



**Jersey Care  
Commission**

## **INSPECTION REPORT**

**Youniversal Care Ltd**

**Home Care Service**

**Suite 24  
4 Wharf Street  
St Helier  
JE2 3NR**

**Date of inspection**

**3 December 2024**

## THE JERSEY CARE COMMISSION

Under the Regulation of Care (Jersey) Law 2014, all services carrying out any regulated activity must be registered with the Jersey Care Commission ('the Commission').

This inspection was carried out in accordance with Regulation 80 of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018 (as amended) to monitor compliance with the Law and Regulations, to review and evaluate the effectiveness of the regulated activity, and to encourage improvement.

## ABOUT THE SERVICE

This is a report of the inspection of Youniversal Care Ltd. The service is situated in St Helier town centre and offers respite, outreach and community visits.

Regulated Activity	Home Care Service
Mandatory Conditions of Registration	Type of care: Personal care and personal support Category of care: Young adult, Adult 60+, Autism, Learning Disability, Physical disability and/or sensory impairment, Mental health, Dementia care, Substance misuse (drug and/or alcohol). Maximum number of personal care and personal support hours to be provided per week: 600 hours per week Age range of care receivers: 18 years and above
Discretionary Condition of Registration	None
Date of Inspection	3 December 2024

Time of Inspection	12:00 pm – 4:00 pm
Type of Inspection	Announced
Number of areas for improvement	None
Number of combined personal care/ personal support delivered during the week of inspection	327 hours

The Home Care service is operated by Youniversal Care Ltd, and there is a Registered Manager in place.

Since the last inspection on 29 March and 6 April 2023, the Commission received an application from the Registered Provider on 4 June 2024 to vary a condition on the service's registration to support individuals aged 18 and above. This was agreed and a new certificate of registration was issued.

For the purposes of this inspection report the individuals who use this company are called users of service.

## 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.

Youniversal Care Ltd offers a range of care packages, including respite, outreach, and community visits. It is part of the learning disability alliance and collaborates with other services to facilitate respite stays, which range from thirty minutes to twenty-four hours.

This service carefully selects packages it knows it can fulfil, both in terms of meeting the needs of the service user and adequate staffing. Care is taken to introduce the staff team slowly to ensure joint relationships can be formed.

Care plans are thoughtfully written, individualised, and updated regularly with input from service users, their representatives, staff, and other professionals who work with the service.

The service ensures safe recruitment processes are followed and demonstrated this to the Regulation Officer.

New staff are required to complete an induction where they will be supplied with a staff handbook, carry out shadow shifts with other members of the staff team to get to know users of service and complete mandatory training.

The organisational structure is clear, and all the service staff and users who spoke to the Regulation Officer expressed their willingness to escalate any concern, should this be necessary.

All staff have access to an online portfolio of policies. These policies are short, concise, easy to read, and related to relevant local legislation.

Staff supervisions are completed every three months in line with the Standards. All staff have annual appraisals.

Feedback was overwhelmingly positive, especially regarding the professionalism and reliability of the managers.

Throughout the inspection, it was evident that both the Registered Provider and Registered Manager are passionate about providing the best possible care to meet the needs of the users of service and having a well-trained, caring staff team.

## INSPECTION PROCESS

This inspection was announced and was completed on 3 December 2024. One weeks' notice was given initially however this was extended to ensure both the Registered Provider and Registered Manager would be available for the visit at their request.

The Home Care Standards were referenced throughout the inspection.<sup>1</sup> This inspection focussed on the following lines of enquiry:

- **Is the service safe**
- **Is the service effective and responsive**
- **Is the service caring**
- **Is the service well-led**

Prior to our inspection all of the information held by the Commission about this service was reviewed, including the previous inspection report.

The Regulation Officer gathered feedback from three users of service and four of their representatives. They also had discussions with the service's management and other staff. Additionally, feedback was provided by two professionals external to the service.

As part of the inspection process, records including policies, care records, recruitment files, monthly quality reports, training matrix and risk assessments were examined.

At the conclusion of the inspection, the Regulation Officer provided feedback to the Registered Manager and Registered Provider both verbally and in writing. This report outlines our findings during the inspection. There were no areas for improvement identified in this inspection.

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<sup>1</sup> The Home Care Standards and all other Care Standards can be accessed on the Commission's website at <https://carecommission.ie/Standards/>

## INSPECTION FINDINGS

At the last inspection, one area for improvement was identified, and an improvement plan was submitted to the Commission by the Registered Provider, setting out how this area would be addressed.

The improvement plan was discussed during this inspection, and it was positive to note that the improvement had been made. This means that there was evidence of policies, including links for staff and incorporating local guidance/legislation.

### **Is the Service Safe?**

Emphasising the importance of creating a safe environment so care receivers are protected from avoidable harm, with a focus on policies and procedures.

This relatively new service has been registered with the Commission for two years. According to its Statement of Purpose, its approach is “humanistic and person-centred”. It follows a therapy framework incorporating unconditional positive regard, empathy, and congruence (consistency).

Through discussions with the Registered Provider, Registered Manager and feedback, it is evident they put the users of service first, make sure they selectively assign support staff, and don't take on care packages they don't feel they can support.

This company has a staff of seventeen, including both managers and one administration assistant. Since the last inspection, twelve staff members have been successfully recruited. The Regulation Officer selected six recruitment files to view and was satisfied that all safety checks had been completed in accordance with their recruitment policy and the Home Care Standards. This includes references, photographic identification, and criminal record checks.

Staffing rotas for each package of care were viewed during the inspection. The rotas identified which support worker would attend and for how long, along with sleeping or waking nights. These were succinct, although the Regulation Officer had to seek clarity and confirmation from the provider on breaks during long shifts.

The service uses an online management platform called Care Line Live. Risk assessments, care plans, duty rotas, supervisions, appraisals and policies are uploaded here. Through company mobile phones, all staff can update notes and view documents required to achieve the best outcomes for the service users. The service is committed to creating a safe environment, with risk assessments in place to identify and manage potential risks. These assessments are regularly reviewed to ensure they remain relevant and are easily accessible to staff to support effective care delivery.

All the support staff have obtained the required Regulated Qualifications Framework (RQF) Level 3 award in medication administration and follow the service's medication policy, which includes having medication administration Record (MAR) sheets in place, safe storage of medication, no transcribing unless exceptional circumstances, and annual refresher training.

Notification of incidents, accidents, and other events was discussed at the inspection, and the notifications submitted to the Commission correlate with the services incidents online system.



## Is the Service Effective and Responsive?

Assessing the organisation of the service so that care receivers' needs are respected and met.

The service has two safeguarding leads who can advise, offer support, and train the staff team. A comprehensive safeguarding policy explains how to make a safeguarding referral. When asked for feedback, all the staff I spoke to explained how they would escalate a safeguarding concern, which corresponded with the policy.

During a discussion around capacity, the provider, manager, and staff were transparent in their processes should a user of the service appear to be deteriorating in terms of capacity, which is in line with the capacity and self-determination Jersey legislation. The users of service, and their representatives would be included in any discussions and decisions.

All newly recruited staff must complete a probationary period of six months along with a robust induction programme. The staff are given a handbook about conduct, company phones, terms and conditions and discounts with local businesses. They are expected to complete a mandatory package of mandatory courses, and specific training to meet the user of service needs. They complete shadow shifts and sign off with more experienced staff to get to know and build up a relationship with users of service and regular feedback sessions with the management team. Staff feedback confirmed that the service is invested in training throughout the year, and they are open to staff completing additional training if relevant to a user of service and will enhance the delivery of care.

This service collaborates with various professionals, including social workers, general practitioners (GPs), capacity assessors, other providers, learning disability professionals, and many others, to provide the best possible person-centred care for every user of service.

All the feedback received praised both the provider and manager for being approachable and responsive when contacted:

*“I can honestly say both the managers are fantastic, reliable, flexible and care about the families.”*

*“Xxx is the best manager of a special needs service on the island, firm but fair.”*

*“The managers answer calls straight away; they care.”*

*“We work closely with Youniversal who do an amazing job. They are passionate, responsive, collaborative, and the care delivery is impeccable.”*

### **Is the Service Caring?**

Evidencing fundamental aspects of care and support are provided to care receivers by appropriately trained and competent staff.

All users of service complete an initial assessment with one of the management team and anyone else appropriate. This assessment identifies medical, social and communication needs, contacts, likes/dislikes and religious beliefs. Following the assessment the user of service will be given a welcome pack and will spend time with staff, including the provider before the service starts.

The welcome packs include information about Youniversal Care Ltd, the complaints policy, and contact information for the Commission. Their written agreement comprises financial information and a four-week termination of contract section. Person-centred care plans and risk assessments are developed with the user of service and/or their representative or social worker and updated every six months unless required earlier. Both the provider and manager swap the review of care plans every six months to ensure a well-rounded approach. The Regulation Officer chose four sets of care plans and found them to be comprehensive and person-centred, meeting individual needs and wishes.

Daily notes were reviewed during the inspection, and the Regulation Officer was satisfied that these were robust.

Staff team meetings take place every two months. They encourage staff to meet with their peers, discuss any issues, concerns or what's going well within the service. Workforce well-being is also a priority for this service, and initiatives include discounts with local businesses, access to six sessions with an external mental health provider, and a pension plan.

Feedback from relatives and users of the service included:

*"Youniversal has exceeded all my expectations. I cannot fault this service; they are part of the family now."*

*"We are lucky to have a care provider like Youniversal."*

*"All the staff team are amazing, and I cannot fault anything about the service."*

*"The staff team takes me out to do sports and they help with general household tasks; it's like having friends in my house."*

*"The staff are well trained; managers are good at answering the phone."*

Professional feedback: *"The staff from Youniversal Care share a passion for encouraging clients to get involved with lots of different activities and excel in tailoring care packages that are personalised to the individual."*

### **Is the Service Well-Led?**

Evaluating the effectiveness of the service leadership and management.
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The Regulation Officer viewed a policy document containing links to all the policies for this service. All policies were online, up-to-date, succinct, easy to read and relevant to local legislation. The staff team can access all the policies through their company phones.

This service has a clear organisational structure, with the Registered Provider at the top, followed by the Registered Manager. Both are involved in the day-to-day

running of the service and will endeavour to see all the users of service most days. They also support and deliver care to users of service regularly and obtain continuous feedback from users and their families/representatives.

The Regulation Officer reviewed the service training matrix. The service has two safeguarding trainers and a moving and handling trainer to deliver in-house training. All staff have completed mandatory training, and the Regulation Officer was satisfied that any additional training needs had been met. Most staff had also completed RQF Level 2 or 3; others had started it.

The Regulation Officer received feedback from staff which was mainly positive:

*“The management team are always around, and I wouldn’t change anything; this company is fantastic.”*

*“As a small staff team, I know everyone who uses the service. The only downside is that if there is a poor internet connection, the care line live app can sometimes go down.”*

*“Xxx makes sure our work-life balance is reflected on the rotas, and they are flexible.”*

*“Best place ever, best boss ever, best team ever, training is excellent.”*

This relatively new company evidenced throughout the inspection that it is following the Home Care Standards set out by the Commission and adhering to its conditions of registration.

## **IMPROVEMENT PLAN**

There were no areas for improvement identified during this inspection and an improvement plan is not required.

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of the Care Commission during the course of this inspection. The findings contained within this report do not exempt the service from their responsibility for maintaining compliance with legislation, Standards and best practice.



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