

Excel Care Services Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
12 November 2024

Service provided by:
Excel Care PVT Ltd

Service provider number:
SP2021000027

Service no:
CS2021000050

About the service

Excel Care services provide support to people in their own homes and in the community. They were based in Fife and covered Fife and Edinburgh areas at the time of inspection. Staff provided support with personal care and housing support tasks, including overnight support.

About the inspection

This was a short notice announced inspection which took place on 12 November 2024. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with management
- reviewed documents

Key messages

The service had made progress towards meeting outstanding requirements

Managers have developed procedures to promote a safe and consistent approach towards financial support

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 11 November 2024 the provider must ensure that they have clear, legible policies and procedures in place which are informed by best practice guidance and relevant legislation. The provider must familiarise themselves with these policies and ensure they are consistently implemented in practice.

The provider should pay particular attention to their financial policy and practices. This is in order to comply with regulations 4(1)(a)(Welfare of Service Users) and 9(1)(Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations (SSI 2011/210).

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20)

This requirement was made on 9 September 2024.

Action taken on previous requirement

The service had updated its financial policy and procedure since the last inspection. There was clear guidance for staff, including evidence of documents which should be used to record financial transactions. We sampled care plans and found examples where people had personalised guidance regarding finances. We spoke with managers who advised us staff would only purchase small essential items, where people had cash to give staff. The manager informed us this only occurred where people received extensive support hours from the service. We felt confident staff were now well informed about their role and responsibility associated with individual's monies. We also felt confident the service continued to work to ensure people had personal plans associated with cash transactions where appropriate.

As a result, this requirement was met.

Met - within timescales

Requirement 2

By 11 November 2024, the provider must ensure they understand their roles and responsibilities in making required notifications to relevant bodies. This must include but is not limited to:

- a) ensuring appropriate and timely referrals and notifications are made to relevant agencies and individuals. This must include, but not be limited to, adult protection referrals, health and social care partnership, police, and Care Inspectorate.
- b) a clear system to ensure notifications are submitted within timescales, when the registered managed is not present and or during out of hours.

This is in order to comply with regulations 4(1)(a)(Welfare of Service Users) and 15(b)(i)(Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This requirement was made on 9 September 2024.

Action taken on previous requirement

We sampled records of accidents and incidents. We found several examples of incidents the service should have informed the Care Inspectorate of. Managers advised they had notified the Local Authority of these, however records did not always clearly evidence this. The service had made appropriate referrals to other external agencies including health services and other social care services as appropriate. We discussed when the service should be making notifications and who to. We shared Care Inspectorate guidance with them and asked they familiarise themselves with this.

As a result, this requirement was not met. We have extended the timescale until 3 February 2025.

Not met

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order to ensure ongoing improvement and development complaints should be recognised and logged. This should be standard practice which is regularly reviewed by management to help them measure outcomes for people.

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19)

This area for improvement was made on 9 September 2024.

Action taken since then

The service had received some complaints since the last inspection. The service kept a record of complaints. Information about the detail of the complaint and actions taken as a result were recorded. We found some evidence of the service investigating complaints. The service would benefit from more time to evidence how complaints are addressed and used to inform future improvement planning.

As a result this area for improvement has not been met.

Previous area for improvement 2

To protect people from potential harm, the provider should demonstrate they have followed good practice guidance for safe recruitment at all times.

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

This area for improvement was made on 9 September 2024.

Action taken since then

This area for improvement was not assessed at this inspection. We will sample recruitment as part of a future inspection. As a result this area for improvement remains.

Previous area for improvement 3

To support people's wellbeing, the provider should ensure support plans contain accurate information on the application of topical preparations including the name of preparation and the exact body part it is to be applied to.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 9 September 2024.

Action taken since then

This area for improvement was not assessed at this inspection. We will sample care plans as part of a future inspection. As a result this area for improvement remains.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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