



Inspection Report on

Carers Trust Crossroads West Wales

**Crossroads
Unit 3
96 Queen Victoria Road
Llanelli
SA15 2TH**

Date Inspection Completed

24/01/2022

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About Carers Trust Crossroads West Wales

Type of care provided	Domiciliary Support Service
Registered Provider	Carers Trust Crossroads West Wales
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are very satisfied with the service they receive. Representatives value the replacement care service and the respite it provides them, with one family member stating “*without them I'd be lost*”. Experienced staff are guided by accurate and detailed person centred plans. The managers of the service are accessible and well respected by all involved.

Well-being

People receive person centered support and are involved in all decisions about the service they receive. Detailed information is recorded in their personal plans. Senior staff work with health and social care professionals to help people remain as healthy as possible. People and/or their representatives contribute to decisions that affect them. Key workers maintain detailed personal plans that focus on things that matter. The service supports people to give their main carer a break, a worker told us *“It’s nice when you can make a difference for the person you are caring for and their husband/wife”*. Staff support individuals with activities that help people remain occupied, while promoting their health and well-being. The service provides an 'Active Offer' of the Welsh language. Many of the staff are Welsh speakers, which means people are able to communicate in Welsh or English as they choose. Recruitment and training ensures people get the right care and support, from skilled and knowledgeable workers. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People know how to make a complaint if needed and have full confidence in the managers.

People have a voice and input into the running of the service because the RI involves them in quality assurance. Governance processes are comprehensive and focus on developing the service by using information from surveys and audits. The Quality of Care Review identifies areas to improve following consultation with people who use the service. The Provider intends to amend its reports to ensure they capture all of the information gathered when reviewing quality.

Care and Development

People are very happy with the support they receive, an individual told us *“the carers are great they know me and I know them, we trust them. They help me do stuff that I enjoy”*. Staff support people in their own homes to give their main carer; usually a relative, a break. A family member told us *“They do the little things that people may see as trivial but they make a huge difference for us, we’d be lost without them”*. The provider has personalised, accurate and up-to-date plans for how it delivers support to individuals. The manager considers a range of information from the person, their representatives, workers and external professionals. Risk assessments help to maintain people’s safety, while promoting their independence. Key workers regularly review plans with individuals and their representatives so they remain relevant. The manager told us the reviews will now be done quarterly. Daily notes are detailed and show the support people receive. Staff assist people with varied activities such as shopping, exercise and gardening. We saw good evidence of health and social care professionals being involved in plans documented. Care staff are passionate and positive about their role and the impact they have on people. A worker told us *“what I love most is the difference I can make to someones life and just be a positive impact on them”*.

Everyone describes a team approach to maintaining the service during the pandemic. The manager told us staff are covering each other’s shifts when they have to isolate and people and their representatives are very patient and understanding.

The provider has policies and procedures to manage the risk of infection. There are good hygiene practices in line with Public Health Wales guidance. A representative told that the staff are diligent with hand sanitation and always wear their PPE.

Leadership and Management

The provider has arrangements in place for monitoring, reviewing and improving the quality of the service. The Responsible Individual's (RI) statutory quarterly visits are comprehensive and involve people and/or their representatives. Workers confirm they talk to the RI but this is not recorded in the reports. The RI intends to amend their reports to document these discussions and we will check in the next inspection. Information from internal quality assurance systems informs the action plan that focuses on improving the service. The six monthly Quality of Care Review; refers to this information but the RI also intends to change the format of the quality report. The provider is planning on transferring the RI duties to a senior officer in the organisation.

There is an open and supportive culture at the service. The manager is accessible and helpful. A worker told us *"the office has a good vibe and everyone is friendly and welcoming"*. People have confidence in the way the service manages complaints and feel able to raise them if needed. When discussing communication a family member said *"I have never had to phone because they phone me and keep us up to speed"*. Support workers are positive about the leadership and one told us *"my line manager is great, easy to talk to and very helpful and supportive"*. All support workers confirm they receive regular, one-to-one supervision meetings and appraisals and can talk to the manager whenever they need to, records corroborated this. Staff members have a good understanding around safeguarding. Policies and procedures are in place to support good practice and staff have a sufficient understanding of key policies.

Pre-employment checks take place before new employees start work. These include reference checks, right to work and Disclosure and Barring (DBS) checks. Support workers receive mandatory, person specific and developmental training to meet people's needs and enable outcomes. Workers are positive about the effective training and one told us the training *"stops and makes you think"*.

Adequate numbers of staff meet people's needs. Regular workers ensure people get continuity of care and support to help build relationships. A representative told us *"they feel like another member of the family in the house and we trust them so much"*.

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
N/A	No non-compliance of this type was identified at this	N/A

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