

UKG Lifestyle Limited

UKG Care Liphook

Inspection report

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29 August 2019

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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

UKG Care Liphook is a domiciliary care agency providing care and support to mostly older people living 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 the inspection 20 people were receiving personal care support.

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

People and their relatives told us they felt safe. Staff completed regular training and understood their safeguarding responsibilities. Potential risks to people had been assessed and measures were put in place to ensure their safe management. There were clear safeguarding processes in place to identify, record and respond to all incidents and accidents. People were supported to receive their medicines by trained staff.

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 encouraged to maintain their independence and staff provided appropriate support to enable people to maintain control of their lives and the care provided. Staff told us they felt valued and supported and had access to a range of training opportunities to enable them to continually develop their skills.

People's care plans detailed their likes, dislikes and preferences regarding how they would like their care needs met. People told us they received appropriate levels of care and support that was responsive to their needs. There was a clear complaints procedure in place and people told us they felt comfortable sharing any concerns and that they would be listened to.

People and their relatives consistently praised staff's caring nature and valued the relationships that they had established with staff. People were treated as partners in their care and told us they received high quality care and support that was delivered with dignity and respect.

There was exceptionally strong leadership and commitment in the organisation and the provider drove a culture of continuous improvement and compassionate, person-centred care. The provider consistently sought new ways of working to engage with staff to drive forward their vision and values to achieve high quality care with a "human touch."

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 14/08/2018 and this is the first inspection.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

UKG Care Liphook

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.

Inspection team

This 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 and specialist housing.

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

Notice of inspection

We gave the service 48 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 28 August 2019 with calls to people who used the service and their relatives to seek their feedback. We visited the office location on 29 August 2019.

What we did before the inspection

We reviewed information we had received about the service since it was registered. 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 of this information to plan our inspection.

During the inspection

We completed calls to people and their relatives to gain feedback on their experience of care provided by

UKG Care Liphook. We spoke with five people and four relatives. We spoke with three members of staff including the provider, registered manager and a senior care worker. We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with three care staff and one social care professional who had previous contact with the service.

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 for 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 their relatives consistently told us they felt safe. One person commented, "Good god I feel safe with [staff], they are so warm, friendly and loving."
- There were clear systems in place to support staff to recognise, respond and report any concerns. We spoke with a social care professional who told us the service made appropriate referrals when concerns were raised to ensure people's safety.
- Staff we spoke with were clear on their roles and responsibilities to ensure people remained safe. Staff were confident any concerns they shared would be listened to and investigated where appropriate by senior care staff and the registered manager.

Assessing risk, safety monitoring and management

- Risks to people were appropriately managed. Assessments of potential risk to people were clear and covered a range of areas. Information included steps staff should take to reduce or remove identified risks to people.
- Where people required additional support to mobilise safely, there was clear information and steps for staff to follow to promote people's safety. One relative commented, "They help [relative] to move around and use all her equipment safely. I ask them when I am not sure on anything, their knowledge is better than mine."
- Environmental risks to people were considered. This included assessment and monitoring of people's home environment to support people to remain safe in their home. For example, staff ensured people's fire detectors, kitchen equipment and home security were in working order and appropriate.

Staffing and recruitment

- People and their relatives told us they received consistent and timely care calls. One relative commented, "I have records of all visits we have had since August [2018] and they come four times a day. In that time, they have only ever been late once, but [staff] called me to let me know there would be a delay."
- Staff rotas were generated in advance and provided to people, so they were aware who would be assisting them with their support needs. The registered manager told us where possible care calls were organised in rounds so people received consistent staff support.
- The provider sought the relevant pre-employment checks to ensure only suitable staff were recruited, which included Disclosure and Barring Service checks prior to commencing their role. This enabled the provider to check applicant's suitability for their role. However, recruitment records did not always record exact dates of staff's previous employment history, which left a risk of gaps in employment not always being fully explored. The provider had recognised weakness in their recruitment process prior to the inspection and had acted to improve the robustness of procedures.

Using medicines safely

- People told us staff supported them to manage their medicines safely.
- People's care records included information on how staff should support them to receive their medicines, and the level of support they required.
- Where people required assistance applying topical creams, records provided information on when these should be applied and included visual body maps to identify where staff were required to apply creams for each person.
- People were supported to receive their medicines from staff who had been appropriately trained. Staffs' competencies to administer medicines safely and in line with best practice guidance was regularly monitored and reviewed by senior staff.

Preventing and controlling infection

- Staff completed infection control and food hygiene training during their induction and received updated training as required.
- The registered manager and senior staff monitored staff's adherence to infection control guidance and policies through regular spot checks of their practice.
- Staff told us personal protective equipment (PPE), such as gloves and disposable aprons were readily available. We spoke with people and their relatives who confirmed staff wore PPE appropriately, when assisting them with their personal care needs.

Learning lessons when things go wrong

- The provider, registered manager and senior staff had weekly meetings which included discussions on any concerns, accidents or issues raised to support effective communication across the provider's services.
- The registered manager maintained oversight of all accident and incident records and reviewed information to manage risks to people. For example, the registered manager discussed how monitoring of a person's falls enabled them to share information with the local authority to put measures in place. This included a falls sensor and door alarm, to reduce the potential risks to the person. We reviewed records which confirmed this.

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's needs were assessed prior to the delivery of their care. The registered manager told us they worked in collaboration with local authority commissioners and relevant health professionals to ensure people's needs were appropriately assessed.
- Senior care staff visited people in their home or hospital before care was provided to introduce people to the service and ensure care plans were in place to direct staff on tasks that people needed support with.
- A relative commented, "I was impressed [with the assessment of need] as I thought [relative] needed a 45-minute care call, but [staff] said what was needed could be met in a 30-minute care call, so I knew it wasn't about getting the money."
- The registered manager supported staff's understanding of best practice guidance by putting together fact files on different areas of interest. A staff member commented, "[Registered manager] puts together fact files for us to keep us on top of things. The last one was on the local Multi-Agency Safeguarding Hub (MASH) which helps keep [staff] all singing from the same hymn sheet."

Staff support: induction, training, skills and experience

- Staff received a range of training suitable to their role. We reviewed staff training records which confirmed staff training was delivered regularly and in accordance with the provider's timescale.
- Staff spoke positively of the induction and training pathway offered to support them in their role. One staff member commented, "My induction was really good, [the trainer] led us through it really well, it was brilliant."
- Staff received regular supervision. We reviewed staff supervision records which confirmed they met regularly with the registered manager on a one to one basis or as part of whole team meetings. This supported staff to share information and seek advice and guidance in their role.

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

- Where required care plans detailed the support, people needed to eat and drink. Plans included people's preferred meal choices and provided information for staff to ensure they left drinks accessible and available to people throughout the day. One person said, "[Staff] fill my [thermos] before they leave and make sure I have a jug of water for the day."
- People we spoke with told us staff sought people's choices daily and were flexible in supporting meal preparation to suit their preferences. For example, one person commented, "[Staff] ask me what I would like each day, sometimes I want a ready meal or sometimes they make something on toast."
- Staff received training in food hygiene to ensure they followed best practice guidance and handled food safely.

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

- The registered manager told us they worked closely with a range of health and social professionals to achieve best outcomes for people.
- We reviewed records in people's care plans which evidenced staff regularly sought appropriate advice and guidance from other professionals. For example, where a person was being supported to manage their skin integrity by the district nursing team, staff attended a joint visit to discuss their care planning.
- People and relatives told us staff followed other professionals' guidance to meet their needs. For example, a relative explained where their loved one received support from a physiotherapist, staff supported the person to use their mobility aids consistently to re-build their confidence and strength.

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 Act 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's care plans reflected where consent had been sought prior to the delivery of care and were signed by the individual to confirm this.
- At the time of inspection no one accessing the service was subject to any restrictions or deprivation of liberty. The registered manager was able to confidently discuss how situations would be managed in the event a person may be unable to consent to their care and treatment or in relation to any specific decision, and steps that would be taken to ensure care was delivered in line with the principles of the MCA.

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

- People and relatives consistently told us they received high quality care and praised staff's efforts. All feedback provided by people and their relatives was positive.
- People consistently told us they would recommend the service. One person said, "Staff are very, very good. They couldn't do enough for me and I couldn't fault them", and another person commented, "I would recommend them [staff], overall I am really happy with my care and there is nothing [I think] they could improve on."
- Relatives told us staff supported their loved ones with kindness and compassion. One relative said, "They're friends not just staff, they're the only friends she's got, we don't see anyone else and they have become her link to the outside world", and another relative commented, "Two of our carers are beyond compare, they're the best carers we have ever had, they're experienced and have attention to detail."
- The service ethos centred around meeting people's diverse needs. For example, information provided to people using the service set out the provider's values and stated, "We believe everyone should be able to live life to the full, regardless of age or disability." A person confirmed, "Staff know me well and what I like as an individual, they treat you as you expect to be treated."

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

- People and their relatives were regularly consulted to discuss their care and care planning to ensure the care provided reflected their needs and choices.
- People were supported to make decisions about their care. One person told us, "We [person and staff] do a lot of care planning by discussion. We decide if something is the right thing or not and then we do it."
- Staff understood the importance of enabling people to be involved in decision making and have choice and control. For example, one staff member said, "I am passionate about person centred care, people are always asked and never told. Even people lacking capacity are still given a choice."

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their independence where possible. A person commented, "I am very independent, and they don't mind when I do [tasks] myself, even if it's not done properly, it's my way and they respect that."
- Staff were committed to providing strengths-based approaches to care to people. For example, a staff member was proud to discuss how they had worked with a person to put measures in place to enable them to manage their own medicines safely. A relative also told us how staff had worked with their loved one to support them to regain confidence in their mobility to reduce the need for moving and handling equipment.
- People and their relatives consistently told us staff treated them with dignity and respect when meeting

their care needs. One person who required assistance to mobilise commented, "Staff always talk to me first and tell me what they are going to do, if they are going to roll me this way or that way. It's good because then I know what to expect and I can help them."

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 told us they received care that was responsive to their needs. For example, one person told us, "Staff are responsive to my needs each day as my condition can be variable, on different days I have different needs and staff support me flexibly."
- People's care plans included a breakdown of each care call and how staff could best support them to meet their needs and preferences.
- People and their relatives were encouraged to share their views on the care provided through regular planned reviews. The registered manager told us, "We make sure we fit in reviews around people. We arrange times to meet their needs and their family's needs if they want them to be present. We will do evenings, weekends because it's not a nine to five role, that doesn't work for people." We reviewed records which confirmed this.

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.

- People's care plans contained information about their communication needs, and supported staff to communicate with people in a way that aided their understanding.
- Information was shared with people in line with their preferences. For example, people's scheduled care call information was sent in advance and people could receive these via e-mail, post or hand delivered according to their preferred method.

Improving care quality in response to complaints or concerns

- People and their relatives told us they felt comfortable raising any concerns and were confident that issues would be dealt with appropriately.
- The provider had a robust complaints procedure in place and the registered manager was responsible for overseeing the appropriate management and responses to any information shared.
- We reviewed records which demonstrated the registered manager and senior staff completed thorough investigations when concerns were shared. These included actions that had been taken to keep people safe.

End of life care and support

- At the time of inspection no one was receiving end of life care. The registered manager was able to discuss

the steps they would take to ensure people had the appropriate care and support if they required end of life support. This included contacting the relevant health and social care professionals.

- Some staff we spoke to told us they had requested additional training to gain a greater understanding of how to best meet people's end of life care needs. They told us this had been shared with the registered manager and as a result training was scheduled to support this.

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

- People and relatives spoke highly of the registered manager and their leadership. For example, we received comments such as, "[The registered manager] is first class, we have a good relationship.", and, "[The registered manager] is extremely good, when my loved one was discharged from hospital sooner than planned everything was in place".
- There was a strong sense of the provider's vision and values within the organisation to promote a culture of delivering "quality care with a human touch". To support this the provider recognised the importance of ensuring they recruited and invested in the 'right' staff with the 'right' attributes by reviewing and updating their recruitment process. The new process included introducing a pictorial guide which visually demonstrated a range of care and support tasks people may require assistance with.
- Ensuring staff were supported and highly motivated in their roles was high on the provider's agenda. The value, recognition and importance of staff and their wellbeing was embedded throughout the organisation. For example, the provider used a range of positive performance management approaches to celebrate staffs' individual successes. Staff we spoke with consistently told us they felt proud of their achievements which was enhanced by the recognition they received. One staff member commented, "The recognition is nice, and I don't feel disheartened I haven't had [an award] yet because I like to see buzz of others being rewarded", and another staff member said, "[Management] really try and praise staff, everyone gets a gift for their hard work and it's great encouragement and boost to us be motivated."
- The provider sought opportunities to promote constructive. For example, the provider had introduced a new approach to staff supervision. The provider told us, "The supervision process has been changed to become more robust. Staff are now given a self-appraisal form before attending. One staff member thought it was good, when she rated herself there were things that she was doing better than she thought and the areas where constructive criticism had been given, she could improve on. This helps to build staff confidence not only in their role but also in themselves and means we can really support them to grow and to be successful with progression if this is what they want."

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 had a good understanding of their duty of candour requirements. The duty of candour sets out actions that the registered manager should follow when things go wrong, including making an apology and being open and transparent.

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

- There was a clear management structure in place which included the registered manager, senior staff and care staff. Staff were aware of the different roles and who they could seek advice and support from.
- The provider's governance systems were operated effectively to continually assess, monitor and improve service delivery. There was a clear delegation of responsibilities amongst the senior care team and staff trusted and valued each other's abilities.
- The registered manager and senior staff regularly completed a range of audits based around their regulatory requirements. This included completing thorough spot checks of staffs' performance and care being delivered in people's homes. We reviewed records which demonstrated how findings from these checks were used to drive improvement to ensure staff delivered the standard of care expected by the provider and the people they supported.
- UKG Care Liphook was one branch of the provider's business under UKG Lifestyles Limited. Other aspects of UKG Lifestyles Limited included UKG Lifestyles providing care sector training and apprenticeships. The registered manager discussed the benefits of being able to regularly consult with the provider's training branch, to share staff's feedback on training course content and identify areas where additional training could enhance staffs understanding of their role.

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

The provider

- The provider and registered manager spoke passionately about the value in regularly seeking feedback from people who use the service to effectively deliver high standards of care. The provider commented, "We see feedback as the breakfast of champions."
- People were supported to feedback about the service they received. People knew the registered manager, who would speak with people regularly to see if there was anything that they wanted or could be improved.
- The provider went to great lengths to explore ways to involve and communicate with staff across their services. This included using a closed social media platform, which allowed the provider to post relevant news, company updates, and share inspirational quotes to continually engage and motivate staff.
- The provider published monthly newsletters and told us, "We have introduced a monthly newsletter to ensure staff have a visual on what is happening at UKG Care but also across the other business units. We aim to make staff feel they are valued by the company and that we are one team." A staff member commented, "You feel really proud of yourself when you're in the newsletter."

Continuous learning and improving care; Working in partnership with others

- The provider had been nominated and achieved at local and national business awards in 2019 which celebrated their vision and success. This included recognition as a best practice representative within The Parliamentary Review. The Parliamentary Review is a series of British publications which aims to share best practice amongst policymakers and business leaders.
- The provider's response to the publication was, "we are honoured to have been invited to participate in this publication. As a business, our aim is to provide outstanding services, delivered by the best people, to achieve excellent results for our clients. The Parliamentary Review gives us a platform to share our learnings and if we can play a small part in contributing to raising industry standards, we will have fulfilled one of our ambitions."
- Staff's adherence to the provider's policies and expectations were reviewed and staff were provided with feedback to support them to continually develop and improve
- There was a clear strategy to safely and effectively roll out new ways of working and support staff through periods of change. One staff member commented, "[The provider] is at all the meetings, we met to talk

about the layout of care plans and they listen to [staff] ideas."