

# The Wilf Ward Family Trust

# The Paceys

## 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

The PACEYS is part of The Wilf Ward Family Trust, a not for profit organisation. It is a home providing a short breaks residential service with a holiday style atmosphere and can accommodate up to seven young adults with learning and/or physical disabilities. The home is in the centre of Swillington, close to local amenities.

At the last inspection in January 2015 the service was rated Good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'The PACEYS on our website at [www.cqc.org.uk](http://www.cqc.org.uk)'

At this unannounced inspection on the 7 June 2017 we found the service remained Good. The service met all relevant fundamental standards.

The service has a registered manager. 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.

Staff were knowledgeable about how to recognise signs of potential abuse and aware of the reporting procedures. Assessments we saw identified risks to people and management plans to reduce the risks were in place. We received extremely positive feedback from relatives of people who used the service. People we spoke with told us they felt safe and enjoyed staying at The PACEYS.

Robust recruitment procedures ensured the right staff were employed to meet people's needs safely.

At the time of the inspection there was sufficient staff on duty to meet people's needs. Relatives told us that during the respite stays there was adequate staff to meet people's needs and facilitate regular activities.

Systems were in place to make sure people received their medications safely during their stay. This included medication training and regular checks and audits of the system.

People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible.

People were treated with respect. People and their relatives told us staff were kind and very caring. Staff we spoke with were able to explain how they respected people's choices, preferences and ensured their privacy and dignity was maintained. We saw staff took account of people's individual needs while supporting them.

There was a system in place to tell people how to raise concerns and how these would be managed. Relatives told us they were listened to and felt comfortable raising any concerns with the management

team.

Relatives told us they were very happy with how the service was run. There were systems in place to monitor and improve the quality of the service provided. Action plans were implemented for any improvements required and these were followed by staff.

The quality monitoring had identified that some environmental improvements were required, we saw that many had commenced including redecoration of communal areas and this was planned to continue into all areas. However, the kitchen required remedial work but there was no dates agreed for implementation of these improvements.

Staff were clear about their roles and responsibilities and had access to policies and procedures to inform and guide them.

Further information is in the detailed findings below.

## 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 remains Good

### Is the service effective?

Good ●

The service remains Good

### Is the service caring?

Good ●

The service remains Good

### Is the service responsive?

Good ●

The service was responsive

People received personalised support that was tailored to their individual needs and preferences.

People were provided with opportunities to take part in things they enjoyed doing. People felt comfortable to raise any concerns with staff or management and were confident that they would be dealt with appropriately.

### Is the service well-led?

Good ●

The service remains Good

# The Paceys

## 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 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.'

This comprehensive inspection took place on 7 June 2017 and was announced. We gave short notice of the inspection in line with our methodology, as it was a respite service and we required the appropriate staff to be available.

Prior to the inspection visit we gathered information from a number of sources. 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.

We looked at notifications sent to the Care Quality Commission by the registered manager. We also obtained the views of professionals who may have visited the home, such as service commissioners, healthcare professionals and the local authority safeguarding team.

At the time of our inspection there were 82 people who used the service for periods of respite. Six people were using the service on the day of our visit. The service can accommodate up to seven people each day. As we were unable to communicate with some of people living at the home due to their complex needs we spent time observing care and support during our visit. However, we spoke with three people who used the service and contacted relatives by telephone and email following our inspection to gain their views.

We spoke with the registered manager, deputy manager and two support workers. We also contacted and spoke with two health care professionals following our inspection and four relatives.

We looked at documentation relating to two people who used the service and two staff, as well as the management of the service. This included people's care records, medication records, staff recruitment, training and support files, as well as minutes of meetings, quality audits, policies and procedures.

# Is the service safe?

## Our findings

People we spoke with told us they felt very safe when they stayed at The PACEYS. Relatives we spoke with told us they were confident that their family member was safe and well cared for during their stay. One relative said, "[My relative] is happy when they arrive and are happy when I collect them. They thoroughly enjoy their stay, which tells me they are safe and well cared for."

The provider had safeguarding policies and procedures in place to guide practice. Safeguarding procedures were designed to protect people from abuse and the risk of abuse. Staff we spoke with were knowledgeable on procedures to follow. Staff also told us that they knew how to report abuse to the local council themselves and would do this if needed. Staff had also had sight of the whistle blowing policy and told us they would feel comfortable to report any incident of poor practice to the management team, the local authority or the Care Quality Commission.

We found risk assessments were in place in people's care files. Risks had been regularly reviewed and these ensured risks were managed so people could be as independent as possible while their safety was monitored. Staff also understood how to manage risks to ensure people were safe. We also saw that there were personal emergency evacuation plans (PEEPs) in place in people's files to ensure safe evacuation procedures could be followed. We were shown environmental risk assessments that had identified risk to people and we found the home was clean well maintained.

Incidents and accidents were recorded and monitored to identify any themes or triggers to be able to manage and reduce the risk of an incident occurring again. From our observations and speaking with staff it was evident that staff understood people's individual needs and knew how to keep people safe.

We found there was adequate staff to meet people's needs. This had to be flexible as it depended on who was staying each day and what their dependency was. Staffing levels changed daily to accommodate people's different needs. Some people received one to one support for their safety and this was in place at the time of our inspection. Staff we spoke with confirmed there was adequate staff to be able provide the care and support required, including accessing the community and activities.

A robust recruitment and selection process was in place, which included new staff receiving a structured induction to the home. We sampled two staff files and saw that all essential pre-employment checks required had been received.

We looked at the systems in place for managing medicines in the service. This included the storage, handling and stock of medicines and medication administration records (MARs) for people. We found medicines were stored safely. We saw records were kept for medicines received, administered and disposal of medicines. We found people were receiving medication as prescribed. We also observed staff administering medicines safely and following procedures.

# Is the service effective?

## Our findings

People we spoke with said staff were kind. One person said, "It is good here."

A relative told us, "The staff are very good, we never have any issues during [my relatives] stay." Another relative said, "The communication is good. We keep on the same page when dealing with [my relative] so that they know their boundaries for safety and that they are the same for a consistent approach that works." They added, "The staff keep to this and let me know of any issues or concerns."

We found staff had the right skills, knowledge and experience to meet people's needs. All new staff completed an induction when they commenced work. We saw this included completing an induction workbook and shadowing an experienced staff member until they were assessed as confident and competent in their role. The induction included regular probation meetings to ensure staff were suitable and that they were appropriately supported into their new role.

The registered manager was aware of the Care Certificate introduced by Skills for Care. The Care Certificate looks to improve the consistency and portability of the fundamental skills, knowledge, values and behaviours of staff, and to help raise the status and profile of staff working in care settings. They told us two new staff were currently working towards the Care Certificate as part of their induction to the service.

Staff told us they felt they had received the training they needed to do their job well. The registered manager told us staff completed the company's mandatory training when they commenced employment. This included moving people safely, health and safety, food safety and safeguarding vulnerable people from abuse. There were also opportunities to attend specific training required to ensure staff were knowledgeable on people's various medical conditions and were able to meet their needs. Staff told us they had attended additional training in epilepsy, diabetes and autism to be able to understand how to best meet people's needs. Staff were also supported to achieve Level Two and Three diplomas in health and social care.

Staff had received regular supervision sessions and an annual appraisal of their work. Staff told us they worked well as a team and were well supported. One staff member told us, "We can talk in confidence; we are listened to and well supported. It is a lovely place to work."

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS). As the service is for respite (short stay) on most occasions a DoLS would not be required. However, we found that the registered manager had applied for 61 DoLS. When we discussed this, the registered manager demonstrated they were aware of the requirements and knew that most of the applications were not applicable. They told us they had been advised by the local authority to send in the applications. The registered manager agreed to review the people who used the service and withdraw any applications that were not required.

Staff gave examples of how people's best interests were taken into account if the person lacked capacity to make a decision. However, some records sampled did not clearly demonstrate that where people could not speak for themselves, decisions had been made in their best interest. For example some people had bed rails in place for safety, staff were able to explain why this decision had been made but it was not documented as a best interest decision. The best interest decision would evidence why and how the decision had been made and that it was the right decision for the person. The registered manager acknowledged this and has since the inspection confirmed in writing that this has been completed.

At tea time we observed the meal being prepared and served. We spoke with people about the food. People were able to choose what they wanted for tea and what time they wanted to eat. People told us they enjoyed the food and were actively involved in menu planning. One choice for tea was pizza and people were able to choose what topping they wanted on their pizza. The staff also sat and ate with people who used the service. The atmosphere was very pleasant, there was banter, laughing and joking together and it was observed to be an enjoyable experience for people.

Relatives we spoke with told us the food was good and there was plenty of choice. One relative told us, "[My relative] likes a curry and they often arrange at weekends a curry and film night, which everyone really enjoys."

People were supported to maintain good health. During their stay, if it was required, there was access to healthcare services. Care records detailed any health care professionals involved in the person's care, such as dieticians and occupational therapists. Health care professionals we spoke with told us the service was very good at seeking advice and guidance to ensure people's needs were met. For example, there had been an issue with some equipment, staff had identified this and were working with the health care professionals to ensure the correct equipment was in place to maintain safety. Until this was in place the registered manager had ensured the procedure being used until equipment was available was risk assessed and approved by the relevant health care professionals. Staff were fully aware of the procedure to follow to ensure the persons needs were met and they received effective care and support.

The registered manager had identified that improvements were required in the service and redecoration was on-going at the time of our visit. Further decoration was also planned. The registered manager had also identified that the kitchens on each unit were very tired and damaged. We found the seal on the fridge was damaged which meant the door may not have closed properly and maintained required temperatures and the freezer was encrusted in ice and required defrosting. However, there was no date for this work to be implemented in the kitchen. The registered manager agreed to look into this to ensure it was detailed in the action plan with dates for commencing of works.



## Is the service caring?

### Our findings

People told us that staff were nice and kind. During our observations we saw staff respected people, maintained their dignity and supported them with decisions.

Relatives we spoke with told us staff were very good, knew people's needs and provided good care and support. One relative said, "[my relative] is completely at ease at The PACEYS. I have a huge amount of praise for all the staff." Another relative said, "We are extremely happy with the respite care provided, they recognise people's specific needs and are very kind and caring." Another relative told us, "The staff are extremely kind, helpful and professional."

We saw that care and support was delivered in a kind and sensitive way. Staff interacted with people positively and there was an inclusive atmosphere. Staff told us they respected people's privacy and dignity and explained how they would knock on people's doors before entering and that they would close curtains when delivering care.

We spent some time in the communal areas during the inspection. We saw that staff were consistently reassuring and showed kindness towards people when they were providing support. Conversations were inclusive and appropriate. All the interaction we observed between staff and people they supported was appropriate and it was clear from how people approached staff they were happy, safe and confident in their company.

The registered manager told us that staffing numbers were determined to allow people to participate in activities off site, and we saw that staff went off site with people to participate in activities of their choice. The activities were individualised and meet people's preferences and we saw high levels of engagement with people throughout the inspection. People had been out during the day participating in various activities and staff told us more were planned for the evening. People told us they went to the local pub, shops and swimming pool.

Conversations we heard between people and staff showed staff understood people's needs; they knew how to approach people and also recognised when people wanted to be on their own. Staff we spoke with knew people well, and described people's preferences and how they wished to be addressed or supported. Staff understood the need to respect people's confidentiality and not to discuss issues in public, or disclose information to people who did not need to know. Any information that needed to be passed on about people was discussed at staff handovers, which were conducted in private.

## Is the service responsive?

### Our findings

Relatives we spoke with told us staff provided excellent care and support that met the needs of their family members. All relatives we spoke with praised the staff very highly. They told us staff understood people's needs and abilities and responded appropriately to them ensuring they had an enjoyable stay and their needs were met.

One relative told us, "I have a huge amount of praise for all the staff at The PACEYS, they all go the extra mile for their clients and their families, it is an amazing service."

Another relative explained to us how they had been very responsive to the need for an emergency admission due to family ill health. They said, "The emergency care could have been a very stressful situation but was made so much easier by the staff. It was the longest stay for [my relative] but they coped extremely well but again, this was down to the care of the excellent staff."

A further comment from a relative was, "We feel confident entrusting the care of [my relative] to the staff at The PACEYS and it enables us to have a relaxing break, knowing they are well looked after."

Each person had a care file which contained information about them and their individual care needs. The care files we sampled contained needs assessments which had been carried out before people were admitted to the home. Care plans and risk assessments had been completed. We saw where people were able they were involved in their care planning and people's likes, dislikes, choices and decisions were documented.

The daily records and visit records were all up to date. These records showed the registered manager worked responsively with external professionals when required. We saw input from an occupational therapist and dietician. The care records gave details of these for staff to follow any advice or guidance. The staff we spoke with were very passionate about ensuring people's needs were met and any changes responded to immediately.

Health care professionals we spoke with all said the staff identified changes and contacted relevant professional for advice or guidance. This ensured people's needs were met. One professional told us, "One person who I work with has been through some difficult times this past year. The PACEYS have been very responsive and supportive to them and their family offering extra respite at times of need. They have been very understanding about changes in the person's anxiety levels and have been proactive in identifying possible reasons for the increasing anxiety. They have continuously informed us and included all the appropriate services to help to resolve matters."

People were supported to access the community and participate in activities. Activities were planned involving individuals ensuring they were listened to and empowering them to make decisions. On the day of our inspection people had been out participating in activities and told us they had enjoyed the activity. One person told us they were going swimming after their tea and were looking forward to it. Relatives told us

there were plenty of activities. One relative said, "There's always plenty of activities going on and [my relative] is eager to join in, they always ask if there's anything they would particularly like to do, and if there is they try their hardest to do it with them."

People's religious and cultural needs were identified and met. We saw that different diets were provided for cultural needs and people were able to attend church or religious services while they stayed at The PACEYS. Staff we spoke with were very knowledgeable on people's religious and cultural needs and how to ensure they were met. For example, staff explained how they stored and cooked halal food separately to meet people's cultural needs.

We saw there was a wishing tree in reception, where people who used the service added their wishes, we saw recent wishes had been facilitated. For example, one person had wanted to go to a proper hairdresser which staff had arranged.

There was a guest council meeting held regularly. We saw minutes of these they were well structured and in a format that people could understand. We saw requests had been made at these meetings and had been followed through by the registered manager. For example, people had requested that a television was installed in the dining area as they liked to sit in this area. We saw that a large television had been installed on the wall, people we spoke with were very happy with the television. People were encouraged to provide feedback and raise any issues at these meetings. We saw all issues were taken seriously and responded to appropriately.

There was a complaints' policy which was given to each person when their care package commenced. It was written in plain English and gave timescales for the service to respond to any concerns raised. A record of compliments received had been maintained with outcomes

The relatives we spoke with told us they felt any concerns highlighted would be taken seriously by the management team and they would take action to address any issues raised. They told us they always felt listened to and any issues were always taken seriously no matter how minor.

## Is the service well-led?

### Our findings

At the time of our inspection the service had a manager in post who was registered with the Care Quality Commission. 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.

There was a structured team in place to support the registered manager. This included deputy managers, senior support workers and support workers. Each member of staff we spoke with was clear about their role and the roles of the other staff employed at the home.

Most people using the service were unable to communicate their views about leadership of the service but our observations were that the service benefitted positively from the registered manager and the way in which the home was run. Staff told us that they felt well supported by the management team. They said there was an open and transparent culture in the home and they were comfortable raising concerns. Staff told us they worked well as a team and everyone pulled together to ensure they provided a good service for people who accessed it. Staff we spoke with were extremely passionate about ensuring the people they supported received a good service that met their needs.

Relatives we spoke with told us the service was well managed. They confirmed communication was very good they were kept up to date of any changes and any new information or advice was shared.

We found systems were in place for managing safeguarding concerns and incidents and accidents. We found that the registered manager took steps to learn from such events and put measures in place which meant they were less likely to happen again.

Effective systems to monitor and improve the quality of the service provided were in place. We saw copies of reports produced by the registered manager. Any issues identified were recorded on an action plan and were actioned in a timely way.

The registered manager actively sought the views of people who used the service and their relatives. This was done in a number of ways such as daily interactions with people, guest meetings and questionnaires. People's feedback was taken into account to improve the quality of the service. We saw the results of the last survey that had been sent out and most of the comments were very positive.

Communication within the staff team was described as very good. Regular hand overs kept staff informed of people's changing situations. Staff meetings enabled staff to keep up to date with changes and updates.