Provider Information to be published

The following information relates to information CIW held about this provider and its associated services on the 31st March 2024.

This section has been completed for you. There are no actions to complete. This information displayed will be included in the published Annual Return.

| Provider name: | | Celtic Care (Swansea) Ltd |
|--|---|---------------------------|
| The provider was registered on: | | 24/08/2018 |
| The following lists the provider conditions: | There are no imposed conditions associated to this provider | |

| elivered by this provide ere: | Service Type | Care Home Service |
|----------------------------------|--|--|
| | Type of Care | Adults Without Nursing |
| | Approval Date | 24/08/2018 |
| | Responsible Individual(s) | 24/00/2010 |
| | Manager(s) | Donielle Williams |
| | Maximum number of places | 2 |
| | Service Conditions | There are no conditions associated to this service |
| | Cartref Celtiadd | |
| | Service Type | Care Home Service |
| | Type of Care | Adults Without Nursing |
| | Approval Date | 24/08/2018 |
| | Responsible Individual(s) | |
| | Manager(s) | Kayleigh Walters |
| | Maximum number of places | 3 |
| | Service Conditions | There are no conditions associated to this servic |
| | Service Type | Care Home Service |
| | Type of Care | Adults Without Nursing |
| | Approval Date | 24/08/2018 |
| | Responsible Individual(s) | |
| | Manager(s) | Donielle Williams |
| | Maximum number of places | 4 |
| | Service Conditions | There are no conditions associated to this servic |
| | Celtic Care (Swansea)Ltd Dom Care Agency | |
| | Service Type | Domiciliary Support Service |
| | Type of Care | None |
| | Approval Date | 24/08/2018 |
| | Responsible Individual(s) | |
| | | Lisa Whiting |
| | Manager(s) | Lisa winding |
| | Manager(s) Partnership Area | West Wales |

| Training and Workforce Panning |
|--------------------------------|
|--------------------------------|

| Describe the arrangements in place during the last financial year for identifying, planning and meeting the training needs of staff employed by the service provider | All staff complete mandatory training. This was completed through our training site- Atlas and Social Care TV. We have a Training M atrix in place which indicates when training is due for refreshing. In addition to core training, identifying specialist training happens at assessment of referrals, changes in people we support present ations both physical and mental, discharges and at supervisions/c ompetency assessments. |
|--|---|
| Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider | We have recruited through Indeed, and all the recruitment would be completed by the manager. Staff retention is tracked and reported on to identify and respond to trends. Our health and wellbeing agenda including our Employ ee Assistance Programme has been cited as a positive aspect of working in our services, this lays the foundation for a positive wor k environment. |

Service Pofile Service Details Name of Service Calon Celtiadd Service Telephone Number 07914607745 What is/are the main language(s) through which your service is provided? English Medium with some billingual elements Other languages used in the provision of the service Welsh

Service Provision

| I | People Supported | |
|---|--|---|
| | How many people in total did the service provide care and support to during the last financial year? | 4 |

Fees Charged

| The minimum weekly fee payable during the last financial year? | 2197.10 |
|--|---------|
| The maximum weekly fee payable during the last financial year? | 3058.20 |
| If you wish to add further detail or comment regarding the scale of charges please do so below | |

Complaints

| Number of active complaints outstanding | 1 |
|--|---|
| Number of complaints upheld | 0 |
| Number of complaints partially upheld | 0 |
| Number of complaints not upheld | 0 |
| Total number of formal complaints made during the last financial year | 1 |
| What arrangements were made for consulting people who use the service about the operation of the service during the last financial year? | advocates meetings MDT meetings Monitoring visits CIW visits social worker visits |

Service Environment

| How many bedrooms at the service are single rooms? | 4 |
|--|-----------------------------|
| How many bedrooms at the service are shared rooms? | 0 |
| How many of the bedrooms have en-suite facilities? | 4 |
| How many bathrooms have assisted bathing facilities? | 2 |
| How many communal lounges at the service? | 1 |
| How many dining rooms at the service? | 1 |
| Provide details of any outside space to which the residents have access | large rear and front garden |
| Provide details of any other facilities to which the residents have access | Sensory room |

| Identify any non-verbal communication methods used in the provision of the service | |
|---|----|
| Picture Exchange Communication System (PECS) No | |
| Treatment and Education of Autistic and related Communication- handicapped CHildren (TEACCH) | No |
| Makaton | No |
| British Sign Language (BSL) | No |
| Other | No |

1

Statement of Compliance

| The Responsible Individual must prepare the statement of compliance. CIW have published <u>guidance</u> on completing the quality of care review which provides advice on what could be contained within the statement of compliance. | | |
|--|---|--|
| | | |
| The extent to which people feel their voices are heard, they have choice about their care and support, and opportunities are made available to them. | At Calon, We have always ensured that we are advocating for o ur service users and learn their preferred method of communic ation to maintain the knowledge about their needs and preferen ces. All our staff are trained in communication, this gives our st aff the ability to recognize different methods or signs of commu nication. In doing this we can determine the service users uniqu e goals and needs. We liaison with families, advocates and car e co Ordinator's to gain a further understanding and knowledge about our service users. | |
| The extent to which people are happy and supported to maintain their ongoing health, development and overall wellbeing. For children, this will also include intellectual, social and behavioural development. | There have been various activities and outings arranged . They have been many outdoor activities such as Techniquest, folly fa rm, west midlands safari, Longleat etc. Staff have arranged vari ous activities, arranged telephone contact and ensured consist ency in the service provision with regards to accommodating dif ferent levels of competencies and preferences in activities for t he individuals we support. Our last quality assurance report we have re-sent documentation for data collection about the servic e to professionals involved with the individual's we support. Thi s is a requirement by regulation 80 of the registration and inspection of social care act 2018. we sent out our documentation and have had very good feedback from professionals. One wrote: "My relation is always happy and well looked after by all of the s taff" | |
| The extent to which people feel safe and protected from abuse and neglect. | At Celtic Care we expect staff to adhere to our policies and pro cedures to maintain our secure and safe environment, free fro m any form of abuse. The staff must understand the importanc e of safeguarding and know in full detail how to access informat ion to assist them in raising a concern. We strive towards providing the best possible care for our resid ents in a safe environment. Abuse can however occur within or outside the home when residents are alone or accompanied. W e have trained our staff yearly on how to recognise and handle safeguarding issues. We have safeguarding referrals and supp ort to assist staff to understand the safeguarding of vulnerable adults. Our home created a safeguarding flowchart for the staff which shows the process of identifying and reporting safeguardi ng issues. We hold regular staff meetings and supervisions and during thi s we test staffs knowledge on legislation surrounding safeguard ing and the importance of whistleblowing, consent and communi cating with non verbal vulnerable adults. Their have been actions that have been taken to make the impr ovements/developments successful by the creation of the mana gement database and updating of all paperwork in the home. T his in turn has set a uniformed approach on how we provide car e throughout the service. The success of this can be measured through feedback received from the commissioner's and follow up visit and from the CIW inspections. The management databas se identifies time scales for completion of tasks; however, it is a working document and has with all care setting paperwork is re viewed and updated as the individual care needs change. | |

| The extent to which people live in accommodation that best supports their wellbeing and achievement of their personal outcomes. | Now we have been taken over by Potens we have more accessi bility to get support in maintaining and improving the accommo dation. We have our allocated maintaince man and he ensures that the home is maintained to a high standard and compliant w ith health and safety regulations. The garden area needs to be improved so the service users ca n gain more access and get more from their surroundings. Our sensory room could do with more sensory lights/items so w e can utilise It better The service users rooms are tailored to their preferences. Thes e are updated every so often when we see changes in their like s and dislikes. |
|---|---|
|---|---|

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 31 March)

The following section requires you to answer questions about each staff type including information about the number of filled and vacant posts, the training undertaken, the contractual arrangements in place and the qualifications of those staff.

| Staff Type | Service Manager | | |
|------------|--|-----|--|
| | Does your service structure include roles of this type? | Yes | |
| | Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year. | | |
| | Filled and vacant posts | | |
| | No. of staff in post | 1 | |
| | No. of posts vacant | 0 | |
| | Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'. | | |
| | Induction | 0 | |
| | Health & Safety | 1 | |
| | Equality, Diversity & Human Rights | 0 | |
| | Infection, prevention & control | 0 | |
| | Manual Handling | 0 | |
| | Safeguarding | 1 | |
| | Medicine management | 0 | |
| | Dementia | 1 | |
| | Positive Behaviour Management | 1 | |

| Food Hygiene | 1 | |
|---|---|--|
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | | |
| Contractual Arrangements | | |
| No. of permanent staff | 21 | |
| No. of Fixed term contracted staff | 0 | |
| No. of volunteers | 0 | |
| No. of Agency/Bank staff | 1 | |
| No. of Non-guaranteed hours contract (zero hours) staff | 0 | |
| Outline below the number of permanent and fixed term contact staff by hours worked per week. | | |
| No. of full-time staff (35 hours or more per week) | 11 | |
| No. of part-time staff (17-34 hours per week) | 8 | |
| No. of part-time staff (16 hours or under per week) | 2 | |
| Staff Qualifications | | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | 15 | |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | 6 | |
| Does your service structure include roles of this type? | Yes | |
| type? Important: All questions in this section relate spe | | |
| type? Important: All questions in this section relate spe | cifically to this role type only. Unless otherwise | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi | cifically to this role type only. Unless otherwise | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post No. of posts vacant | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post No. of posts vacant Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post No. of posts vacant Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post No. of posts vacant Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 | |
| type? | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 1 | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post No. of posts vacant Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 1 0 | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post No. of posts vacant Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 1 0 | |
| type? | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 1 0 1 0 1 | |
| type? | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 1 0 1 1 1 1 | |
| type? | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 1 0 1 0 1 0 0 | |
| type? Important: All questions in this section relate spe stated, the information added should be the posi Filled and vacant posts No. of staff in post No. of posts vacant Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management Dementia | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. 1 0 r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 1 0 1 0 0 1 1 0 0 0 | |

| Contractual Arrangements | | |
|---|---|--|
| No. of permanent staff | 0 | |
| No. of Fixed term contracted staff | 0 | |
| No. of volunteers | 0 | |
| No. of Agency/Bank staff | 0 | |
| No. of Non-guaranteed hours contract (zero hours) staff | 0 | |
| Staff Qualifications | | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | 0 | |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | 1 | |
| Other supervisory staff | | |
| Does your service structure include roles of this type? | Yes | |
| Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year. | | |
| Filled and vacant posts | | |
| No. of staff in post | 1 | |
| | | |
| No. of posts vacant Training undertaken during the last financial yea | | |
| | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed | |
| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that ma can be added to 'Please outline any additional tr | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed | |
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| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that ma can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is | |
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| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 | |
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| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 1 1 | |
| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that ma can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 1 1 1 0 | |
| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that ma can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management Dementia | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 0 1 1 1 0 0 | |
| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that ma can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management Dementia Positive Behaviour Management | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 0 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 0 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
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| Training undertaken during the last financial year Set out the number of staff who undertook relevat provided is only a sample of the training that mar- can be added to 'Please outline any additional transition outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 | |
| Training undertaken during the last financial year Set out the number of staff who undertook releva provided is only a sample of the training that mar- can be added to 'Please outline any additional tr not outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements No. of permanent staff | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 0 1 1 1 0 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| Training undertaken during the last financial year Set out the number of staff who undertook relevater provided is only a sample of the training that marking the added to 'Please outline any additional transition of outlined above'. Induction Health & Safety Equality, Diversity & Human Rights Infection, prevention & control Manual Handling Safeguarding Medicine management Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements No. of permanent staff No. of Fixed term contracted staff | r for this role type. ant training. The list of training categories y have been undertaken. Any training not listed aining undertaken pertinent for this role which is 0 0 0 0 0 1 1 1 0 0 0 0 0 1 1 1 0 0 0 0 1 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 | |

| No. of full-time staff (35 hours or more per week) | 1 |
|--|----|
| No. of part-time staff (17-34 hours per week) | 0 |
| No. of part-time staff (16 hours or under per week) | 0 |
| Staff Qualifications | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 1 |
| No. of staff working towards the required/recommended qualification | 0 |
| Nursing care staff | |
| Does your service structure include roles of this type? | No |
| Registered nurses | |
| Does your service structure include roles of this type? | No |
| Senior social care workers providing direct care | |
| Does your service structure include roles of this type? | No |
| Other social care workers providing direct care | |
| Does your service structure include roles of this type? | No |
| Domestic staff | |
| Does your service structure include roles of this type? | No |
| Catering staff | |
| Does your service structure include roles of this type? | No |
| Other types of staff | |
| Does your service structure include any additional role types other than those already listed? | No |

Service Profile

Service Details

|--|

| Service Telephone Number | 01792846518 |
|--|----------------|
| What is/are the main language(s) through which your service is provided? | English Medium |
| Other languages used in the provision of the service | |

Service Provision

| People Supported | |
|--|---|
| How many people in total did the service provide care and support to during the last financial year? | 3 |

Fees Charged

| The minimum weekly fee payable during the last financial year? | 2197.10 |
|--|---------|
| The maximum weekly fee payable during the last financial year? | 2812.11 |
| If you wish to add further detail or comment regarding the scale of charges please do so below | |

Complaints

| Number of active complaints outstanding | 0 |
|--|---|
| Number of complaints upheld | 0 |
| Number of complaints partially upheld | 0 |
| Number of complaints not upheld | 0 |
| Total number of formal complaints made during the last financial year | 0 |
| What arrangements were made for consulting people who use the service about the operation of the service during the last financial year? | Complaint Policy and procedure in place. Resident meetings External meetings with social workers Meetings with advocates General conversations daily Staff meetings QA feedback forms |

Service Environment

| | · · · · · · · · · · · · · · · · · · · |
|--|---|
| How many bedrooms at the service are single rooms? | 3 |
| How many bedrooms at the service are shared rooms? | 0 |
| How many of the bedrooms have en-suite facilities? | 1 |
| How many bathrooms have assisted bathing facilities? | 0 |
| How many communal lounges at the service? | 1 |
| How many dining rooms at the service? | 1 |
| Provide details of any outside space to which the residents have access | Enclosed Garden space that the residents have access too. |
| Provide details of any other facilities to which the residents have access | Back Garden only. |

Communicating with people who use the service

| Identify any non-verbal communication methods used in the provision of the service | |
|---|-----|
| Picture Exchange Communication System (PECS) | Yes |
| Treatment and Education of Autistic and related Communication- handicapped CHildren (TEACCH) | No |
| Makaton | Yes |
| British Sign Language (BSL) | No |
| Other | No |

The Responsible Individual must prepare the statement of compliance.

CIW have published guidance on completing the quality of care review which provides advice on what could be contained within the statement of compliance.

Set out your statement of compliance in respect to the four well-being areas below.

| have choice about their care and support, and opportunities are made available to them. . We fir eir wish s a cha ks they | ic Care we pride ourselves on ensuring that the individua upport feel that their choices, rights, feelings and though e forefront of the support that we supply. One way we en his is by having the individual and the families, advocates ofessionals included in every stage of their personal plan nd that this process helps us gain valuable insight into th hes and needs. During this process it gives the individual ance to inform us what their capabilities are and what tas y feel that they need support with. |
|---|--|
| | |
| lan that duals a ce com The pla ndividu ans in t e kept i they ar mented Reside sis to d th, once al goal e comp elves w eport w goal.To al servi d reside ividuals opinion and the eel nee viduals the opp All infor prove c ort. It is | all the information gathered we then compile a personal p ti is in a format that the individual understands. The indivi and are also given a copy of the plan for them to read on upleted and asked to sign if they are happy with the plan. ans are kept in the main file in the manager's office; the i als are asked if they would like to keep a copy of their pl their rooms. If they have requested that they want it to b in the office the manager will ensure to show them where re located if they need access to them. This is then docu d and signed by both resident and manager. ents key worker take time to sit with them on a monthly ba discuss what the individual's personal goal if or them mon we the goal has been decided they complete their Person plan which is set out in simple stages, once all stages ar olete they decide what they would like to challenge thems with for the next goal. This is evidenced in their monthly r with photos of the service user completing their personal o ensure that we priorities the importance to the individu ice user's feelings that their voice is being heard, we hol lent meetings every 3 months. During these meetings ind s are encouraged by their support workers to voice their ns on how they feel that the home is run, what they enjoy ey feel that works for the home but also what they might f eds improving. The staff always try to ensure that the indi is feel that this is a safe environment where they can have portunity to contribute to decisions that affect their lives. rmation gathered from these meetings is then used to im our service and the outcomes for the individuals we supp is Celtic Care ethos to ensure we promote an open and tr rent culture. |

| The extent to which people are happy and supported to maintain their ongoing health, development and overall wellbeing. For children, this will also include intellectual, social and behavioural development. | Having face to face visits maintaining family/friends contact and varying activities that have kept the people we support stimulated and motivated. The individuals have managed well and have continued to enjoy doing activities together and alone as per u ual. Service users are now back into a routine of their regular a ctivities within the community, such as friendship house, potter and dance and drama, tai chi and keep fit classes. Appointment for people we support are now up and running (although a wain ng time) and staff will support them to attend these. Most are face to face but on times they may be done over a telephone or ideo call. The service has supported an individual with volunteer ring work at a local café enabling them to develop skills in hosg tality and social interaction. We have had a stable full staff tea m. We have never had to employ agency staff as the staff are lways willing to cover the hours to meet the needs of the service e. At present we do have some staff off sick, and we are current ty recruiting to be at full capacity. All staff are up to date with their annual training with Social Care TV and Atlas and the manager monitors the training matrix informing staff when their training is due for renewal. For more complex needs we have class ro om based training to ensure that our staff are up to date and a ble to provide a safe package of care to the individuals. All our staff are signed up the QCF level 2/3 in Health and Social Care Wales in line with government legislation. As we have been acquisitioned by Poten's we willing be using a new training though Elfy. All Staff have quarterly supervisions and annual appraisals. The manager has a matrix to ensure that the supervisions and appraisals. The manager has a matrix to ensure that the supervisions and appraisals. The manager has a matrix to ensure that the supervisions and appraisals. The minager has a matrix to ensure that the supervisions and appraisals. The manager has a matrix to ensure that the supervisions and appraisals are al |
|--|--|
| The extent to which people feel safe and protected from abuse and neglect. | ch we feel is reflected in our staff retention. Our aim at Celtic Care is to promote a safe and secure environment, free from abuse and neglect, we ensure that the home understands that the rights of the people living within the home is the main priority in our philosophy of care. We promote those rights through the care and services we provide, and encourage all residents to exercise their rights to the full. We have policies and procedures in place that help people feel safe and protected from abuse and neglect. We have updated our Whistle E owing Policy since Potens has taken over Celtic Care to include the new contacts such as the Responsible Individual and Oper tions Manager. There has been no safeguarding incidents since the last report was completing. |
| | We strive towards providing the best possible care for our resi ents in a safe environment. Abuse can however occur within o outside the home when residents are alone or accompanied. We have trained our staff yearly on how to recognize and handle safeguarding issues. We have safeguarding referrals and sup ort to assist staff to understand the safeguarding of vulnerable adults. Our home created a safeguarding flowchart for the staff which shows the process of identifying and reporting safeguar ng issues. As standard, resident meetings are held regularly, f edback is sought to ensure they are happy with the care provi ed and what, if any, changes they would like to see in the hom or to their care. Residents have in the past, and continue to sp eak with staff, management and the responsible individual on one to one basis and in resident meetings to voice their opinio on the care they receive. This evidences the resident's confidence and comfort in the care they receive from the support worl ers, the managers and from the company as a whole. Feedback k from our last Monitoring Visit from the local authority (Neath ort talbot) it was picked up about a service users lightbulb not eing in place. With the input from this persons Social Worker and d family and carrying out a MCA it has been rectified and no for |

| The extent to which people live in accommodation that best supports their wellbeing and achievement of their personal outcomes. | At Cartref Celtiadd we maintain the service by having a mainten ance man that carried out maintenance within the service, there is a new schedule in place for ticketing jobs for them to be com pleted. We have a range of facilities at the home, there is a ope n communal lounge area, a utility room, a kitchen leading to a c onservatory where there is a dining area. The home has a 'hom ely' feel to it and this has been the feedback from recently audit s. The service users bedrooms are personalised to their own lik es and decorated with their own choice of paint / wallpaper and accessories. The home has weekly health and safety checks, e nsuring it a safe environment in line with legislation. There is pl anned works for improving the garden, and this has been raise d by maintenance. The back garden is accessible to all service users and have started to plant flowers to make it a more pleas ant area to be in. |
|---|---|
|---|---|

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 7 31 March)

I.

The following section requires you to answer questions about each staff type including information about the number of filled and vacant posts, the training undertaken, the contractual arrangements in place and the qualifications of those staff.

| Staff Type | Service Manager | | |
|------------|--|---|--|
| | Does your service structure include roles of this type? | Yes | |
| | Important: All questions in this section relate spe stated, the information added should be the pos | cifically to this role type only. Unless otherwise ition as of the 31st March of the last financial year. | |
| | Filled and vacant posts | | |
| | No. of staff in post | 1 | |
| | No. of posts vacant | 0 | |
| | Training undertaken during the last financial year for this role type. Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'. | | |
| | Induction | 1 | |
| | Health & Safety | 1 | |
| | Equality, Diversity & Human Rights | 1 | |
| | Infection, prevention & control | 1 | |
| | Manual Handling | 1 | |
| | Safeguarding | 0 | |
| | Medicine management | 1 | |
| | | | |

| Dementia | 0 | |
|---|---|--|
| Positive Behaviour Management | 1 | |
| Food Hygiene | 0 | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Epilepsy Continence Autism Learning Disability Record Keeping | |
| Contractual Arrangements | | |
| No. of permanent staff | 1 | |
| No. of Fixed term contracted staff | 0 | |
| No. of volunteers | 0 | |
| No. of Agency/Bank staff | 0 | |
| No. of Non-guaranteed hours contract (zero hours) staff | 0 | |
| Outline below the number of permanent and fixe | d term contact staff by hours worked per week. | |
| No. of full-time staff (35 hours or more per week) | 1 | |
| No. of part-time staff (17-34 hours per week) | 0 | |
| No. of part-time staff (16 hours or under per week) | 0 | |
| Staff Qualifications | | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | 1 | |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | 1 | |
| | | |
| Deputy service manager | | |
| Does your service structure include roles of this type? | No | |
| Other supervisory staff | | |
| Does your service structure include roles of this type? | No | |
| Nursing care staff | | |
| Does your service structure include roles of this type? | No | |
| Registered nurses | | |
| Does your service structure include roles of this type? | No | |
| Senior social care workers providing direct care | | |
| Does your service structure include roles of this type? | No | |
| Other social care workers providing direct care | | |
| Does your service structure include roles of this type? | Yes | |
| | | |

| Filled and vacant posts | |
|--|--|
| No. of staff in post | 13 |
| No. of posts vacant | 0 |
| Training undertaken during the last financial year Set out the number of staff who undertook releva provided is only a sample of the training that man can be added to 'Please outline any additional tr not outlined above'. | ant training. The list of training categories y have been undertaken. Any training not listed |
| Induction | 13 |
| Health & Safety | 13 |
| Equality, Diversity & Human Rights | 11 |
| Infection, prevention & control | 13 |
| Manual Handling | 13 |
| Safeguarding | 12 |
| Medicine management | 13 |
| Dementia | 0 |
| Positive Behaviour Management | 6 |
| Food Hygiene | 13 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements | |
| No. of permanent staff | 13 |
| No. of Fixed term contracted staff | 0 |
| No. of volunteers | 0 |
| No. of Agency/Bank staff | 1 |
| | 0 |
| No. of Non-guaranteed hours contract (zero hours) staff | |
| | d term contact staff by hours worked per week. |
| staff | d term contact staff by hours worked per week. |
| Outline below the number of permanent and fixe | |
| Outline below the number of permanent and fixe No. of full-time staff (35 hours or more per week) | 7 |
| Outline below the number of permanent and fixe No. of full-time staff (35 hours or more per week) No. of part-time staff (17-34 hours per week) | 7 6 0 |
| Outline below the number of permanent and fixe No. of full-time staff (35 hours or more per week) No. of part-time staff (17-34 hours per week) No. of part-time staff (16 hours or under per week) | 7 6 0 |
| Outline below the number of permanent and fixe No. of full-time staff (35 hours or more per week) No. of part-time staff (17-34 hours per week) No. of part-time staff (16 hours or under per week) Typical shift patterns in operation for employed s Set out the typical shift patterns of staff employed at the service in this role type. You should also include the average number of staff working in | 7 6 0 staff 3 staff per day 1:1 (8am-10am) |
| Outline below the number of permanent and fixe No. of full-time staff (35 hours or more per week) No. of part-time staff (17-34 hours per week) No. of part-time staff (16 hours or under per week) Typical shift patterns in operation for employed s Set out the typical shift patterns of staff employed at the service in this role type. You should also include the average number of staff working in each shift. | 7 6 0 staff 3 staff per day 1:1 (8am-10am) |

| Does your service structure include roles of this type? | No |
|--|----|
| Catering staff | |
| Does your service structure include roles of this type? | No |
| Other types of staff | |
| Does your service structure include any additional role types other than those already listed? | No |

Service Profile

Service Details

| Name of Service Celtic Care (Swansea)Ltd Dom Care Agency | |
|--|--|
|--|--|

| Service Telephone Number | 01639893101 |
|--|--|
| What is/are the main language(s) through which your service is provided? | English Medium with some billingual elements |
| Other languages used in the provision of the service | currently the main languages used to provide the service are E nglish, for those individuals who prefer to be spoken to in their native language. For Welsh speaking individuals we are able to provide staff that can communicate in Welsh. For individuals wh o have communication difficulties we are able to provide suppor t. |

Service Provision

People Supported

| How many people in total did the service provide care and support to during the last financial year? | 46 | |
|--|----|--|
| support to during the last marcial years | | |

Fees Charged

| The minimum hourly rate payable during the last financial year? | 23 |
|--|---|
| The maximum hourly rate payable during the last financial year? | 26.50 |
| If you wish to add further detail or comment regarding the scale of charges please do so below | $\pounds23$ was for Private care and local health board charges $\pounds26.50$ w as from local Authority. |

Complaints

| Number of active complaints outstanding | 0 |
|---|---|
| Number of complaints upheld | 0 |
| Number of complaints partially upheld | 0 |
| Number of complaints not upheld | 0 |
| Total number of formal complaints made during the last financial year | 0 |

| year? | ome file. The manager can be contacted using the contact numbe r found in the file. The managers make routine contact with the se rvice when three monthly reviews are completed. Family members and carers who are involved in the service users care package ar |
|-------|--|
| | e able to contribute to the reviews |

Communicating with people who use the service

| Identify any non-verbal communication methods used in the provision of the service | |
|---|---|
| Picture Exchange Communication System (PECS) | Yes |
| Treatment and Education of Autistic and related Communication- handicapped CHildren (TEACCH) | No |
| Makaton | Yes |
| British Sign Language (BSL) | No |
| Other | Yes |
| List 'Other' forms of non-verbal communication used | these include facial expressions ,gestures, body postures and ge stures, hand signals e.g. thumb up or down |

Statement of Compliance

The Responsible Individual must prepare the statement of compliance.

CIW have published guidance on completing the quality of care review which provides advice on what could be contained within the statement of compliance.

Set out your statement of compliance in respect to the four well-being areas below.

| The extent to which people feel their voices are heard, they have choice about their care and support, and opportunities are made available to them. | Managers visit each individual service user as planned and this will usually include a relative or the main carer. This gives each person a chance to discuss their care plan and individual need s. this should have been done as well, when the Adult team wor ker made the initial visit to establish the level of need before th e package was agreed and put on the waiting list for providers t o view. Managers will establish what the individual's prefernces are regarding how they are addressed and how they like meals and drinks prepared and what their preferred options are. The i ndividual will also be informed of the length of the calls which st aff are allocated. There are tasks which are included in the package such as bed changing and managing the laundry, the individual can indicate their preferred options. When providing per sonal care the staff will encourage individuals to manage what t hey are able for themselves to promote a good level of indepen dence and a feeling of well being. Where an idividual is able sta ff would encourage the person to choose what they want to wea r and assist with dessing and encourage people to be clean an d comfortable. |
|--|--|

| The extent to which people are happy and supported to maintain their ongoing health, development and overall wellbeing. For children, this will also include intellectual, social and behavioural development. | Celtic Care are providing support to a number of individual with specific critical health needs. These packages are provided wit h two care staff and the use of equipment for all transfers. The packages are enabling individuals to remain in their own homes . The care package is also supporting main carers, who may be a spouse or son/daughter living with the individual. |
|---|---|
| | Celtic Care have in recent months provided an increased care package for two individuals with End of life care needs, wishing to remain at home. This was provided working closely with Distri ct nurses, General Practitioners and Occupational Therapists t o provide the appropriate care with compassion and Dignity. O ne individual has sadly passed away at home. The other individ ual has improved and continues to receive a reduced level of s upport at home and is able to attain a good quality of life. Staff were complemented on the care provided by family and h ealth professionals. Staff have been supported to manage and maintain emotional well being throughout. |
| | Individuals who need to attend routine medical appointments or periods of out patient treatment are supported when needed wit h changed call times, this includes appointments for dental che ck ups, also podiatry and optician where practical. Individuals a nd family members have given their thanks for the flexibility of t he service. Celtic Care work routinely with the community nurses where this support is provided for any of the service users. Should there be a need staff also work with occupational Thera py to support any changes. |
| | Service users would benefit from additional socialisation , howe ver this is not part of the service provided by Ceredigion Dmicil ary services. Celtic Care have identified one service user who was, after a time allocated Direct Payments for the employment of a personal assistant which is provded by a staff member. this has proved extremely beneficial for this individual. Ceredigion Dom care services are rigid in their observation of t he guidelines for care packages. With the private clients to whom we have provide a service we have had more flexibility with what support we can provide. |
| The extent to which people feel safe and protected from abuse and neglect. | Staff receive training on safeguarding and whistleblowing and mandatory core subjects. Supervision is carried out with staff and observation during wor k. Individuals receiving a service are encouraged to give their o pinion and views of the support they receive. Managers are ava ilable at all times during the shift times. Routine reviews are carried out enabling the service user to dis cuss the package with the managers. Reviews are also carried out by the allocated Adult team case worker or the reviewing officer annually, when the service user and or their main carer or family member can discuss any conc erns or issues. Feedback from case workers has been very pos- itive. Staff are registered with Social Care Wales as per the regulatio ns. Staff are enrolled on the QCF 2 course with Cymru Care Tr aining under Pembroke College. Any service user specific training will be provided as well as top |
| | cs where a staff member may be interested in gaining more info rmation. |

Number of posts and staff turnover

| The total number of full time equivalent posts at the service (as at | 15 |
|--|----|
| 31 March) | |

The following section requires you to answer questions about each staff type including information about the number of filled and vacant posts, the training undertaken, the contractual arrangements in place and the qualifications of those staff.

| Staff Type | Service Manager | | |
|-------------------------|--|--|--|
| | Does your service structure include roles of this type? | Yes | |
| | Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year. | | |
| Filled and vacant posts | | | |
| | No. of staff in post | 1 | |
| | No. of posts vacant | 0 | |
| | Training undertaken during the last financial yea Set out the number of staff who undertook releva provided is only a sample of the training that may can be added to 'Please outline any additional tr not outlined above'. | ant training. The list of training categories y have been undertaken. Any training not listed | |
| | Induction | 0 | |
| | Health & Safety | 1 | |
| | Equality, Diversity & Human Rights | 0 | |
| | Manual Handling | 1 | |
| | Safeguarding | 1 | |
| | Dementia | 0 | |
| | Positive Behaviour Management | 0 | |
| | Food Hygiene | 1 | |
| | Please outline any additional training undertaken pertinent to this role which is not outlined above. | Fire Extinguisher Diabetes Awareness Safeguarding of Children Anxiety Autism-and-learning-disabilities Care planning Consent COSHH Cyber security Drug misuse Eating disorders Food hygiene Health and safety Safe administration of medication Self harm Train the trainer SOVA | |
| | Contractual Arrangements | | |
| | No. of permanent staff | 1 | |
| | No. of Fixed term contracted staff | 0 | |
| | No. of volunteers | 0 | |
| | No. of Agency/Bank staff | 0 | |
| | No. of Non-guaranteed hours contract (zero hours) staff | 0 | |
| | Outline below the number of permanent and fixe | d term contact staff by hours worked per week. | |
| | No. of full-time staff (35 hours or more per week) | 1 | |
| | No. of part-time staff (17-34 hours per week) | 0 | |

| lo. of part-time staff (16 hours or under per week) | 0 |
|---|---|
| Staff Qualifications | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | 1 |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | 0 |
| Deputy service manager | |
| Does your service structure include roles of this type? | Yes |
| Important: All questions in this section relate spe stated, the information added should be the pos | cifically to this role type only. Unless otherwise tion as of the 31st March of the last financial year. |
| Filled and vacant posts | |
| No. of staff in post | 1 |
| No. of posts vacant | 0 |
| | 1 |
| Set out the number of staff who undertook relevations provided is only a sample of the training that matcan be added to 'Please outline any additional transformation outlined above'. | |
| Induction | 0 |
| Health & Safety | 1 |
| Equality, Diversity & Human Rights | 0 |
| Equality, Diversity & Haman Rights | 0 |
| Manual Handling | 0 |
| | |
| Manual Handling | 0 |
| Manual Handling Safeguarding | 0 |
| Manual Handling Safeguarding Dementia | 0 1 1 |
| Manual Handling Safeguarding Dementia Positive Behaviour Management | 0 1 1 0 |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour Diet Nutrition and Hydration |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour Diet Nutrition and Hydration 1 |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements No. of permanent staff No. of Fixed term contracted staff | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour Diet Nutrition and Hydration 1 0 |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements No. of permanent staff No. of Fixed term contracted staff No. of volunteers | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour Diet Nutrition and Hydration 1 0 0 |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements No. of permanent staff No. of Fixed term contracted staff No. of volunteers No. of Agency/Bank staff No. of Non-guaranteed hours contract (zero hours) | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour Diet Nutrition and Hydration 1 0 0 0 0 |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements No. of permanent staff No. of Fixed term contracted staff No. of Agency/Bank staff No. of Non-guaranteed hours contract (zero hours) staff | 0 1 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour Diet Nutrition and Hydration 1 0 0 0 0 |
| Manual Handling Safeguarding Dementia Positive Behaviour Management Food Hygiene Please outline any additional training undertaken pertinent to this role which is not outlined above. Contractual Arrangements No. of permanent staff No. of Fixed term contracted staff No. of volunteers No. of Agency/Bank staff No. of Non-guaranteed hours contract (zero hours) staff Outline below the number of permanent and fixe | 0 1 1 0 1 Stress Management Safe administration of medication Bullying and Harassment Oral Health duty of candour Diet Nutrition and Hydration 1 0 < |

| Staff Qualifications | | |
|--|---|--|
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | 1 | |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | 0 | |
| Other supervisory staff | | |
| Does your service structure include roles of this type? | No | |
| Senior social care workers providing direct care | | |
| Does your service structure include roles of this type? | No | |
| Other social care workers providing direct care | | |
| Does your service structure include roles of this type? | Yes | |
| Important: All questions in this section relate spe stated, the information added should be the pos | ecifically to this role type only. Unless otherwise ition as of the 31st March of the last financial year. | |
| Filled and vacant posts | | |
| No. of staff in post | 15 | |
| No. of posts vacant | 1 | |
| Training undertaken during the last financial year for this role type. Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'. | | |
| Induction | 5 | |
| Health & Safety | 13 | |
| Equality, Diversity & Human Rights | 5 | |
| Manual Handling | 14 | |
| Safeguarding | 15 | |
| Dementia | 12 | |
| Positive Behaviour Management | 0 | |
| Food Hygiene | 15 | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Safe administration of medication Infection control QCF 2 QCF 3 Oral hygiene Fire safety COSHH Communication Continence Food Hygiene any other specific service user led training | |
| Contractual Arrangements | | |
| No. of permanent staff | 15 | |
| No. of Fixed term contracted staff | 0 | |
| No. of volunteers | 0 | |
| | | |

| No. of Agency/Bank staff | 2 |
|--|--|
| No. of Non-guaranteed hours contract (zero hours) staff | 13 |
| Outline below the number of permanent and fixe | d term contact staff by hours worked per wee |
| No. of full-time staff (35 hours or more per week) | 6 |
| No. of part-time staff (17-34 hours per week) | 7 |
| No. of part-time staff (16 hours or under per week) | 2 |
| Staff Qualifications No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 14 |
| No. of staff working towards the required/recommended qualification | 1 |
| Other types of staff | |
| Does your service structure include any additional role types other than those already listed? | No |

Service Profile

| vice Details | |
|--|-----------------------|
| Name of Service | Celtic Dawn Care Home |
| Service Telephone Number | 07914607745 |
| What is/are the main language(s) through which your service is provided? | English Medium |

no

Service Provision

Other languages used in the provision of the service

| People Supported | |
|--|---|
| How many people in total did the service provide care and support to during the last financial year? | 2 |

Fees Charged

| The minimum weekly fee payable during the last financial year? | 1865.12 |
|--|---------|
| The maximum weekly fee payable during the last financial year? | 2505.57 |
| If you wish to add further detail or comment regarding the scale of charges please do so below | |

Complaints

| Number of active complaints outstanding | 0 |
|---|---|
| Number of complaints upheld | 0 |

| Number of complaints partially upheld | 0 |
|--|---|
| Number of complaints not upheld | 0 |
| Total number of formal complaints made during the last financial year | 0 |
| What arrangements were made for consulting people who use the service about the operation of the service during the last financial year? | |

Service Environment

| How many bedrooms at the service are single rooms? | 2 |
|--|-------------------|
| How many bedrooms at the service are shared rooms? | 0 |
| How many of the bedrooms have en-suite facilities? | 2 |
| How many bathrooms have assisted bathing facilities? | 0 |
| How many communal lounges at the service? | 1 |
| How many dining rooms at the service? | 1 |
| Provide details of any outside space to which the residents have access | large rear garden |
| Provide details of any other facilities to which the residents have access | None |

Communicating with people who use the service

| Identify any non-verbal communication methods used in the pro- | ovision of the service |
|---|------------------------|
| Picture Exchange Communication System (PECS) | No |
| Treatment and Education of Autistic and related Communication- handicapped CHildren (TEACCH) | No |
| Makaton | No |
| British Sign Language (BSL) | No |
| Other | No |

Statement of Compliance

Γ

The Responsible Individual must prepare the statement of compliance.

CIW have published <u>guidance</u> on completing the quality of care review which provides advice on what could be contained within the statement of compliance.

Set out your statement of compliance in respect to the four well-being areas below.

| have choice about their care and support, and opportunities are made available to them. he at od an ha en vic da | If the individuals we support have a personal plan created with hem. To ensure the plan is accurate and the individuals are in olved in the planning process, giving their own input on what t tey feel they can do independently and what tasks they feel th it they need support with. We feel that Celtic Care are really go d at listening to the individual and ensuring they have a voice and that their views are valued. This is evident from feedback t that we receive from the individuals and their family members wh on asked what they think of the service. To ensure that the indi- idual is feeling that their voice is being heard and we are up to late with their involving needs and preferences we hold reside it meetings every month. |
|---|--|
|---|--|

| The extent to which people are happy and supported to maintain their ongoing health, development and overall wellbeing. For children, this will also include intellectual, social and behavioural development. | There have been various activities and outings arranged. The i ndividuals we support are now attending a dance class, which t hey choose to go to. The feedback from this is that they enjoy It and it is a good form of exercise. One has also shown interest i n joining the local knitting group so has been attending the gro up and has really enjoyed this and it had improved their skills. We have one resident who is now attending dementia choir and is liking the experience. We always ensure that the residents ke ep as much independance as possible by doing some daily livin g tasks to develop their skills. |
|---|---|
| The extent to which people feel safe and protected from abuse and neglect. | Our aim at Celtic Care is to promote a safe and secure environ ment, free from abuse and neglect, we ensure that the home u nderstands that the rights of the people living within the home i s the main priority in our philosophy of care. We promote those rights through the care and services we provide, and encourag e all residents to exercise their rights to the full. We have polici es and procedures in place that help people feel safe and prot ected from abuse and neglect. We strive towards providing the best possible care for our residents in a safe environment. Abu se can however occur within or outside the home when resident s are alone or accompanied. We have trained our staff yearly o n how to recognise and handle safeguarding issues. We have s afeguarding referrals and support to assist staff to understand the safeguarding of vulnerable adults. Our home created a safe guarding flowchart for the staff which shows the process of iden tifying and reporting safeguarding issues. |
| The extent to which people live in accommodation that best supports their wellbeing and achievement of their personal outcomes. | We have a handyman whose main role is to ensure that the ho me is maintained to a high stand and is compliant with any Heal th and Safety Regulations. Managers and staff also have respo nsibilities to ensure that the home is in line with current legislati on, they ensure that all fire escape routes are free from clutter and unobstructed. Fire exit signs and fire extinguishers are in ci ear view and all staff and people we support are informed wher e the fire exits are located and where the assembly point for the home is. All new staff have to take part in a full fire evacuation within their induction period so they are aware of the company health and safety protocols, there is also weekly, monthly and b i annual fire drills to ensure that the people we support and staff f are aware of the escape routes and what action to take in the event of a fire or the fire alarm sounding |

Number of posts and staff turnover

| The total number of full time equivalent posts at the service (as at | 8 |
|--|---|
| 31 March) | |

The following section requires you to answer questions about each staff type including information about the number of filled and vacant posts, the training undertaken, the contractual arrangements in place and the qualifications of those staff.

| Staff Type | Service Manager | |
|------------|--|--|
| | Does your service structure include roles of this type? | Yes |
| | Important: All questions in this section relate spe stated, the information added should be the pos | cifically to this role type only. Unless otherwise ition as of the 31st March of the last financial year. |

| No. of staff in post | 1 |
|--|--|
| No. of posts vacant | 0 |
| Training undertaken during the last financial year Set out the number of staff who undertook releva provided is only a sample of the training that ma can be added to 'Please outline any additional tr not outlined above'. | ant training. The list of training categories |
| Induction | 0 |
| Health & Safety | 0 |
| Equality, Diversity & Human Rights | 0 |
| Infection, prevention & control | 0 |
| Manual Handling | 1 |
| Safeguarding | 1 |
| Medicine management | 0 |
| Dementia | 1 |
| Positive Behaviour Management | 0 |
| Food Hygiene | 0 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | 0 |
| Contractual Arrangements | |
| No. of permanent staff | 6 |
| No. of Fixed term contracted staff | 0 |
| No. of volunteers | 0 |
| No. of Agency/Bank staff | 0 |
| No. of Non-guaranteed hours contract (zero hours) staff | 0 |
| Outline below the number of permanent and fixe | d term contact staff by hours worked per week. |
| No. of full-time staff (35 hours or more per week) | 2 |
| No. of part-time staff (17-34 hours per week) | 3 |
| No. of part-time staff (16 hours or under per week) | 1 |
| Staff Qualifications | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | 1 |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | 0 |
| Deputy service manager | |
| Does your service structure include roles of this type? | No |
| | |
| Other supervisory staff | |

| Filled and vacant posts | |
|--|--|
| No. of staff in post | 1 |
| No. of posts vacant | 0 |
| Training undertaken during the last financial year Set out the number of staff who undertook releva provided is only a sample of the training that ma can be added to 'Please outline any additional tr not outlined above'. | ant training. The list of training categories |
| Induction | 0 |
| Health & Safety | 1 |
| Equality, Diversity & Human Rights | 1 |
| Infection, prevention & control | 0 |
| Manual Handling | 0 |
| Safeguarding | 1 |
| Medicine management | 0 |
| Dementia | 1 |
| Positive Behaviour Management | 0 |
| Food Hygiene | 0 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | |
| Contractual Arrangements | |
| No. of permanent staff | 1 |
| No. of Fixed term contracted staff | 0 |
| No. of volunteers | 0 |
| No. of Agency/Bank staff | 0 |
| No. of Non-guaranteed hours contract (zero hours) staff | 0 |
| Outline below the number of permanent and fixe | d term contact staff by hours worked per week. |
| No. of full-time staff (35 hours or more per week) | 0 |
| No. of part-time staff (17-34 hours per week) | 1 |
| No. of part-time staff (16 hours or under per week) | 0 |
| Staff Qualifications | |
| | 1 |
| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | |
| be registered with Social Care Wales as a social | 0 |
| be registered with Social Care Wales as a social care worker No. of staff working towards the | 0 |
| be registered with Social Care Wales as a social care worker No. of staff working towards the required/recommended qualification | 0 No |

| Senior social care workers providing direct care | |
|--|----|
| Does your service structure include roles of this type? | No |
| Other social care workers providing direct care | |
| Does your service structure include roles of this type? | No |
| Domestic staff | |
| Does your service structure include roles of this type? | No |
| Catering staff | |
| Does your service structure include roles of this type? | No |
| Other types of staff | |
| Does your service structure include any additional role types other than those already listed? | No |