

Crossroads Caring For Carers Wokingham Limited

Crossroads Caring for Carers

Inspection report

Wokingham Hospital
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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service: Crossroads Caring for Carers Wokingham is a charity run domiciliary care agency. Crossroads provides non-emergency support to people who are carers in their own home. Crossroads provides this support for both older people and children. The aim of the service is to provide short periods of respite for the carer by giving care and support to the person they care for. At the time of our inspection the service was supporting 23 people who were receiving person care.

People's experience of using this service:

- The registered manager reviewed, assessed and monitored the quality of service provided
- Recruitment processes were in place to make sure, as far as possible, that people were protected from staff being employed who were not suitable.
- People's medication was handled safely.
- All staff training records were up to date and complete.
- People's needs were assessed, planned and reviewed to ensure they received support that met their changing needs.
- Staff understood how to keep people safe and their responsibilities for reporting accidents, incidents or concerns. The registered manager had the knowledge to identify safeguarding concerns and to act on these appropriately.
- People views on their relative's support was regularly sort.
- Relatives knew how to complain and knew the process to follow if they had concerns.
- The service regularly received positive feedback from people they supported
- One person stated, "We are very happy with the service. Everyone, all the carers and administration staff, are considerate and very kind."
- Recruitment processes were in place to make sure, as far as possible, people were protected from staff being employed who were not suitable.
- People's right to confidentiality was protected and their diversity needs were identified and incorporated into their support plans where applicable.

Rating at last inspection: Good (Report published September 2016)

Why we inspected: This was a planned comprehensive inspection based on the rating at the last inspection.

Follow up: We will continue to monitor all information we receive about this service. This informs our ongoing assessment of their risk profile and ensures we are able to schedule the next inspection accordingly.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was Safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was Effective

Details are in our Safe findings below.

Good ●

Is the service caring?

The service was Caring

Details are in our Safe findings below.

Good ●

Is the service responsive?

The service was Responsive

Details are in our Safe findings below.

Good ●

Is the service well-led?

The service was Well Led

Details are in our Safe findings below.

Good ●

Crossroads Caring for Carers

Detailed findings

Background to this inspection

The inspection:

'We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.'

There was a registered manager in post, a registered manager is a person who has registered with the Care Quality Commission to manage the service.

Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The service a registered manager and an assistant manager.

Inspection team: One inspector carried this inspection

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because it is a small service and we needed to make sure the relevant staff and information would be available in the office.

The inspection site visit took place on 25 March 2019. We visited the office location to see the office staff and to review care records and policies and procedures. The registered manager and assistant manager was available and assisted us on the day of the visit.

What we did:

- Before the inspection site visit we looked at information we have gathered about the service. The previous registered manager completed a Provider Information Return (PIR). This is a form that asks the provider to

give some key information about the service, what the service does well and improvements they plan to make. This information helps support our inspection. We looked at the PIR and at all the information we had collected about the service.

- We looked at the notifications we had received for this service. Notifications are information about important events the service is required to send us by law.
- We contacted all members of staff asking for feedback on working for the service and received a response from six

During the inspection we spoke with the Registered Manager and the assistant manager. We also gathered information about:

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- Four people's care plans, daily notes, monitoring records, risk assessments and medication sheets.
- One recruitment record
- Records of compliments.
- Training matrix
- Supervision Matrix

After the inspection additional information was gathered

- The Registered Manager's quality assurance audit
- Policies and procedures
- Feedback from four relatives
- Feedback from six staff members

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People were supported by staff who had a good understanding of safeguarding
- The service had a children and adult protection flowchart. This allowed them to navigate through the process of reporting concerns.
- Staff members stated that the service had a lone working policy. The policy highlights the safeguarding measures staff should take when lone working.
 - One staff member stated, "I have a laminate prompt sheet" This was used to prompt staff on what to do if they suspected people they supported were being abused or were at risk of harm.
 - Relatives stated that people had been asked their consent to any care and treatment before they received it.

Assessing risk, safety monitoring and management

- People were protected from risks associated with their health and care provision.
- The risks associated with people's individual care and support needs had been assessed, with assessments in place for areas such as mental capacity, medication and memory. For example, following an assessment an in-depth risk assessment would then be carried out at each person's home. This identified any hazard and risk levels. The safety measures needed would then be recorded.

Staffing and recruitment

People were kept safe from the risk of being supported by unsuitable staff because the service had adequate recruitment processes in place. Additionally, value-based interviews were designed to establish if candidates had the appropriate attitude and principles.

- However, the registered manager had highlighted in a service meeting, that some disclosure and barring service (DBS) checks, which help employers make safer recruitment decisions were out of date. It was agreed with the chair of trustees for them to be renewed. The registered manager provided evidence of this agreement
- The registered manager carried out recruitment checks to ensure suitable staff were employed. One new member of staff had started work since the last inspection. Required staff recruitment checks had been carried out
- There were sufficient numbers of staff to support people safely

Staff stated that they felt they had enough time on a visit to complete all of the care and support required by the person's care plan. One relative commented that staff are "Mostly" available when they need them.

Using medicines safely

- People's medications were managed safely.

- All staff received yearly e-learning in 'Medication safe handling awareness training.'
- Records showed all staff's medicines training was up to date.
- Medicines administration record sheets were up to date and had been completed correctly by the staff administering the medicines.

Preventing and controlling infection

- Staff received training in the control of infection.
- Staff were provided with personal protective equipment when going into people's homes.

Learning lessons when things go wrong

- The registered manager identified that some DBS checks had expired and had acted on this appropriately.
- The service kept an accidents/incident log. There have been no recorded accidents in the past year.
- The registered manager had processes in place to record accidents and incidents, these were investigated so that any trends or themes could be identified and lessons learnt to prevent reoccurrence.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed, planned and reviewed to ensure they received support that met their changing needs. A recent service user satisfaction survey for the service highlighted that 77% of respondents 'agreed strongly' that the service was effective and responsive.
- Care and support was delivered in a non-discriminatory way and respected people's individual diverse needs.
- People felt, "staff know how your relative likes things done".
- The registered manager stated, "On the assessment we look at people's religions, culture, interests and background."
- It was evidenced that one person who lacked capacity had a best interest meeting to discuss their care and support plan with relatives, this ensured people's needs and preferences were met.

Staff support: induction, training, skills and experience

- People received care from staff that had the necessary knowledge, skills and experience to perform their roles. The 2018 adult carers survey showed 73% felt an 'Excellent' level service of service satisfaction.
- All relatives commented that they thought, "staff have the training and skills they need when supporting."
- Staff had the training they needed to support the specific people they care for. For example, the registered manager had arranged bespoke training at a team meeting to enable staff to meet the specific needs of people living with dementia.

There was evidence in new staff members files, of days they have shadowed other staff members for experience.

- The service provided training in topics they considered mandatory, such as manual handling, safeguarding children, safeguarding adults and medication administration.
- All training the provider considered to be mandatory was up to date.
- Staff received training in relation to the equality and diversity on their induction and a refresher every three years.
- Staff were well supported and received formal supervision bi-monthly to discuss their work and how they felt about it.
- Once a year staff had a formal appraisal of their performance over the previous 12 months.
- Staff receive twice a year work based observations in people's homes. This focused on their competency levels.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to have a healthy diet

All staff received training in food safety and fluids and nutrition

- All people's files had a 'plan of care needed by the cared for person.' This information was very specific and highlighted what time and what type of food to provide the person. For example, in one person's file it had documented they like porridge and toast for breakfast.

Supporting people to live healthier lives, access healthcare services and support

- The registered manager and staff were knowledgeable and well informed about people's health and wellbeing. They communicated with each other reporting any changes or issues.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

- We checked whether the service was working within the principles of the MCA and found that they were.
- All staff stated that they had received training and had an understanding of the MCA. During the inspection the registered manager demonstrated how they worked within the principles of MCA. For example, we saw how people had been given the opportunity to make their own decisions around the support they were receiving.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- The service undertook an annual survey. One relative commented in the survey, "Crossroads have provided very good care for my husband, he has enjoyed the company and I enjoyed the time out knowing he is not only well looked after but also entertained."
- Staff provided support to meet the diverse needs of people using the service including those related to disability, gender, ethnicity and faith.
- All relatives spoken to felt that staff were caring and treated their people with dignity and respect.
- Relatives were positive about the support that was provided. One relative we spoke with told us, "Having Crossroads in our lives is wonderful. I always feel rested and content following the three hours of the weekly visit by our kind and considerate carer. Being the same person, each week has fostered an in depth feeling between us all for our needs and ambitions which has always worked for us, and as always we both look forward to our Friday meeting each week."

Supporting people to express their views and be involved in making decisions about their care

- Relatives views on people's support was regularly sort.
- The care plans were drawn up with people, using input from their relatives. For example, on a consent form it was documented that consent was given 'verbally' as the person was unable physically to sign the form.
- Carers told us that their relatives had been asked their 'consent' by care staff when needing any treatment or support.
- The registered manager stated that two meeting have been set up in 2018 for all carers to share their experiences. This day was in partnership with Berkshire care home, where people were provided with cream tea.

Respecting and promoting people's privacy, dignity and independence

- Staff stated, "People who use this care agency are always treated with respect and dignity."
- People's right to confidentiality was protected. All personal records were kept locked away in the office and in a place of their choice within people's own homes.
- People's risk assessments linked into their care plans and detailed treatment choice and preferred methods. For example, they clearly identified people's bathing, showering and skin care needs.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

Good: □ People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received support that was individualised to their personal needs.
- The service was responsive to people's needs and interests. For example, one person they supported, they liaised with the Alzheimer's society singing for the brain group. They then supported the person and their full-time carer to attend the group.
- An assessment is completed within two weeks of referral to identify if the service can provide support to the full time carer and the person they care for.
- Staff were knowledgeable about the needs, choices and preferences of the people they provided care and support to.
- For example, we were told about a person with a hearing impairment and how the service ensured a deaf interpreter was organised to be present at the person's home when working with them.

Improving care quality in response to complaints or concerns

- There had been no complaints made to the service in the past year.
- The service had received 22 compliments in the past year.
- One person commented on the support, "Thank you for the support your organisation has given me. It did make a difficult period easier to cope with because I didn't feel so alone."
- Staff were aware of the procedure to follow should anyone raise a concern with them.
- In the annual survey for 2017-18, a relative commented, "Although the service was good anyway it's improved exceedingly. We've got to know the care support worker's [CSW] which really helps."

End of life care and support

- At the time of this inspection the service did not have any one at end of life care.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

Good: □ The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The provider had a Duty of Candour policy in place, which included a form for recording events, actions taken, and where improvements should or could be made.
- Staff felt managers were accessible and approachable and dealt effectively with any concerns they raised.
- One member of staff told us, "[Registered manager] tries very hard to keep us up to date on all aspects."
- One carer stated on the 2017-18 survey, '...I can leave my husband safely for short periods.' A second carer stated, '...Having Crossroads in our lives is wonderful. I always feel rested and content following 3 hours of the weekly visit by our kind and considerate carer.'

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was aware of their legal responsibility for meeting the requirements and regulations about how the service was run. The registered manager and provider had quality assurance measures and systems in place to monitor the quality and safety of the care provided. This included regular observations of care staff during calls. Staff supervision was used as a mechanism to look at quality and assurance.
- All of the registration requirements were met and the registered manager was aware of what notifications should be sent to us when required. Notifications are events that the registered person is required by law to inform us of.
- Records were up to date, fully completed and kept confidential where required.
- Staff rotas were in place and highlighted each person's visit schedule for the coming week. In the past year the service has recorded two late visits. They documented the 'reason for occurrence' and 'follow up action'.
- Crossroads Caring for Carers had appropriate risk measures in place. These included a lone working policy and separate lone working guidance for managers, staff and volunteers. This provided guidance to staff working for the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff stated the registered manager sought feedback about the service and took their views into account.
- Continuous learning and improving care
- All people are signed up to Crossroads caring for carers emergency 'Back me up' (BMU) service. This

system is where staff will response 24 hours a day, 365 days a year. It provides urgent support to the cared for person in the event of a carer being unable to care.

- The registered manager and staff team were always looking for ways to develop and improve the care provided. They saw any feedback as an opportunity to improve the service further. For example, we saw care plan improvement that had been put into place that focused further on the needs of the people they supported. As a result this highlighted the desired outcome and specifically stated how this would be achieved.

Working in partnership with others

- Crossroad caring for cares has attendance at commissioning meeting, Mencap meetings, and with the carers trust.

- The registered manager and staff team worked in partnership with other healthcare professionals, families, and community organisations to ensure people received high-quality care.

- Crossroad Caring for Cares works with 'The Lions Club of Wokingham' who provide the service with a plastic container and a green cross sticker. Inside the container is a form that details a person's personal details, medication and if they have a do not attempt resuscitation (DNAR). This information is to inform paramedics. When the service starts to work with people, they provide them with a Lion's Club pack. The green cross sticker is provided so people can place this on their front door to inform paramedics in attendance that there is a lion's club plastic container inside the person's house.