



Inspection Report on

Crosfield House

**Crosfield House
Dark Lane
Rhayader
LD6 5DB**

Date Inspection Completed

20/11/2023

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About Crosfield House

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Crosfield House Ltd
Registered places	64
Language of the service	English
Previous Care Inspectorate Wales inspection	23/9/2019
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy living at Crosfield house and live meaningful lives doing the things which are important to them. Care staff are safely recruited, well trained, and supported with their ongoing learning and development.

The environment promotes people's independence and provides a safe, stimulating home. Effective auditing and maintenance of the home ensures the health and safety of people living and working there is maintained.

There is effective oversight of the service by the manager, regional manager, and responsible individual (RI). The service is supported by internal and wider organisational departments. The provider is committed to providing a well-managed and organised home which supports the needs and personal outcomes of people who live there.

Well-being

People have control over their daily life and are supported to make choices about how and where to spend their time, who to socialise with and what they want to eat. People are asked about their personal preferences and these choices are respected and facilitated as much as possible. Crosfield House have a team of Wellbeing staff who work hard to ensure people can engage in stimulating and meaningful activities which include 'Namaste' sessions and animal therapy. People are supported to go out swimming, attend music venues, watch the Rugby at the local pub and visit agricultural shows or other places which are important to them. People are part of and contribute to their local community by attending events and social groups. Crosfield House are working to promote the Welsh language and culture. They have engaged in a Welsh language scheme which is used and promoted throughout the home. People are encouraged to use their Welsh language skills by attending the local male voice choir, engaging with the local school, and helping with Welsh language lessons within the home. People's skills and interests are celebrated and encouraged. We saw people with music skills being supported to play and sing and were told others help with the religious services in the home. The service promotes an inclusive environment which respects the cultures and beliefs of people living in the home and the staff who work there.

People receive the right support for their health and wellbeing from skilled staff within the service and external professionals. We saw where a person's health has changed, action is taken to seek medical advice and additional monitoring is put in place. Information about people's health and wellbeing is effectively handed over and we saw continuity within care records which showed the continuation of care between different staff over several days. People who are in the end stages of life are treated with dignity and respect. We saw families of people had thanked the home for taking care of their loved one and for supporting the family during difficult periods. One comment read *"the support you provided was impeccable and comforting to us all."*

People are protected from abuse and neglect. Staff receive safeguarding training and are supported by robust policies and procedures which ensure people know how to report concerns. The service effectively monitors incidents and accidents, carrying out reflective practice and implementing changes where needed. The manager told us they have a good working relationship with the local safeguarding team and will seek their guidance when needed. People who have restrictions in place have the appropriate assessments carried out and documentation in place. The service ensures restrictions are always the least restrictive option, having regard for people's rights.

Care and Support

People receive care and support which is person centred and delivered in line with their needs and wishes. People have personal plans in place which are created and reviewed with people or their representative. Records are updated when there is a change to a person's needs. Information about people's life history, family and interests is recorded and documents how this is important to them now. We saw care was delivered in line with information within care records. People experience positive outcomes because the care and support delivered considers all aspects of an individual's well-being. We were told several people had experienced significant improvements in their health since coming to live at Crosfield House. Daily records are detailed and time accurate, with information from care staff, the wellbeing team and nursing staff.

Care and support are delivered with dignity and respect. One person told us "*Staff are really good and help me with what is important to me.*" People have requests for support met in a timely way and we found the service to be very well staffed. This means people could access help or company at any time. We saw kind and empathetic interactions and saw people actively seek this from staff. A person told us, "*Staff have a heart of gold.*" Care staff we spoke with know people well, what their daily routines are and could tell us how they like to be supported.

People are supported to access health and wellbeing services from external professionals in addition to the support provided in the home. We saw referrals are made to ensure people have the right support. Records of involvement from external professionals is recorded within care records and personal plans are updated with any information and guidance given. Risk assessments are in place to keep people safe whilst ensuring people have choice and control over their daily lives.

Medication is managed and administered safely. Staff must complete medication training and have annual competency assessments. People are supported to have regular reviews of their medication. We saw as required medication (PRN) and medication with specific administration requirements is recorded and monitored.

There are effective infection prevention and control measures in place. Staff have completed training and are supported by detailed policies relating to this. There is access to personal protective equipment (PPE) which is stored safely.

Environment

People live in an environment which promotes their independence and supports their safety. The home has a maintenance team in place who ensure safety checks are carried out and any issues which arise are addressed. Audits of the environment ensure all routine testing is conducted including gas and electrical safety and fire safety checks. Crosfield House was recently inspected by Environmental Health and was awarded a level 5 rating, the highest which can be achieved.

We found all areas of the home to be bright and cleaned to a very high standard. Communal areas have notice boards so people can see the activities planned and other information. Photos and pictures of the local areas create a way for people to reminisce. There are sensory/fidget boards on the walls around the home which provide engagement and stimulation for people. We were told there are plans to redecorate some areas of the home. People's bedrooms are warm and clean. We saw bedrooms are decorated to personal taste and had items of importance to people such as furniture, photos, and soft furnishings. Some rooms have ensuite facilities and all rooms have a vanity unit with sink and access to well-equipped communal bathrooms and toilets.

All areas of the home have several communal areas for people to access with various seating to meet physical needs. Lounges have items for people to engage with such as games, puzzles, and sensory objects as well as soft animals and dolls which we saw brought people comfort. People have access to a sensory room and all areas have smart speakers for music and diffusers which create a calm and pleasant environment. People can access safe and pleasant outdoor spaces which the provider told us they plan to develop further.

Specialist equipment such as profiling beds, hoists and mattresses are serviced and well maintained. People's daily records show equipment being used including bed rails, safety mats, sensor alarms and call bells are checked at least daily in line with the personal plan and risk assessment. We saw safe manual handling techniques being used to support people with their mobility.

Leadership and Management

People live at a home which is well led and organised. Effective governance arrangements are in place which ensure all areas of service provision are audited. This means the management team in the home and wider senior management have good oversight of the service and identify areas to develop and drive improvement. There is a statement of purpose in place which accurately reflects the service being delivered. The guide to the service provides people with information about what they can expect if they choose to live at Crosfield House. These documents provide further information about how to raise concerns and who to speak to if they are not happy. Detailed policies and procedures are in place.

People are supported by staff who are appropriately recruited and suitably trained. We looked at several recruitment files and found all the required pre-employment checks, including disclosure and barring service (DBS) checks are carried out before someone begins working at the service. Care staff receive an induction and are supported to register with Social Care Wales, the workforce regulator. We found staff receive training in many areas of care and support through online learning, face to face training and ongoing continual professional development. Nursing staff are supported to keep their training up to date and develop their skills to maintain their professional registration. Staff receive one-to-one supervision and an annual appraisal of their work to discuss their ongoing learning and development. Staff meetings are held to ensure the team are aware of any important information and have the opportunity to raise topics of discussion in an appropriate forum.

The responsible individual of the service visits on a regular basis, looking at areas of service delivery and speaking with people who live and work at the home. People's views are sought through face-to-face conversations, resident and relative meetings, staff meetings and feedback questionnaires. Feedback is included within the quality-of-care report which reflects on the service over the last six months. The quality of care report shows whether actions set have been achieved and how the provider plans to drive improvements.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
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