

Universal Care and Support Services Ltd

# Universal Care and Support Services Ltd

## Inspection report

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Date of inspection visit:  
29 November 2023

Date of publication:  
21 December 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

Universal Care and Support Services Ltd is a domiciliary care agency registered to provide personal care to people in their own homes. The service provides support to older and younger people with a range of needs. This includes people with physical disabilities. At the time of our inspection the service supported 3 people.

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

People and relatives spoke very positively about the service they received. Staff knew how to keep people safe and protect them from harm. Risks associated with people's care and the environment were identified and assessed. People received their medicines safely, when needed, by staff trained in medicine management. Staff were recruited safely.

People and their relatives had confidence in the ability of staff to provide effective care. Staff development was supported through an induction when they started work. Ongoing training was provided to staff to ensure their skills and knowledge remained up to date. People had access to healthcare professionals to ensure their ongoing healthcare needs were met.

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 received person centred care and developed positive relationships with staff, who had a good understanding of their care and support needs. People's right to dignity and privacy were respected and their independence was promoted.

People and relatives were involved in their care plans to ensure they reflected people's preferences, religious and cultural beliefs and values. People knew how to make a complaint and feedback on the service was encouraged and used to drive forward improvements and learn lessons.

The registered manager had processes in place to monitor and review the quality of the service, for example, audits of care records. The provider had a contingency plan in place, to minimise any risks to the service running safely in the event of, for example adverse weather conditions. Staff felt supported by the management team.

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 service was registered with us on 20 September 2022, and this is the first inspection.

### Why we inspected

This was a planned inspection to provide a rating for 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 ●

# Universal Care and Support Services 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 team consisted of 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 type of care service. The inspector visited the service and the Expert by Experience gathered feedback about the service from people and their relatives via the telephone.

#### Service and service type

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

#### 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 we needed to be sure the registered manager would be in the office to support the inspection.

### What we did before the inspection

We reviewed the information we had received about the service since registering with us in September 2022. 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 2 people who used the service and 2 relatives about their experience of the care provided. We spoke with 5 staff including the nominated individual, registered manager, and 3 care staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records, including 3 people's care records. We looked at 2 staff files in relation to recruitment and staff support, and a range of records relating to how the service operated and was managed.

# 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 and relatives felt safe with staff. One person said, "Yes, I feel safe with the staff, they are great." A relative told us, "[Person] adores the staff, they look after them very well, definitely safe."
- Staff had received safeguarding training and understood their responsibilities to report any concerns to the registered manager. One staff member told us, "I would raise any concerns and know the manager would act on it straight away."
- The registered manager understood their responsibility to report any concerns to the local authority and to CQC to ensure any allegations or suspected abuse were investigated.

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

- Risks associated with people's care were assessed and regularly reviewed. However, we did identify a care plan which lacked detailed guidance to inform staff how to provide catheter care. Despite this shortfall, staff demonstrated they knew how to support them safely and their care needs were met. We brought this to the attention of the registered manager who took action to address this during the inspection.
- People and relatives told us staff supported them safely and their care needs were fully met. One person said, "The staff are very good and well trained." Another person told us, "Staff are wonderful, I'm very happy with the care I get."
- Relatives were positive about the support people received. One relative said, "They [staff] have been a great support to [Person]." Another relative told us, "I'm very happy, staff are very caring and supportive."
- Staff recorded incidents and accidents, and these were reviewed by the registered manager and action taken to prevent reoccurrence. Any lessons learnt were discussed in team meetings.
- The provider had a contingency plan to minimise any risks to the service running safely in the event of, for example, adverse weather conditions.

Staffing and recruitment

- There were enough staff to provide people's planned care calls. One person said, "They are always on time, they never let me down." One relative said, "No problems at all with their time keeping."
- Staff were recruited safely. The provider sought references and completed DBS checks before staff started working at the service. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines as prescribed. There were systems in place to ensure this was done safely.

A relative told us, "[Person] was upset the other day, and wouldn't take their pills, so the staff facetedimed me so I could have a chat with them until they were settled, they then took the pills, which they need."

- Staff completed training about how to administer medicines and competency assessments were completed to confirm they did so safely.

#### Preventing and controlling infection

- People and relatives confirmed that staff wore personal protective equipment (PPE).

- Staff received training in infection control and understood their responsibilities. They told us there was a good supply of PPE to maintain good infection control practice.

# 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 and relatives had confidence in the ability of staff to provide effective care. One person said, "Staff will do anything for me, I'm well looked after." One relative told us, "Staff are absolutely brilliant, they really understand [Person] and have made the time to really get to know them."
- People's needs were assessed before they started to use the service. This information was used to develop care plans and risk assessments. Staff told us, "This information tells me how the person wants to be supported by me."
- Staff spoken with demonstrated a good understanding of people's needs and knew how to provide effective care.

Staff support: induction, training, skills and experience

- New staff received an induction and worked alongside an experienced staff member to get to know people and understand their needs.
- The management team carried out spot checks of staff practice to ensure they were providing care in line with their training.

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

- People were supported to eat and drink if this part of their planned care.
- A relative told us, "[Person] needs support and staff will sit and talk with them, encouraging them to eat."

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

- Staff worked in partnership with other healthcare professionals, such as GP's and district nurses. This supported people's health and wellbeing.
- Staff monitored people's health and wellbeing. Relatives confirmed this, one told us, "One of the staff suggested [Person] should see a doctor and we arranged that, I have complete trust in them."

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.

- People and relatives confirmed staff worked within the principles of the MCA. One person said, "Staff always treat me with the utmost respect." One relative told us, "Staff always ask and explain things first to [Person]."
- Staff had received MCA training and demonstrated an understanding of the principles. One staff member told us, "People have the right to make their own decisions and it's important that I respect this."

# 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

- People and their relatives told us staff were caring. One person said, "Staff are wonderful, very caring, I call them my little angels." One relative told us, "[Person] absolutely adores them and has a great relationship with the staff. I'm over the moon with how they support them."
- Staff spoke with care and compassion about the people they supported and recognised the importance of promoting people's independence.
- People's personal information was managed securely in line with data protection law.

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

- People and where appropriate their relatives were fully involved in making decisions about their care. One relative said, "We are all involved in the care, we work together as a team. I trust them implicitly with [Person], they are amazing."

# 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

- People received personalised and responsive care. One person told us, "They [staff] are very flexible when I need to change things for appointments. They always meet my needs." One relative said, "I have complete peace of mind, they look after [Person] so well."
- Staff told us if people's needs changed the care plan was reviewed. This was confirmed by relatives, one relative told us, "They often let me know if something is not quite right, so we can discuss any changes needed."
- The registered manager ensured care plans contained information which was personalised to people's needs. This included their likes and dislikes.

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.

- Staff knew how to communicate effectively with people. Relatives spoke positively about staff being patient and taking the time to talk and listen to people.
- The registered manager demonstrated a good understanding of the AIS. Information was available in the appropriate format for each person, such as large print and available in different languages as needed.

Improving care quality in response to complaints or concerns

- People and relatives knew how to complain. One relative told us, "I have no reason to complain, if I did, I am sure it would be resolved quickly."
- The service has received 1 complaint since being registered. Records viewed showed this was responded to promptly in line with the provider's policy.

# 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.

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

- People and relatives spoke positively about staff. One relative told us, "Managers are engaged with the service and have high standards." Another relative said, "The staff are great, I think [Person] would have to go into a home if it wasn't for the good care, they give them."
- Managerial oversight of the service was good, and a range of quality audits and checks took place to monitor the service and drive forward improvements. For example, checks on care records and staff competencies.
- Staff understood what the provider expected of them, and they demonstrated a commitment to providing good care. One staff member told us, "It's a great place to work, very client focused."
- Staff felt supported and received the guidance they needed to fulfil their roles through individual and team meetings. One staff member said, "I enjoy working here, the managers are supportive and approachable."
- The registered manager demonstrated an understanding of the regulations and their responsibilities. For example, they had informed us about important events within the service.

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

- People were very happy with the service provided. One person said, "I would recommend them, they are very good." One relative told us, "Communication is good, and the managers are very involved with the service and are engaging."
- People and relatives were encouraged to provide feedback during regular phone calls with the registered manager and nominated individual. At the time of our inspection the service was in the process of sending out their first quality questionnaire to gather further feedback on the service.
- Staff gave positive feedback regarding the open, honest and supportive culture of the service. One staff member said, "The managers are very approachable and supportive, I enjoy working here." Another staff member told us, "We work as a team, morale is very good."
- The providers' policies and procedures prompted inclusion and diversity and reflected protected characteristics as defined by the Equality Act 2010.

Working in partnership with others; 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

- Staff liaised with a range of health and social care professionals involved in people's care to support their physical health and wellbeing as seen in the records we viewed.
- The registered manager understood the need to be open and honest when things went wrong in line with the responsibilities under the duty of candour.