

Care and Social Services Inspectorate Wales

Care Standards Act 2000

**Inspection report
Domiciliary care agency**

Crossroads Care North Wales

Llys Eirias
Heritage Gate
Abergele Road
Colwyn Bay
LL29 8BW

Date of publication – 20/08/2010

You may reproduce this Report in its entirety. You may not reproduce it in part or in any abridged form and may only quote from it with the consent in writing of Welsh Ministers.

Care and Social Services Inspectorate Wales

North Wales
Government Buildings
Dinerth Road
Rhos on Sea
Colwyn Bay
LL28 4UL

01492 542580
01492 542569

Name of agency:	Crossroads Care North Wales
Contact telephone number:	01492 517375
Registered provider:	Croesffyrdd Gogledd Cymru-Crossroads North Wales-Gofalu Am Ofalwyr Caring for Carers Ltd
Registered manager:	Alison Jones
Category: e.g. Large agency (200 hours and over) Small agency (up to 199 hours) Supported housing	Agency>200hrs
Dates of this inspection episode from:	26/05/2010 to: 02/06/2010
Dates of other relevant contact since last report:	
Date of previous report publication :	12/03/10
Inspected by:	Marie Tait
Lay assessor:	
Other regions contributing to this report:	

Introduction

This report has been compiled following an inspection of the service undertaken by the Care and Social Services Inspectorate for Wales (CSSIW) under the provisions of the Care Standards Act 2000 and associated Regulations.

The primary focus of the report is to comment on the quality of life and quality of care experienced by service users.

The report contains information on how we inspect and what we find. The report is divided into distinct parts mirroring the broad areas of the National Minimum Standards.

CSSIW's inspectors are authorised to enter and inspect regulated services at any time. Inspection enables CSSIW to satisfy itself that continued registration is justified. It also ensures compliance with:

- Care Standards Act 2000 and associated Regulations whilst taking into account the National Minimum Standards.
- The service's own statement of purpose.

At each inspection episode or period there are visit/s to the service during which CSSIW may adopt a range of different methods in its attempt to capture service users' and their relatives'/representatives' experiences. Such methods may for example include self-assessment, discussion groups, and the use of questionnaires. At any other time throughout the year visits may also be made to the service to investigate complaints and to respond to any changes in the service.

Readers must be aware that a CSSIW report is intended to reflect the findings of the inspector at a specific period in time. Readers should not conclude that the circumstances of the service will be the same at all times.

The registered person(s) is responsible for ensuring that the service operates in a way which complies with the regulations. CSSIW will comment in the general text of the inspection report on their compliance. For those Regulations which CSSIW believes to be key in bringing about change in the particular service, they will be separately and clearly identified in the requirement section.

As well as listing these key requirements from the current inspection, requirements made by CSSIW during the year, since the last inspection, which have been met and those which remain outstanding are included in this report. The reader should note that requirements made in last year's report which are not listed as outstanding have been appropriately complied with.

Where key requirements have been identified, the provider is required under Regulation 23B (Compliance Notification) to advise, in writing, the appropriate regional office of the completion of any action required by CSSIW.

The regulated service is also responsible for having in place a clear, effective and fair complaints procedure which promotes local resolution between the parties in a swift and satisfactory manner, wherever possible. The annual inspection report will include a summary of the numbers of complaints dealt with locally and their outcome.

CSSIW may also be involved in the investigation of a complaint. Where this is the case CSSIW makes publicly available a summary of that complaint. CSSIW will also include within the annual inspection report a summary of any matters it has been involved in together with any action taken by CSSIW.

Should you have concerns about anything arising from the inspector's findings, you may discuss these with CSSIW or with the registered person.

Care and Social Services Inspectorate Wales is required to make reports on regulated services available to the public. The reports are public documents and will be available on the CSSIW web site: www.cssiw.org.uk

Overall view of the domiciliary care agency

Crossroads Care North Wales is a registered charity who operates a large domiciliary care agency, providing over 200 hours of support services to carers and the people they care for.

Crossroads Care North Wales have moved premises and are in the midst of organising their new offices. The office is open plan with rooms available for privacy if required.

The offices were clean and are fit for purpose. There is a visitor's book in the main entrance to the office for all visitors to the agency to sign in accordance with Health and Safety Regulations.

Crossroads Care North Wales is registered with Care and Social Services Inspectorate for Wales (CSSIW). The certificate for the Responsible Individual was displayed in both English and Welsh however the certificate for Registered Manager was not displayed, this is to be addressed.

An up-to-date Statement of Purpose (SOP) was provided dated November 2009. The document details the objectives of the service, the nature of the personal care services provided and the key terms and conditions. The Service User Guide (SUG) is the document provided to service users detailing the services and care they can expect to receive from Crossroads Care North Wales. The complaints procedure and contact details for CSSIW are outlined in this document.

A range of inspection methodology was utilised to gather and collate information about the service that Crossroads Care North Wales provides.

- The agency was provided with a Self Assessment Form (SAF) which affords them the opportunity to report any developments within the service.
- Twenty staff questionnaires were issued and thirteen staff members responded.
- Consideration of core policies and procedures.
- Discussion with the Registered Manager.
- Inspection of documentation.
- Telephoned service users to attain opinion about the service that crossroads Care North Wales provides.
- Case tracking of 4 staff files and 3 service user files.

Case tracking affords the Inspector the opportunity to examine how individual service user needs are identified and met by the care staff. The three service user files case tracked contained the relevant information to be kept such as an initial assessment, risk assessments (environmental) and service delivery plans.

Case tracking of staff files ensures that staff working at the agency receives regular training and supervision and that relevant safety checks have been undertaken to work with vulnerable adults.

Consideration of this information identified the focus of this inspection episode; an inspection plan was compiled to examine documentation, staff training and risk assessments.

The staff questionnaire responses received were positive about the agency and the care provided. The comments received were shared with the Registered Manager whilst maintaining anonymity of the respondents.

Crossroads Care North Wales mission statement is to 'promote, offer, support and deliver high quality services for carers and people with care needs'.

The Inspector would like to thank Yveline Hands, the Responsible Individual, Alison Jones, the Registered Manager and the staff for their warm welcome and co-operation during this inspection episode.

User focused service

Inspector`s findings:

Crossroads Care North Wales is registered with CSSIW. The registration certificate for the organisation was displayed in both English and Welsh, however the certificates for the Registered Manager were not displayed, this was discussed and is to be addressed by the Registered Manager.

An up-to-date copy of the SOP (November 2009) and SUG (December 2009) was provided during the inspection visit. Copies can be provided in a format suitable to meet the service user`s needs such as Braille or large print.

Three service users` files were case tracked and contained relevant information such as personal details, risk assessments and the service delivery plan, which is person centred. The Local Authority are just beginning to provide unified assessments which the agency can utilise to prepare a plan of care, which is beneficial and ensures that care is appropriate to meet needs.

Four staff files were case tracked. Files are being re-organised at present to ensure that all are the same and contain the correct information. There was evidence of relevant skills and competencies attained through mandatory training. Evidence of qualifications was also seen and the Registered Manager stated that more than 50% of care staff has acquired a National Vocational Qualification (NVQ) Level 2/3.

Records are securely stored in locked filing cabinets in the office. Service users have a file in their home containing the care plans. Another file is also provided to the service user detailing contact numbers and advice and guidance about the service.

According to the Self Assessment Form the service continues to be financially viable. An audit was undertaken in June 2010 and a report is pending. The Registered Manager will forward a copy of the report to CSSIW once available.

All policies and procedures are reviewed by policy makers in Crossroads. All changes are highlighted in yellow for ease of use. Discussion was held with the Registered Manager to ensure that policies and procedures are pertinent to their own area.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

--

Personal care

Inspector's findings:

Crossroads Care North Wales provide support to carers and care for the person they care for. Crossroads Care North Wales is registered to cater for the needs of individuals with physical disability such as sensory loss/impairment, learning disability, mental health, elderly mentally infirm and children and their families.

Four service users were approached for their opinion about the services that Crossroads Care North Wales provides. There was no reply to one call; another was unable to comment as they did not know who was providing services. Two stated that they were happy with the service comments made included "it's excellent", "wonderful" and "brilliant". Carers showed respect and stayed for the allocated time. One concern about the service was expressed. A service user was not informed until the morning of the planned visit that their regular carer would not be going due to illness. The service user believes this was due to a move of premises and staff being busy. The service user voiced their concerns to their carer upon her return to work. This was conveyed to management. The carer has since been absent from work on another occasion and the service user was informed the day before this time, which they deemed acceptable.

Policies are worked through in team meetings, staff are asked to read and sign to confirm they have read and understood them.

Any referrals that come into the agency, if there is capacity and funding they are responded to within three days.

Reviews are undertaken annually for adults and every six months for children, evidence of this was noted during the case tracking of service user files.

The agency has a data protection and a confidentiality policy. The computer system is password protected to ensure security of information to be held by the agency.

The provision of care is reviewed daily in the record log and staff completes an internal recording form which reports any changes or concerns regarding the service user on a regular basis. Spot check supervisions are also carried out to ensure safe working practices.

Care plans are person centred and promote choice and individuality. If the carer requests activities can also be included as part of the care package provided by the agency.

Medication is not administered unless necessary. A medication policy is in place and staff receives the relevant training to meet the needs of the individual. The medication chart is kept in the individual's home; completed sheets are filed in the office.

The agency endeavour to provide continuity of care. Two or three care support workers are matched to service users and the individual they care for. During absence due to holidays or sickness these same carers cover the shifts.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding from this inspection cycle:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

--

Protection

Inspector's findings:

Four staff files were case tracked as part of the inspection process. Relevant documentation was held in accordance with Regulation 15, schedule 3. However no original Criminal Record Bureau disclosure (CRB) was available for the files case tracked although a record of the issue number and due date for renewal was recorded. This was discussed with the Registered Manager and it is a requirement of this report that original copies of the CRB are to be kept for inspection purposes, following which they can then be destroyed and a record of the issue number and due date for renewal documented.

All mandatory training including manual handling and the prevention of abuse was discussed with the Registered Manager and all is up-to-date. A training matrix was provided as evidence. Extra training pertinent to meet service user's needs is also sought and undertaken.

Individual risk assessments are included with the care plan and consider environmental risks of the home surroundings. The agency also has a risk management policy and procedure in place which is dated 2010.

Care Support Workers are provided with a supply of protective equipment such as gloves, aprons, alcohol gel and anti-bacterial wipes to provide care.

There is a lone working policy, which is provided to staff. Care Support Workers are provided with a personal alarm, emergency contact numbers and use their own mobile phone if necessary.

Staff are aware of the on-call system and are provided with contact numbers and the Registered Managers number.

The agency has an accident book but it is not audited as there is no reason to record.

There have been no complaints received since the last inspection. Crossroads Care North Wales have a complaints policy which explains the procedure and gives correct times scales and appropriate contacts.

There have been no Protection of Vulnerable Adults/Children (POVA, POCA) complaints and no Regulation 26 notifications have been received since the last inspection.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number
Criminal Record Bureau disclosure to be kept for inspection purposes, following which they can be destroyed and a record of the issue number and due date for renewal documented.	29/08/10	15(1)(b)

Good practice recommendations:

--

Managers & staff

Inspector`s findings:

Crossroads Care North Wales provide a six month induction programme for new staff. All mandatory training is undertaken. A booklet is also provided which staff members complete during the induction process to confirm understanding. New staff shadow experienced staff and they are introduced to families that they will be providing support/care for. Staff questionnaire responses were positive about the induction received. Comments received include "very thorough", "excellent training and induction and "I received a full induction training from my manager before I was allowed out in the community. I also attended all the compulsory courses before I started the job for example POVA, first aid and manual handling".

Alison Jones is the Registered Manager; she has attained NVQ Level 4 in leadership and management which is essential to register with the Care Council for Wales. The Registered Manager has also acquired a train the trainer certificate which is beneficial when providing in-house training.

Two staff members are enrolled on the train the trainer course.

Training pertinent to the service user and the individual is provided to ensure care needs are met. The idea of training matrix to illustrate specialist training sought and completed was discussed with the Registered Manager as it may be beneficial to show what has been undertaken during the year.

The skills and competencies of staff are paramount to Crossroads Care North Wales and NVQ is encouraged with more than 50% of care staff achieving the qualification.

Mandatory training is re-arranged for staff members if they have a reasonable excuse for non attendance, if the excuse is unacceptable then this would be dealt with through supervision.

Supervision and appraisals are undertaken but some of the files only contained copies of the most recent ones undertaken, therefore it was difficult to establish if they are undertaken on a regular basis in accordance with Regulation 16. The Registered Manager assured the Inspector that supervisions, appraisals and the organisation of files is being addressed.

A total of eighty seven staff work for Crossroads Care North Wales, there is a low turn over of staff, two members of staff have left since the last inspection and one member of staff has been employed.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

It would be considered good practice to provide a training matrix to illustrate training pertinent to meet the needs of the service user group, to show what training has been accessed and undertaken during the year.

Organisation and running of the business

Inspector's findings:

A liability insurance certificate was supplied with the Self Assessment Form, which expires in March 2011.

The Self Assessment Form was completed and returned to CSSIW within the specified time scales.

Crossroads Care North Wales have recently moved premises and are now based in Colwyn Bay. A visitor's book is placed in the main entrance, which was checked and is regularly used. Entrance to the premises is through the car park which is security protected and admittance is via a call system.

The Quality Assurance report was discussed, crochet is the tool used to compile the report a copy is to be provided to CSSIW.

Staff questionnaire responses received were positive and shared with the Registered Manager. Staff feel that they are able to contribute ideas and suggestions at any time and don't have to wait for staff meetings.

Although Care Support Workers are autonomous workers questionnaire responses highlight that they work well as a team. Comments received included "very well", "although we are lone workers we meet up at staff meetings etc. We all work as part of a team and provide cover/advice to each other" and "we are all lone workers, any member of staff will willingly cover calls for holidays and sickness".

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

--