



# Inspection Report on

**Pale Road**

**Neath**

## **Date Inspection Completed**

18/10/2022

18<sup>th</sup> October 2022

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## About Pale Road

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	National Autistic Society
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	06/08/2019
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

Pale Road is a very good service supporting individuals with autism. With effective governance and oversight by the National Autistic Society (NAS). The Responsible Individual (RI) ensures a good quality service that respects the wishes and aspirations of the people they support. We saw good mechanisms in place to support the continual monitoring and review of support provided to people.

People are listened to, and relatives are part of the care planning and review process. The service is supported by a long-standing staff team who know and respect people. People are safe and secure supported by well trained staff who have an understanding of safeguarding the individual.

## Well-being

People have a voice which is heard and listened to. People told us they are happy in the service and have choice in what they do and where they go. Relatives told us they are happy with the service; they are part of the reviews and contribute to decision making through the care planning process. People and relatives told us they feel listened to by the manager and staff team. Relatives told us; *“staff at the service are fantastic. Most of the staff are long term and treat all the residents, with great respect and care. The staff team are always approachable, friendly, and quick to let me know if they have any concerns”*.

The service has a long-standing staff team who are well supported through supervision and team meetings carried out within regulatory time scales. Staff are well trained, and able to support people in achieving their outcomes and what matters to them. We saw people actively supported to engage in meaningful activities around the home which promotes their independence, which is also reflected in their support plans and risk assessments.

People feel safe, secure, and protected from abuse and neglect. The provider has good systems and processes in place to safeguard people. Staff receive safeguarding training supported by sound policies and procedures which are updated and reviewed regularly. Relatives told us; *“I absolutely think they are safe and well cared for. My relative is always comfortable and happy to return to the service, if I take them out or have them to stay with me and that is extremely comforting knowing that they are quite happy to return”*.

Peoples physical and emotional well-being is supported very well. We saw well written support plans and detailed risk assessments, supporting people to be as independent as possible within their own home and their local community. Daily notes show people being supported to access local health care and documents are updated and reviewed where necessary.

We saw effective governance and oversight of the service from the R I. The RI has good systems in place to monitor the quality of the service and to support the manager and staff team in improving quality.

## Care and Support

The service provider has considered a wide range of views and information to confirm they are able to meet needs and support the outcomes of the people they support. We looked at two support plans which are up to date and person-centred. Support plans show the aspirations of people are being achieved such as holidays abroad. Plans show the involvement of the individual and their relatives. Relatives told us; *“Yes, we are involved, the annual reviews that we have are really helpful in showing me how the staff are trained and how they take great care of the residents”*. The guide to services is tailored to the needs of the individuals and reviewed regularly.

The provider has accurate and up to date plans in place in order to meet the needs of people. We saw support plans giving a clear picture of the individuals, their likes, and dislikes. Support plans show staff how to meet people’s needs without encroaching on their individual freedoms. Relatives told us; *“Yes, plans reflect their extremely active lifestyle and now that most of the Covid rules have subsided they are back in the community and enjoys swimming, golf, walking and watching the rugby. They are encouraged to make their own choices”*. We saw relevant well written risk assessments to underpin their support plans.

The service provides a good quality service supporting the needs and considering the wishes aspirations and outcomes of the people they support. We saw care plans and risk assessments putting people at the centre of the service. Relatives told us; *“I am extremely pleased with the way they treat my relative, and they are always presented immaculately. I have never had any concerns and I am relieved with the knowledge that they are happy and being looked after by people who really do care for them”*.

We saw good governance and oversight of the service. The RI has systems in place to monitor and review the quality of the service. The quality monitoring reports show people’s views of the service. A professional told us; *“overall, I am very pleased with the service, people there are very settled, and I think this is related to the support they have had over the long time they have lived there”*.

People told us they feel safe. The provider has good mechanisms in place to safeguard vulnerable people whom they support. Staff are aware of the safeguarding process which is supported by safeguarding policies and procedures which are regularly reviewed. Staff told us; *“I would go straight to the manager then the Responsible Individual, if I saw something I wouldn’t be afraid to say something”*.

## Environment

This is a lovely property managed by the NAS. The atmosphere is relaxed and welcoming, and the service meets the needs of the individuals. It is a large four-bedroom property looking over a beautiful well-maintained garden with picturesque views. We saw people are very relaxed carrying on with day-to-day activities independently showing this is their home. We saw individuals accessing the local community with support from staff. We saw the interior of the service is in need of some updating and repair, however the provider is working with Coastal Housing to ensure the necessary updates are made. People's rooms are decorated to reflect their tastes and are supported by staff to be as independent as possible in their choices.

The provider has mechanisms in place to identify and mitigate risks to the health and safety of people. We looked at Personal Emergency Evacuation Procedures (PEEP) which give clear instructions of how to support people in the event of a fire. These procedures are reviewed on a regular basis. There is a detailed risk assessment in place with consultation from fire safety professionals. The maintenance file was seen and showed regular health and safety checks are carried out to mitigate the risk to people. We saw some storage areas are a little cluttered this was discussed with the manager who assured us this is being addressed. We saw a Covid 19 risk assessment is in place, we were asked to confirm we were symptom free before entering the property to safeguard individuals.

## Leadership and Management

The provider has good governance and quality monitoring arrangements in place which supports the smooth operation of the service. The provider has a long-standing staff team who know people well and have the relevant skills and training. Relatives told us; *“this management team have always been contactable on the house phone, their mobile and via email. They always come back to me if I have a question immediately. If there have been any concerns about my relative, I have never had to contact them because they always make me aware in the first instance”*. There are policies and procedures in place which are reviewed on a regular basis. The Statement of Purpose (SoP) is well-presented and fully reflects the service being provided.

There are good arrangements in place for the effective oversight of the service. The NAS have a thorough and ongoing quality assurance process in place. The RI has an active role in the service. We saw quarterly visit reports which show consistent monitoring of the service and environment. We also saw six-monthly quality care reviews which give clear guidance and direction to the manager on actions to be taken to improve the quality of the service. The provider has oversight of the financial arrangements and investment in the service. We saw suitable staffing levels on the day of inspection, and this was confirmed by staff. Staff told us; *“Staffing levels are good, and we can make arrangements if one of the people are ill”*.

The NAS operates a culture of openness and candour at all levels. Staff told us they can speak openly about concerns and feel confident they would be supported by the management team. Relatives just told us they feel confident in speaking to the management and staff.

The service provides the appropriate number of staff who have the knowledge competency and skills, to support individuals to achieve their personal outcomes. Staff told us; *“Yes, we're always training, sometimes I think there's too much training”*. *“I've done NVQ 3, I've done PBM training refresher this year, Dols; Mental Capacity Act and I've done safeguarding as well, you do a lot of online training, I have even done vehicle awareness because we take people out in a vehicle”*. The training plans support this statement and confirm all staff are registered with Social Care Wales. Staff told us; *“things have changed a lot since I first started here, I didn't know a lot about autism and the words they used, but they give us regular training and now I see the importance of the training for the people living here without the training I wouldn't know how to support them.”* We looked at three staff files all recruitment documentation is in place. Supervision records show staff are well supported on a regular basis and their well-being is considered.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

### Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
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