

Excel Care Management Services Ltd

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Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Excel Care Management Services is a domiciliary care service located in Wigan. It provides personal care to people living in their own houses and flats. Not all people using the service were receiving a regulated activity. 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

Medicines were not always managed safely, and some people did not receive them as prescribed. Although staff were recruited safely, DBS risk assessments were not always completed appropriately. Some people who used the service and relatives said personal protective equipment (PPE) was not always worn by staff when delivering their care. There were enough staff working for the service, although some people raised concerns with us about the timeliness of their care visits during the day. We have therefore made a recommendation regarding staffing levels.

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.

There were limited governance systems in place at the time of our inspection and the service were unable to evidence audits, spot checks and competency assessments were carried out consistently for all staff. There was mixed feedback about management and leadership and not all staff said they felt there was a positive culture within the service.

Rating at last inspection

The last rating for this service was good (published July 2018).

Why we inspected

The inspection was prompted in part due to concerns received about recruitment of staff, medication, staffing and leadership. A decision was made for us to inspect and examine those risks.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed to requires improvement based on the findings at this inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Excel Care Management on our website at www.cqc.org.uk.

Enforcement and Recommendations

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection.

We have identified breaches in relation to safe care and treatment and good governance. We will continue to monitor the service and will take further action if needed.

You can see what action we have asked the provider to take at the end of this full report

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect. For more details, please see the full report which is on the CQC website at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Not all aspects of the service were safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

Not all aspects of the service were well-led

Details are in our well-led findings below.

Requires Improvement ●

Excel Care Management Services Ltd

Detailed findings

Background to this 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 1 inspector, a medicines inspector and 2 Experts by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced. We gave a short period notice of the inspection. This was because we needed to be sure the provider or registered manager would be available to support the inspection.

Inspection activity was carried out between 10 and 31 January 2023.

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 14 relatives and 21 people who used the service about their experience of the care provided. We spoke with 23 members of staff including the registered manager, nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 10 care plans and associated medication records. We looked at 10 staff recruitment files, staff training records and records associated with the provider's quality monitoring systems.

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 good. The rating for this key question has now changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Using medicines safely

- Medicines were not managed safely.
- Medicines were not being given to people as prescribed, this placed people at risk of harm. For example some people were prescribed paracetamol. We found the required 4 hour time interval between doses was not always observed. This meant people were at risk of potential overdoses.
- The systems used to audit medicines were not effective, and the audits had not identified some of the issues found during the inspection.
- Medicine related risk assessments and care plans were not always up to date, therefore we were not assured people received their medicines safely.
- Not all of the information we requested was made accessible, for example, care plans, risk assessments and other health information, therefore we could not be assured medicines were used safely.

This meant there had been a breach of regulation 12 (1) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, regarding safe care and treatment.

Staffing and recruitment

- Although we did not find any negative impact on the care people received due to insufficient staffing levels, some of the feedback we received from people using the service and relatives was more were required. Some people also said their care visits weren't always timely.. One person said, "I don't think so, as the agency could not cover a day off for one carer." A relative also commented, "Occasionally I feel they are short."
 - Feedback from staff about current staffing was that although care was not compromised, staff sickness could often present problems. One member of staff said, "Many staff often phone in sick which has a knock-on effect on the rest of the care team and management." Another member of staff added, "There seems to be quite a lot of staff employed by Excel but high sickness levels which impacts visits being on time, especially at weekend when we have less staff available. Luckily my regular clients understand this and are happy for us to get there when we can."
 - We spoke with the registered manager about this feedback. They told us they were aware of recent staffing concerns which had been impacted by staff sickness and the COVID-19 pandemic. At the time of our inspection, recruitment of staff remained ongoing.
- We recommend the service continues to monitor their staffing levels to ensure there is no impact on the care people received.
- Overall, staff were recruited safely, with pre-employment processes such as application forms, holding interviews and seeking references from previous employers all being carried out. DBS checks were carried

out, however some staff had begun delivering care before the results had been received. We have reported on this further in the well-led section of this report.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People told us they felt safe as a result of the care they received. One person said, "Yes, I'm building up a nice relationship with the carers." A relative added, "Yes, I would say so my (relative) had a fall and the carer came back after her scheduled visit to check on (relative). I thought that was really good."
- Safeguarding and whistleblowing policy and procedures were in place and the training matrix showed staff received training.
- Staff displayed a good understanding about safeguarding and how to recognise potential concerns. One member of staff said, "I fully understand safeguarding service users we have a duty of care to report anything that we are concerned about and which puts people at risk. Whistleblowing is also very important as staff need to know if anything is wrong so we can solve the problem. I wouldn't hesitate to whistle blow on staff."
- Accidents and incidents were monitored closely, with details provided about any lessons learnt to prevent future re-occurrence.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- Staff said they had enough personal protective equipment (PPE) available, although some people confirmed it was not always worn when delivering care. One person said, "They do, but not always." Another person said, "They don't always wear masks." We provided this feedback to the registered manager who said they would address this concern during spot checks and observations.
- People had a range of risk assessments in place regarding their care. Where any risks were identified, control measures were in place about how to keep people safe.

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). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA as needed.

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 good. The rating for this key question has now changed to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Continuous learning and improving care; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Managers and staff being clear about their roles and understanding quality performance, risks and regulatory requirements

- We looked at the systems in place to monitor the quality of service. Despite asking the registered manager for examples of how they ensured good governance, evidence of audits was not provided despite numerous requests, even after the inspection.
- Quality audits were not in place. The lack of audits meant the registered manager was unable to effectively identify shortfalls and therefore could not secure improvements.
- We asked staff if they received spot checks and observations to ensure they were carrying out their roles effectively. One member of staff said, "I've not had a spot check since the company took us over at the beginning of September." Another member of staff said "Never had one." A third member of staff said, "No, I have never had any kind of observations."
- The spot check/observation policy and procedure said staff would receive 4 per year, however when we asked for evidence these had taken place it was not provided.
- We also spoke asked staff if they received competency checks for areas such as medication and moving and handling. One member of staff said, "Never had one, the medicines are always wrong on the app we use and no matter how many times I report it nothing gets done." Another member of staff added, "I've not had one since starting. Seniors are asked to carry out medication checks but are often too busy and on shift themselves to do it." The policy and procedure said staff would not be able to administer medicines until this had been assessed. We asked for evidence of these records however they were not provided. Staff had received medication training however.
- Risk assessments were not always in place for staff to work whilst they were waiting for their DBS check to be returned.

People were at risk of harm through the lack of effective governance systems. This was a breach of regulation 17 (1) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, regarding good governance.

- The registered manager understood their role and responsibility to submit statutory notifications and ensure regulatory requirements were upheld.
- Systems were in place to involve people, relatives and staff in how the service was run, including the use of satisfaction surveys to obtain feedback.
- Team meetings were held to obtain their views and WhatsApp messaging was used to share information

amongst the staff team. Some staff had also attended events to strengthen team working and raise money for charity.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Some staff said they felt there was a positive culture within the service and reported being happy in their roles. One member of staff said, "Excel care a good company to work for. If you work with them, they are good with you. I have always had a regular rota and any issues I've had have always been resolved. I enjoy my job at Excel Care, seeing my regular clients they're like family to me." Another member of staff said, "Excel are an amazing company and go above and beyond for everyone. I enjoy my role I have been here for over 7 years."
- However, some other staff felt the culture needed to be improved and felt there wasn't always strong teamwork amongst the staff team. One member of staff said, "We can be a good team, but I wouldn't say it is consistent. There is a small number of my colleagues that I work well and communicate well with. There are others who don't understand the consequences of not doing a thorough enough job or handing back shifts." Another member of staff added, "I feel there is a lack of team work and when we are out in the community there is very little communication."
- Feedback about management and leadership was mixed, although some staff said they were very happy with the current management arrangement. One member of staff said, "Yes, I am very supported in my job role." Another member of staff said, "There is a lack of communication between management and staff. We are not informed or involved with many things. I do not feel supported by management and feel they brush you off if you have an issue." A third member of staff added, "There is poor management and leadership. Some managers are unapproachable and there are issues with communication."

Working in partnership with others;

- The service worked in partnership with several different organisations. This included different health care professionals and colleagues from the local authority who carried out quality monitoring visits to monitor performance.
- The service had also developed excellent links in the local community. This included attendance at dementia care, supporting local school choir groups, donations to the homeless and facilitating events at times such as Christmas and Easter.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment Appropriate systems were not in place to ensure medicines were managed safely.
Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Appropriate systems were not in place to ensure good governance.