

Unite Care Ltd

# Unite Care Ltd

## Inspection report

Unit 40, Design Works  
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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 Care Ltd is a domiciliary care agency providing personal care to people living in their own home. At the time of our inspection the service provided support to nine people. 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.

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

People were protected from the risk of harm and abuse. There were effective systems and processes in place to minimise risks. Care workers had been recruited safely and they knew how to identify and report concerns. Risks in relation to providing support to people were assessed and plans to manage such risks were developed together with people who used the service. Medicines were managed safely. The service had processes to analyse trends and patterns of accidents and incidents to minimise the risk of such events happening again. 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 were involved in their care and the service had developed person centred care plans to manage and meet their care needs. People's communication needs were assessed, and systems were in place to meet them. Concerns and complaints were listened to and actions were taken to learn from complaints and make improvements.

The service had a robust and effective quality assurance monitoring system to make ongoing improvements to the care people received. People told us that there was a very positive caring culture by care workers and the service. One relative told us, "The staff really go above and beyond and created a bond with my relative, they became part of our family."

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 9 July 2021)

The provider completed an action plan after the last inspection 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 inspection was prompted by a review of the information we held about this service and to assess if the service had made improvements since our last inspection.

### 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our safe findings below.

# Unite 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. 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.

#### 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

This inspection was unannounced.

Inspection activity started on 20 September 2022 and ended on 29 September 2022. We visited the location's office on 20 September 2022.

#### What we did before the inspection

We reviewed information we had 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 (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 two relatives of people who used the service to help us understand the experience of people who could not speak with us. We also spoke with one person using the service. We spoke with the registered manager, one care coordinator and three care workers. We reviewed seven care records of people using the service, seven personnel files of care workers and other records about the management of the service.

# 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 we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm and abuse. There were policies covering safeguarding adults, which were accessible to all staff. They outlined clearly who to go to for further guidance.
- People who used the service and relatives told us that they were safe with their care worker. One person told us, "I am absolutely safe, the [name] is very good and knows exactly what to do."
- Care workers understood their responsibility in identifying, responding to, and escalating suspected abuse. They told us they would report any allegations of abuse to the office. They were aware they could notify the local authority, the CQC and the police when needed. One care worker told us, "If I had any concerns of people not being safe, I would contact the office and tell the manager."
- Records showed staff had received up-to-date safeguarding training appropriate to their role.

Assessing risk, safety monitoring and management

- Risks in relation to meeting people's needs and supporting them at their home were assessed and plans to manage such risk were in place.
- During our last inspection risk assessments and risk management plans contained conflicting information and lacked detail in how to ensure people's needs were met safely. This resulted in a breach of regulation 12 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Safe care and Treatment.
- During this inspection the service had made a number of improvements and risk assessments and risk management plans were detailed and clear.
- We found that risk assessments had been developed in areas such as the environment, manual handling and pressure care. These provided clear information for care workers to follow when supporting people. People who used the service and relatives told us that they had been involved in the process. One person said, "At the beginning we spoke about what help I need and how this can be met best."
- Care workers told us that they had access to risk assessments via an application (App) on their phone and also advised us that they will inform the office as soon as they noticed any changes to the people they supported.

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 Mental Capacity Act (MCA).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- Most people had capacity to make their own decision. Peoples capacity had been assessed as part of their initial assessment and any information where people required support with making particular decisions had been recorded in the care plans.

#### Staffing and recruitment

- People were receiving care and support from staff that had undergone the necessary safer recruitment checks.
- We reviewed staff recruitment files and found applications on file. Employment history had no gaps and references were verified and were on file before staff started employment. Disclosure and barring checks were completed before staff started to work. These checks helped to ensure only suitable applicants were offered work with the service.
- The service had an electronic monitoring system which showed that over the past three months no calls were missed, or care workers were late. People who used the service told us and relatives confirmed this. One relative told us, "They [care workers] have never missed a call and when they are late, they will always call us."

#### Using medicines safely

- Peoples medicines were managed safely.
- During our last inspection we found that medicines were not managed safely, care records lacked information on the level of support people required and risks around the assistance with medicines were not assessed. This resulted in a breach of regulation 12 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Safe care and Treatment.
- Since our last inspection the service had made improvements and records around peoples medicines support were detailed and also clearly highlighted risks when people were assisted with their medicines.
- Care workers received training around supporting people with their medicines and their competency was assessed.
- Electronic medicines administration records (MARs) were completed correctly. If care workers missed any medicines, the system automatically alerted the office. The registered manager told us that if he received an alert, he would immediately contact the care worker to find out what has happened and resolve the issue.
- People who used the service raised no issues around poor management with their medicines and records viewed confirmed this.

#### Preventing and controlling infection

- The service had arrangements in place for preventing and controlling infection. This included making sure there was enough personal protective equipment (PPE) and ensuring staff had the necessary infection control and food hygiene training.
- Staff confirmed they had access to personal protective equipment PPE, such as masks, aprons and gloves. Staff told us they could access additional PPE from the office and the registered manager would deliver PPE to people's homes. For example, the registered manager asked us to come slightly later for our visit to the office so he could drop off PPE at people's homes.
- People told us that care workers observed hand hygiene and wear masks, gloves, aprons and shoe covering when supporting them as and when needed and kept extra stock in their cars.

#### Learning lessons when things go wrong

- Systems were in place to ensure accidents and incidents were documented and lessons were learned if things had gone wrong.
- The registered manager told us that since our last inspection there had been no accidents or incidents.



They told us that they would discuss any incidents or accidents with care workers during their supervisions or during staff meetings to ensure lessons were learned and the risk of similar incidents happening in the future were minimised.

- The registered manager was clear that certain incidences and accidents had to be reported to the CQC.

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed 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 and relatives told us they received person centred care. Their care files contained meaningful information that identified their abilities and the support required.
- During our last inspection care was not always person centred and care plans lacked detail and provided conflicting information about people's needs and the care they received. This resulted in a breach of Regulation 9 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Person-centred care.
- Since our last inspection the service had implemented an electronic care planning system, which can be remotely accessed by care workers when supporting people. Care plans referred to people's likes and dislikes. Care plans provided clear information how people's needs were met and detailed the tasks people expected the care worker to carry out during visits.
- People who used the service and relatives spoke highly about the care workers and the agency. One relative said, "We have told the agency of the difference they have made to our relative; they take extra time to listen and carers created a bond with us and my relative which has made our relative very comfortable with the carer. The agency keeps family informed and carers are very respectful. We feel privileged to have such fantastic carers and as a family we strongly believe that this has prolonged his life."

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 registered manager demonstrated good understanding of the AIS, he advised us that documents can be provided in different formats if this was required to help people to better understand them
- Relatives told us, that care workers showed cultural awareness and while they don't speak the same language of the people they supported, they made a conscious effort to speak slowly and explain things more clearly to people. One relative said, "They [staff] don't, speak our language but are aware of the language barrier and take more time when listening to my relative."

Improving care quality in response to complaints or concerns

- The service did not receive any formal complaints since our last inspection. The registered manager told us that they would deal with any concerns raised by people or their relatives immediately, but these had mainly been around choosing more suitable times for calls or requesting a different care worker.

- The service had a complaints procedure in place and people who used the service and relatives told us that they would be happy to raise any concerns with the care workers or the registered manager. One relative said, "I have no complaints, the care workers are excellent, however, if I have any issues, I will call the manager."

#### End of life care and support

- Some people who used the service were receiving end of life care from the local palliative care team provided by the hospice. Care workers provided personal care and no end of live care. However, we saw that care workers had received training in end of life care and one relative told us that they were very sensitive to their relatives end of life care needs. They told us, "The staff have really helped my relative to keep his spirits up, I couldn't fault them."

# 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 we rated this key question requires improvement. At this inspection the rating has changed to 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

- The service had robust systems to monitor and assess the quality of care provided to people who used the service.
- During our last inspection we found that quality audit systems had failed to identify shortfalls in the safe management of medicines, risk management and care planning. This resulted in a breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good governance.
- During this inspection we found that the service had made improvements to the quality monitoring system. The register manager assessed regularly care plans and medicines administration records to respond to shortfalls in a timely manner.
- People who used the service and care workers told us that regular spot-checks were carried out. Records viewed during this inspection confirmed this.
- The service had a range of policies and procedures to ensure that care workers were provided with appropriate guidance to meet the needs of people. These addressed topics such as, medicines management, safeguarding and equality and diversity.

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 were a range of formal systems, which ensured people had choice and control over their care. People participated in regular reviews, surveys and meetings. One relative said, "The manager contacted us regularly to find out if anything changed. We worked very well together with the agency and care workers had built very good relationships with the family and my relative."
- People received regular unannounced spot checks and telephone calls. This ensured they were consulted and given opportunities to comment about their care.
- The registered manager was knowledgeable about the characteristics that were protected by the Equality Act 2010, which we saw had been fully considered in relevant examples. As addressed earlier, people's religious or cultural needs were met.

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 understood their responsibility of notifying the CQC of events when things had gone wrong.

- The registered manager said, "I will always contact the local authority and CQC if something has gone wrong. I am very open, and it is a good way of making improvements."

#### Continuous learning and improving care

- There was an incident/accident reporting system. However, we found the process for disseminating information on lessons learnt could be further developed. We have made a recommendation for implementation of formal systems for ensuring an effective system for learning lessons.
- We identified improvements were made following audits and feedback from people receiving care.

#### Working in partnership with others

- The service worked in partnership with a range of health and social care agencies to provide care to people. These included, GPs, district nurses, pharmacists and members of the palliative care team.
- The registered manager told us that they continued to take part in provider engagement calls arranged by the local authority during the COVID 19 pandemic. They told us that these calls were very useful and was a good forum to share knowledge and experience.