

Alderson Limited

# Libertas Gainsborough

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

About the service: Libertas Gainsborough is a domiciliary care agency providing personal care to people living in their own homes. It provides a service to older people and those living with dementia, physical disability or a sensory impairment. Not everyone using Libertas Gainsborough receives a regulated activity; the Care Quality Commission (CQC) only inspects the service being received by people provided with 'personal care', help with tasks related to personal hygiene and eating and drinking. For these people we also take into account any wider social care provided. At the time of the inspection the service was not providing personal care to people with learning disabilities and or autism.

At the time of the inspection, they were providing a regulated activity of personal care to 218 people.

People's experience of using this service: We received very positive views from people about the support provided to them. When talking about the service people told us, "They are all very good, we get on really well together." Without exception people said they felt safe and staff were respectful.

People received their medicines safely and on time and their health was well managed. Staff had positive links with healthcare professionals which promoted people's well-being.

People said they received care in a timely way from a regular team of care staff. They had good communication with the office and had been given information about which care staff would be supporting them.

The provider had systems in place to safeguard people from abuse. Staff could recognise and report any safeguarding concerns if they suspected abuse. Relevant risk assessments had been completed. Medicines were managed safely. Accidents and incidents were monitored to identify and address any patterns or trends to mitigate risks.

Staff had appropriate skills and knowledge to deliver care and support people in a person-centred way. Staff recruitment was safe and staff understood how to keep people safe.

People told us they were happy with the service they received and felt staff had a clear understanding of their needs and preferences. People were supported with good nutrition and could access appropriate healthcare services.

Care plans had been developed and were regularly reviewed. These contained relevant information about how to meet people's needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; policies and systems supported this practice.

The registered manager and staff team worked together in a positive way to support people to remain as independent as possible and to be safe. Staff told us they were well supported by the registered manager

and management team.

Checks of safety and quality were made to ensure people were protected. Work to continuously improve was noted and the registered manager was keen to make changes that would impact positively on people's lives.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk).

Rating at the last inspection: This is the first inspection of the service since its registration in May 2018.

Why we inspected: This was a scheduled inspection based on the date of registration.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

## 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 was safe.

Details are in our Safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our Well-Led findings below.

Good ●

# Libertas Gainsborough

## Detailed findings

### Background to this inspection

**The 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 checked 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.

**Inspection team:** The inspection was carried out by an inspector and an assistant inspector.

The service had a manager registered with (CQC). This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

**Service and service type:** The service is a domiciliary care agency, it provides care to people living in their own homes. It provides a service to older people and those living with dementia, physical disabilities or a sensory impairment.

**Notice of inspection:** We gave the provider 48 hours' notice of the inspection visit because we needed to be sure that someone would be available in the office.

We visited the office on 1 May 2019 to see the manager and office staff and to review care records and policies and procedures.

**What we did:** We looked at information sent to us since the last inspection such as notifications about accidents and safeguarding alerts and the Provider Information Return (PIR). The PIR is a form that asks the provider to give some key information about the service, what the service does well and Improvements they plan to make. This information helps support our inspections.

We contacted the local authority commissioning and safeguarding teams and the local Healthwatch England. Healthwatch England are an independent organisation who listen to people's views about local services and drive improvement by sharing those views with organisations who commission, deliver and regulate health and social care services. We also sought feedback from professionals who worked with the service. This information helps support our inspections.

We spoke with three care staff, the deputy manager and two team leaders, the registered manager and a registered manager from another service who was supporting them during the inspection. Following the inspection, we spoke with six people using the service, two relatives and two staff members.

We reviewed a range of documents. This included twenty people's care and medicine records. We looked at eight staff recruitment and supervision records and documents relating to the management of the service and policies and procedures developed and implemented by the provider. We also looked at staff training records and staff rotas.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse; Staffing and recruitment.

- The provider had effective safeguarding systems in place; staff protected people from harm or abuse. They received appropriate training in this topic area.
- People told us they felt safe and supported by members of staff. One person said, "Yes, I definitely trust them all."
- People told us they received care in a timely way and overall were notified if calls were running late.
- The provider operated a safe recruitment process and staff told us they covered gaps in the rota and worked well as a team. People confirmed they had a core team of staff who supported them and they usually received regular care from the same team.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong.

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans clearly documented the control measures for staff to follow to keep people safe.
- Systems were in place to identify and reduce risks to people using the service. People's care plans included individual risk assessments. These provided staff with clear information of any risks and guidance on the level of support people needed.
- Staff understood how to promote people's independence whilst reducing potential risks.
- The management team responded appropriately when accidents or incidents occurred and used any incidents as a learning opportunity.

Using medicines safely.

- Medicines were safely received, stored, administered and disposed of when no longer needed. People were encouraged to manage their own medicines where they had those skills. One person told us, "They (staff) see to my tablets, I'm happy with this as they are always on time so I can take them straight away."
- Where medication errors were found during audits they were investigated and prompt action taken as needed.
- Staff were trained in the safe administration of medicines and had a good knowledge of current practice when supporting people with their medicines.

Preventing and controlling infection.

- Systems were in place to protect people from the risk of infection. Staff were provided with and used personal protective equipment (PPE) appropriately. 'Spot checks' were completed and monitored staff use of PPE.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law.

- People's needs were assessed, planned and regularly reviewed to ensure any changing needs were met. People told us, "Yes, they met with me and put me at ease to make sure I get my medicines and meals as needed." Another person told us, "When they took over from the previous provider they came to see me and to explain they were taking over and to discuss my care needs."
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life. One person told us, "My care has been personalised for me, they know my likes and dislikes and deliver what I want."

Staff support: induction training, skills and experience.

- People were confident in staff's skills and knowledge to support them. One person told us, "The new staff come with an experienced staff to learn what they need to do."
- The provider's induction and training processes ensured staff had the required skills and knowledge to meet people's needs.
- The registered manager had good systems to understand which staff needed their training to be updated and who required supervision.

Supporting people to eat and drink enough to maintain a balanced diet.

- People were offered choices around their meals and drinks. One person told us, "They help me with my meals and always ask me what I would like before preparing it."
- Care plans recorded people's meal preferences, allergies and the support they required which ensured staff had relevant information to support people with dietary needs.

Staff working with other agencies to provide consistent, effective, timely care: Supporting people to live healthier lives, access healthcare services and support.

- Where staff required support from healthcare professionals this was arranged and staff followed guidance provided. Information was shared with other agencies when people needed to access other services for example, hospital.
- Care plans contained information about each person's health needs and the support they required to remain as independent as possible.

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 with appropriate legal authority. Where it is in people's best interests to deprive them of their liberty in their own homes, applications must be made directly to the Court of Protection.

We checked whether the service was working within the principles of the MCA.

- The provider was working within the principles of the MCA; any restrictions on people's liberty were identified and discussions had taken place with relatives and social workers to support applications to the court of protection when this was required.
- Staff ensured that people were involved in decisions about their care; and knew what they needed to do to make sure decisions were made in people's best interests. People told us staff sought consent from them before providing care and they were able to make individual choices and decisions about their daily lives.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity.

- People told us they were treated with kindness and were positive about the staff's caring attitude. One person told us, "I've been very lucky this time round. Every day they ask if there is anything else they can do for me – really good like that."
- People's equality, diversity and human rights were respected. People were supported to follow their faith and live their lives the way they wanted to. One person told us, "staff call me by my preferred name, even the office staff, they are all really good."
- Staff spent time getting to know people's preferences and used this knowledge to care for them in their preferred way. One person told us, "They (carers) speak to me as my daughter would, well mannered, don't say anything out of place. They look after me really well."

Supporting people to express their views and be involved in making decisions about their care.

- Staff enabled people to make decisions about their care; and knew when people wanted help and support from their relatives. People were directed to sources of advice and support or advocacy when needed.
- People were supported to make their own decisions and lifestyle choices. People and their relatives told us they were included in decisions about their care and were offered choices.

Respecting and promoting people's privacy, dignity and independence.

- Staff developed trusting relationships with people and their relatives. Staff treated people with respect and maintained their privacy and dignity. When we asked people if staff treated them respectfully they told us "Yes 100% absolutely," and "Yes, they do, they help me to get a shower or a good wash, very respectful they don't make me embarrassed or anything."
- People's rights to privacy and confidentiality were respected.
- People provided examples of how they were supported to maintain their independence. One person told us, "Yes, I may need help with certain things on some days – but at the same time they allow me to be independent as well and let me do the things I can do for myself."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- A comprehensive assessment was carried out prior to providing a service, to identify people's support needs and their care preferences. Care plans were developed detailing how these needs were to be met. Care plans contained relevant information and were up to date.

- Staff were knowledgeable about the people who used the service and displayed a good understanding of their preferences and interests, as well as their health and support needs, which enabled them to provide personalised care. One person told us, "My team don't wash up, as that's my job to do in the afternoon. They listen to me as it's something I like to do." People and their representatives were involved in reviews of care.

- People's needs were identified, including those related to the protected quality characteristics. For example, reasonable adjustments were made where appropriate and the service identified, recorded, shared and met the information and communication needs of people with a disability or sensory loss, as required by the Accessible Information Standard.

Improving care quality in response to complaints or concerns.

- People and their relatives knew how to make complaints should they need to and were confident they would be addressed. One relative told us, "I had to raise an issue with male carers being sent in the early days, but I spoke to them and they sorted it out, we only have female care staff now."

- The provider had a complaints policy and procedure in place and information was provided to help people understand the care and support available to them. The registered manager acted on complaints in an open and transparent way. They used any complaints received as an opportunity to improve the service.

- People and their families knew how to provide feedback to the management team about their experiences of care and the service used a range of accessible ways to enable this to happen. This included one to one meetings to discuss care, satisfaction questionnaires and telephone calls.

End of life care and support.

- Staff were aware of good practice and guidance in end of life care and knew how to respect people's religious beliefs and preferences.

- The registered manager explained people were supported to make decisions about their preferences for end of life care including professional involvement.

# 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.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility.

- The service benefitted from having a registered manager who was committed to providing good quality care to people who used the service. They led by example with their open and honest approach. Staff told us, "[Registered managers name] I've not known a manager like her, she goes out of her way to put people at ease, she won't ask anyone to do anything she won't do herself."
- The registered manager understood and acted on their duty of candour. Processes were in place to investigate incidents, apologise and inform people why things happened.
- The provider invested in staff and recognised their contributions where possible. Incentives and benefits were in place for staff.

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

- The registered manager was knowledgeable about events within the service and worked alongside team leaders and monitored the service continually. They addressed any issues quickly and encouraged people to raise their niggles or concerns, so they could be resolved. All feedback received was used to continuously improve the service.
- Effective systems were in place to monitor the quality of the service people received. These included, observations of staff practice, audits, regular reviews of care, and an electronic system which identified the time staff arrived and left calls.
- The registered manager had ensured they had communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.
- The registered manager worked to develop the staff team so that staff at all levels understood their roles and responsibilities. They were accountable for their staff and understood the importance of their roles. Staff were held to account for their performance where required.

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

- People who used the service, their relatives and staff were included in the development of the service. Questionnaires were completed and responses analysed and used to plan and improve the service.
- Meetings were held for staff at all levels for them to share ideas and make suggestions.

Continuous learning and improving care.

- The registered manager followed current evidence-based practice and attended networking groups to

share best practice.

Working in partnership with others.

- The registered manager and staff team had developed good working relationships with health and social care professionals involved in people's care. Staff liaised with relevant professionals to ensure people's needs were assessed and care plans were in place. Where people required specialist support the registered manager worked with healthcare professionals to deliver appropriate training and assess staff skills.