

Crossroads Lewis Ltd Support Service

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Type of inspection:
Unannounced

Completed on:
4 November 2025

Service provided by:
Crossroads Lewis Ltd

Service provider number:
SP2004006985

Service no:
CS2004080227

About the service

Crossroads Lewis Ltd provides a care at home service across the Isle of Lewis. The office for this service is based in the town of Stornoway. The service aims to provide care that will:

- Allow family carers to have respite from caring duties.
- Support individuals with palliative care needs.
- Provides support for people who live alone and who are affected by age ,ill health or disability .

The core service provides respite and support on the basis of regular support visits to allow family carers a break from their caring role. Additional services are provided through planned short breaks, or in exceptional circumstances by providing some short-term overnight support.

Crossroads Lewis Ltd also provides care to individuals where the local authority has purchased care which they themselves do not have the resources to provide, but which is urgently needed.

At the time of the inspection there were 92 service users receiving support.

About the inspection

This was an unannounced inspection which took place between 28 and 31 October 2025. 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 six people using the service and six of their family representatives;
- spoke with 13 staff and management;
- observed practice and daily life;
- reviewed documents;
- reviewed feedback information submitted in surveys by supported people, relatives, staff and other stakeholders including health and social care professionals.

Key messages

This service is highly valued by people who use it, and their families.

People received good quality care and support, from staff they knew well.

People were involved in planning their support.

Staff were matched with people, taking account of likes and interests, so that they got the most out of their support.

The service benefitted from an experienced staff team.

The service needed to improve their quality assurance processes.

The management team were knowledgeable about the aspects of the service which required improvement.

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 staff team?	4 - Good
How well is our care and support planned?	4 - 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.

The service was highly valued by those using it. People and their relatives praised the management and staff teams, and how their support enabled them to access and enjoy a range of activities, outings and social opportunities. Relatives spoke of the benefit of having a break from their caring role, and a number described this as being lifeline. Support was flexible to people's needs and circumstances. Comments included:

"This is an excellent service which greatly benefits my health and wellbeing, I look forward to the weekly visits".

"The service is of a very high quality and (my relative) thoroughly benefits through service provision".

"The Crossroads Service and all the team are just wonderful. They are empathetic, patient and are extremely dedicated to providing an excellent level of care. As a family we feel incredibly lucky to have their support".

"I enjoy my weekly visits from my carer, and we spend the time chatting".

Feedback was positive about the quality of care and support people received. Personal care was being supported to a high standard. Staff were seen to be flexible in carrying out tasks that supported people's wellbeing, or supported carers. Support had been provided to enable people to travel to mainland hospitals, thus enabling access to essential health care. Staff were vigilant and observant to changes in people's health, and to ensuring that any concerns were appropriately and timeously escalated. This helped ensure that the right support or treatment was put in place. Where medication was administered we observed that the necessary administration records were used to effectively guide staff with this task .

People benefitted from a service that had good lines of communication. The service was responsive to requests from supported people, or their relative. People were kept informed and up to date about any changes to their support. Feedback evidenced that the management team had well established professional relationships with partner organisations, and worked co-operatively with colleagues, using their resources to benefit people who were referred to their service.

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people, and clearly outweighed areas for improvement .

We were confident that people were treated with respect by a compassionate and caring staff team. Staff were described as being reliable. People told us that they felt comfortable with their regular support workers, and that trusting and positive relationships had developed. One person commented about "a fabulous service, my Crossroads carer is an important figure in my life, indeed I would consider her a friend now". Service management used their knowledge of people's needs and preferences, to identify the most

appropriate staff member to provide their support. This was seen as key to people getting the most out of the allocated support.

The Crossroads team benefits from good staff retention, and from the wealth of relevant experience contributed by individual staff. There is an apparent supportive and compassionate ethos in the service delivery, evidenced by the staff and management team. Decisions about accepting new clients, were made taking cognisance of the person's needs, and service capacity.

Staff told us that they felt very supported in their role. They were able to access managerial advice and guidance at all times when they were working, including, where necessary, out of office hours. Staff described good information sharing, thus ensuring that they were well informed about people's needs, and support requirements.

Recently group supervisions had been trialled and these had been received positively by participating staff, having found it beneficial to participate in sessions within small teams. Although some one to one supervisions had taken place, generally these were not completed with the expected regularity. This was due to the management team not having the time and capacity to undertake all aspects of the registered manager role, including supervision, which they highlighted as a specific example. This is an area for the provider to review.

Safer recruitment guidance had been followed, and staff were registered with the relevant professional bodies. However, we highlighted the necessity to streamline the recording and auditing of recruitment checks, to strengthen the process.
(See previous area of improvement).

New staff undertook some core training, for example, moving and handling and first aid, and a number of online courses, to ensure they were trained, competent and skilled to support people. Induction also included shadowing opportunities, which facilitated introductions to people who were supported by the service. All staff were expected to complete, and periodically refresh, a suite of mandatory training courses. We observed that these had not been completed by all staff and have therefore made an area for improvement about this.
(See area for improvement 1)

A previous area for improvement related to the observation of staff practice had not been met. This area of improvement was specifically in relation to checking compliance with infection control guidance, and the use of personal protection equipment. Taking a wider view of staff roles and responsibilities, this area of improvement has been amended to encourage practice observations, and competency assessments, across the range of areas relevant to staff practice. (See area for improvement 2).

There has been an acknowledged issue identified by the service in, at times, having the necessary staff resources available to consistently provide replacement cover. Commonly this can occur when short notice staff absences occur. The service have collated data to evaluate of the extent of this problem. While they continue to be proactive in arranging cover when this is possible, it is evident that there is need for a more holistic approach to address the ongoing issue. (See area of improvement 3).

Areas for improvement

1.

To ensure people have confidence in the organisation providing their care and support, the provider should support staff to complete mandatory training, using a range of approaches to suit different learning styles for staff, and thereby support their compliance and continuous professional development.

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

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes'.
(HSCS 3.14).

2. In order to support positive outcomes for people who use this service, the service should evidence staff practice observations, and in key areas of practice, competency based assessments, to support continuous learning and professional and practice development.

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

'I use a service and organisation that are well led and managed'. (HSCS 4.23).

3. So that people will experience high quality and consistent support, the provider should use the available data to inform a strategy that will consistently enable their deployment of staff, when required, to cover holiday periods or staff absence.

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

'My care and support is consistent and stable because people work well together' .
(HSCS 3.19)

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

It was evident that people were fully involved in decisions about their support, and that their views were central to care planning. There was an evident flexible and person centred approach to support planning, and a responsive approach to changing needs .

Support plans were of a good standard, generally offered an appropriate level of detail, and were proportionate to the service being provided. In some instances there was some scope to add further information, building on the knowledge of family carers and staff to enhance plans. Support plans for people using the short breaks service were very informative, as appropriate to the increased responsibilities these breaks entail. Good communication practice was demonstrated prior to these breaks, by meeting with the specific team to foster awareness of the support plan. Risk assessments were being completed, but further work remains outstanding to add value to how these provide staff with clear practice guidance. While some care plan audits have been completed, a robust and regular system would further support consistency and development. (See previous area for improvement) .

There has been an increased focus on reviews, as attending to these timeously has been an ongoing challenge. To expedite these, there had been an approach of alternately completing these in person or by telephone. While some good progress has been made, similarly to other areas already highlighted, resource capacity in the management team has been identified as a barrier to always completing this task, including in a way that retains a person centred approach.

We advised that services should be clear about legal powers, for example, power of attorney and guardianship, as are relevant to the supported person. We have shared the current guidance produced by the Mental Welfare Commission- 'Working with the Adults with Incapacity Act - for people working in adult care settings' which would help to ensure the right people are consulted about the right things.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The completion of quality assurance systems should be improved on to help identify any areas of the service that could be improved on. This should include, but not be limited to audits of care plans, completion of care reviews and feedback from people.

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

'I use a service and organisation that are well led and managed'. (HSCS 4.23).

This area for improvement was made on 7 March 2023.

Action taken since then

The service makes some use of quality assurance tools, including feedback from people, and care reviews. However, they have not yet established a system of regular audits that supports service improvement and development.

This area of improvement will be continued.

Previous area for improvement 2

In order to ensure positive outcomes for people who use this service, the service should be able to evidence robust quality assurance systems to monitor staff compliance with Personal Protective Equipment (PPE).

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

'I use a service and organisation that are well led and managed'. (HSCS 4.23).

This area for improvement was made on 9 February 2021.

Action taken since then

The service had not undertaken any staff practice monitoring citing a busy service and lack of availability of management to undertake the task. To reflect the wider context of oversight of staff practice monitoring, beyond compliance with PPE , this area will be continued but in an amended form.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at 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 staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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