

Rotherham Crossroads-Caring For Carers

Rotherham Crossroads - Caring for Carers t/a Crossroads Care Rotherham

Inspection report

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Ratings

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

Summary of findings

Overall summary

The inspection took place on the 3rd and 4th January 2019 and was announced. The provider was given short notice of the visit to the office. This was because we needed to be sure key staff would be available at the office.

At our last inspection we rated the service outstanding. At this inspection we found the evidence continued to support the rating of outstanding and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

There was a registered manager who managed the day to day operations of the service. 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.

Without exception people told us they received a fantastic service from Rotherham Crossroads. Staff we spoke with gave the provider compliments on how they cared for and supported people.

People continued to be protected from abuse because staff knew what action to take if they suspected someone was being abused, mistreated or neglected.

There were sufficient numbers of staff available to keep people safe and to meet their needs. The number of staff supporting people and times of the day people were supported had been planned as part of an individual package of care.

The provider and registered manager helped ensure people did not face discrimination or harassment. People's individual equality and diversity were respected because staff received training on the subject and got to know people well.

The registered manager and provider had worked hard to learn from incidents, near misses and mistakes. Investigations were carried out when required and systems were in place to help identify any trends or patterns, which could drive change, when needed.

Without exception everyone we spoke with told us the service was effectively delivering consistent high quality care and support.

Rotherham Crossroads is an employer that staff told us they want to work for and totally committed to investing in individual employees to ensure its workforce are successful and happy.

The service continued to provide high quality effective care and support. Staff were competent in their roles, undertook good quality training and had a very good knowledge of the people they supported. This meant they could effectively meet people's needs in a person-centred way.

Staff had received training and understood their responsibility in regard to the Mental Capacity Act 2005 (MCA). People's capacity to make decisions had been assessed when planning care. Staff confirmed they asked for people's consent before providing care and they respected and promoted each person's choices.

Staff went that extra mile for people they supported. For example, we looked at how a person with a sensory impairment and health related problems was supported and we judged the person-centred care they received to be exceptional.

People were able to share their experiences, concerns and complaints and the provider acted upon information shared. The provider analysed complaint each year to learn and future improve the lives of the people they supported.

Support plans were comprehensive, well structured, and person centred. The care packages were reviewed at regular intervals or following a change of need.

Rotherham Crossroads had clear aims and objectives which were shared with people, their relatives and staff, which were embedded into our culture of the service.

Rotherham Crossroads had embraced and developed relationships with local ethnic groups to develop services for people living in the Rotherham area.

Quality audits were used to identify issues and development plans were in place to drive improvements.

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 remains outstanding.	Outstanding ☆
Is the service effective? The service has improved to outstanding.	Outstanding ☆
Is the service caring? The service remains outstanding.	Outstanding ☆
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains outstanding.	Outstanding ☆

Rotherham Crossroads - Caring for Carers t/a Crossroads Care Rotherham

Detailed findings

Background to this inspection

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

This comprehensive inspection took place on the 3 and 4 January 2019 and was announced. The provider was given short notice of the visit. This was because we needed to make sure staff were available in the office. The inspection team consisted of an adult social care inspector and an assistant inspector. We spoke with 11 people who used the service and three relatives on the telephone, to gather their views of the service. At the time of our inspection the service supported 300 people with various care needs, from social support to support with personal care and independence.

Prior to the inspection we gathered information from a number of sources. We looked at the provider information return (PIR) which helped us to prepare for the inspection. This is a form that asks the provider to give information about the service and what improvements they plan to make. We also looked at information from statutory notifications sent to us by the registered manager.

During the inspection we spoke to the registered manager and four care support workers. We contacted a variety of professionals who commissioned and monitored the service to gain their views and to understand how the provider worked in partnership with other agencies.

We looked at a range of records about people's care. These included six care records, staff recruitment, supervision and training records, compliments and complaints, quality assurance audits and accident and incident analysis.

Is the service safe?

Our findings

At the last inspection this key question was rated as outstanding. At this inspection we found the service continued to provide outstanding safe care.

Without exception people told us they received a fantastic service from Rotherham Crossroads. Staff we spoke with gave the provider compliments on how they cared for and supported people. Most people had used the service for many years. A relative told us, "No concerns at all, the care is excellent." A person who used the service said, "It's marvellous, first class because they (staff) always help you out. They are so willing and caring." Another person told us, "I'm highly satisfied with them. They are very nice people."

We received extremely positive feedback from other agencies who worked in partnership with Rotherham Crossroads. For example, one professional said, "We have commissioned [Rotherham] Crossroads for six years now to deliver a flexible respite service for the carers of referred patients. As part of our internal quality assurance checks, we request feedback from patients with regard to the level of service they received from all the commissioned voluntary sector providers we referred them to and [Rotherham] Crossroads have, on the whole, always received high scores and positive comments."

People continued to be protected from abuse because staff knew what action to take if they suspected someone was being abused, mistreated or neglected. Staff spoke confidently about how they would protect people by raising concerns immediately with the management team. Staff said they were confident the registered manager and provider would take prompt action to safeguard people. Staff had a good understanding of whistleblowing and felt they would be protected from being identified should they raise anything. Everyone we asked felt safe because of the care and support they received from Rotherham Crossroads. One person said, "I do feel safe, they look after me marvellously." Another person said, "Yes, definitely feel safe."

We saw there were policies and procedures in place to manage risks associated with people's care. Staff told us it was important to balance safety against risk as this ensured people had choice and control of their lives. For example, Rotherham Crossroads had obtained tracking equipment which would benefit people living with dementia. This equipment helped families to track their relative by knowing their location. These trackers had been supplied to people living with dementia and enabled relatives and police to find people quickly should they leave their property or go out in the community, ensuring their safety and wellbeing.

The provider had embraced the 'Herbert Protocol' which is a national scheme being used by the police in partnership with other agencies which encourage carers to compile useful information which could be used in the event of a vulnerable person going missing. There is often a risk that people living with dementia can at some point start to wander and some people can get lost or go missing. This can lead to feelings of confusion and fear for individuals and their family. This initiative helps provide reassurance and helps to keep people safe.

Risk assessments were in place to identify any risks to people or staff. These assessments had been

completed thoroughly to ensure people received safe care whilst maintaining their choices and preferences. People's behaviours were understood and managed safely and appropriately. Staff undertook training in the management of behaviours. To promote fire safety, the provider carried out a review visit as part of the risk assessment which looked at home safety. Where they identified fire risks, the provider arranged, with the client's consent, for South Yorkshire Fire and Rescue to undertake a visit where they would supply fire safety equipment free of charge to the client.

There were sufficient numbers of staff available to keep people safe and to meet their needs. The number of staff supporting people and times of the day people were supported had been planned as part of an individual package of care. Some people had staff supporting them for a number of hours where others only required short times of support, dependent on their individual needs. People told us they were provided with staff who they knew well. One person said, "They have always turned up." Another relative said, "Crossroads are my lifeline, (my relative) looks forward to carers visiting every week." Another said, "Crossroads have fulfilled my relatives dream to stay living in their own home. They look after (my relative) admirably, (relative) is happy with the care they receive and is always chirpy and smiley."

The provider and registered manager helped ensure people did not face discrimination or harassment. People's individual equality and diversity were respected because staff received training on the subject and got to know people well.

People continued to receive their medicines safely. People's support plans clearly described the level of support required and how this support should be delivered. Staff who administered medicines had received up to date training, and competency checks were completed to help ensure their skills and knowledge remained sufficient and up to date. Medicines Administration Records (MAR's) were kept in people's own homes and these were checked regularly by staff and management to ensure they were accurate.

People were supported to store their medicines safely. The provider had purchased a number of medication safes which could be used where there had been an assessed risk to people who may take their medicines incorrectly due to conditions like dementia. This has helped to reduce risks and given peace of mind to relatives and carers.

People were able to manage their own medicines if they chose to do so. When people self-administered medicines, staff checked regularly through observation and discussion to ensure the person remained safe and happy with the arrangements.

We saw care records reflected the level of support each person needed, and it was clearly recorded if the person could manage their medicines themselves. One person said, "They (staff) make sure that I am taking the medication on time and correct. They pointed out an error for me last week." Another person told us they take their own medicines and, "Staff regularly check."

The registered manager and provider had worked hard to learn from incidents, near misses and mistakes. Investigations were carried out when required and systems were in place to help identify any trends or patterns, which could drive change, when needed.

Staff were being safely and robustly recruited. This ensured only suitable people with the right skills were employed by the service. All appropriate checks had been undertaken before staff began working for the service. These included two written references, (one being from their previous employer), and a satisfactory Disclosure and Barring Service (DBS) check. The Disclosure and Barring Service carry out a criminal record and barring checks on individuals who intend to

work with children and vulnerable adults, to help employers make safer recruitment decisions.

Infection prevention control measures were in place. Staff told us that they had an ample supply to personal protective equipment (PPE) such as gloves.

Is the service effective?

Our findings

At the last inspection in 2016 we rated this key question as good. At this inspection it had improved to outstanding.

Without exception everyone we spoke with told us the service was effectively delivering consistent care and support.

A large part of Rotherham Crossroads vision is to recognise the contribution of the unpaid carer and to support them to have access to quality support and services they need. They work with the Carers Trust which a registered charity supporting carers locally. They provide carers with activity groups that they are able to access monthly. These groups help to support them to meet and connect with peers and participate in activities which are themed to improve health and wellbeing and reduce social isolation. Rotherham Crossroads have been successful in gaining funding from The Big Lottery Carers Trust and the Mayors Charity to expand the Therapies for Carers service which they also offer. This service has been developed to support carers who are experiencing stress or anxiety due to caring for a loved one. As well as therapy sessions such as massage and other complimentary therapies like Reiki, carers are able to access a variety of free activities which are scheduled throughout the year such as guided walks, exercise sessions and craft sessions. One relative gave feedback that the quality of care and friendly nature of the service had been excellent and they were extremely grateful for everything Crossroads had done for them. Another relative said, "Crossroads are the only ones that check up on me to make sure that I am alright."

Rotherham Crossroads provided carers with a platform to encourage their opinions. They have a regular steering group which consisted of quarterly meeting which are held for carers, to support them to contribute, influence, develop and shape future services for carers. They also provide the carers with someone to support their loved one to facilitate the carer to attend the meetings. This gives the carer a voice and help them get the most out of the extra services that are offered by the provider.

The service worked in partnership with other organisations such as Age UK Rotherham and the Alzheimer's Society to provide 'The Carer Resilience Service.' The service was funded by Rotherham Clinical Commissioning Group [CCG] and was for carers of people living with dementia, providing information, advice and practical support with the aim to build carers' resilience, prevent crisis and work with the carer and other agencies to enable the person with dementia to live at home for as long as possible.

Before people received a service, a comprehensive assessment of their needs was carried out with the person, family or others who knew them well. Evidence based tools were used to identify and assess any risks related to falls, risk of pressure sores and nutrition/hydration. From this, a personalised care plan was developed tailored to each person's individual needs, which was reviewed and updated as they changed.

Rotherham Crossroads is an employer of choice and total committed to investing in employees in order to ensure its workforce are successful and happy. The provider is working with Rotherham Metropolitan Borough Council to pilot their Health and Wellbeing at Work Place Award scheme. They have willingly put

themselves forward to demonstrate their continued commitment to the health and well-being of their workforce. By wanting to show that their work place is supporting and productivity can flourish. Rotherham Crossroads have demonstrated they have many strengths and areas of good practice, amongst them is the excellent working relationship between the staff and the management.

It was clear that staff were extremely happy in their work from the positive feedback they gave. A number of staff told us they had recommended that their friends or relatives apply for jobs with the company as they believed they were, "Really good to work for. I had never done this job before and they were so welcoming." "Good company, they have empathy with workers and clients."

Since the last inspection the provider has demonstrated exceptional commitment to caring for their staff. They have gained a silver level award from The Workplace Wellbeing Charter for the work they had done and continue to do through their commitment to the health and wellbeing of their workforce.

New members of staff completed a thorough induction programme, which included being taken through key policies, procedures and training to develop their knowledge and skills. Staff who were new to the health and social care sector completed the Care Certificate. The Care Certificate is a national training programme introduced to support all staff new to care to obtain a basic level of understanding of good care standards. New staff shadowed experienced members of the team until they and the person they were supporting felt confident and familiar.

The service continued to provide high quality effective care and support. Staff were competent in their roles, undertook good quality training and had a very good knowledge of the people they supported. This meant they could effectively meet people's needs. Following induction all staff undertook regular training relevant to their role and the people they supported.

Some of the training was deemed mandatory by the provider, such as fire safety, health and safety and safeguarding. Staff also undertook training specific to the needs of people they supported. For example, a staff member who was supporting a person said, "All staff in the person's care team needed and had completed training in dementia." Another staff member said, "We do loads of training. The training is good, it equips me on every aspect of the role." Another member of staff said, "They (the provider) keep us up to date and if we are due to refresh the training they let us know. They are very good with making sure training is up to date. The training is very thorough."

Staff told us they passed on their knowledge to assist carers with their loved ones. Staff told us they had shared simple information they had learnt, which could be beneficial to people. Staff said, "At a home visit I had recommended trying a dark coloured plate for the client as they were struggling to eat. Since eating on the dark plate, the client has no difficulty eating and finishes meals every time." The feedback from people suggested they felt safe and reassured that staff would know what to do and how to help them. One person said, "They are very well trained. I think they do training before they get the job."

Staff said they felt well supported by their colleagues and management. Team meetings and formal supervision sessions were held to allow staff time to reflect on practice and consider their own skills and development. All staff said even though they often worked alone, the communication and support systems meant they were always able to contact someone for support or guidance.

We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA). The MCA provides a legal framework for making decisions on behalf of people who lack 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 the mental capacity to make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

Staff had received training and understood their responsibility regarding the MCA. People's capacity to make decisions had been assessed when planning care. Staff confirmed they asked for people's consent before providing care and they respected and promoted each person's choices. Where people had limited capacity spouses and relatives were available to inform any decisions that may have been needed.

The service was able to respond to people's changing needs. For example, where people had hospital appointments the service altered the time of the visit to ensure the support was provided prior to people leaving home for the appointment. The service responded to emergencies such as if a person had an accident the service would identify and send a care support worker to assist at short notice.

People told us they were very well supported where staff provided the arrangements with their nutrition and hydration This ranged from support from staff to reheat meals in the microwave, to making a sandwich, or tea and toast. Some people told us they could manage meal preparation themselves. One person said, "We find staff extremely useful especially when preparing meals." Another said, ""They do prepare my breakfast. They always make me a cup of tea, whatever I want one."

The provider signposted people to services such as The British Red Cross befriending service and the Alzheimer's society. Staff worked in partnership with support services such as the falls team, social worker and speech and language therapists.

Is the service caring?

Our findings

At the last inspection we rated this key question as rated outstanding. At this inspection the service had continued to provide outstanding care.

Staff went that extra mile for people they supported. For example, support was provided to a person with a sensory impairment and health related problems. The person lost their wallet and was very distressed when they were unable to find it. A member of staff took the time to calm the person and then retraced all their steps, doing everything they could, to retrieve the wallet. Eventually, the staff member managed to find the wallet which had been left on the seat of a taxi. They got the wallet returned to the person with all its contents intact. This is a simple example of staff going above and beyond. The registered manager told us the loss of the wallet was significant to the person but because staff were kind and caring they had alleviated the persons distress. The registered manager felt it was important to express gratitude to the staff and shared a letter they wrote to them expressing their appreciation, and how much they were valued.

The service had a culture which recognised equality and diversity amongst the people who used the service and the staff team. Staff recognised, understood and respected people's differences and diverse needs. Staff supported people to express their views, discussed their wishes and beliefs and incorporated them into how they were supported. For example, one person who was living alone with dementia was referred to Rotherham Crossroads for support. They were unable to speak or understand English. The provider could match the person with a support worker who could fluently speak in their language and had a good knowledge of their culture. They were able to effectively communicate with the family, build a trusting relationship with them. This supported the person to access community activities and helped them translate spoken and written information. As a result, the family's anxieties had been alleviated and they had peace of mind knowing their loved one was cared for in a culturally sensitive way.

All staff attended equality and diversity training, and this training was regularly updated. The provider and registered manager recognised the benefits of having a diverse community of staff who valued one another and the contributions they could make to the service. The gender and age of staff employed at the service complimented the needs and preferences of people they supported. This was evident in the recruitment and mix of staff employed and in the organisation of staff and how they supported people.

The provider's values included, 'care, compassion, commitment, courage, communication and competence.' All the staff we spoke with were able to tell us about the values of the organisation. They clearly demonstrated they were dedicated to improving people's wellbeing and had the knowledge and skills to provide outstanding care to people. People we spoke with echoed this in their comments. One person simply said, "They (the staff) are the bees' knees (exceptional) as far as I am concerned."

The service valued the views of people who used the service and analysed their feedback on continuously improve and innovate. Questionnaires were used to capture people's view and they also undertake an end of service survey to capture the views of people when the support from Rotherham Crossroads finished. We saw extremely high satisfaction levels and people comments about their experiences was without exception

positive. Of the 81 surveys received everyone was likely to recommend Rotherham Crossroads. Comments were extremely positive, examples of these comments are; 'The service is fantastic, can't be improved.' and 'Full marks staff are exceptional.'

We looked at a sample of thank you cards which had been received from relatives. Most of comments were commending the carers for their kindness and compassion.

Relatives and other agencies without exception praised the staff and management for their caring and compassionate approach to supporting people. One relative said, "They are kind to my [relative]." The person explained that their relative was living with dementia and would often tell staff to go away. Another person said, "I have known of [Rotherham]Crossroads for a long time and never once heard a wrong word."

It was evident through discussions with staff, relatives and other agencies that there were many examples of people having developed their skills and independence whilst being supported by Rotherham Crossroads. One person was attending was attending community courses, mixing more with people and staff reported seeing a massive change in confidence and independence.

People and their relatives said staff treated them with utmost dignity and respect. Their comments included, "Yes, all the time. It's where I tell them what I want to do and they assist me if I need any assistance," and "They let me do as much as I can. I will say can you help me with this please." A staff member said, "To maintain the persons dignity I close door when they are using the toilet, help in the shower and with dressing as sensitively as I can, which means asking if I can help." Staff were trained in promoting people's privacy and dignity and discussed practical ways to do so. For example, by covering a person with a towel to protect their modesty when they were having a wash. People and relatives praised how staff promoted and respected people's independence. One person said, " They have the patience with [name] in the bath."

Is the service responsive?

Our findings

At the last inspection we rated this key question as good. At this inspection the service maintained this rating.

The provider worked with health care professionals to ensure people were supported following best practice at the end of their life. Staff said when they provided end of life care to people they also provided support to their relatives. They were mindful of the privacy and dignity of the person they were caring for during their last weeks or days and always considered any support the loved ones may need as this was very important. Staff were praised by relatives for the care they had given, "Their kindness and love for the client will always be remembered. [Staff] are a credit to your organisation." Another relative send a thank you card which read, "A belated thank you to all carers and office staff involved in supporting my dear [relative] and myself during illness. A special thanks to [named staff] for their unfaltering patience and showing constant respect for our dignity."

As part of their charitable activities Rotherham Crossroads provide an end of caring service. This is a service where the regular staff visits the carer for a number of weeks following the death of their loved one or if they have been admitted to 24-hour care. Quite often the care would have been provided to the person for many years and for support to suddenly stop, at such a difficult time, could impact on the carer. So, with the carers consent, the regular staff continue to visit for an hour for a few weeks, sometimes just for a coffee and a chat. Depending on the situation they may suggest appropriate groups or activities that they can become involved in. The registered manager told us that carers who have used this service, don't realise it's a service, because of the sensitive way it is offered, but they really appreciate the extension and additional support offered.

People were able to share their experiences, concerns and complaints and the provider acted upon information shared. A complaints procedure and complaints log was in place to monitor these. We saw where concerns had been received, they had all been followed up and responded to in a timely manner.

Every single person we spoke with said they felt the provider listened and felt they would take appropriate action to put things right. People told us they were confident if they had a complaint they knew who they should speak to. One person said, "I know how to make complaint but I've never had to make one." Relatives said the provider listened and were easy to talk to. Staff understood what they should do if a complaint was raised with them. We found the registered manager thoroughly investigated all concerns and incidents then ensured action was taken to put measures and improvements in place to minimise the potential for a reoccurrence of these.

The provider had taken innovative steps to ensure that they met the legal requirements for the Accessible Information Standard (AIS). The AIS is a legal framework that requires providers to ensure people with a disability or sensory loss can access and understand information they are given. For example, the service has links with Rotherham Ethnic Minority Alliance (REMA), Tassibee who are a group for isolated and socially excluded Asian ladies in Rotherham and a Multicultural Centre, who assist should any documents need

translation. People were asked their information requirements which is then recorded within the care plans and information is provided to support the persons requirements such as easy read or large print.

Support plans were comprehensive, well structured, and person centred. The care packages were reviewed at regular intervals or following a change of need. People were involved in the writing of the care plans to ensure they were meeting the person's needs.

Staff were very responsive to people's needs and delivered a person focused service. For example. One person, who spoke English as a second language, received a letter regarding a change in benefits which they didn't fully understand. They called Crossroads Care and spoke to a member of staff tried to arrange for a translator but was unable to get one arranged. A member of staff who spoke Polish could step in and translate the letter for the person and their relatives. This gave the family the support they needed and they were able to reapply for the benefit and reduced strain on their family.

Is the service well-led?

Our findings

At the last inspection we rated this key question as outstanding. At this inspection the service had continued to be extremely well led and was rated as outstanding.

The service had a new registered manager since our last inspection who has over 24 years of service and experience with the provider. They told us they were committed to providing outstanding care and looked on the inspection as a positive experience where they could grow further. They had a clear plan on what achievements they wanted to gain in the following 12 months. They had realised that the social care market is an ever changing one and wanted to ensure the service they provided remained outstanding.

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.

Without exception all staff felt that the change in management had been a smooth transition. Staff had confidence in the registered manager's leadership. One staff said, "[Name of manager] is now trying on focusing on staff doing a few more things outside of work. They are listening a lot and are always looking at ways to improve [Name of manager] has had a definite positive impact on staff having a voice." The registered manager said, "My main focus coming into the role is about having effective communication, recognition and getting things moving."

Rotherham Crossroads have clear aims and objectives which are shared with people, their relatives and staff, which were embedded into our culture of the service. As a registered charity, the board of trustees have overall responsibility. We saw they had regular meeting which were held at board level where people and their relatives were involved in, along with staff representatives. This enabled everyone to have a voice in the culture, vision and strategy of the organisation.

The service has won a variety of awards including Kite Mark Plus award in recognition for their volunteer programme, which ensures a high quality, positive volunteering experience, showing that the provider is effectively managing and supporting volunteers. Along with the ISO 9001 Standard which is a nationally recognised standard covering quality and management compliance. In addition to these awards we received 100% positive feedback from other professionals and agencies who they worked alongside. For example, we received this feedback from a representative from Rotherham Social Prescribing Service. "We have commissioned [Rotherham] Crossroads for six years now to deliver a flexible respite service for the carers of referred patients. The service introduces people to the wellbeing benefits of having some respite that they may self-fund or get help to fund in the longer term. As part of our internal quality assurance checks, we request feedback from patients about the level of service they received from all the commissioned voluntary sector providers we referred them to and [Rotherham] Crossroads have, on the whole, always received high scores and positive comments. We look forward to continuing an excellent working relationship with [Rotherham] Crossroads managers and staff."

The registered manager told us they felt it very important to recognise and celebrate all the good work that staff were doing. The provider had various incentives on offer to show their appreciation such as long service awards after a period of years in employment. Staff were awarded with incentives for going that 'extra mile,' recently one staff had been awarded an electronic device for their commitment. Relatives sent the provider a variety of thank you card to thank them one said, "Staff have been nominated for that extra mile. Their kindness and love for the client will always be remembered." And, "Staff are a credit to your organisation." Staff told us they were extremely happy with their job and got great job satisfaction.

A person that had used Rotherham Crossroads services wanted to show their appreciation and donated some money to the provider who is a charity. They wanted the money to be used to support carers that were struggling, so a charitable fund was set up so carers could have a break where they needed to. It enabled a number of carers to take a much-needed time off from caring for loved ones.

Rotherham Crossroads had embraced and developed relationships with local ethnic groups to develop services in the Rotherham area. They had worked with Tassibee which is an Asian women's organisation based in Rotherham. The service engaged with women who were interested in taking up employment in caring roles in the community. Rotherham Crossroads gave them an overview of the role of a Care Support Worker and how the role could be so rewarding as it could really make a difference to people's lives. Some of the women took up position in caring roles.

The provider used a variety of quality checking systems. We found them to be effective, robust and embedded into practice to support improvement and innovation. The provider had a service development plan in place which showed they were keeping up to date with best practice.