Provider Information to be published

The following information relates to information CIW held about this provider and its associated services on the 31st March 2023.

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: | | Brynhaulog Limited | |
|--|---|--|--|
| The provider was registered on: | | 18/02/2019 | |
| The following lists the provider conditions: | There are no imposed conditions associated to this provider | | |
| The regulated services delivered by this provider | Sunnybank Care Home | | |
| were: | Service Type | Care Home Service | |
| | Type of Care | Adults Without Nursing | |
| | Approval Date | 18/02/2019 | |
| | Responsible Individual(s) | Rhidian Havard | |
| | Manager(s) | Margaret Havard | |
| | Maximum number of places | 5 | |
| | Service Conditions | There are no conditions associated to this service | |

Training and Workforce Planning

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

We have a training matrix in place that we work from, it identifies w hich staff need training and in what areas. New staff are also und ertaking new training courses this has including the new Joint Community Induction Course in partnership with NHS Wales.

Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider

We have taken on a new staff member who is keen to progress with her career, we have a low level of staff turnover having only los t two members of staff who decided to pursue a different career. We have found that "Word of mouth" is the best for method of recruitment in our business, as we live in a rural location in Pembrok eshire and our present staff members often recommend us as an employer.

Service Profile

Service Details

| Name of Service | Sunnybank Care Home |
|--|---------------------------------|
| | |
| Telephone Number | 01348811369 |
| What is/are the main language(s) through which your service is provided? | Welsh Medium and English Medium |
| Other languages used in the provision of the service | Makaton |

Service Provision

People Supported

| How many people in total did the service provide care and | 5 |
|---|---|
| support to during the last financial year? | |

Fees Charged

| The minimum weekly fee payable during the last financial year? | 656.60 |
|--|---------|
| The maximum weekly fee payable during the last financial year? | 1420.39 |

Complaints

| What was the total number of formal complaints made during the last financial year? | 0 |
|--|---|
| Number of active complaints outstanding | 0 |
| Number of complaints upheld | 0 |
| Number of complaints partially upheld | 0 |
| Number of complaints not upheld | 0 |
| What arrangements were made for consulting people who use the service about the operation of the service during the last financial year? | 6 monthly family questionnaires were sent out |

Service Environment

| How many bedrooms at the service are single rooms? | 5 |
|--|--|
| 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? | 1 |
| 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 | A rear garden and patio area and summer house Front patio with seating area. Vegetable garden and potting shed |
| Provide details of any other facilities to which the residents have access | Conservatory |

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 |

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.

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 Resident meetings are held at Sunnybank where they can voic have choice about their care and support, and opportunities e any concerns, requests and generally have chat about how t are made available to them. hey are feeling about living in Sunnybank. At the most recent meeting one resident wanted to buy new sho es and clothes these were ordered and have now been deliver ed as well as having had the opportunity to buy a new coat on a trip to Haverfordwest which they are very pleased with. Another resident also wanted to buy new clothes and they had t he opportunity to purchase new ones on their weekly trips out t o town. A further resident who has certain communication difficulties, w as encouraged to use her communication chart to let her feelin gs be known. The resident wanted to bake some cakes as this i s something they enjoyed doing many times in the past, as well as go shopping and continue having weekly video calls with their r family member who lives abroad. The manager at Sunnybank has responsibility to residents for The extent to which people are happy and supported to maintaining health and well being. The home has a close relatio maintain their ongoing health, development and overall wellbeing. For children, this will also include intellectual, social nship with the local G.P. and they are always on hand to suppo and behavioural development. rt the residents. One resident has regular visits from the District Nurse to ensur e their wellbeing. Some residents have seen the dentist at the beginning of the y ear and were identified as in need of some minor procedures. Residents are given the opportunity to make weekly visits the lo cal Gym, this is something they enjoy and look forward to as pa rt of their weekly activities. It also is important for their general h ealth and wellbeing. The gym instructor in particular has comm ented one how their mobility has improved considerably over th e last 12 months. A recent check of the care plans revealed some residents are d ue check ups in October, these appointments have been made. The extent to which people feel safe and protected from abuse There have been no concerns or reported incident of abuse at and neglect. Sunnybank. Some staff have completed safeguarding training over the last year, however, some need refreshing and this will be completed within the month. The policy and procedure for dealing with residents personal all owance money has recently undergone a major change. Previo usly the R.I. was responsible for ensuring that the money was c orrect and all necessary receipts obtained. All staff now have a more hand on roll with accessing the money on behalf of the re sidents, this extra responsibility has produced a more open and transparent paper trail, so far proving to be a success. The extent to which people live in accommodation that best The home is centrally located in a busy and vibrant village, a vil supports their wellbeing and achievement of their personal lage hall located a 5 min walk away has a host of different even ts on from regular coffee mornings, village lunches, Christmas outcomes. and Easter fayres all of which the residents enjoy attending. There is a recently renovated garden to the rear that now has f ull wheelchair access to a patio arear and summer house. The resident enjoy sitting out here when the weather if fine especiall y when enjoying a lunch or tea. Visitors are also encouraged to use this facility if they want, and can have a comfortable area w hile visiting the residents. A vegetable plot and potting shed has also proven to be a grea t asset for the residents with one in particular having taken a gr

The following section requires you to answer questions about the staff and volunteers working at the service.

eat interest in the plot. They enjoy working on the plot and has proven vital in giving the resident something to do and look for

ward to reaping the rewards it brings.

| Number of posts and staff turnover | |
|--|---|
| | |
| The total number of full time equivalent posts at the service (as at 31 March) | 7 |

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.

The information entered should relate to the period during which the staff member has been working for the provider only.

Staff Type

| Service Manager | T | |
|--|---|--|
| 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 | 0 | |
| Health & Safety | 0 | |
| Equality, Diversity & Human Rights | 0 | |
| Infection, prevention & control | 1 | |
| 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. | Epilepsy = 1 Fire Training = First Aid Diabetes = 1 | |
| 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 | |

1

0

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) | 0 | |
|--|--------------------------------|--|
| Staff Qualifications | | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | | |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | | |
| Deputy 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 | 0 | |
| Equality, Diversity & Human Rights | 0 | |
| Infection, prevention & control | 1 | |
| Manual Handling | 1 | |
| Safeguarding | 1 | |
| Medicine management | 0 | |
| Dementia | 0 | |
| Positive Behaviour Management | 0 | |
| Food Hygiene | 0 | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Epilepsy = 1 Fire Training = 1 | |
| 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 fixed 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 | 0 | |
| 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 | |
| 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 | |
| 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 | 8 | |
| 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 | 1 | |
| Health & Safety | 0 | |
| Equality, Diversity & Human Rights | 0 | |
| Infection, prevention & control | 1 | |
| Manual Handling | 6 | |
| Safeguarding | 4 | |
| Medicine management | 2 | |
| Dementia | 4 | |
| Positive Behaviour Management | 0 | |
| Food Hygiene | 3 | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Diabetes = 1 Epilepsy = 6 Fire Training = 5 First Ald = 6 | |

| Contractual Arrangements | | |
|--|---|--|
| No. of permanent staff | 8 | |
| 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 fixed term contact staff by hours worked per week. | | |
| No. of full-time staff (35 hours or more per week) | 6 | |
| No. of part-time staff (17-34 hours per week) | 2 | |
| No. of part-time staff (16 hours or under per week) | 0 | |
| Typical shift patterns in operation for employed at the service in this role type. You should also include the average number of staff working in | We do not have designated cooks or cleaning sta all staff are required to housekeeping roles along de caring roles. | |
| each shift. | Night Staff work 7pm until 9am (Sleeping Night) Day staff hours vary considerably with some staff arting work at 8am finishing at 3.30 Whilst others start at 9 and finch at 5. Others may start at 2pm and finish at 8pm. There are a minimum of 3 each shift day shift except for the night staff | |
| Staff Qualifications | | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 8 | |
| No. of staff working towards the required/recommended qualification | 2 | |
| 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? | Yes | |
| List the role title(s) and a brief description of the role responsibilities. | Gardener | |
| 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 releven provided is only a sample of the training that ma | ant training. The list of training categories | |

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 | 0 |
| Equality, Diversity & Human Rights | 0 |
| Infection, prevention & control | 0 |
| Manual Handling | 0 |
| Safeguarding | 0 |
| Medicine management | 0 |
| Dementia | 0 |
| 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 fixed 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) | 0 |
| No. of part-time staff (16 hours or under per week) | 1 |
| Staff Qualifications | |
| No. of staff who have the required qualification | 0 |
| No. of staff working toward required/recommended qualification | 0 |