

Excel Care Group Ltd

Excel Care Group

Inspection report

274 Manchester Road
Audenshaw
Manchester
M34 5GL

Tel: 01617111332

Date of inspection visit:
31 July 2023

Date of publication:
25 August 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

Excel Care Group is a domiciliary care agency providing personal care to people in their own homes. The service mainly provides support to people with end of life care. At the time of our inspection there were 42 people using the service.

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

People and their relatives told us they felt safe when receiving care. The service had appropriate safeguarding policies in place and staff were supported to raise concerns, when necessary. Staff were recruited safely. Staff did not always record care visits. We have made a recommendation about this. Risk assessments did not always contain additional information to support staff.

Staff felt supported by the registered manager and completed a combination of online and face to face training. Staff supported people to eat and drink, staff encouraged people with their fluid intakes. Staff supported people to access healthcare.

Staff supported people with kindness. People felt supported with dignity and respect. People and their families were involved in reviews about their care. Staff supported people to express their views. We received positive feedback about the kindness and caring nature of staff.

Care plans were not always personalised with additional information about the individual. Staff had good knowledge about people as individuals and had taken the time to get to know people, and their likes, better. Staff supported people and their families with compassion at the end of their lives. There was an appropriate complaints policy in place. People felt able to discuss any concerns with the registered manager.

The registered manager completed regular audits at the service which had recently been updated. The audit did not include an action plan however this was updated during the inspection. The service worked well with other professionals. People, their relatives and staff felt supported by the registered manager and were able to express their views.

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.

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 10 October 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Recommendations

We have made a recommendation about the recording of care calls.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement 

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good 

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good 

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good 

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

Excel Care Group

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector and an Expert 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 72 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 31 July 2023 and ended on 11 August 2023. We visited the location's office on 31 July 2023.

What we did before the inspection

We reviewed information the provider had sent us since registering. 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 the information gathered as part of monitoring activity that took place on 26 April 2023 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

During the inspection

We reviewed records relating to the running of the service including staff files, care plans and audits. We spoke to 1 person who used the service and 5 relatives of people who use the service. We spoke with 2 professionals who worked with the service. We also spoke with 5 staff including the registered manager and support workers.



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 of this newly registered service. This key question has been rated 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.

Staffing and recruitment

- Staff did not always record when they had attended calls. The service used a mobile app to log the care calls. Staff were not consistently logging into calls to record that the call had taken place. Audits showed that this had improved over the last six months however there were still a significant number of calls which looked like they had been missed as the records had not been updated.
 - We were assured that these calls had been attended and people had not raised any concerns. It is important that the service maintains accurate records of the care being delivered.
- We recommend the service reviews the use of systems to monitor and record care calls to ensure that accurate records are maintained.

- Staff were recruited safely. The registered manager kept thorough records around following up references for new staff. We found one example where one person's employment history had not been followed up completely. This was reviewed and amended during the inspection.
- There was a consistent staff team working at the service. People told us they regularly received support from the same group of staff.
- Staff told us they had enough time to deliver care and sit and talk to people and their families during their call. People told us that staff had not missed any calls and would contact them if they were running late.

Assessing risk, safety monitoring and management

- Risk assessments were in place regarding the care and the environment for each person. Risk assessments did not always contain additional information to support staff. The registered manager had also identified that some risk assessments would benefit from further detail.
- The registered manager kept staff up to date with risks. Staff told us that they read people's care plans before supporting them.

Using medicines safely

- Medicines were administered by staff who had received appropriate training. Staff received a combination of online and face to face training in the administration of medication. Staff then had their competency assessed prior to administering medication independently.
- Medicines were not always recorded as administered when staff had not logged into the care calls on the monitoring app. This was reviewed on a monthly basis by the registered manager. There were no recorded incidents of people missing their medication.

Systems and processes to safeguard people from the risk of abuse

- The service had systems in place to safeguard people from the risk of abuse. Staff had all received safeguarding training and were knowledgeable about abuse and their responsibility to report concerns.
- Staff had appropriately raised safeguarding concerns and these had been escalated by the management team. The management team supported staff when they raised concerns.
- People and their relatives told us they felt safe with the staff. One relative told us, "Having Excel in has given us peace of mind as we know [relative] is perfectly safe being looked after."

Preventing and controlling infection

- Staff followed infection prevention and control measures. Staff told us they had access to PPE and this was also checked by the management team during spot checks.
- Relatives told us "The carers are always wearing gloves and aprons and I know they change them after helping him."

Learning lessons when things go wrong

- There were no recorded accidents and incidents at the service.
- The registered manager raised areas of improvement with staff through team meetings and supervisions.

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 care. Care plans and risk assessments were put in place. One relative told us, "Excel did a full risk assessment and interview about [relative] before they started. They were very thorough in their questioning and obviously wanted to get [relative] care right."

Staff support: induction, training, skills and experience

- Staff received appropriate training to assist them to meet people's needs. Staff completed the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and care sectors.
- Staff were also supported to obtain NVQs in health and social care.
- Newly recruited staff completed an induction period which included them shadowing other staff. Staff told us enough training was provided to support them in their roles.
- Staff were supported to give feedback through regular supervisions. Staff told us they found the supervisions useful.

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

- Staff supported people to eat and drink, where possible.
- Some people required the use of drink thickeners. Thickener is a powder which is added to liquids to assist people with swallowing difficulties. There was not sufficient information in care plans to direct staff about the correct amount of thickener to be used. Staff told us that this information was readily available in people's homes. People's care plans were updated during the inspection.
- Staff understood the importance of encouraging people with food and fluids.

Staff working with other agencies to provide consistent, effective, timely care

- Staff contacted other professionals on people's behalf to ensure they received effective care. One relative told us, "They [the service] work as a team" with other healthcare professionals.
- The registered manager worked closely with professionals to ensure people received the correct support. One professional told us, "[registered manager] communicates with me if they need advice around a specific patient or if they feel additional information is required to support a care plan."

Supporting people to live healthier lives, access healthcare services and support

- Staff contacted other healthcare agencies when required. Staff told us how they had contacted the emergency services when needed. Relatives gave examples of staff staying with their relative when they were waiting for an ambulance.

- Staff were observant and raised concerns about people's health. One relative told us, "They [staff] sometimes spot things I would never see."

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff sought consent prior to providing care and understood the importance of people being involved about decisions about their care.
- All staff had completed training in 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

- Staff treated people well and with kindness. One relative told us, "I don't think you could find a nicer bunch of people to look after your family."
- Relatives and a professional felt that the care provided had contributed to a person thriving with end of life care.
- Staff treated people as individuals and recorded personalised notes about their care.

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

- People were supported to express their views. Staff told us they took the time to sit with people and their families to get to know them better.
- Relatives told us they were involved in care plan reviews. People felt comfortable speaking with staff and the registered manager about their care. One person told us, "I know they are very busy with clients but they never make me feel rushed and always have time to sit and chat to me."
- People and their relatives were regularly asked for feedback on the care being provided. One relative told us, "We are often being asked if everything is ok."
- Staff supported people and their relatives to attend appointments with professionals to discuss their care.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect. Staff knew how to treat people with respect. One relative told us, "Everybody (carers and office) are very kind and very professional."
- Staff supported people to be as independent as possible. Staff recognised that people's ability to be independent changed as their health deteriorated. Staff adapted their support to promote people's independence in line with their abilities. One person told us, "The carers know that I like to remain as independent as possible, so never try to take over and just work with me to make sure I stay safe as I get things done with their support."

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

- Care plans contained basic information around the level of care each person required. The care plans were not always personalised to reflect how the individual would like to be supported. The registered manager had also identified this during a recent audit. Following the inspection, the registered manager provided an updated care plan which showed improvements around personalisation.
- Care notes demonstrated that staff knew people well. For example, which drinks they liked and how they liked their drinks to be prepared.
- Staff told us they considered learning people's likes and dislikes to be a "priority" and took the time to talk with people and their families to get to know them better.
- People and their relatives were involved in care plan reviews. A relative told us, "They went through everything then until [relative] was happy." Another relative told us that staff had also supported them at meetings where their relative's care was discussed.

End of life care and support

- Staff supported people well at the end of their lives. Staff had received training in end of life care. Staff understood what good end of life care looked like.
- Staff were passionate about supporting people with dignity and respect at the end of their lives.
- Staff also provided support to people's relatives as they provided end of life care.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were recorded in their care plans. Staff told us they spoke to people throughout providing care.

Improving care quality in response to complaints or concerns

- The service had a complaints policy in place. The service had not received any complaints regarding people they supported.
- Relatives told us they felt confident to raise concerns if they had any. One person told us, "I have never had to complain, but if I ring the office, the phone is always answered during the day or someone rings me back quick enough."

- The registered manager was responsive to concerns. A relative explained that the registered manager had apologised when a call was running late.

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.

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

- The registered manager completed regular audits of the service. The registered manager had recently developed a new audit which was more detailed and personalised to the service. The audit had identified areas to improve. There was no action plan in place to monitor the progression. Following the inspection an action plan had been included in the audit.
- The registered manager monitored care calls and there had been an improvement in staff recording attendance at calls. However, a significant number of care calls were still not being logged on the monitoring app. The registered manager told us this was regularly discussed with staff. However the system was not updated to record calls had been completed. We have made a recommendation about this in the safe domain of the report.

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

- There was a positive culture at the service. Staff told us they felt supported by the registered manager and their colleagues.
- Staff were confident that the registered manager would support them and give advice, when needed. One member of staff told us, "There is always someone to talk to at Excel."
- Staff were empowered to raise concerns and seek help for people when needed.

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 understood their responsibility to be open and honest.

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

- People using the service felt supported by the registered manager. People told us they felt comfortable approaching the registered manager and were confident they would be supported appropriately.
- We received positive feedback about the staff and management team at the service. A relative told us, "They (Excel) seem very organised and communicate well." Another relative told us, "Professionally and emotionally, Excel have given us all the support we need."

Continuous learning and improving care

- Throughout the inspection the registered manager was responsive and looking at ways to further develop and progress the service.

Working in partnership with others

- The service worked well in partnership with other professionals. One professional told us the service was "really responsive" and the registered manager was "very knowledgeable" about people, their families and the support they needed.
- The registered manager had attended sessions at a local college to share their experience of their career in care. In recognition of this, the registered manager had received an 'Industry Excellence Partnership Award.'