



Inspection Report on

Paul Sartori Foundation

**Paul Sartori House
Winch Lane
Haverfordwest
SA61 1RP**

Date Inspection Completed

29/01/2024

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About Paul Sartori Foundation

Type of care provided	Domiciliary Support Service
Registered Provider	Paul Sartori Foundation Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	30 August 2022
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Paul Sartori is a domiciliary support service which is registered with the Care and Social Services Inspectorate Wales (CIW) to provide care and support to people over the age of 18. The service provides hospice at home care to people who are in the end stages of a life limiting illness. The care delivered includes personal care, complex psychological and emotional support and symptom management to meet the needs of a patient and their family.

People receive care and support, in their preferred way, from a team of consistent staff who they like and are familiar with. Personal plans provide accurate and up to date information regarding people's care needs and the way in which care staff should support each person. Risks known to people's health and well-being are recorded and managed to keep people safe. People are very happy indeed with the care they receive. Relatives of people who use the service appreciate the good communication they receive from the staff and manager. The Responsible Individual (RI) and the manager have implemented robust processes to regularly monitor the quality of the service provided and to ensure the service is run safely. The suitability of care staff to work at the service is checked, and relevant training is provided, to ensure that staff understand the needs of the people they support. Care staff enjoy working at the service and are well supported by the manager, the RI and the Trustee Management Board in their roles.

Well-being

People and their relatives are extremely happy with the service provided. People told us they have established very positive relationships with the care staff supporting them. They consistently praised the standard of care they receive and describe the staff as “*absolutely amazing*” and “*second to none*”. Relatives shared positive feedback regarding the service provided and they told us they felt “*very fortunate indeed*” to receive such a good service. Good communication by the staff and manager were said to be a particular strength of the service. Whenever possible the same care staff provide support to people to provide continuity of care. People and their relatives said that they very much appreciate the stability which this offers.

People are encouraged to have control over their day to day lives, as far as is possible. Choices are available to people in terms of how they wish to receive their care and support. Staff encourage people to share their views and feelings regarding the service they receive and, through the feedback provided, they contribute to the development of the service.

People’s physical and mental health and emotional well-being are promoted. Detailed personal plans and risk assessments are in place to inform care staff about how each person wishes to be supported as well as what staff must do to promote people’s health and wellbeing. Care staff provide support with medication and take prompt action in response to changes in people’s health. Contact is made with appropriate health and social care professionals when required. Arrangements are in place to keep people safe and to protect them from harm.

People’s well-being is enhanced by the provision of complementary therapies and treatments. We saw a number of well-equipped therapy rooms within the offices for people, their relatives and staff members to either see a counsellor or to have therapies. These include massage, aromatherapy, reflexology, relaxation techniques and reiki. Individual and group counselling is offered to people and their relatives. A well-managed and well-stocked equipment store ensures that people receive equipment, such as commodes, wheelchairs, profiling beds, mattresses and reclining chairs in a timely manner to make them more comfortable. We saw that equipment is kept in very good order and can be delivered to people at very short notice, often the same day.

The Welsh language and culture are respected. Several care workers are able to communicate in Welsh and have found this to be helpful in a number of instances. Staff are encouraged to take up opportunities to learn to speak Welsh to increase the service’s provision of the Welsh language.

Care and Support

People using the service, and their family members, are treated with dignity and respect and their rights are protected. Care and support is offered in addition to respite for people, assisting them to liaise with other relevant agencies and professionals. People are invited to make contact with the service prior to requiring support in order that an initial assessment can be made and support provided without delay if needed. This enables people to receive the right care and support at the right time. It also allows the service to be sufficiently flexible to meet people's needs effectively.

People are involved in decisions regarding the care and support they receive. Personal plans reflect discussions held with people, and their families where appropriate, regarding the support required. People told us they are regularly asked how they want to be supported and by who. Personal plans are up to date, accessible to care workers and record in detail how each person's care and support needs should be met. Care workers we spoke with demonstrated an awareness and understanding of the information recorded within each person's personal plan. We saw the support delivered was in line with the personal plan and risk assessments in place.

People are supported to receive the most appropriate care when their needs change and care packages in place can be adapted to meet their new needs. The service responds extremely quickly when people's support needs change, providing a very flexible service to continue to meet people's changing needs effectively.

People are protected from harm and abuse. Known risks to people's safety are recorded within their personal plans, as well as the measures in place to manage the risk. Care workers are confident regarding their roles and responsibilities in relation to protecting people from harm and abuse. Safeguarding training is provided, and a safeguarding policy is in place which clearly records what staff should do should they witness or suspect abuse. Care workers told us they felt able to raise any concerns and they were confident they would be listened to.

Environment

Leadership and Management

There are clear arrangements in place to oversee the smooth running of the service. We saw policies and procedures are in place to fulfil the aims of the statement of purpose. The Responsible Individual provides oversight of the service and liaises closely with the manager and the Board of Trustees. The care management team consistently support and develop staff to reach their full potential. Paid staff are complemented by a team of volunteers who work in the services and other departments to support the care staff and additional work of the Foundation. These include people who work in the complementary therapy service, in the shops and those involved in fundraising. All the staff we spoke with appeared well motivated and fully committed to their work.

Paul Sartori has a clear aim to 'provide sustainable services that promote good end of life care in Pembrokeshire'. This aim, led by the RI, manager and trustees, is clearly understood and demonstrated by care workers in all interactions with people and each other. Conversations with staff demonstrate a focus on the individual and a positive attitude towards how they support people and their family members as they approach the end of their lives. The service revalidated its Bronze 'Investors in Carers' award in 2023 and won the 'Team of the Year' award, competing against a mix of teams working across a number of counties.

Processes are in place to continually monitor, review and improve the quality of the service provided. The RI regularly meets with the manager, including a formal monthly meeting and informal discussions by phone, email and text. Trustee board meetings take place monthly in which the RI and manager are present and clinical matters are discussed and actioned. The RI attends clinical governance meetings on a quarterly basis and regularly visits the agency offices for meetings, events and informal discussions with staff. They also speak with people to gather their views about the service they receive. Quality of care reviews take place twice a year and the findings are recorded and shared with the Trustee Management Board.

People are supported by care workers who have the knowledge and skills to undertake their roles. The records we saw demonstrate new care workers are recruited safely and they are provided with training which is appropriate to their roles. Service specific training, for example, in quality of life, difficult conversations, building resilience, tender conversations and ethical debate, is offered to care workers in addition to mandatory training such as moving and handling and infection control. All care staff spoken to said they feel well supported in their roles and can access managerial advice and guidance when they need it. We saw staff receive one-to-one supervision sessions with their line manager and an annual appraisal. Staff team meetings take place regularly to discuss any

planned changes to the service, and to gather feedback regarding the service provided. All staff spoken with demonstrated a clear commitment to making a positive difference to the lives of the people they care for and support.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	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.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	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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