Surrey Crossroads  
Crossroads Care Surrey - East Surrey Branch

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<th>Region:</th>
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| **Location address:**    | Oxted Community Hall  
                          | Church Lane  
                          | Oxted  
                          | Surrey  
                          | RH8 9NB |
| **Type of service:**     | Domiciliary care service |
| **Date of Publication:** | June 2012 |
| **Overview of the service:** | Crossroads Care East Surrey is registered to provide the regulated activities of 'personal care'. The service provides non-emergency support to carers who care for a person in their own home. Crossroads provide care to older people, people who have dementia and people/children who have physical disabilities. |
Our current overall judgement

Crossroads Care Surrey - East Surrey Branch was meeting all the essential standards of quality and safety inspected.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 14 February 2012, talked to staff and talked to people who use services.

What people told us

People told us they were very satisfied with the care and support they received. People described the service as "Fantastic." One person said that they "Don't know what we'd do without the help we get."

People said the staff were punctual and always stayed for the full time agreed. Staff were friendly and kind and spoke respectfully to them. The people we spoke with said that staff were competent and appeared well trained and demonstrated a understanding of our needs. They understood what support was needed and always delivered the care and support that had been agreed.

We were told that people did not have any concerns or complaints about the service. Everyone who spoke to us stated that they knew how to complain and to whom they should complain. The information that the people who used the service received from the agency fully detailed who they should complain and the contact details of the appropriate person or organisation to make their complaint to.

People we spoke with said that they were fully consulted about the care and support package they received and that the service regularly reviewed the care given. They confirmed they had a copy of the care plan and that they could request changes to the care and support package at any time.

What we found about the standards we reviewed and how well Crossroads Care Surrey - East Surrey Branch was meeting them

Outcome 01: People should be treated with respect, involved in discussions about...
their care and treatment and able to influence how the service is run

People's privacy, dignity and independence were respected.
The provider was meeting this outcome area.

**Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

People experienced care, treatment and support that met their needs and protected their rights.
The provider was meeting this outcome area.

**Outcome 07: People should be protected from abuse and staff should respect their human rights**

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.
The provider was meeting this outcome area.

**Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

There were enough qualified, skilled and experienced staff to meet people’s needs.
The provider was meeting this outcome area.

**Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

The provider had a system in place, to identify, assess and manage risk to the health, safety and welfare of the people using the service.
The provider was meeting this outcome area.

**Other information**

Please see previous reports for more information about previous reviews.
What we found for each essential standard of quality and safety we reviewed
The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

More information about each of the outcomes can be found in the Guidance about compliance: Essential standards of quality and safety
Outcome 01: Respecting and involving people who use services

What the outcome says
This is what people who use services should expect.

People who use services:
* Understand the care, treatment and support choices available to them.
* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
* Have their privacy, dignity and independence respected.
* Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement
The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
People who used the service told us that they were very satisfied with their care and support they received from the agency. One person described the service as "fantastic," and another person said that they received a "very good service."
People confirmed that they were involved in deciding what support they needed and how it should be delivered. They said they were able to make changes to the support package by speaking with the manager or one of the senior staff over the telephone and they would visit them at home if necessary to discuss the changes.
People told us that staff were respectful, upheld people's dignity and maintained their privacy. One person stated that they were "confident that staff respected their confidentiality" and "would not discuss what went on in their home."

Other evidence
The manager described the process when people first made contact with the service. She said that she spoke with the carer initially by telephone to make sure the service could meet their needs and also the needs of the person being cared for. The manager, or one of the senior staff, would then make a visit to the carer's home and a full assessment of needs for both the carer and cared for person was completed with them. The assessment included a risk assessment of the environment and also assessments about issues such as moving and handling when necessary.
We looked at five care and support plans they contained detailed assessments of the needs of the carer and the cared for person in each case and references to individual choices and preferences and how they should be met were seen clear and easily read. The care plans had been developed from the assessments and there was evidence that the care plans had been agreed with the carer, who had signed the document accordingly where appropriate the agency would also ask the cared for person to counter sign that they were also in agreement with the plan. The agency has a set of policies and procedures which demonstrates to the staff how independence was to be promoted, with people choosing to help with support and encouragement from staff.

**Our judgement**
People's privacy, dignity and independence were respected.
The provider was meeting this outcome area.
Outcome 04:
Care and welfare of people who use services

What the outcome says
This is what people who use services should expect.

People who use services:
* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement
The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
People spoke very positively about the service. They told us that staff were nearly always on time and that they stayed for the agreed time and did what had been agreed in the care plan.
People said that staff were friendly and that they spoke to them respectfully and always demonstrated a good professional manner. One person told us that staff seemed to be well trained and felt they were competent. We were told by one person that they "Don't know what we'd do without the help we get from them."
People we spoke with said that they were involved in deciding what care and support they needed and even if the needed to care at that time or to delay the care package until a later date.
They also told us about how the manager and the office staff kept in touch with them and had reviews to ensure the service they were receiving was still appropriate to their needs. One person described how they telephoned the office if they wanted to change the support they received and this was always agreed where possible. They appreciated the flexibility this gave them. People told us they had a copy of their care plan and they knew what the care plan contained.
One person stated that they always received letters from the manager to confirm any changes they had agreed or if their was a temporary change to the carer or the care package.

Other evidence
We looked at five care plans in detail that were held at the office. The manager confirmed that a copy of the care plan was kept by the person using the service.
The care plans were well written and would give staff all the information they would need to provide the appropriate care and support to the carer and cared for person. We saw from the documents held in the care plan file, that reviews were held at least annually and more frequently if changes occurred or when requested.

We saw evidence that the person using the service signed the care plans and other documents to indicate they understood and agreed the care and support them or the cared for person would receive.

Risk assessments were seen within the care plan files and these were followed by risk reduction plans. The risk assessments looked at issues such as the environment and equipment, any moving and handling that may be required and other factors. For example, risk assessments were in place in respect of all medicines kept in a person's home. This meant that staff were alerted to all potential hazards and plans were in place to reduce potential risks.

Copies of the care plans were kept at both the office and in the homes of the people receiving care, so staff were able to access information at all relevant times.

**Our judgement**

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this outcome area.
Outcome 07: Safeguarding people who use services from abuse

What the outcome says
This is what people who use services should expect.

People who use services:
* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement
The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings
What people who use the service experienced and told us
All the carers and people who use the service that spoke with us felt that they were safe and at ease with the carers that visit them. People told us that staff were kind, friendly and very professional. They said they appeared to be well trained and competent. One person spoke about how they trusted the staff who visited them to support and care for relative and that they felt "safe and secure in their hands". People who talked to us also stated that the agency had provided information to them to ensure that they could make complaints if they wanted to. The people we spoke with all felt that they knew how and to whom they should contact if they were unhappy with the service or felt unsure or worried. One family member stated that "if they were worried about the agency or the staff they could contact CQC or even their local Social Services team to give them support or help if they needed to complain".

Other evidence
The manager told us that all staff complete training about safeguarding people from abuse when they first start working for the agency as part of their induction training. Update training was provided for all staff on a regular basis and the manager stated that safeguarding was regularly discussed during staff meetings. Some staff provided care and support to children and younger adults and these staff had attended child protection training. The manager told us that policies and procedures were in place about adult and child protection and whistle blowing and that staff received information about these in their
handbooks. The manager told us that all potential new staff were required to complete a robust recruitment process that included completing an enhanced Criminal Records Bureau checks and providing a minimum of two references. We looked at staff files and saw that records of the recruitment process were in place.

**Our judgement**
People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.
The provider was meeting this outcome area.
Outcome 14: Supporting staff

What the outcome says
This is what people who use services should expect.

People who use services:
* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement
The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us
We did not speak to people who use the service about this outcome area on this occasion.

Other evidence
The registered manager stated that all new staff must undertake a full induction courses part of which is office based. The induction course provides a basic outline of the organisation the concept of care. Staff complete training which includes health and safety, safeguarding, infection control and food hygiene.
The registered manager also told us that in addition to the regular training provided to all care staff, the agency will support and provided additional training if it is deemed necessary to improve the persons caring skills.
The manager told us that staff received formal supervision four times a year and one annual appraisal in addition the staff team attend regular meeting to discuss issues and learning.
The manager further stated that more supervision would take place if it was felt it was needed.
We looked at a random sample of six staff files we saw evidence within the files of regular supervision taking place.
The manager stated that all of the mandatory training required under legislation was up to date.

Our judgement
There were enough qualified, skilled and experienced staff to meet people's needs.
The provider was meeting this outcome area.
Outcome 16:
Assessing and monitoring the quality of service provision

What the outcome says
This is what people who use services should expect.

People who use services:
* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

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<td>The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision</td>
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<td><strong>What people who use the service experienced and told us</strong></td>
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<td>We spoke to ten people who use the service and two cared for people who are directly cared for by Crossroads East Surrey. They told us that they had not completed a quality assurance (QA) survey in the previous 12 months prior to the visit by CQC. The people however had been asked to provide verbal feedback about the service they receive by the office.</td>
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<td>Two people who used the service told us that staff were occasionally delayed on arriving, but where possible, office based staff ring to explain this and if the change was pre arranged the office supplied written confirmation of the change.</td>
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<td>Overall the people we spoke to all stated that they experienced a good quality of care from the Crossroads. Two careers stated that they felt comfortable about leaving their relative with the care staff supplied by the agency one said that the &quot;quality of care and support they received from Crossroads was exceptional and the care package that was set up for them and their family member was a &quot;gods send&quot;.</td>
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<td>One person stated that they would have &quot;welcomed an opportunity to complete a formal written quality questionnaire about the service they received from Crossroad. They continued to state that &quot;it would have allowed them the chance to say how excellent they felt the care and support had been&quot;.</td>
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<td><strong>Other evidence</strong></td>
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<td>The registered manager told us the service carried out an annual quality assurance (QA) survey for the period 2010/2011 and had yet to undertake one for 2011/2012. The analysis of the 2010/2011 QA demonstrated that Crossroads East Surrey was providing a good overall quality of care to the people who used the service.</td>
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The manager stated that the role of QA had been incorporated into a regional process and was not actioned locally by Crossroad East Surrey.

People who used the service had stated that they would welcome a local QA questionnaire to allow them to feed back directly to the agency regarding the “excellent care they received from Crossroads East Surrey”.

The manager did state that they actively sought verbal feed back from the people who used the service. The feedback allowed the people who used the service to influence the care and services they received from Crossroads.

The manager said that the checks allowed the service to gauge if the care was appropriate to the needs of the person and that the quality of the care is of a consistent standard.

The verbal feedback was documented and retained by the service, to be used to highlight areas where improvements could be made or where the service was meeting the needs of the people who used the service.

The provider may find it useful to develop a local quality assurance questionnaire, to allow the people who use Crossroads East Surrey to supply appropriate feed back regarding this specific location.

**Our judgement**

The provider had a system in place, to identify, assess and manage risk to the health, safety and welfare of the people using the service.

The provider was meeting this outcome area.
What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called Guidance about compliance: Essential standards of quality and safety.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

**Compliance actions**: These are actions a provider must take so that they achieve compliance with the essential standards. We ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action**: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.
Information for the reader

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