Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Libertatem Healthcare Group Limited

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The inspection visit took place on 10/09/2026

Service Information:

Operated by:	Libertatem Healthcare Group Limited
Care Type:	Domiciliary Support Service
Provision for:	Care and support for adults
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Good
Leadership & Management	Good

Summary:

Libertatem Healthcare Group provides domiciliary support across six footprints in Wales: North Wales, Cardiff and the Vale, Cwm Taf Morgannwg, West Glamorgan, West Wales and Gwent. Five footprints are currently actively supporting people, with West Wales due to become active imminently as new packages of care are ready to commence.

People receive good, personalised care and support which promotes their well-being, independence and safety. People spoke positively about their care and described respectful relationships with staff who know them well. They are supported to make choices, remain involved in their care and achieve outcomes that matter to them. Care records provide staff with detailed guidance, and arrangements for managing medicines are effective.

People are supported by safely recruited staff who complete mandatory and specialist training relevant to their roles. Professionals highlighted knowledgeable staff, good communication and effective partnership working. Some feedback identified that rota planning and communication could improve; however, people continued to receive their care and support.

Regular governance meetings, audits and quality monitoring give managers good oversight of care, staffing and service performance. The responsible individual is actively involved in monitoring the service.

Findings:

Well-being — Good

People receive good support that enables them to live the lives they choose and achieve outcomes that are important to them. Feedback from people, relatives and professionals was consistently positive about the quality of support provided. People told us staff know them well, listen to their views and adapt support to reflect their preferences, and outcomes. We found people are encouraged to maintain control over their daily lives and are supported to make decisions about the care and support they receive. Evidence reviewed demonstrated people are involved in developing and reviewing their care and support arrangements, helping to ensure support remains relevant to their changing needs.

People are supported to remain active, maintain relationships and take part in activities that are meaningful to them. Records, discussions and feedback demonstrated people access education, leisure activities, holidays, shopping, social opportunities and community activities. We found examples of staff supporting people to pursue interests, develop confidence and experience new opportunities whilst maintaining their safety. Positive risk management supports people to achieve a balance between independence and safety, helping them remain in control of their lives rather than restricting opportunities. Professionals told us staff understand people's needs well and work in a person-centred way to support participation and engagement.

People are supported to stay healthy and safe. Care staff work closely with families, case managers and health professionals to ensure people receive the support they need. Records demonstrated timely involvement of specialist services when required and showed staff respond appropriately to changes in people's health and well-being. We found risk assessments and support plans provide guidance to help staff support people safely whilst promoting choice and independence. Feedback from professionals was particularly positive regarding communication, partnership working and the provider's commitment to meeting people's individual needs.

People know how to raise concerns, and most feedback indicated people feel listened to. People and relatives spoke positively about relationships with staff and leaders and described them as approachable and responsive. We found evidence that concerns raised by people or their representatives had been considered and acted upon. A minority of feedback suggested communication across the wider organisation is not always consistent and some people and relatives would welcome clearer communication regarding staffing arrangements and points of contact. However, this had not prevented people from accessing support, maintaining relationships or achieving outcomes that matter to them. Overall, people experience positive and respectful support that promotes their well-being, independence and quality of life.

Care & Support — Good

People receive care and support that reflects their individual needs, preferences, strengths and circumstances. Records reviewed demonstrated people benefit from both person-centred planning and detailed clinical support planning. Care plans provide staff with clear guidance about how people wish to be supported, whilst also containing the specialist information required to safely meet complex health, and clinical needs. Plans covered areas including communication, mobility, nutrition, medication, emotional well-being, personal care and healthcare interventions. We found care and support plans were detailed, regularly reviewed and tailored to the individual, promoting consistency and continuity of care. Discussions with people, relatives, professionals and staff confirmed support is delivered in line with people's outcomes and changing needs.

People are supported to have choice and control over decisions that affect their lives. Feedback from people and relatives demonstrated they are involved in discussions about their care, support and future planning. Records evidence care arrangements are reviewed and updated following input from people, families and relevant professionals. The quality of daily recording demonstrated support is delivered in a manner that promotes dignity, respects individual preferences and helps people achieve outcomes important to them.

People are protected through robust risk management arrangements. Risk assessments are detailed, proportionate and provide staff with clear guidance on how to support people safely whilst promoting independence and positive risk taking. Staff work closely with relatives, case managers and health professionals to ensure identified risks are effectively managed and reviewed. We found specialist clinical advice and professional guidance had been incorporated into care planning and support arrangements. Feedback from professionals consistently described care as safe, responsive and centred on individual needs.

People receive appropriate support to meet their healthcare and medication needs. Medication management arrangements are effective, supported by regular audits, stock checks and staff competency assessments. Electronic medication systems provide effective oversight and a clear audit trail. We found evidence of ongoing monitoring, review and involvement of healthcare professionals to ensure people receive safe and effective care.

People benefit from care delivered by staff with the skills, knowledge and training required to meet complex and specialist needs. Training records, care documentation and professional feedback demonstrated staff understand the specific health conditions, communication methods, interventions and support requirements of the people they support. Professionals spoke positively about the competence of staff and the effectiveness of multidisciplinary working. While it was evident people and those important to them are involved in reviews and decision-making, this was not always consistently reflected within review documentation. The management team are addressing this. Overall, people receive effective, well-coordinated care and support which

promotes their safety, health and well-being.

Leadership & Management — Good

People benefit from a service that is well led, with effective management arrangements supporting positive outcomes. Leaders understand the people using the service and are committed to delivering high-quality, person-centred care and support. Feedback from people, relatives, staff and professionals was consistently positive about the quality and responsiveness of the service. Regular governance, quality assurance, audits, meetings and reviews provide oversight, accountability and opportunities for improvement.

Systems are in place to monitor the quality, safety and effectiveness of care and support. We reviewed audits and governance processes covering medication, incidents, safeguarding, staff training, supervision and care records. These were used effectively to monitor performance and address areas requiring improvement. Clinical governance is strong, with leaders maintaining oversight of complex clinical support and ensuring specialist guidance, healthcare recommendations and professional advice inform practice. Medication arrangements are particularly effective, with regular audits, clear accountability and evidence of learning when issues are identified. Action plans are used to address and monitor improvements.

People are supported by staff who receive comprehensive training, supervision and opportunities for professional development. Training compliance has continued to improve, with learning relevant to the complex needs of people receiving support. Supervision encourages staff to reflect on practice, discuss safeguarding responsibilities and identify support needs. Staff consistently described feeling supported by managers and able to access advice when needed. Professional feedback also highlighted staff knowledge, competence and professionalism.
Leaders work collaboratively with people, relatives, commissioners, case managers and healthcare professionals. We found effective partnership working and constructive professional relationships supporting continuity and consistency of care. Communication with external professionals was generally timely and effective, and concerns, complaints and safeguarding matters were managed appropriately. Incidents and feedback are used to inform learning and service development. Staff understand whistleblowing procedures and feel able to raise concerns.

The culture in the service places people at the centre of decision-making and promotes openness and improvement. While involvement in reviews and care planning was evident, this was not always consistently reflected in supporting documentation. A small amount of feedback also indicated that communication across the wider organisation could be strengthened. These areas had not adversely impacted outcomes for people, and leaders had identified opportunities to improve systems and recording. Overall, leadership, governance and clinical oversight provide a good level of assurance that people receive safe, effective and person-centred care.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

Mae’r adroddiad hwn hefyd ar gael yn Gymraeg

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