

Review of compliance

<p>Crossroads Care In Mid-Yorkshire Crossroads Care in Mid Yorkshire</p>	
<p>Region:</p>	<p>Yorkshire & Humberside</p>
<p>Location address:</p>	<p>Trafalgar Mills Leeds Road Huddersfield West Yorkshire HD2 1YY</p>
<p>Type of service:</p>	<p>Domiciliary care service</p>
<p>Date of Publication:</p>	<p>November 2011</p>
<p>Overview of the service:</p>	<p>Crossroads Care in Mid Yorkshire is part of a national charitable organisation providing respite care to carers and people with care needs. They work in the community across Kirklees, Wakefield and Leeds with people of any age group, illness or disability. The offices are based on the outskirts of Huddersfield.</p>

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Crossroads Care in Mid Yorkshire was meeting all the essential standards of quality and safety.

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 2 November 2011, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

As part of this planned review, we spoke with three people who are receiving a service. Each of these people are the main carer for a person who receives personal care or support from Crossroads. All the feedback was positive and each person expressed that they were extremely satisfied with the service they received. Some of the comments we received include:

"They are fantastic, very professional. The staff are encouraged to report anything they think is wrong which is really important when they are working with vulnerable people."

"It is a wonderful service. I would always recommend them. They have immaculate time keeping and they always keep me informed."

"The staff are very, very competent."

"The staff seem to really enjoy working with my daughter."

All the people we spoke with said the staff were kind, treated them and their family member who required care with respect, and ensured their privacy and dignity was respected.

People told us there was discussion about how the service would be delivered and staff listened to their views and opinions. People knew how to contact the office if they needed to speak with a manager or make any changes to their service, and they all felt comfortable approaching the management team.

People knew how to make a complaint, or comment about the service. Everybody we spoke with said they were comfortable about doing this and that any concerns or complaints were taken seriously and dealt with promptly. One person said "there are very strict procedures, and Margaret (the manager) won't take any slack".

People we spoke with said staff kept a record of what services had been delivered; they all confirmed the records were an accurate reflection of what had happened.

People said managers came to their home to check they were receiving a good quality service.

What we found about the standards we reviewed and how well Crossroads Care in Mid Yorkshire 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 who use the service have their privacy and dignity respected and their views are taken into account in the way the service is provided and delivered.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential standard.

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

People who use services experience appropriate care, treatment and support that meets their needs.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential standard.

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

People who use the agency are protected from abuse or the risk of abuse through the procedures, and staffs knowledge of these.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential Standard.

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

People's health and welfare needs are met by competent staff.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential Standard.

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 has systems in place to identify, analyse and review risks, incidents and errors. Information about quality and safety is gathered and monitored to identify risks and areas for improvement.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential Standard.

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.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

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

All the people we spoke with said the staff were kind, treated them and their family member who required care with respect and ensured their privacy and dignity was respected. One person told us, "without question they treat my wife with dignity and respect."

People told us there was discussion about how the service would be delivered and their views and opinions were listened to and taken into account. People knew how to contact the office if they needed to speak with a manager or make any changes to their service, and they all felt comfortable approaching the management team.

One person told us that they have been allocated all male workers as this was important for their relative.

Other evidence

We looked at care records for three people and found evidence that where possible people were involved in planning their care, treatment and support. Where this was not possible, the people who cared for them at home were involved in this process. Comprehensive assessments had been completed in each file we looked at. The care coordinator is responsible for completing this assessment, and a care plan and risk

assessments are completed from this information.

Care plans and risk assessments clearly demonstrate that people are encouraged to maintain their independence, and their privacy and dignity is respected. This was confirmed by the staff we spoke with and in the records we looked at.

Care records we looked at had a communication log where a record is kept of all contacts with the family. There was evidence in these records that Crossroads are good at communicating with families, and providing information and choices about the support they require.

As part of this review, we spoke with people who use the service, staff and three external professionals who are involved with the service. They all confirmed that people are given choices about their care, treatment and support and information is provided to people to enable them to make choices.

Our judgement

People who use the service have their privacy and dignity respected and their views are taken into account in the way the service is provided and delivered.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential standard.

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

We spoke with three people whose relative receives a service, and each was extremely complimentary about the service they receive.

Each confirmed that a detailed assessment was carried out by a care coordinator before they received a service, and a detailed care plan, and risk assessments were in place. People said that staff always followed the care plan. One person told us, "There is a copy of the care plan in the house, and the staff get it out every time they come. They also did an assessment of the house."

Another comment from the parent of a person receiving a service was, "I know the care plan is being followed, and if it's not, it can be easily said to staff."

People said they were happy with the staff that came into their home and said they usually had the same staff coming in to deliver care. One person had been receiving care from the same support worker for seven years enabling them to build a good relationship and get to know each other well.

Each person we spoke with said staff knew how to meet the needs of the person they were caring for, and had the necessary skills and competence.

People using the service confirmed that their preferences were usually accommodated. One person told us that care staff support their daughter to attend day services, and staff are always provided on those specific days. She told us that staff seemed to really

enjoy working with her daughter.

Another parent told us that their son was actively involved in choosing support staff. She told us that if her son did not 'connect' with staff, his views and opinions were taken into account by the agency.

Other evidence

We looked at care records for three people and found that detailed, comprehensive assessments had been completed for each person. The assessments considered the persons holistic needs and potential risk and hazards. Care coordinators complete the assessments with input from the individual, their carer and if appropriate other people involved in the persons care and treatment. This information is then used to develop the care plan and risk management plan.

External professionals are consulted where necessary, and there was evidence of this in the records. A member of staff told us that she had received one to one training with a district nurse before she started working with someone with diabetes. She said this had increased her confidence and knowledge.

We spoke with two care staff as part of this review. they told us they always read the persons care plan before going to their home, and discuss what is required of them with the care coordinator. The care coordinator and staff told us that if a person has more complex needs and requires more personal care, the care staff have the opportunity to meet the person first and work alongside an experienced member of staff. The care plans we sampled contained excellent detail about how the persons needs should be met. They included detailed information to enable staff to maintain peoples welfare and promote their wellbeing by taking account of all of their needs. Staff said if they thought the care plan needed adjusting to meet peoples changing needs, they would discuss this with their manager.

There was evidence in the records that regular reviews take place. There was evidence that continuity of care is achieved through effective communication systems between staff, managers, people receiving a service and other professionals involved in the persons care. This was confirmed through discussion with the manager, staff and people receiving a service.

The manager, staff and people receiving a service told us that control measures are in place for identified risks and foreseeable emergencies. Comprehensive records, including clear protocols about how to deal with an emergency are kept in each persons home. In addition to information about the person, there is also detailed information about the environment that staff are going in to. This includes, for example: location of utilities, telephone, water stopcock, heating controls, emergency exits and fuse box. A 24 hour 'on-call' system is in place and is covered by experienced, senior staff. Staff we spoke to were clear about what to do in an emergency and who they needed to contact.

Our judgement

People who use services experience appropriate care, treatment and support that meets their needs.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential

standard.

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

We spoke with three people who use the service and they told us that they have been provided with information and contact numbers if they have any concerns about the care they receive.

One parent of a person receiving care told us, "They are fantastic, very professional. The staff are encouraged to report anything they think is wrong which is really important when they are working with vulnerable people."

Other evidence

The manager told us that all staff receive training in safeguarding adults and children, the Mental Capacity Act and Deprivation of Liberty Safeguards. Staff training records and the operations manager confirmed this.

All staff we spoke with as part of this review were familiar with safeguarding procedures and could describe clearly what action they would take in the event of a safeguarding matter coming to their attention. They were clear about their roles and responsibilities in this area. Staff said they had never had any concerns about the service, but would always report any concerns they may have.

Safeguarding matters that have arisen have been dealt with in line with multi-agency procedures, appropriate action has been taken and required records have been kept.

The Service User Guide gives information to people receiving a service about

safeguarding, and who to report concerns to. People we spoke to knew who to contact if they had any concerns about the care they receive.

The manager told us that there are no people receiving a service who require restraint and the service has not made any applications under the Deprivation of Liberty Act.

Our judgement

People who use the agency are protected from abuse or the risk of abuse through the procedures, and staffs knowledge of these.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential Standard.

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 spoke to three people whose relatives receive a service and they all told us they were extremely happy with the service they receive. One person told us he was able to go out and feel confident his wife would be looked after properly whilst he was gone. Some of the comments we received include.

"It is a wonderful service. I would always recommend them. They have immaculate time keeping and they always keep me informed."

"The staff are very, very competent."

All the people we spoke with said they were confident that staff had the skills to do what was expected of them.

Other evidence

We spoke with the registered manager, operations manager and trainer, co-ordinator and two support workers during our visit. It was confirmed by the people we spoke with that all mandatory training is completed by staff in addition to a range of other training relevant to the roles staff have. The 'skills for care common induction standards' are provided by an external agency, BACS Training Ltd. All staff complete this and also complete the in-house induction. Staff training records confirmed this.

Support workers we spoke with confirmed they had attended this training. One member of staff described the training as "fantastic". Staff told us how beneficial it had been and how much they had learnt. Training specific to peoples individual needs is also

arranged through external resources. One member of staff described how they had been taught to monitor blood sugar levels before they started supporting an individual with diabetes. A district nurse had provided this training.

There was evidence that staff are encouraged and supported to acquire further skills and qualifications that are relevant to the work they do. For example, staff told us they were encouraged to complete a National Vocational Qualification (NVQ) in care. One person told us they had completed NVQ level 2 and intended to start NVQ level 3. The co-coordinator told us she had almost completed NVQ level 4.

A staff training matrix is kept and provides clear records of what training has been completed, needs to be completed or is due to be updated. We looked at a sample of staff training records and found evidence to demonstrate that a range of relevant training has been completed and is up to date. For example: moving and handling, safeguarding, health and safety, medication administration, deaf awareness, autism awareness, first aid. We looked at records for three staff, and each contained certificates evidencing training they had completed.

The organisation has an in house training officer. Staff we spoke to gave excellent feedback about the quality of the training and one person told us, "He makes it fun so it is easy to take in."

We looked at records for three staff and saw evidence of regular supervision. This included work-based supervision. A member of staff told us that a manager periodically observes their care practice and competence in the workplace. These spot checks are usually unannounced, and a report is completed with the findings and any areas for improvement. Staff also have one to one meetings with their manager on a regular basis where a personal development plan for learning needs is completed.

Risks to staff from the premises, equipment or work they do are assessed and the preventative and protective measures that need to be followed are implemented. For example, all staff are provided with a pack of equipment before they start working with individuals. This includes: staff handbook, disposable gloves, aprons, hand gel, personal safety alarm and circuit breaker.

All the staff we spoke to told us the manager and management team at the office were approachable and supportive. Staff said they could talk to any of the managers at the office for support and guidance.

Our judgement

People's health and welfare needs are met by competent staff.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential Standard.

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

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

All the people we spoke to who use the service told us they were happy with the service they receive.

We spoke with three people who use the service and they all said they knew who to contact if they were not happy with the service. Each of them said they would be comfortable in raising any concerns, and were confident they would be dealt with appropriately.

Other evidence

The manager told us that there are systems in place for monitoring quality of the service. An annual quality assurance survey is sent to every person using the service and their carer. These are returned directly to the committee where they are evaluated and a report is written. The manager is then responsible for addressing any identified actions.

The organisation has a clear management structure, and staff we spoke to were clear about roles and responsibilities. There are systems in place to monitor accidents, incidents and near misses. We looked at accident and incident records, and there was evidence that appropriate action is taken to develop solutions and reduce risks in the future. Staff we spoke to were clear about their responsibilities to report and record accidents, incidents, near misses.

The manager told us that where concerns are raised by people using the service, they

are always recorded in the complaints log. We looked at the complaints records and saw evidence that complaints or concerns are dealt with in a timely manner and appropriate actions are taken to improve the service.

In staff records we saw evidence of work-based supervision and a report with the findings and any areas for improvement. These included feedback to staff about how they demonstrate respect and understanding, their interaction with the service user and how well the care plan was implemented. Staff told us they found this useful in evaluating and improving their care practice.

Staff told us that each time they go to a persons home, they record what care was delivered and the time of their visit in the record kept in the persons home. These records are regularly brought back to the office where the managers check and file them.

Our judgement

The provider has systems in place to identify, analyse and review risks, incidents and errors. Information about quality and safety is gathered and monitored to identify risks and areas for improvement.

Overall, we found that Crossroads Care in Mid Yorkshire was meeting this essential Standard.

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.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, 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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