

# FOREXCEL HEALTHCARE LTD ForExcel Healthcare

### **Inspection report**

Suite 2, 2nd Floor Bright House Business Centre Bright Road, Eccles Manchester M30 0WG

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Date of inspection visit: 13 July 2023

Date of publication: 11 September 2023

#### Ratings

Overall rating for this service	Good •
Is the service safe?	Good
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

For Excel Healthcare is a domiciliary care agency providing personal care to people in their own homes. Not everyone who used the service received personal care. 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. At the time of the inspection 1 person was receiving the regulated activity personal care.

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

Relatives said they felt the service was safe. There were enough staff to care for people safely and correct staff recruitment procedures were followed. Staff understood about safeguarding and how to report concerns. People's care plans contained risk assessments, with information about how to keep them safe.

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. Staff received enough training and supervision to support them in their roles.

We received positive feedback about the care provided. Staff were described as kind and caring and treated people well.

Although no complaints had been made, systems were in place to respond to these if necessary. The feedback we received was that the care was person centred.

There were systems in place to monitor the quality of service including staff meetings and satisfaction surveys. We have made a recommendation about how governance of the service and partnership working could develop further.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

#### Rating at last inspection

This service was registered with us on 17 July 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.

The overall rating is Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for ForExcel Healthcare on our website at www.cqc.org.uk.

#### Enforcement and recommendations

We have made two recommendations about how governance of the service and partnership working could be developed further.

#### 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



## For Excel Healthcare

## **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 was carried out by 1 inspector.

#### 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 the service 48 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection. Inspection activity was carried out between 13 July and 4 August 2023. We visited the location's office on 13 July 2023.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We did not seek feedback from the local authority, as no there were no commissioning arrangements in place at the time of

the inspection. 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 1 relative about their experience of the care provided. We also spoke with 3 members of staff including the registered manager and 2 support workers.

We reviewed a range of records. This included 1 care plan, 2 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.

This is the first inspection of this newly registered service. This key question has been rated as Good. This meant people were safe and protected from avoidable harm.

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

- Relatives said they felt the service was safe. We were told, "(Person) is definitely safe and staff are very safety conscious. (Person) gives glowing reports of staff. They treat her very well."
- Staff understood about safeguarding and said they had received training. One member of staff said, "Safeguarding is about ensuring people are not being abused in anyway."
- A safeguarding policy and procedure was in place, explaining what needed to be done if abuse was suspected.
- At the time of our inspection, there hadn't been any safeguarding incidents, or accidents/incidents which required further action.

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

- Risk assessments were in place regarding the care people received. Where any risks were identified, control measures were in place about how to keep people safe.
- Enough PPE was available, which people confirmed was always worn and staff said was available in sufficient quantities.

#### Staffing and recruitment

- There were enough staff employed to care for people safely. Everyone we spoke with said there were enough staff to deliver the care people needed. One member of staff said, "For now we have enough staff and can get everything done." A relative added, "Timekeeping is good and they stay for the right amount of time."
- Staff were recruited safely, with all the necessary procedures followed including interviews, seeking references and carrying out DBS checks. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- At the time of our inspection, no one required support with the administration of medicines.
- If this was to change however, a medicine policy and procedure was in place and staff would be provided with appropriate training.



## 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 of this newly registered service. This key question has been rated as Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff were appropriately trained. Relatives told us staff were well trained. One relative said, "Yes, staff seem totally competent and know what they are doing."
- Staff told us they were supported in their roles and were provided with the relevant training to enable them to care for people effectively. One member of staff said, "Yes there is enough training. I've done moving and handling, safeguarding, infection control and health and safety."
- All staff completed an induction and this covered areas such as policies and procedures, relevant training and meeting people they would be caring for.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care

- People's needs were assessed before receiving a service. The registered manager told us they only accept people if they know they can meet their needs and have the staffing capacity to provide the support and time they may require.
- People's needs were regularly reviewed to ensure support provided by staff was relevant and up to date.
- Although only 1 person was receiving a regulated activity at the time of the inspection, the registered manager was in contact and worked alongside local authorities and relevant social work teams to ensure people received effective and timely care.

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 Act 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 authorized under the MCA. We checked whether the service was working within the principles of the MCA.

- Correct procedures were in place if people lacked the capacity to make their own decisions, which were taken in people's best interest. Any assessments of people's capacity were undertaken as required.
- Staff understood about the MCA and the reasons it was required.

Supporting people to live healthier lives, access healthcare services and support; Supporting people to eat and drink enough to maintain a balanced diet

- At the time of the inspection no one needed staff support to attend appointments at healthcare services.
- At the time of our inspection, no one needed staff support to eat and drink.



## 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 since registration of this service. This key question has been rated as 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; Respecting and promoting people's privacy, dignity and independence

- Relatives told us they were happy with the care provided. We were told, "The care is of a good standard. We've had no problems at all."
- Staff were described as kind and caring. One relative said, "I would say the member of staff who looks after (person) is lovely."
- People were treated with dignity, respect and given privacy when they needed it. One relative said, "Absolutely, they are very respectful."
- People were supported to maintain as much independence as possible. Staff knew people well and what they were able to do and what areas they required support with.

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

- Relatives were able to provide feedback about the service through regular conversations, reviews and surveys. Relatives spoken with were positive about the care and support provided.
- Relatives told us they were involved in decisions about their care and could contact the registered manager directly with any queries they had.



## Is the service responsive?

## Our findings

Responsive – 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 since registration of this service. This key question has been rated as 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 were personalised and contained information for staff about how people wanted activities to be carried out. For example, personal care and important things staff needed to be aware of.
- Staff knew the people they visited and had a good knowledge of their individual needs and preferences. Relatives said the care provided was person centred and that staff knew about the different things people liked and how to build a good rapport with them. A relative said, "(Person) has a lot in common with staff, including their heritage. They enjoy listening to music and chatting together."

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.

• The registered manager was aware of this requirement. They told us they would provide documentation in different formats if and when required. Communication needs were assessed as part of the initial assessment process and was reflected in care plans.

Improving care quality in response to complaints or concerns

• There was a complaints policy and procedure in place. This had been provided to people and relatives, so they knew how to make a complaint. People and their relatives told us they had no complaints, although we saw relevant documentation was in place as required.

End of life care and support

• At the time of our visit there was no one receiving end of life care.



## 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 of this newly registered service. This key question has been rated as Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted 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; 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.

• At the time of the inspection and due to the level of personal care being limited, a formal audit was not used to monitor the quality of service. The registered manager said they had a weekly telephone review meeting with staff to catch check how things were progressing so they could monitor accordingly. The registered manager was also in regular contact the family members to seek their views regarding anything that may need to improve or be changed.

We recommend quality assurance audits are further developed should the service take on any more service users over time.

- Staff supervisions were carried out, to ensure staff were supported and that standards were being maintained.
- 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. Staff meetings were held to gather staff views and monitor performance and development.

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

- The registered manager knew to submit statutory notifications to CQC as required, however there had not been any notifiable incidents at the time of our inspection.
- At the time of the inspection, there was a registered manager in post and they were supported by a care coordinator who all assisted with the day to day running of the service.
- It is a legal requirement for the ratings from the last inspection to be displayed on any websites operated by the provider and at the office location. As this was the first inspection of the service, we spoke with the registered manager about ensuring ratings were displayed as needed.

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

- The staff team spoke of a positive culture at the service and said they enjoyed their roles. Staff told us they felt supported by management.
- Everybody we spoke with said they felt the service was well-led. One relative said, "Things seem to be well

managed and organised. I have never had to raise any concerns. Things seem to be efficient." A member of staff added, "Management are supportive. They keep us up to date with training so that we are learning all the time."

• A relative spoke positively about the care provided to their people which enabled good outcomes. One relative said, "We rate the staff and care is of a good standard."

Working in partnership with others

• At the time of our inspection, the service had only just begun providing a regulated activity, therefore partnership working with other organisations was limited.

We recommend this is something the service look to develop further.