



Inspection Report on

Crosshands Home Services Ltd (Swansea)

**Suite A Beech House
Pheonix Enterprise Park
Lion Way Llansamlet
Swansea
SA7 9FZ**

Date Inspection Completed

02/11/2022

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About Crosshands Home Services Ltd (Swansea)

Type of care provided	Domiciliary Support Service
Registered Provider	Crosshands Home Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	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

The service is led by a dedicated manager who is well supported by the Responsible Individual (RI). People, their relatives and care workers respect the manager and the value of the service to them. There is good oversight by the RI, who speaks with care workers as part of his Regulation 73 visits. Details of findings from these visits need to be better documented.

People and their relatives speak positively about the care and support they receive. Care staff demonstrate a good knowledge of the needs of the people they support. Staff are enthusiastic about working for the service. There is good evidence of people and/or their representative being involved in their care, however, more person centred details should be included in care plans.

Well-being

People receive care and support that meets their needs. Staff are knowledgeable, caring and take pride in the care and support they provide. Care plans provide information about the person, but additional person centred details are required. People remain as healthy as possible as the service actively works alongside health and social care professionals.

People and/or their representatives contribute to decisions, which affect them; this is well documented. The RI involves people in quality assurance processes including his Regulation 73 responsibilities. Care staff have access to policies and procedures, which are reviewed regularly. The manager and RI have a clear vision and provide good leadership and management of the service.

People are protected from abuse and neglect as care staff are fully aware of their responsibilities to protect people they care for and to raise concerns. People know how to make a complaint if needed and have confidence in the managers, staff and the service.

Care and Support

People receive a service that meets their assessed needs. Initial assessments are undertaken, and care plans produced from these. The plans provide an overview of the needs of the person. However, further information is required on how the care and support is to be delivered to better inform care workers. This will ensure continuity of care and support for the individual whilst they are receiving the service. Risk assessments are in place and regularly reviewed. People and / or their representatives are involved in the planning and delivery of their care.

People and relatives value the service. People told us *“the carers are great; they are like family”* and *“the service my mother receives is absolutely perfect, fantastic – they have helped so much”*. Care records also show that people and / or their representatives are involved in decisions around the care being provided. People also benefit from a dedicated team of consistent staff who know them well. People told us; *“I more or less have the same carers – I know them all”* and *“I have mostly the same carers which is really helpful”*. Health and social care professionals are involved in the care of people when needed.

People feel safe and protected. Care workers are aware of their responsibilities to protect people from COVID and abuse. Those staff spoken to have a good knowledge of moving and handling, infection control and safeguarding and speak passionately about protecting the people they care for. People also told us they feel safe through the regularity of care workers, and their professionalism. They also told us they feel able to raise a concern about the service if needed and feel confident their concern would be addressed by the manager.

Policies and procedures are readily accessible. Training and support are in place to ensure care staff have the knowledge and understanding to maintain people’s safety and well-being.

Leadership and Management

The service is led by a dedicated manager who is registered with Social Care Wales and is well supported by the RI. The manager demonstrates a very good knowledge of the people who use the service and the care workers employed. The RI is readily available to support the manager and together they make a strong leadership team to drive the service. The manager receives regular supervision and support from the RI.

As part of Regulation 73, the RI seeks feedback from people and relatives who are receiving the service. Feedback from staff is also sought and those contacted told us they know who the RI is, and he does speak to them. Whilst Regulation 73 visits are being undertaken, the reports produced lack analysis and details to help inform actions for the future. This has been discussed with the RI as part of the inspection.

People are supported by a motivated, valued and well-trained staff team. All care workers who have completed an inspection questionnaire tell us they are very well supported by the manager and the organisation. Staff told us *“[manager] is very approachable and kind, nothing is too much trouble for her”* and *“she [manager] is excellent, one of the best I have worked for”*. We listened to a telephone call between the manager and a care worker during the visit to the service and heard her offering support, guidance and reassurance to the care worker.

People and their representatives praise the staff that support them, they told us; *“10/10 for the staff, they are excellent. [Manager] is excellent, always keeps me updated and shares information.*

Newly appointed staff go through a detailed recruitment process and all records looked at contain the necessary recruitment documentation. Staff receive a range of mandatory and specific training to support them in their role. Training records corroborate this. There are induction, supervision and appraisal procedures in place. Care workers told us they have regular supervision and support and in the main, these are reflected in the staff records. The manager is currently arranging team meetings to be held online to enable care workers to attend and contribute to the support and guidance being provided.

Policies are in place to support staff and managers. These are reviewed regularly, however, need to accurately reflect CIW's role in handling concerns. The Statement of Purpose reflects the service being provided.

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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Date Published 15/12/2022