

# Crossroads Caring Scotland - Moray/Nairn Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
1 November 2024

**Service provided by:**  
Crossroads Caring Scotland

**Service provider number:**  
SP2007008963

**Service no:**  
CS2014332293

## About the service

Crossroads Moray and Nairn provide social respite for people living at home. The aims and objectives of the service state: Crossroads Caring Scotland's mission is to provide services within the community, which will improve the lives of vulnerable people of all ages, who are facing ill health, disability or long-term physical or mental health conditions or who are disadvantaged due to their caring role, allowing them to feel valued and live as independently as possible.

## About the inspection

This was a short notice announced which took place on 9 and 18 October 2024. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Spoke with and received questionnaires from seven people using the service and three of their family
- Spoke with four staff and management
- Observed practice and daily life and reviewed documentation.

## Key messages

- People enjoyed being able to participate in activities which interested them
- Support was person-led and flexible
- People had good relationships with their carers
- Staff felt there was more stability within the service.

## From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	4 - Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

## How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People experienced respectful, compassionate support. Staff knew people well and we observed good conversations. People's interests were at the centre of the care and support, with people being asked what they preferred to do that day, for example attending lunch clubs, going for a drive, or being supported at home. One person told us, 'The carer that I have is such a caring and joyful person I look forward to her weekly visits.' This meant people were able to choose how their support was provided reflecting their choices and wishes.

## How good is our leadership?

4 - Good

We evaluated this key question as good. There were a number of important strengths which taken together clearly outweighed areas for improvement .

Improvement in oversight of the service was evident and the provider should continue to develop the service improvement plan reflecting the progress of the service (**see area for improvement 1**).

Twice a year a service audit was undertaken by senior management covering all aspects of the service, for example medication and staff recruitment. This meant people benefited from a quality assurance process which highlighted any improvements needed, for example ensuring risk assessments were relevant.

There was a care plan tracker with reviews being planned and undertaken. This meant people's care and support plans were accurate and up-to-date.

Accidents and incidents were reported on a digital system with a clear policy and process for staff to follow should one occur to either staff or people using the service.

Team meetings were held regularly and well attended by staff. Minutes from the meetings evidenced discussions about service delivery and how this could be improved to meet the needs of people or their family carers. It would be beneficial to see these discussions reflected in the service improvement plan so management can track any changes and how they supported people.

Staff told us they felt there was more stability in the service with improved communication with the management team. Supervision was planned throughout the year and staff were satisfied with their supervision. Staff also said they were able to contact the leadership team at any time should they need support.

Each staff member had a training record which showed the training and when it was due, for example, dementia and adult protection training. On the whole, the training was up-to-date however, we identified some training had expired which meant staff may not have up-to-date current knowledge and best practice guidance. We discussed this with the provider, and we were assured this training would be a priority. As a result, people should have confidence that staff supporting them will be trained and skilled.

## Areas for improvement

1. To support continuous improvement, the provider should ensure the service improvement plan reflects the service delivery and identifies improvements detailing actions and outcomes. This should include, but not limited to, receiving feedback from people who use the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

### How good is our staff team?

**5 - Very Good**

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff were happy within their roles. Staff felt well trained for their role and although some training had expired this did not currently impact on people's support. Staff felt they worked well together and were able to get peer support from each other should they need it. They knew how to contact managers if there was a situation that needed to be escalated. This meant people were experiencing support which was consistent and stable.

Safer recruitment practices were in place with a comprehensive induction process for new staff, this included learning about the provider's ethos and expectations of the Scottish Social Service Council (SSSC). This meant people were assured that they were supported by people who followed their professional and organisational codes.

### How well is our care and support planned?

**5 - Very Good**

We evaluated this key question as very good. There were a number of important strengths which taken together clearly outweighed areas for improvement.

Care planning was written jointly with people and, if appropriate, their representatives. The plans were reflective of people's individual needs and interests. People knew when their support took place. Should the staff be running late, they contacted the person to let them know. This meant people were reassured that their support would take place.

We discussed with the provider about the flexibility of the times of the support, for example if someone wished to go out in the evening. The provider assured us this was possible and would make sure people were aware of this opportunity.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

The provider must ensure that personal plans are reviewed with individuals and or their families, whenever there is a significant change in people's circumstances and at least once in each six month period.

This is in order to comply with Regulation 2011/210 Regulation 5(2)(b), Personal Plans of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

**This requirement was made on 19 July 2019.**

#### Action taken on previous requirement

Since the previous inspection, the service had ceased providing personal care and was providing social respite day support for people. The care plans which were reviewed were reflective of the support delivered. This included days and times of support. There was appropriate information to enable the care staff to deliver the support and were reflective of the individual's interests.

**Met - within timescales**

#### Requirement 2

In order to ensure that the organisation's quality assurance processes support improvements and developments, the provider must, by 19 October 2019, evaluate their processes and take action when improvements and developments are identified.

This is in order to comply with Regulation 2011/210 3, Principles, of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This requirement was made on 19 July 2019.**

**Action taken on previous requirement**

There had been improvements in the provider's quality assurance with evidence of service audits and trackers. These demonstrated the service's improved oversight of service delivery and areas for improvement.

**Met - within timescales**

**Complaints**

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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