



**Jersey Care  
Commission**

# **Summary Report**

**Youniversal**

**Home Care Service**

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

**Inspection Dates  
5, 6 and 17 November 2025**

## 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 provides a comprehensive range of care packages, including respite care, outreach support, and community-based visits. The management team comprises the Registered Manager, the Provider, and the Quality Assurance Lead. They are supported by a part-time administrative assistant.

There was evidence of a service that is both safe and responsive to the needs of care receivers. The management team demonstrated active engagement throughout the inspection process and promptly addressed any recommendations from the Regulation Officer and Pharmacist Inspector.

Feedback highlighted the delivery of person-centred, holistic care and described a staff team committed not only to supporting care receivers but also to providing meaningful care and support for their families. One health professional confirmed this in feedback, *“Youniversal have trusting and meaningful relationships, not just with the adults who they support, but also their families.”*

The service prioritises recruiting staff who are well-matched to the needs and preferences of the care receivers they support. The management team reported strong staff retention and described themselves as a hands-on team, stepping in when required. This approach ensures effective oversight of care delivery, supported by regular spot checks.

Care plans and risk assessments are in place to support care delivery and are stored electronically. Evidence showed that care plans are regularly reviewed with care receivers. To maintain quality and objectivity, the plans are divided into three groups, referred to by the service as ‘bubbles’, each overseen by a member of the management team.

These groups rotate every three months, ensuring that each plan is reviewed by a fresh pair of eyes. This rotational process serves as an internal quality assurance measure, akin to an audit, to verify accuracy, compliance, and person-centred care.

Staff training and development were found to align with the Standards. Staff also receive regular supervision and appraisal. Staff reported that the management team was supportive of work-life balance and their well-being.

The management structure was appropriate for the size of the service, and external quality oversight was provided by an independent practitioner.

## IMPROVEMENT PLAN

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

The full report can be accessed from [here](#).