

Unite Healthcare Ltd

# Unite Healthcare Ltd

## Inspection report

Wilkinson House  
14 Tasker Terrace, Rainhill  
Prescot  
Merseyside  
L35 4NX

Tel: 01514932212

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Unite Healthcare is a domiciliary care service that provides support and personal care to older 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 102 people were receiving support with personal care.

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

Since the last inspection, the new registered manager and provider had worked hard to make necessary improvements to the governance systems and processes and overall service delivered. This included the implementation of more robust and effective systems to monitor key aspects of the service.

Safe recruitment processes were in place. A range of pre-employment checks were completed to ensure newly recruited staff were suitable to work for the service.

People told us they received care and support from regular staff who knew them well. They told us calls were completed at the times agreed in their care plans and that staff stayed for the required amount of time.

People told us they felt safe with the staff who supported them, and family members were confident their loved ones were well looked after. Staff showed a good understanding of their roles and responsibilities for keeping people safe from harm.

Risks to people had been assessed, including risks related to the COVID-19 pandemic. Those identified were managed safely by competent staff. Where people required support with medication, this was managed safely. People and family members confirmed that medication was received at the right times.

People and family members spoke positively about the overall management of the service and the care provided. The registered manager and provider promoted a person-centred culture and provided evidence throughout the inspection to support this.

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 and update: The last rating for this service was requires improvement (published 14 October 2019). The provider was in breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. They completed an action plan to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

This was a planned inspection based on the previous rating.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

This service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service responsive?**

This service was responsive.

Details are in our responsive findings below.

**Good** ●

### **Is the service well-led?**

This service was well-led

Details are in our well-led findings below.

**Good** ●

# Unite Healthcare 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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

This 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 homes.

The service had a manager registered with the Care Quality Commission. This means that the registered manager and provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We announced the inspection visit 48 hours' before it took place. This was because we needed to give time to prepare in advance for our visit due to the COVID-19 pandemic.

Inspection activity started on 25 September 2020 and ended on 30 September 2020. We visited the office location on 25 September 2020.

#### What we did before the inspection

We reviewed the information we 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We spoke over the telephone with four people who used the service and eight family members about their experiences of the care provided. We also spoke with the registered manager, provider and six members of care staff.

We reviewed a range of records. This included six people's care records and multiple medication records. We looked at the recruitment files for three staff employed since the last inspection.

#### After the inspection visit

Due to the impact of the COVID-19 pandemic we limited the time we spent on site. Therefore, we requested records and documentation to be sent to us and reviewed these following the inspection visit.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- Safe recruitment processes were followed. A range of pre-employment checks were completed to assess new applicant's fitness and suitability to work at the service.
- The service employed the right amount of suitably skilled and qualified staff to safely meet people's needs.
- People and family members told care and support was provided by consistent staff who knew them well. Their comments included; "It's always the same two [staff] and when they are off it's the same two other [staff]" and "I've got three regular staff who come, I know when they're coming, they just tell me."

### Assessing risk, safety monitoring and management; Using medicines safely

- Individual risks to people, significant others, such as spouses, and the environment had been assessed in detail, including those related to COVID-19; for example, underlying health conditions.
- Assessments and associated care plans provided detailed information and guidance in order for staff to keep people safe from avoidable harm.
- Medicines were managed safely by suitably trained and competent staff.
- The support people needed with their medicines was clearly recorded within their electronic care plans. Records showed medicines had been administered at the right times.
- The registered manager and provider had completed a full review of people's medicines and implemented new systems to ensure medicines kept within people's homes was up-to-date and accurate.

### Systems and processes to safeguard people from abuse

- Staff understood how to protect people from abuse and who to report any concerns to.
- People told us they felt safe and staff treated them well. Their comments included; "I feel very safe, they're [staff] so good and so nice. I feel safe with them" and "Very safe, they're [staff] on time and they are caring and very pleasant."
- Family members felt reassured their relatives were safe and well looked after by staff. Their comments included; "Totally safe, I'm quite confident to leave them [staff] o get on. I don't have to watch over them, they're great" and "Very safe because [relative] has good carers and continuity."
- A record of safeguarding incidents was kept and regularly checked by the registered manager to ensure appropriate action was taken.

### Preventing and controlling infection

- Staff completed IPC training including COVID-19 related training and had a good understanding of safe IPC working practices.

- The registered manager and provider had created robust systems to ensure staff had access to a sufficient stock of the right personal protective equipment (PPE).
- People and family members told us staff wore PPE in line with current IPC guidance. Their comments included; "They [staff] go straight in and wash their hands. With the current situation they have masks and pinnies on" and "Very good. They [staff] wear masks and gloves and they wear a uniform which is always clean."

#### Learning lessons when things go wrong

- The service kept a record of any incidents including accidents that occurred within people's homes. Incidents were reviewed regularly by the registered manager and provider to look at patterns and trends. Action was taken to prevent incidents reoccurring in the future.



# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to 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 care that was person-centred and based their needs and choices. Care plans included detailed information about people's social history, likes and dislikes to allow staff to get to know them before providing support.
- Staff were responsive to people's needs. They provided office staff and the registered manager with updates where people's needs had changed. One person told us, "Sometimes one of the carers might say you need this or that and they let Unite know. They arrange to come and talk to me about it and see if they can improve matters for me."
- People and family members told us they were involved in the care planning process and were happy with the support staff provided. Their comments included; "One of the ladies [managers] comes out to go through everything. We're getting exactly what we need" and "Oh yes, [Name], the owner comes up and through it with me."
- People and family members told us staff arrived at the times agreed in care plans and stayed for the required amount of time. Their comments included; "They [staff] are always punctual" and "They [staff] arrive on time and stay the right amount of time."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service recorded and shared information relating to people's communication needs. Care records provided guidance for staff on how to effectively communicate with people who were identified as having communication needs or difficulties.
- The registered manager was aware of the need to ensure that information was made available to people in a way they would understand, such as large print for those with sight impairment, should they require it.

Improving care quality in response to complaints or concerns

- People and family members told us they knew who to contact if they had any concerns and were confident any issues would be dealt with. Their comments included; "They [office staff] have explained what I need to do if I wanted to make a complaint" and "If I had a complaint, I would ring them, but I haven't got any complaints."

- Each person's care plan contained information about who to contact should they wish to make a complaint.
- The registered manager maintained a record of complaints received to show how they had been managed; those recorded had been dealt with appropriately. One family member told us, "Our complaint was dealt with to our satisfaction."

#### End of life care and support

- At the time of the inspection the service was not supporting anyone with end of life care, however the registered manager showed a good level of knowledge and understanding around their role and responsibility in this area.

# 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Continuous learning and improving care

At the last inspection governance systems were not always effective at monitoring key aspects of the service. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, enough improvements had been made and the provider was no longer in breach of this regulation.

- Since the last inspection, the registered manager and provider had worked hard to improve the systems used to monitor the quality and safety of the service.
- Regular audits and checks were carried out on key aspects of the service; where areas of improvements were identified, a clear action plan was implemented.
- 'Spot checks' were completed on staff by the management team to observe their practice whilst providing support to people; this included separate observations relating to infection control and PPE usage. Any issues identified were addressed through supervision and additional learning and support given if required.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a clear emphasis on promoting a positive culture and ensuring people received person-centred care.
- People spoke positively about the service and the support provided by staff. Their comments included; "They [staff] do everything I want, if I do request anything new, they will do it for me. If I come out of hospital, they slot me in straight away" and "The girls [staff] that are on this run are very friendly, helpful and make me feel safe."
- Family members felt confident and reassured their relatives were well looked after. One family member told us, "There is consistency and a measurable and qualitative process for looking after [relative] and keeping him safe. He gets companionship as well as care."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service involved people and their families through regular reviews, conversations to enable them to put forward their views about the service.
- Surveys were sent out to people and family members as a further way to gather their views about the

service; information gathered was used to make improvements.

- Regular meetings were held with staff in various ways to ensure their safety during the pandemic. Staff told us these meetings helped them feel supported and engaged with at all times.
- The manager, provider and staff team worked closely with other health and social care professionals to ensure good outcomes for people.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory 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 and provider showed a good level of knowledge and understanding of their responsibilities and regulatory requirements and worked well together to ensure the service was well-managed. This was evidenced by the improvements identified since the last inspection.
- People and family members told us they felt the service was well-managed and that they were regularly contacted by office staff and the registered manager. Comments included; "I can only speak for myself and I think it's very organised" and "I think it's done well really. Its managed well, if someone's late they [office staff] do manage to get someone out to you."
- The provider had the required policies and procedures in place and they were regularly reviewed and made accessible to staff.
- The registered notified CQC of events as required by regulation. They were aware of their legal responsibilities and the importance of investigating incidents/events that occurred as well as complying with duty of candour responsibilities. One family member told us, "I've noticed a great deal of improvement with how staff communicate with me, how they deal with me if things go wrong. Openness, I like that."