

Summary Report

Youniversal Care Limited

Home Care Service

Suite 24 4 Wharf Street St Helier JE2 3NR

29 March and 6 April 2023

SUMMARY OF INSPECTION FINDINGS

The following is a summary of what we found during this inspection. Further information about our findings is contained in the main body of this report.

The structure of the service remains small but is proportionate to the staffing levels and the client group. The Provider and Registered Manager have established a core staff team and policies, documents, and procedures to ensure the safety of staff and care receivers. It was positive to note what had been achieved since the service registered with the Commission only eight months ago, in July 2022.

There was evidence of appropriate induction and training for staff, and the Provider had developed supervision and appraisal documents that were clear and comprehensive. Following feedback from a recent staff survey, further improvements to the supervision process have been introduced. This is highlighted further under the heading 'Management of the Service.'

The feedback received from care receivers, relatives, and health professionals was overwhelmingly positive. There was feedback regarding the service being 'personcentred,' in addition to positive feedback regarding the quality of the care provided. The service uses an electronic system called 'Care Line Live.' All information is stored electronically, including the care plans. New care receivers are given a welcome letter containing contact details for the management team and the complaints process. A sample of care plans was reviewed. The care plans included a section 'about me,' which evidenced personalisation. The plans also contained appropriate risk assessments and referrals to other healthcare professionals.

The importance of promoting the choice and independence of care receivers was highlighted frequently throughout the inspection process and in the feedback provided. This is an area of good practice.

The Provider had written policies for the service in line with Appendix 2 of the Standards. After reviewing a sample of the policies, the Regulation Officer identified that further modification was required. This is an area for improvement.

IMPROVEMENT PLAN

There was one area for improvement identified during this inspection. The table below is the Registered Provider's response to the inspection findings.

Area for Improvement 1 Ref: Standard 4	The Registered Provider must ensure that policies include appropriate links for staff and include local guidance/legislation and best practice.
To be completed by:	
within three months from the date of inspection.	Response of Registered Provider:
	On meeting with our inspector and discussing the improvement area, we have made the required changes and updates to our policies. Policies are and remain live documents, that will require ongoing changes and development to remain in line with guidance and the company.

The full report can be accessed from here.