prevention and control guidance to minimise risks related to the spread of infection.

Assessments were person centred and care was responsive to people's needs. The staff were motivated and well trained to carry out their roles effectively.

The service was well led. The provider and registered manager followed governance systems which provided effective oversight and monitoring of the service. These governance systems and processes ensured the service met people's assessed needs.

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.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

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 30 September 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this 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 safe findings below.

Good ●

Is the service caring?

The service was caring.
Details are in our safe findings below.

Good ●

Is the service responsive?

The service was responsive.
Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well-led.
Details are in our safe findings below.

Good ●

Unique Community Services Manchester

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 and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

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 24 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 21 December 2022 and ended on 5 January 2023. We visited the location's office on 21 December 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 information gathered as part of monitoring activity that took place on 31 May 2022 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

During the inspection

We spoke with 3 relatives about their experience of the care provided. We spoke with 8 care staff including the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We received feedback from 5 health and social care professionals. We reviewed a range of records. This included 2 people's care records and multiple medication records. We looked at 2 staff files in relation to recruitment and staff supervision and 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.

This is the first inspection of 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's relatives told us the care provided was safe.
- Staff completed safeguarding and whistleblowing training. They knew how to identify and report any concerns and were confident to report to outside agencies if required.
- The registered manager reported safeguarding concerns to the local authority and the Care Quality Commission in line with guidance.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff told us there was an open culture and they were able to raise concerns with the management if required.
- There were policies and procedures in place to ensure that accidents and incidents were recorded, actioned, and analysed if they occurred.
- Care plans were clear and recorded risks to people and provided clear guidance for staff to follow.

Staffing and recruitment

- Staff were recruited safely and had the appropriate pre-employment checks in place before employment commenced.
- Care packages had dedicated staff allocated to ensure consistent care was provided. Staff received client focused inductions to ensure they had the required skills. Relatives told us, "I am most happy with who they employ, they must have a very good judge of character".
- Health & social care professionals told us, "Request for staffing was always met, no lateness, no absence and positive communication with the hospital".

Using medicines safely

- Staff who administered medicines had been trained to do so and the registered manager completed competency checks to ensure correct procedures were followed.
- Effective oversight was in place including a regular schedule of audits.
- A new digital system alerted staff to events such as late or missed medicines. This enabled an immediate response to any concerns.
- Relatives were happy with the support provided. They told us, "There have been no problems with medication" and "I'm happy with the way they deal with medication".

Preventing and controlling infection

- We were assured the provider was using PPE effectively and safely.

- Staff had received training in how to prevent and control infection.

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

- Staff completed a comprehensive assessment of people's needs.
- Care plans contained person-centred information about people's likes and dislikes and their preferred routines.
- People's needs in relation to equality and diversity were considered during the assessment and care planning process, such as age, disability and religion.

Staff support: induction, training, skills and experience

- Staff completed a full induction when they commenced employment. This included mandatory training, shadowing experienced staff and competency checks carried out by senior staff.
- There was a comprehensive system in place to ensure good support for staff including an employee assistance programme.
- All the staff we spoke to were positive about the support they received including the induction and the training opportunities available. They told us, "Yes, I have received everything I need and feel confident to do my job" and "Yes, it was very good. There was an office induction and an induction focused on the service user including shadow shifts".
- The service had quick access to specialised training both internally and externally to meet the needs of complex care packages. Good oversight was in place to ensure training was up to date.

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

- Staff received training in food safety and hygiene.
- People had detailed nutrition and hydration care plans where required.
- Where care workers had a responsibility to prepare and provide food and drink for people this was provided. Relative were very positive about the support, "I've seen them all cooking and baking together. My [relative] really loves their food".

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

- The service was responsive to people's needs. One relative told us, "They've got to know [relative] quite well. They can recognise when [relative] isn't quite themselves and is really quiet, they always notice".
- People had health passports in place to support other health and social care professionals to ensure support was provided in the way they needed.
- People were supported to access health care and people were supported to attend appointments.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service was working within the principles of the MCA.
- Relatives told us staff always asked for consent before carrying out care.
- Care plans contained information about consent, capacity and decision making.

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; Respecting and promoting people's privacy, dignity and independence

- Relatives were positive about the support they received. They told us, "[staff] go above and beyond. This package cannot be removed ever. It's been a lifeline for my [relative]. [relative] is well loved and the [staff] are all like an extended family. I have no concerns whatsoever" and "They help with personal care. [family] is always treated with dignity and respect. I always see them having a laugh which is so lovely to see".
- Staff received equality and diversity training. Staff delivered care and support in a non-discriminatory way and upheld people's rights.
- Staff explained how they promoted people's privacy, dignity and independence.
- People had the opportunity to try new experiences, develop new skills and gain independence.

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

- People's relatives told us, "I can always get a hold of someone if I need to speak" and "[Registered Manager] always listens to me. If I ever have any concerns, I can call and it is sorted straight away. Someone has always been available, even over Christmas".
- Staff had inductions specifically focused on the people they were going to work with. This included shadow shifts before working alone to ensure they were familiar with people's individual needs and preferences.
- Staff respected people's choices and wherever possible, accommodated their wishes, including those relevant to protected characteristics, such as cultural or religious preferences.

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 plans were person centred and identified what was important to people.
- There was a high level of satisfaction with the service. A relative told us, "What I like about this agency is that they follow [relative] care plan to a tee. We are really happy and would recommend this agency".
- One health and social care professional told us, "The care provided to the individual was excellent and delivered in a very caring and person-centred way. I would not hesitate to recommend them to other services".
- Staff told us the care plans were clear and were positive about the attention to detail when being introduced to new people to work with. Staff told us, "Yes, they have been very careful with the way they have introduced me to the client" and "Yes, we are always given the care plan before we meet people, there is lots of information about their likes and dislikes. We do an onsite induction with service users as well".

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 followed the five steps of the accessible information standard.
- Care plans documented the person's preferred method of communication, any impairments that could affect communication, and guided staff on the best ways to communicate with people. This ensured people had access to information in a form that met their assessed needs.
- A dedicated staff member was trained to support compliance with the Accessible Information Standard.
- The staff were supported by inhouse speech and language therapists and a positive behaviour support team.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service had a dedicated, "Family Care Navigator", who researched options for people based on their interests.
- The service successfully supported people to be more active in their local community. One person who was socially isolated before using the service and had not been out for months was supported to go out regularly.

Improving care quality in response to complaints or concerns

- A complaints policy was widely available. The service had not received any complaints since registering with CQC.
- Relatives were happy with the care provided and felt able to raise concerns if they had any.

End of life care and support

- At the time of the inspection the service was not supporting anybody who was at the end of their life.
- Care planning gave people and their relatives the choice to explore this area if required.

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

- There was a positive culture throughout the service. This was demonstrated in practice by the improvements made to people's lives.
- The service received excellent feedback from people, relatives and staff through surveys and reviews of care.
- The responses we received from relatives were positive. These included, "This is a good service, [relative] had a few agencies and this is one of the better ones" and "Absolutely excellent service and care provider. Really happy. We could not have managed without them. Words cannot describe how thankful we are for their professional, friendly and caring manner".
- Staff told us they felt valued and enjoyed working for the service. Comments included, "I am so happy to be part of this company" and "I have worked in the sector for 10 years. This is the best service I have worked for".
- Communication with staff was very good. Staff told us, "It has been good, [Registered Manager] is very supportive. They regularly check to see how we are doing" and "Yes, it has been one of the best I have worked for. It is well organised. The way they operate they make it very easy for staff".
- Staff received equality and diversity training. Staff delivered care and support in a non-discriminatory way.

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

- The registered manager and nominated individual were hands on and knew the service well. They received good support from the wider organisation and there was a clear focus on improving and growing the service.
- The service had invested in new technology including electronic care plans.
- Governance processes were effective. A system of regular scheduled audits was in place. This included a wide range of audits to help ensure the service meet its regulatory requirements. Actions were identified for any shortfalls found.
- There was a strong focus on person-centred care. This expanded people's horizons and reduced the restrictions placed upon them.
- The staff team had the skills, knowledge and experience to perform their role and had a clear understanding of people's needs.

- Senior staff understood and demonstrated compliance with regulatory and legislative requirements.

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 registered manager was fully aware of their responsibilities under the Duty of Candour. The Duty of Candour is a regulation which all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines' providers must follow if things go wrong with care and treatment.

Working in partnership with others

- The service worked collaboratively with other local community health services.
- We received excellent feedback from health and social care professionals. They told us, "They actually stand out in this regard, they contacted me promptly, communicated issues well, always readily available for meetings, calls and provide the fullest information where further support from commissioners as required", "They were fully engaged with processes including training that our team offered and the staff individually were some of the most engaged and proactive staff I've seen", "They were part of Multi Disciplinary Teams on a weekly basis and their input was invaluable" and "I was very impressed. I work with a lot of services offering both residential and domiciliary support and it was refreshing to work with such a competent, confident and proactive service".