

Liberty House Care Homes Limited

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Inspection report

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West Midlands
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Date of inspection visit:
10 February 2019

Date of publication:
10 April 2019

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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:

Liberty House is a residential care home that was providing personal care to six people who had a learning disability and/or autism at the time of the inspection.

People's experience of using this service:

Staff understood their responsibilities to protect people from abuse and discrimination. They knew to report any concerns and ensure action was taken. The registered manager worked with the local authority safeguarding adults team to protect people.

Staff were supported in their roles and received an effective level of training. They told us they were happy with the level of training and support they received and we observed them supporting people in a competent and caring manner.

People were protected from harm by the provider having effective systems in place to monitor medicine management, staffing, infection control and upkeep of the premises.

Staff promoted people's dignity and privacy. Staff provided person-centred support by listening to people and engaging them at every opportunity. Staff were caring and understanding towards people. People using the service appeared comfortable in the presence of staff working in the service.

The premises provided suitable accommodation for people with communal areas and bedrooms which were personalised to people's individual interests.

Support plans were detailed and reviewed with the person and their relatives when possible. Staff worked with and took advice from health care professionals. People's health care needs were met.

People had a variety of internal activities and external activities, which they enjoyed on a regular basis. These activities were evidenced by the items and photos displayed around the home. Displayed on the notice board, were achievements of fund raising by some of the people at Liberty House. They displayed their craft works to the wider community, via the Adults Education Centre and raised £120.00 for Children in Need.

One person showed a distinct interest in sewing and tapestry. As well as being supported with developing a hobby, staff also supported them to enrol on a local Adult Educational class to further their skill. They attend this weekly with support of staff. This person has thrived, and their work has been displayed by the college as an example of the high quality of completed pieces. Another person living in the home, has shown remarkable improvement in their concentration levels and behavioural issues, thanks to the support undertaking activities within gardening.

The registered manager ran a well organised service. Relatives' views were sought, and opportunities taken to improve the service. Formal supervision meetings were carried out and staff were also supervised informally. They told us they were supported and clear about what was expected of them. Audits and checks were carried out, so any problem could be identified and rectified.

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

The care service supported people in line with the values that underpin the Registering the Right Support and other best practice guidelines. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Rating at last inspection:

The service was rated as Good at the last inspection. The inspection report for the last inspection was published on 01 November 2016.

Why we inspected:

This was a scheduled inspection based on the previous rating.

Follow up:

We will continue to carry out ongoing monitoring and will inspect the service in line with its rating.

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

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 ●

Liberty House Care Homes 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, 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 one Adult Social Care inspector.

Service and service type:

The service is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement. CQC regulated both the premises and the care provided; both were looked at during this inspection.

The home accommodates six people in one adapted building. At the time of the inspection, six people were living in the home.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection:

The inspection was unannounced.

What we did:

We met with five of the six people living in the service as one person was visiting their relatives. We also

spoke with one relative, the registered manager, the service manager, a senior support worker and one support worker. We observed the care and support provided and the interaction between staff and people.

We looked at two people's care records and associated documents. We looked at previous inspection reports, rotas, audits, staff training and supervision records, health and safety paperwork, accident and incident records, complaints and compliments. We also looked at records that related to how the home was managed, such as quality audits, fire risk assessments and infection control records.

Before our inspection we reviewed all the information we held about the home, including notifications of incidents that the provider had sent us. We looked at the Provider Information Return (PIR). This 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.

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

- The service had effective systems in place to ensure people were protected from the risk of abuse
- A relative told us they were confident their relatives were safe at Liberty House. They told us "I'm happy with the home, they attend to the needs of [names of relatives] and they (their relatives) always seem happy in the home".
- Staff we spoke with described how they would report suspected abuse and were confident the registered manager would act on their concerns. One staff member told us "It is important never to dismiss what someone is trying to tell you, to listen carefully to them and report and record the concerns so they can be acted on".
- Staff were also aware which other organisations they could contact if their concerns were not acted on.

Assessing risk, safety monitoring and management

- When people were supported to access the community, comprehensive plans and risk assessments were in place to ensure people could access the community safely both locally and nationally.
- Environmental risks were managed at the service. For example, required checks had been carried out on gas, electricity and the fire safety systems in place at the service.
- A Legionella risk assessment had not been updated for the service since a new hot water system was put into the service. The registered manager had thought that as they didn't have a water tank this was no longer required.
- Following the inspection, a company had been instructed to carry out this work and we have received confirmation from the provider that this has taken place.

Staffing and recruitment

- We checked recruitment records which demonstrated that staff were recruited safely and necessary checks were made to ensure staff were suitable to work with vulnerable people.
- Staff we spoke with told us they felt there were enough staff working at the service to support people effectively.
- People told us there were enough staff and they were able to go out when they wanted to.
- Our observations evidenced that staff working at the service had the skills and experience to communicate with and support people effectively.

Using medicines safely

- Staff who administered medicines received appropriate training to do so safely.
- The medicine systems were regularly audited by the management of the service.
- Records demonstrated that medicines were administered to people as directed by the prescribing professional.
- The service had worked with the GP over the last few years to reduce the amount of medication that people were taking. This in line with a national NHS initiative.

Preventing and controlling infection

- The service was clean, tidy and free of any malodours.
- Systems were in place to ensure that the cleanliness of the service was maintained and monitored.
- There was a named senior member of staff who was responsible for this area.
- The service had received a five star food hygiene rating from the food standards agency and staff had received training in food hygiene.

Learning lessons when things go wrong

- When incidents occurred, incident reports were completed and reviewed by the registered manager.
- Where appropriate care plans and risk assessments were reviewed and measure put in place to reduce the risk of further incidents occurring.

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 had their needs assessed and a support plan in place which explained to staff how the person should be supported to meet those needs.
- Goals were set with the person and staff supported people to work towards these goals. We saw progress was regularly reviewed as appropriate.
- People were supported to make choices about their needs and because effective communication systems were in place.

Staff support: induction, training, skills and experience

- Staff told us they received effective training and good support from the registered manager, who they told us was always available.
- Staff had their own personal development files which were reviewed and maintained through regular supervision sessions with a member of the management team.
- People benefitted from having a staff team who were encouraged by the provider to undertake further qualifications and training to develop their practise.
- Evidence of the achievements of care staff and the management team were visible in the home. These included pictures of staff receiving awards and certificates from their qualifications. The staff were clearly proud of their achievements.

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

- people were supported to choose what they wanted to eat and drink throughout the day. We observed one person who had communication difficulties showing the care staff which drink they wanted. They did this by pointing to a photo of a cup of coffee on a display that had several types of drinks to choose from.
- Food provided was healthy and nutritious. People were able to choose what they wanted using a wide range of pictures of different types of meals. Choices were then displayed on an accessible menu.
- The service recorded the meals eaten and the common allergens they contained. The registered manager told us this was so they could identify possible allergies in people that they may not be aware of.
- The food available met the cultural needs and preferences for the people living in the home.
- People's dietary needs were met effectively by the service. One person had been overweight and was diagnosed with type 2 diabetes. However, since living at the service and being supported to eat a healthy home cooked diet had lost weight and their blood glucose level was now in the normal range and this

person was no longer diabetic.

Adapting service, design, decoration to meet people's needs

- The service had been adapted to meet the needs of the people using the service.
- Signs and information displayed in the service was presented in forms that people could understand. This included information on health, activities, menus, safeguarding and which staff were working in the service.
- The garden was accessible to all and maintained by the people living in the service, assisted by staff. People told us they liked working in the garden and growing plants and vegetables in the green house.
- One person showed us their room which they had personalised to reflect their interests. This person told us "I really like my room and can watch my films and listen to music when I want to".

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

- People told us they have their healthcare needs met. One person said, "If I am ill staff will take me to the doctors, they also take me to the optician and to the dentist".
- Records were maintained of the outcomes of health appointments and systems in place to ensure further appointments were not missed.
- Accessible health information was displayed in the home for people to see and for staff to use to increase people's understanding of their health conditions. The registered manager informed us that this was regularly updated whenever they visited the local health centre.
- People benefitted from having Hospital Passports in place. These contained essential information on how to support the person if they were admitted to hospital.
- The service had worked with the GP over the last few years to reduce the amount of medication that people were taking. This in line with the NHS led initiative Stopping Over Medication of People with learning disability, autism or both (STOMP). STOMP involves regular reviews of people's medicines to ensure they are receiving the right medicines they require.
- People had annual health checks and people were screened for health conditions that may not present any symptoms in the early stages.

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. We found the service was working within these principles and conditions put in place were being met.

- Our observations demonstrated that people living in the home were not restricted in any way inside the

service and were able to access all areas of the home and garden freely.

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; equality and diversity

- One person told us "I like living here is nice and relaxed".
- From our observations it was clear staff knew people very well and were aware of their preferences and used this knowledge when supporting them.
- Where people were unable to express their needs and choices, staff understood their way of communicating. Staff told us they show the person the options available or pictures of activities so they can make choices.
- Staff showed genuine concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way.
- Relatives told us, "The home is very nice, very nice caring staff and I always feel welcomed."

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. Where needed staff sought external professional help to support decision making for people such as advocacy.
- Records of care review meetings demonstrated people were actively involved in making decisions about their care and support. We also saw relatives were also present at these meetings where possible and appropriate. If they were not available to attend then their views were sought prior to the meeting.

Respecting and promoting people's privacy, dignity and independence

- People's privacy was respected and all personal care was provided in private.
- People were enabled to maintain and develop relationships with those close to them, social networks and the community.
- People were supported to focus on their independence in all areas of their lives. They were supported to be independent in their ideas and choices and this meant people enjoyed freedom and control of their life.
- People being in control and independent demonstrated the provider's values were embedded in staff culture. A member of staff told us, "We listen to the service users and they get to make real choices".

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

- People were supported to attend a local adult education centre to develop their skills and independence.
- Activities were provided to people seven days a week and at all times of day including the evenings.
- Activities included, cross-stitching, baking, gardening, gym sessions, holidays in this country and abroad.
- Staff told us that the gardening project had really helped one person living at the service who found it difficult to concentrate on tasks. Their work in the garden has helped them to develop skills such as watering the plants.
- Summer Garden festival held every year, in which people sold vegetables and plants grown in the garden and models and crafts made by people.
- At Liberty House we support people with choices of places to go on outings, locally, nationally and abroad.
- Staff at the service had supported people to obtain passports. This had allowed them to go on holidays abroad including to Spain. Two people living at the service had a goal to visit Jamaica, the trip to Spain was used to allow the people to get used to travelling on a plane, which they hadn't done before. To achieve request to go aboard, staff and management supported people to obtain their passports. This took real dedication by the staff as no one had ever left the UK before. The process of obtaining the passports was difficult as some people did not family involvement or contact. This made the process of applying for the passports more challenging and difficult.

Improving care quality in response to complaints or concerns

- People were supported to provide feedback to the management team at their monthly meetings with their keyworker. We viewed the minutes of these meetings which demonstrated people's views and opinions were acted on.
- People and relatives knew how to make complaints should they need to. Relatives told us they had never had to complain about anything but believed any concerns would be listened to and dealt with.
- An accessible complaints policy was in place at the service. A relative told us they had not made any complaints but if they needed to, they would contact the staff or the registered manager. They were confident their concerns would be taken seriously and dealt with effectively.
- There had not been any complaints. The registered manager told us about the process in place to act upon any complaints they received. They told us complaints would be used as an opportunity to improve the service.

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; and how the provider understands and acts on duty of candour responsibility

- The registered manager demonstrated a commitment to provide person-centred, high quality care by engaging with everyone using the service and stakeholders.
- Staff and the registered manager involved people and their relatives in all aspects of the service and their care.
- Staff told us the registered manager listened to them and was keen to hear ideas on how the service could be improved. They told us the registered manager was always available and approachable. Staff told us, "The registered manager is very supportive and always around to give guidance and advice".

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

- The registered manager demonstrated a commitment to ensuring that Liberty House delivered a high quality, safe service to people living at there.
- Regular checks and audits were completed by the registered manager and senior staff to ensure people were safe and were happy with the service they received.
- 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.

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

- The services mission statement was displayed in the home along with the services values.
- These were embedded within the staff team who were passionate about providing a person centred service for all the people living at the service.
- People and staff were engaged and able to speak up freely, raise concerns and discuss ideas.
- People had completed a survey of their views and had regular service user meetings to discuss the service they received. The feedback had been used to continuously improve the service.

Continuous learning and improving care

- The registered manager attends provider forums with the local authority and is on the local authority's

provider boards. The registered manager was keen to share developments with other providers to develop their practices.

- The registered manager stated that "We are always learning, as individuals and a team".
- Regular team meetings were held at the service which encouraged staff to reflect on changes that had been implemented and how these had affected the service. They also discussed new changes they could make to improve the service.

Working in partnership with others

- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.
- The Registered manager had also made links with the local adult education centre which some of the people living at Liberty House attended. The service took student placements from university and local schools in the area.
- The registered manager also spoke about their passion to promote Health and Social Care as a career for young people. They informed us they were part of a local partnership promoting careers in social care. The registered manager told us they had been chosen to be interviewed for a film they were making to promote social care.