

Barnsley Disability Services Limited

Barnsley Disability Services Limited

Inspection report

Unit 29 Mount Osborne Business Centre
Mount Osborne Industrial Park, Oakwell View
Barnsley
S71 1HH

Date of inspection visit:
09 November 2023

Date of publication:
24 November 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Barnsley Disability Limited Services is a domiciliary care service providing personal care to people in their own houses and flats in the community. At the time of our inspection there were 15 people using the service. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

People's experience of the service and what we found:

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence, and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

Right Support

People and their relatives were happy with the care they received. People received care and support from staff who knew them well and understood their individual needs and preferences. There were enough staff to meet people's needs and keep them safe.

People's care plans were comprehensive and personalised. Risks to people were assessed and managed. People were supported with their medicines and their dietary needs by staff trained and competent to do so.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Right Care

People were supported by staff who were exceptionally kind and caring. Staff protected and respected people's privacy and dignity. Staff provided personalised care and support to promote people's wellbeing, enhance their quality of life and to achieve positive outcomes. Staff were trained and understood how to protect people from poor care and abuse. The service worked well with other agencies to do so.

Right Culture

Staff were safely recruited and provided continuity in care. Staff received an induction and training which included areas of care and support, infection prevention and control, and person-specific training. Action was taken to ensure systems to monitor staff training was kept up to date. Risks to people were managed effectively and safely and people and their relatives were involved in planning their care.

Quality systems were in place to monitor the quality of service to enable the provider to improve the service

and the lives of people supported. The registered manager understood their role and responsibilities. Staff placed people's wishes, needs, and rights at the heart of everything they did. The management and staff worked with external agencies and health and social care professionals.

People and their relatives told us they felt confident to approach the management team and their feedback or complaints would be listened and responded to. The management team had a shared commitment to the culture and values of the service, where people remained at the centre of their care and support.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (published 20 October 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Barnsley Disability Limited Services on our website at www.cqc.org.uk.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Barnsley Disability Services Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

We visited the offices on the 9 November 2023 and made phone calls to people, relatives, and staff on 7 November 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and other professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send to us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service and 6 relatives about their experience of the care provided. We spoke with 3 members of staff including the registered manager and care staff.

We viewed a range of records. This included 4 people's care records and medication records. We looked at 3 staff files in relation to recruitment and a variety of records relating to the management of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were protected from the risk of abuse.
- People told us the service was safe. Comments included, "[Relative] is safe, the staff are absolutely brilliant. I cannot fault them," and "We have a good relationship with the carers. They are more like friends to us."
- Staff had received safeguarding training and knew how to recognise and report any concerns about people's safety and welfare. Managers understood their safeguarding responsibilities.

Assessing risk, safety monitoring and management

- Risks to people's safety and welfare were assessed.
- Care records included information about the measures in place to manage risks.
- Risks to people were kept under regular review and staff were knowledgeable about the action they needed to take to keep people safe. People's care records showed staff were following the guidance in people's care plans.

Staffing and recruitment

- People told us there were enough staff to meet their needs. Comments included, "[Relative] always knows who is coming to see them. They [management team] always notify us about any changes to staff to keep things as consistent as possible." And "The staff are very reliable. They always let me know if they are running late."
- The provider operated safe recruitment processes.

Using medicines safely

- People were supported to receive their medicines safely.
- People were happy with the support they received with their medicines.
- Staff were trained in the safe management of medicines. Competency checks were carried out to make sure they were following the correct procedures.

Preventing and controlling infection

- People supported were protected from the risk of cross infection.
- Staff received training and were provided with personal protective equipment.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.

- Staff understood and fulfilled their responsibilities to raise concerns and report incidents and near misses; they were fully supported when they did so.
- The registered manager ensured they reflected on where things could have been improved and used this as an opportunity to improve the service for people and staff.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental 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 mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- Staff supported people in the least restrictive way possible to ensure they had maximum choice and control of their lives. One relative said, "They listen and take on board what we are saying. We are both very happy with everything."
- Staff supported people to make choices. Care records provided staff with information about how they should support people taking account of their needs and preferences.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive and open culture at the service.
- The registered manager promoted a culture that was open and transparent in everything the service did. People and relatives told us the service was well led. Comments included, "We are so lucky to have had this company support and care for [relative] over the years," and "Communication is good If there are any issues the [management team] are quick to sort things out."
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- Staff were complimentary of the support they received from the management team.

Managers and staff being clear about their roles, and understanding quality performance, risks, and regulatory requirements

- The service was extremely well organised. There was a clearly defined management and staffing structure in place. Managers and staff were clear about their roles and responsibilities.
- Systems for monitoring and assessing the quality and safety of the service were fully embedded.
- People spoke very positively about the service. Comments included, "It is a well-managed service," and "I am very happy with the service."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood their responsibilities under the duty of candour.
- The provider was open and transparent when dealing with any issues or concerns. They understood their responsibility to apologise and give people and explanation if things went wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People's views were obtained through individual quality assurance forms and surveys.
- Staff had opportunities to provide feedback through a dedicated provider's live feedback app platform. This allowed the provider access to real time concerns and enabled them to address them in a timely manner.

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- The management team were extremely responsive to any suggestions for improvement.
- They recognised the importance of learning when things went wrong and sharing learning with others.

Working in partnership with others

- The service worked in partnership with a wide range of agencies to improve people's experiences.