



## Inspection Report on

**CrossHands Home Services Ltd (CrossHands)**

**Plot 6b Unit 2  
Heol Parc Mawr  
CrossHands  
Llanelli  
SA14 6RE**

**Date Inspection Completed**

29/05/2024

**Welsh Government © Crown copyright 2024.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

## About CrossHands Home Services Ltd (CrossHands)

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	15 <sup>th</sup> of December 2022
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

Crosshands Home Support provides a reliable service that people trust. People are encouraged and supported to maintain their skills and independence. People feel confident communicating with the manager and staff, and are assured they will be listened to.

Care staff have a good understanding of the needs of the people they support. Staff feel valued and are positive about the service. Care staff are safely recruited, receive good induction and training. Staff feel that schedules are well planned and they have enough time to spend with people.

There are good management arrangements in place and the RI has good oversight of the service. The Responsible Individual (RI) has effective systems in place to plan, review and audit the delivery of the service.

## Well-being

People told us they are happy with their care and support, and the service provided to their loved ones. People have written information about the service, feel confident communicating with the manager and staff, and feel that they are listened too. Individuals' using Crosshands Home Services are treated with dignity and respect. Personal plans are co-produced and regularly reviewed, ensuring that people's individual circumstances are considered.

People get the right care and support, enabling them to maintain their independence. People told us the service is responsive and flexible if people's needs change or if there is an emergency.

People told us they feel safe and protected. People receive a good standard of care and support from care staff who are safely recruited, trained and supported, helping to maintain their wellbeing.

People are supported to maintain their overall health and emotional wellbeing. The care staff have good relationships with people and understand their needs, seeking support from management and other professionals when required. Effective medication management systems ensure people's medical conditions are well managed to help support their health and wellbeing.

Crosshands home support is proud of its record of zero missed calls, supporting people to live independently within their own home, maintaining their health and wellbeing.

People value the care staff that support them, we were told, "*[They're] so pleasant, they're bright and lift your spirits up right away.*" We were also told, "*The girls are really good, they go above and beyond.*"

## Care and Support

Personal plans reflect people's personal outcomes, care and support needs. Specific guidance in people's personal plans supports care staff to meet people's day-to-day needs. People told us carers are flexible and provide the help they want when they ask. People are confident in the staff, we were told, "*They know what they are doing.*" Personal plans are reviewed regularly with people using the service, and any changes are promptly communicated to the staff. Staff told us, "*The office is on point with them. They let you know when there have been changes.*"

Risks and needs are considered in the care planning process. Care staff focus on enabling and enhancing people's skills, to help them maintain and develop their independence at home. A user of the service told us about increasing their independence with staff support.

People are supported to maintain their overall health and wellbeing. Staff understand people's health needs and support them to access health services. Care staff obtain appropriate medical assistance when they see it is necessary.

People are kept safe by care staff who have undertaken safeguarding training and understand their responsibilities. Risk assessments are in place to identify and minimise individual risks. Furthermore, the service promotes hygienic practices, and the management of infection risk. People told us, "*[They] have all their PPE, as they should.*"

Medication records are fully completed, regularly audited and the overall administration of medication is effective.

## Leadership and Management

The Responsible Individual (RI) has good governance to support the effective operation of the service. The RI is present in the service several times a week and has good oversight of operations. They capture extensive feedback from individuals using the service and staff, to assess the quality of care delivery. The RI regularly audits the service, provides feedback to the staff, identifies areas for development and actions to be taken.

Care staff receive frequent supervision which is also used as an opportunity to identify their training and development needs. There is a positive culture within the service, care staff told us they felt valued in their role and confident in the support they receive. A staff member told us about the management team, "*They're brilliant.*" They also told us, "*They are always at the end of the phone, you feel supported.*" Care staff told us they experienced positive induction periods and were supported to complete training within their roles.

The majority of staff training is up to date and the service provider has a plan for refresher sessions. We were told, "*Induction was brilliant, I felt confident afterwards.*" Care staff told us the call schedules are well planned and the manager is receptive to ideas of how they could be improved.

Care staff are appointed following a safe recruitment process. Staff files are well organised and easy to navigate. They evidence checks such as references and Disclosure and Barring Service (DBS) checks are completed. Most files contain a full employment history, but some had gaps. The provider has agreed to make sure any gaps are accounted for.

The manager has a focus on staff wellbeing and plans opportunities for staff to get together for social occasions. The manager ensures staff feel listened to, and staff confirmed the manager was approachable and available.

The service promotes an accessible complaints policy and procedure. People using the service feel comfortable about reporting problems. We were told, "*I'm confident that they would sort any problems.*"

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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 inspection	N/A
-----	--	-----



### **Was this report helpful?**

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

**Date Published** 09/07/2024