

UK Top Care Limited

# UK Top Care Ltd

## Inspection report

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22 June 2023

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## Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Top UK Care Ltd is a domiciliary care agency, providing personal care to people in their own homes. At the time of our inspection there were 5 people were using the service. 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.

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

Details of how to reduce risks to people's safety were included in people's care plans. Care plans reflected people's individual needs. Enough staff were employed to meet people's needs. People and relatives said safe care was provided, with people protected against abuse, neglect and discrimination.

Staff had received training on how to keep people safe and were able to explain how these actions would be put into practice.

Effective quality assurance systems were in place to ensure people were provided with a quality service. A person using the service and relatives were satisfied with the management of the agency. They said they always received a polite and reassuring response to their queries, and any needed action had been taken.

A person using the service and relatives were very satisfied with the personal care that staff provided. They said they were treated with respect and dignity and staff had a caring and friendly approach to them.

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

This is the fourth inspection for the service.

The last rating for this service was requires improvement (published 16 May 2023).

### Why we inspected

We undertook this targeted inspection to check whether the Warning Notices we served in relation to Regulation 18 and Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met on concerns we had about the ability of staff to provide safe care and the lack of management oversight of risk.

The overall rating for the service has not changed following this targeted inspection and remains requires improvement. We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

### 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 not always safe.

Details are in our safe findings below.

**Inspected but not rated**

### Is the service well-led?

The service was not always well led.

Details are in our well led findings below.

**Inspected but not rated**

# UK Top Care 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.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notices we issued in relation to Regulation 18 (Staffing) and Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We had concerns we had about the ability of staff being able to provide safe care and the lack of management oversight of risk.

#### Inspection team

This inspection was carried out by 1 inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses.

#### 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 registered manager would be in the office to support the inspection. We also gave time for the registered manager to send us inspection information, so we did not have to spend an extended amount of time in the office of the service.

Inspection activity started on 21 June and ended 22 June 2023. We visited the office location on 21 June

2023.

#### What we did before the inspection

We reviewed information we had received about the service and we sought feedback from the local authority.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

#### During the inspection

We spoke with 1 person who used the service about their experience of the care provided and 4 relatives.

We spoke with 3 care staff and the registered manager. We reviewed a range of records. This included 3 care records. We looked at 3 staff files in relation to staff supervision and training. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

We continued to seek clarification from the registered manager to validate evidence found, which was sent to us.

# 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 this key question was rated requires improvement . We have not changed the rating as we have not looked at all of the safe key question at this inspection.

At the last inspection the provider had failed to ensure that people who use the service were not at risk of receiving unsafe care and support because staff were not trained, competent and qualified; nor understood their responsibilities fully and were not supported to provide safe care and support. This was a breach of Regulation 18 (1) (2) (Staffing) of the Health and Social Care Act 2008 (Regulated Activity) Regulations 2014.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we had previously served. We found that improvements had been made.

### Staffing and recruitment

At our last inspection we found that there had been a failure to ensure staff were trained, competent and qualified; nor understood their responsibilities fully and were not supported to provide safe care and support which was a breach of Regulation 18 (1) (2) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found that improvements had been made.

- Staff had been trained to administer medicines since the last inspection.
- Staff had also undertaken other relevant training to ensure people using the service were kept safe.
- Staff understood how to support people in relevant health and safety issues such as using moving equipment such as hoists and stand aids.

### Assessing risk, safety monitoring and management

- Systems introduced since the warning notice meant that people could be protected from risks associated with their care and support.
- Risk assessments were in place for a range of issues including supporting people to walk safely.
- Assessments included the environmental risk assessments which identified and managed risks in people's homes, such as identifying tripping risks to prevent people from falls.

### Systems and processes to safeguard people from the risk of abuse:

- People were protected from the risk of abuse.
- A person and relatives said that staff followed safe working practices and there was good protection from the risk of abuse. One person said, "I feel safe with the carers. There has never been a problem."
- Staff demonstrated they understood how to safeguard people and were aware of reporting to the registered manager if abuse was suspected or alleged and to external agencies if no action was taken. They were confident the management would act if they had any concerns about people's safety.
- The registered manager was aware of the duty to report any safeguarding concerns to the local authority safeguarding team.

# 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 this key question was rated requires improvement . We have not changed the rating as we have not looked at all of the safe key question at this inspection.

At the last inspection the provider had failed to ensure that the provider's oversight systems and processes were effective. The lack of leadership and management oversight of people's care placed increased the risk of harm. There were limited opportunities for people and staff to give feedback on the service. This was a breach of Regulation 17 (1) (2) (Good Governance) of the Health and Social Care Act 2008 (Regulated Activity) Regulations 2014.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we had previously served. We found that improvements had been made.

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

- Audits and checks were now in place to check the service was meeting people's needs, such as checking that the care provided was meeting the assessed needs of people.
- The registered manager understood their role and the needs of their staff team.
- Staff understood their responsibilities, and who to report to if they had concerns and needed help.
- The provider had introduced a system to ensure spot checks on staff took place to assess whether staff were providing appropriate care and a positive approach to people. Staff had been spot checked since the last inspection to check their competence.

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 aware of the duty of candour, that if mistakes were made, they had a duty to be open and honest, issue an apology and take any necessary action.
- They also understood information sharing requirements, and knew that when concerns had been identified, appropriate statutory notifications required to be submitted to CQC as required by law, and to the local authority.