

Excell Home Care Ltd

# Excell Home Care Limited

## Inspection report

97 High Street  
Mosborough  
Sheffield  
South Yorkshire  
S20 5AF

Tel: 01142471428

Date of inspection visit:  
13 August 2019

Date of publication:  
27 August 2019

### 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:

Excell Home Care Limited is a domiciliary care agency. It provides personal care to people living in their own home. It provides a service to older adults and younger disabled adults. The agency office is based in the Mosborough area of Sheffield. At the time of our inspection the service was providing personal care for approximately 104 people. 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.

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

People we spoke with told us they felt safe and did not express any concerns about their safety.

At our last inspection we found the risk assessments for specific health conditions needed improving. For example, people who had diabetes. At this inspection we found action had been taken to ensure a risk assessment was undertaken for people's specific health conditions.

Safeguarding procedures were robust and staff understood how to safeguard people.

Systems were in place to make sure managers and staff learnt from events such as incidents, concerns and investigations.

At our last inspection we found the provider did not have adequate systems in place to ensure the safe handling, administration and recording of medicines to keep people safe. We saw action had been taken by the provider to ensure medicines were managed safely at the service.

People we spoke with were satisfied with the quality care provided by the service. Some people told us they would just like their calls to be delivered consistently on time. They thought the service needed more staff to cover for unexpected staff absence so the support workers did not have to complete extra calls. We shared this feedback with the registered manager. They told us they were actively recruiting staff and we saw evidence of this at the inspection. The registered manager told us they would monitor the delivery of people's call times so people experienced continuity of care.

The provider completed pre-employment checks for new staff, to check they were suitable to work at the service.

Staff received a range of training and support relevant to their role. Staff told us they felt fully supported and listened to. People were confident care workers had received appropriate training to meet their needs.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Support

workers understood the importance of respecting people's diverse needs and promoting independence.

People told us support staff were respectful and treated them in a caring and supportive way.

Most people we spoke with felt confident they could raise any concerns with the office based staff and those concerns would be taken seriously. We saw complaints were managed in line with the provider's complaints procedure.

We found the quality assurance systems in place to monitor the quality and the safety of the service had been improved since the last inspection.

Rating at last inspection:

At our last inspection Excell Home Care Limited was rated requires improvement (report published 11 September 2018) and we found two breaches of the regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected:

This was a planned inspection based on the previous rating.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://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 had improved and 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 had improved and was well led.

Details are in our well-Led findings below.

# Excell Home Care Limited

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

The inspection was carried out by two inspectors 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:

Excell Home Care is a domiciliary care agency. It provides personal care to people living in their own houses.

The service had a manager registered with the Care Quality Commission. 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.

#### Notice of inspection:

This inspection was announced. We gave a short period notice of the inspection because the location provides a domiciliary care service and we needed to be sure that someone would be available to support us with our inspection.

Inspection activity took place over three days, the 9, 12 and 13 August 2019. We visited the main office on the 13 August 2019.

#### What we did:

Before this inspection we reviewed the information we held about the service, which included correspondence we had received and any notifications submitted to us by the service. Statutory notifications are information the registered provider is legally required to send us about significant events that happen within the service. For example, where a person who uses the service has a serious injury. We used the information the provider sent us in the provider information return. This is information providers

are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We contacted social care commissioners who help arrange and monitor the care of people using Excell Home Care Ltd service. We also contacted Healthwatch Sheffield. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During this inspection we spoke with 11 people using the service by telephone. We also spoke with the registered manager and care coordinator during our office visit and contacted support staff by telephone and email.

We looked at six people's care records. We checked a sample of medication administration records and seven staff files, which included recruitment checks, supervisions and appraisals. We also looked at other records relating to the management of the service, such as quality assurance documents.

# 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 this key question was rated as requires improvement. At this inspection this key question has improved to good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to safeguard people from abuse.
- People told us they felt safe whilst being supported by staff. Comments included, "I feel safe with the girls [support workers], they really spoil me and cheer me up if I feel depressed" and "I do feel safer when they [support worker] help me have a shower. I can be a bit unsteady sometimes. I also have a key safe, so they lock the door when they go."
- Staff had undertaken safeguarding training and were knowledgeable about their roles and responsibilities in keeping people safe from harm.
- Staff told us they would always report any concerns to the registered manager.
- The registered manager understood their responsibilities and worked with other agencies to ensure any safeguarding concerns were dealt with properly.

Assessing risk, safety monitoring and management

At our last inspection in September 2018, we found the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- At our last inspection we found the risk assessments for specific health conditions needed improving. For example, people who had diabetes. At this inspection we found action had been taken to ensure a risk assessment was undertaken for people's specific health conditions. Care plans contained appropriate guidance for staff about how to support people to reduce the risk of avoidable harm.
- Risk assessments were reviewed regularly or more frequently if a person's needs changed. This supported staff to take appropriate action to reduce risks as risk levels changed.
- An environmental risk assessment was undertaken of people's homes before staff started supported the person.
- There were systems in place to assess, monitor and mitigate the risks relating to the health, safety and welfare of people who used the service were effective.

Using medicines safely

At our last inspection in September 2018 we found some concerns relating to the management of medicines. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- At our last inspection we found the provider did not have adequate systems in place to ensure the safe handling, administration and recording of medicines to keep people safe. We saw action had been taken by the provider to ensure medicines were managed safely at the service.
- People's Medication Administration Records (MARs) were returned to the office every month and checked by the senior staff. This helped to ensure any errors were identified and action taken to reduce the risk of them being repeated. The MARs we looked at had been completed correctly.
- Staff who administered medication had received training and their competency had been checked.
- Staff told us their care rotas clearly identified where people required a time critical call to ensure they received their time sensitive medicine. For example, a person prescribed Warfarin needs to take their medication at the same time each day.

#### Staffing and recruitment

- The provider completed pre-employment checks for new staff, to check they were suitable to work at the service.
- Some people we spoke with told us they would just like their calls to be delivered consistently on time. They thought the service needed more staff to cover for unexpected staff absence so the support workers did not have to complete extra calls. We shared this feedback with the registered manager. They told us they were actively recruiting staff and we saw evidence of this at the inspection. They also told us they were looking at changing the service's care planning software. The registered manager told us they would monitor the delivery of people's call times so people experienced continuity of care.

#### Preventing and controlling infection

- Staff had access to personal protective equipment (PPE) such as gloves and aprons. People spoken with told us staff used gloves and aprons appropriately whilst supporting them. Staff told us they had an adequate supply of gloves and aprons.

#### Learning lessons when things go wrong

- The service had a process in place for staff to record accidents and untoward occurrences. The registered manager understood the importance of investigating accidents and incidents, reporting to the relevant agencies and acting to reduce the risk of recurrence.



# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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

- The registered manager explained how they assessed people's needs before the service started supporting them. The assessment considered all aspects of people's needs and the information was used to develop written care plans and risk assessments. Protected characteristics under the Equality Act were considered.
- People we spoke with were satisfied with the quality of care they had received. Comments included, "They [support workers] do an excellent job. They understand me completely now and just get on with things" and "I think they [support workers] do an excellent job and they understand me perfectly. They have given me a new lease of life" and "They [older support workers] do understand me. They know I can be slow doing things, but they let me try any way. The young ones can be in a hurry sometimes."
- We reviewed the compliments the service had received from people's relatives. We saw relatives had thanked the staff for the care provided. Comments included, "Thank you all for looking after me" and "[Family member] really enjoys your people [support workers] coming and looks forward to it."

Staff support: induction, training, skills and experience

- Staff completed training in a range of different subjects to ensure they had the right skills, knowledge and experience to deliver effective care.
- Staff were supported to undertake the Care Certificate. The Care Certificate is an identified set of standards that health and care professionals adhere to in their working life.
- Staff told us they felt supported and received regular one-to-ones and appraisals.

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

- People were supported with their health and dietary needs, where this was part of their plan of care.
- Support workers monitored people if they were at risk of poor nutrition and involved healthcare professionals where required.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support:

- The service had clear processes for referring people to other services, where needed.
- In people's records we found evidence that staff sought advice from community health professionals such as the local GP, the district nurses and specialist nurses. This process supported staff to achieve good outcomes for people and to help people maintain their health.

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 with appropriate legal authority. 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. We found the service was working within good practice guidelines.
- At the time of the inspection none of the people supported by the service had a Court of Protection Order in place.
- People had signed to indicate their consent to their care plans where able. People we spoke with told us support workers consulted them and asked for their consent before providing care and support.
- Support staff had received training in the MCA. Staff described how they promoted people to be as independent as possible and to make decisions for themselves.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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

- People we spoke with made positive comments about the support staff. Comments included, "The ladies [support workers] are lovely; so helpful," "I think it is very good, the girls [support workers] all deserve a gold medal," "Some of the carers are wonderful, and the others are just ok" and "They [support workers] are all lovely. They have a laugh and a joke, but don't go too far with it. They always have a smile on their face and make me feel better when they are here."
- We looked at whether the service complied with the Equality Act 2010 and how the service ensured people were not treated unfairly because of any characteristics that are protected under the legislation, such as gender and race. The registered manager promoted equality and diversity. Staff received training on equality and diversity.
- People's care records had information about their preferences which included their preferred name, race, religion and sexual orientation.
- The registered manager and care coordinator were very knowledgeable about the people they supported, their preferences and their communication needs.

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

- People told us they had been involved in making decisions about their care and support needs. Reviews of people's care plans recorded people's comments and opinions.
- Care plans contained information for staff on how people expressed their views and how to support them to be involved in making decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance of respecting people's privacy and supporting them to be as independent as possible.
- People spoken with told us they were treated with dignity and respect and were supported to be as independent as possible. People told us staff listened to them. Comments included, "They are very respectful to me, I am an older lady, but still very friendly. They [support workers] make me feel comfortable when helping me have a wash," "The girls [support workers] treat me with respect and I get on well with them all. They are very patient with me. I have had a stroke and can be quite slow when doing things, but they never rush me" and "They are lovely girls [support workers], very kind and caring." One person told us they felt they were not always treated with respect when they contacted the office and listened to. We

shared this feedback with the registered manager so they could take the appropriate action.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People we spoke with told us they could ask for changes to their plan of care. Comments included "I just tell them [office based staff] if I need to change the times for an appointment. They are very good like that" and "Yes, they [support workers] always ask what I need doing, if I want a shower or just a wash, they are always flexible."
- People had a detailed care plan in place. There was a record of the relatives and representatives who had been involved in the planning of people's care. We saw people's care plans would benefit from containing more information about people's life histories. We shared this feedback with the registered manager.
- People's risk assessments and care plans showed how some people may behave when they were becoming agitated or displayed behaviour that could challenge. Care plans gave guidance to staff on how to respond to these challenges.
- People's care plans and risk assessments were regularly reviewed and in response to any change in needs.
- The service provided an on-call service for staff to contact if they needed assistance and advice. Support staff described how they would respond if someone became unwell while they were supporting them.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Some people using the service were supported to attend activities within community, where this was part of their plan of care. For example, one person was supported to attend activities within their sheltered accommodation.

Improving care quality in response to complaints or concerns

- A copy of the service's complaints policy was provided to each person using the service.
- People told us they would contact the office if they had any concerns.
- We saw complaints were recorded and dealt with in line with organisational policy. We found the service had responded to people's and/or their representative's concerns and taken action to address any concerns.

The provision of accessible information

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were identified, recorded and highlighted in care plans. For example, one person used a pictorial communication book to help them to express their views to staff.
- The registered manager told us the service could provide information in different formats to meet people's or carers' needs. They also told us they would contact organisations which specialise in providing support to people with disabilities or sensory loss for advice.

#### End of life care and support

- There was no one receiving end of life care at the time of our inspection. Training records showed staff had undertaken end of life training. People's wishes and preferences were explored during their initial assessment.

# 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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

At our last inspection in September 2018, we found evidence of a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- We found the quality assurance systems to monitor the quality and the safety of the service had been improved since the last inspection. Regular checks were completed at the service to identify any areas for improvements and to ensure it provided high-quality care and support. The registered manager was in the process of reviewing the service's care planning software, to enable further improvements to the monitoring of service delivery.
- The nominated individual regularly visited the service to monitor the quality and safety of the service. This included a review of the following areas; health and safety, complaints and compliments, recruitment and training. They also monitored the completion of any action plans.
- Staff meetings took place to review the quality of the service provided and to identify where improvements could be made. One staff member told us they would like the service to have more staff meetings. We shared this feedback with the registered manager.

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

- People told us they were asked their views about the service.
- We saw the registered manager had actively sought peoples and their representative views, by sending out questionnaires and ringing people or their representatives for feedback.
- The service had developed strong links within the community.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- There was a positive and welcoming atmosphere at the main office.
- The registered manager was available to people and staff to speak with. We received positive feedback

from people about the registered manager. Comments included, "I have spoken to the manager and I think it is very well run indeed. The girls usually tell me if there are any changes," "I do know [registered manager]. I have spoken to her once or twice, she is very nice" and "I have met the manager she sometimes comes to help the carers. Yes, I think it is well managed."

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

- We received positive feedback from staff about the way the service was run. They told us the registered manager was approachable, supportive and proactive at dealing with any issues that arose.
- Staff were clear about their roles and responsibilities.
- Staff were committed to providing person-centred care and learning from any incidents.
- The registered manager was aware of their obligations for submitting notifications in line with the Health and Social Care Act 2008.

Working in partnership with others:

- The service worked with other agencies such as the local authority and clinical commissioning groups who commissioned care for some people living in the home.