

Annual Return 2022/2023

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:	Canterbury House Residential Home Limited	
The provider was registered on:	22/03/2019	
The following lists the provider conditions:	There are no imposed conditions associated to this provider	
The regulated services delivered by this provider were:	Canterbury House Residential Home Limited	
	Service Type	Care Home Service
	Type of Care	Adults Without Nursing
	Approval Date	22/03/2019
	Responsible Individual(s)	Jane Lawrence-George
	Manager(s)	Jane Lawrence-George
	Maximum number of places	13
	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	All staff undergo a comprehensive list of Mandatory/specialised training - most courses require yearly updates, topics chosen will be determined on the needs of our residents all training completed will be logged on training matrix where at a glance will highlight gaps and dates, through regular supervisions and updating the matrix every 8-12wks will ensure staff remain trained & training needs identified arranged and sourced through different mediums to ensure staff training is current
Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider	We follow the All Wales Recruitment & selection policy, ensuring that appropriate measures are in place for the recruitment of staff by ourselves, we have lost 3 staff members (2 left industry 1 due to ill health). We have recruited 2 new staff members and ensured all documentation are in place and have been checked. Registration on Social Care Wales and appropriate training plans have been implemented.

Service Profile

Service Details

Name of Service	Canterbury House Residential Home Limited
Telephone Number	01646693465
What is/are the main language(s) through which your service is provided?	English Medium
Other languages used in the provision of the service	We currently do not use any other language in the provision of our service apart from in the medium of English

Service Provision

People Supported

How many people in total did the service provide care and support to during the last financial year?	15
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Fees Charged

The minimum weekly fee payable during the last financial year?	693.71
The maximum weekly fee payable during the last financial year?	821.21

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?	<p>The home has a complaints procedure which is accessible, & sets out the names, timeframes, & how to make a complaint. It also provides information on what to do if the complainant is not satisfied with the resolution, & under what circumstances the home will involve safeguarding, police or CIW.</p> <p>The subject of complaints is within the meeting template of each level of meetings. This ensures that the system is easily monitored by the RI through involvement, and access to the meetings and records, which will demonstrate that information on the homes complaints procedure has been passed on in the most appropriate format. It also demonstrates the commitment to openness, & our duty of Candour.</p> <p>The RI will engage with the Registered Manager, staff, residents, relatives, and external bodies to ensure the right level of information has been shared with them, & information provided to the RI has been listened to & where required, actioned as part of the homes continual process of improvement.</p>

Service Environment

How many bedrooms at the service are single rooms?	8
How many bedrooms at the service are shared rooms?	2
How many of the bedrooms have en-suite facilities?	0
How many bathrooms have assisted bathing facilities?	2
How many communal lounges at the service?	2
How many dining rooms at the service?	1
Provide details of any outside space to which the residents have access	We have a secure gated garden space with raised planters with resin pathways offering seating grassed areas trees and shrubs.
Provide details of any other facilities to which the residents have access	In the garden there is a summer house that has electrics well insulated and furnished

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)	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

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.

Being both the Manager & R.I. I am in regular contact with both my deputy and my staff on a daily basis, whether it is in person, phone, email etc. Over the last year I have gathered many examples of this from letters of thanks, telephone & face to face discussions with all stakeholders, from the residents, family, friends, advocacy services and staff. All evidence is documented through various audits, conversations, meetings, reviews are just some of the measures.

I hold regular staff meetings, staff supervisions, resident meetings both formal but mostly on an informal basis this is where more communal topics can be discussed such as menus, activities & how to raise concerns/complaints - daily discussion with the residents, family communication (Letters/conversations) etc. Care plans are inclusive of the person, family & should any specialised service be required is actioned. All of these are reviewed and audited by the R.I. to ensure care is delivered in a way that people feel their voices are heard, they have choice about their care and support.

The benefits of being a small home is that each person is given the time to express their needs and wishes from day one & on a daily basis and the process of getting to know that persons likes/dislikes is paramount to getting to know them well. Good staff retention too is a key factor.

Care planning is an integral part of ensuring that an individual are listened too by giving ample opportunities to state how they wish their care needs to be provided e.g. when they get up/go to bed, what they eat, wear, where they wish to spend their day, activities, to how they take their medication are some factors. We endeavour to meet the persons' needs holistically ensuring that at their physical, psychological, emotional & spiritual needs are address.

I have participated & attended training & information events organised by commissioning on the Quality Assurance, also 'My Home Life' that are committed to the development of positive practices, as a result of this training I am looking at further develop the Quality Assurance & Quality Care reviews to enable me to have a robust process for their completion and or any improvements.

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.

Care plans, meetings, & conversations with staff, family & residents enable me to audit the processes that assist me to identify if people are happy & supported to maintain their ongoing health, development, and overall wellbeing.

I am in the home at various times & oversee how residents happiness, health & wellbeing is being addressed by the staff. This is supported by the biographies in care plans providing much needed insight into a person's life & how knowledge of them can support them.

By understanding the person, what strengths they still have can greatly assist with self-esteem, leading to positive experiences that contribute to their overall happiness & wellbeing.

There are good examples of how this is being met in care plans. Resident A & B have expressed in their review that they were happy with their care, planned out what activities they wanted to participate in and maintained their hobby of playing the piano & generally being very social.

Care plans outlines how their health care needs are being addressed, & who this involves, & the things that make them happy, such as keeping their appearance smart & well-groomed which identifies them as an individual.

The care plans are actively a good way of measuring a resident's happiness, health & wellbeing, as notes are recorded within the timeline of conversations had with them & any observations made by staff eg. Mood, behaviour etc. This can then support a ny involvement as required by outside agencies or healthcare professionals.

Vaccines have been provided to residents to help protect against Covid and Flu virus & Environmental health continue to give advice and support.

Formal/informal chats have provided & shared information to enable residents to have a role in the service they receive, eg. menus to ensure people get what they like. Additionally referrals are made to support those with low weights, specialist diets, falls prevention & Mental health.

Activities take place these can be participated in as a group or individual basis. The good social aspects that are happening at the home - scrap book of pictures has been compiled recording events also on Nourish (care planning system)The following is an insight into what has been taking place.

- Residents interaction with local school
- A resident enjoying being part of the homes community washing up/wiping up, sweeping in dining & other tasks
- residents spending time in garden/summer house
- Themed menu days
- Tiktok

others examples on record

<p>The extent to which people feel safe and protected from abuse and neglect.</p>	<p>Daily checks(level 1) are carried out in the home at each shift changeover, looking at exit points, fire safety, the environment, monitoring the temperature of the home, checking the equipment is fit for purpose, emergency lights are working, no obstructions to fire exits or unnecessary clutter that could cause slips trips or falls. It also accounts for all persons on the premises, are accounted for. These checks provide a safe environment for residents, staff & any visitors. These checks are audited by the manager weekly which then audit as RI periodically, so there is a continuous series of checks & audits to maintain safety.</p> <p>The home has recently had an independent Health & safety audit by Croner's this will be carried out yearly to assist in maintaining safety.</p> <p>As part of the managers checks, ensuring fire exits are clear & all aspects of fire safety is accounted for: Fire alarm testing, extinguisher, fire inspections, recommendations & fire training. The manager is also responsible for ensuring that adequate levels of medication is kept in the home & in appropriate locked storage with records. The kitchen has all paperwork in place & completed that aligns with environmental health & food safety management systems. Stocks of food is kept that account for residents needs/requests, storage & stock rotation guidelines & storage within correct areas of fridges/freezers with labels for opened foods of use by dates. Defect-lists are used effectively to identify any items/areas that are defective to ensure the correct action is taken in a timely manner. The maintainer is responsible for this, & the manager works closely with them to ensure clear communication & awareness of what needs doing & timescales. Staff are involved with this process, so they can always ensure the safety of all persons. Examples of this is how defective equipment is removed from use and labelled as such. Staff training & supervision is conducted to ensure staff are fit for purpose & any areas of concern or training needs can be explored as part of the supervision process & collectively at staff meetings. This aligns with Transformation 'keeping the workforce fit for purpose' & 'promoting a positive culture' - 'My Home Life' Care plans along with associated assessments & risk assessments provide the information required for the delivery of care so residents care is delivered safely & any risks to abuse or neglect can be recognised and actioned. ISTUMBLE and Marf forms used with falls.</p>
<p>The extent to which people live in accommodation that best supports their wellbeing and achievement of their personal outcomes.</p>	<p>Through my role as RI/Manager I look to see how individuals' function within the accommodation to ensure that it suits their individual needs on a safety level & supports them to achieve personal goals. At meetings we discuss the environment. Individual rooms are furnished to provide some home comforts & personal items can be added to, or replace if desired, what is already there, or changed around to suit preferences/needs. As rooms are being redecorated, residents can have an input into colours and decorative items for the room/s. The lounge is made up of two rooms that have a concertina style dividing door so enough to provide space for activities watch TV and be a clutter free walkway for those that use walking aids to promote their own mobility, and can be opened up on special events. Side tables are used for drinks, snacks and for those who wish to take meals in the lounge. We can confirm that conversations & observations with both residents & staff are able to provide ideas for any changes to the layout & contents of the lounge. This is also the case for other communal areas. I as the manager, was able to attend training & gain information & a better understanding about the benefits of a dementia friendly environment, and a better understanding of how the environment can impact people living with Dementia. Doors have been painted Dementia friendly colours & Dementia friendly signage in place. Bathrooms & toilets have had the seats, handrails & toilet roll holders replaced with Dementia friendly coloured ones (blue). The home provides ample room for people to have a sense of space with a quiet room. The kitchen is well equipped with ample room for storage and cooking/serving of meals & has a folder with all FSMS paperwork. The dining room is situated down the hallway from the kitchen for residents to take their meals. Bathrooms have been equipped with safe bathing facilities; staff can support as required. During a visit I spent time looking around bedrooms. A person being cared for in bed looked comfortable with matching bedding and their room was nicely kept with all things that they needed close to hand. Most of the bedrooms, communal areas, toilets, bathroom etc have had flooring replaced, more are planned with the replacement of the bedroom carpets. Residents are invited to make comments & contributions on décor as improvements take place. Residents chose the lounge chairs & colour scheme. Up stairs bathroom is being redesigned as a wet room.</p>

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

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 31 March) 2

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	
	Does your service structure include roles of this type?	Yes
<p>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.</p>		
<p>Filled and vacant posts</p>		
	No. of staff in post	1
	No. of posts vacant	0
<p>Training undertaken during the last financial year for this role type.</p> <p>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'.</p>		
	Induction	1
	Health & Safety	1
	Equality, Diversity & Human Rights	1
	Infection, prevention & control	1
	Manual Handling	1
	Safeguarding	1
	Medicine management	1
	Dementia	1
	Positive Behaviour Management	1
	Food Hygiene	1

Please outline any additional training undertaken pertinent to this role which is not outlined above.	Care Planning Coshh Continence Awareness Record Keeping Pressure Care Assessment of Needs Diabetes Nutrition and Diet First Aid Fire Dols Dementia Communication Confidentiality Covid 19 Oral Care Anxiety HACCP Skin care Develop as a worker Risk Assessment Person centered Care Activities and exercise
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Contractual Arrangements

No. of permanent staff	17
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)	2
No. of part-time staff (17-34 hours per week)	13
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	1
No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager	3

Deputy service manager

Does your service structure include roles of this type?	Yes
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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 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	1
Medicine management	1
Dementia	1
Positive Behaviour Management	1
Food Hygiene	1
Please outline any additional training undertaken pertinent to this role which is not outlined above.	All additional training will be identified so that the staff will have the knowledge and understanding to care for an individual in our home. Therefore the list can go on as staff are trained depending on the needs, conditions. Signed up to commence QCF L5 Management Care Planning Coshh Contenance Awareness Record Keeping Pressure Care Assessment of Needs Diabetes Nutrition and Diet First Aid Fire Dols Dementia Communication Confidentiality Covid 19 Oral Care Anxiety HACCP Skin care Develop as a worker Risk Assessment Person centered Care Activities and exercise
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	1
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?	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?	Yes
<p>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.</p>	
Filled and vacant posts	
No. of staff in post	11
No. of posts vacant	2
<p>Training undertaken during the last financial year for this role type.</p> <p>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'.</p>	
Induction	11
Health & Safety	11
Equality, Diversity & Human Rights	11
Infection, prevention & control	11
Manual Handling	11
Safeguarding	11
Medicine management	11
Dementia	11
Positive Behaviour Management	11
Food Hygiene	11
Please outline any additional training undertaken pertinent to this role which is not outlined above.	SKIN RISK ASSESSMENT RECORD KEEPING PERSON CENTERED CARE NUTRITION & DIET CONFIDENTIALITY COVID 19 CARE OFFICER TRAINING CARE PLANNING COMMUNICATION CONTINENCE COSHH DOLS DEVELOP AS A WORKER DIABETES FIRE FIRST AID HACCP
Contractual Arrangements	
No. of permanent staff	11
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)	11
No. of part-time staff (16 hours or under per week)	0
Typical shift patterns in operation for employed staff	
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.	<p>The home provides 24-hour care, and this is divided up into 3 shifts. Morning shift 07.45 – 16.00 Afternoon shift 15.45 – 22.00 Night shift 21.45 – 08.00</p> <p>The Registered Manager/Deputy Manager carry out the regulatory paperwork tasks and remain in a supportive capacity to the home between the hours of 09.00 – 17.00 on weekdays, sharing the on-call duty out of office hours.</p> <p>The morning and afternoon shift both comprise of one Care Officer and one Care Workers to meet the needs of the residents throughout the day and into the evening. The manager adopts a flexible approach and can increase staffing to three during peak times.</p>
Staff Qualifications	
No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker	9
No. of staff working towards the required/recommended qualification	2
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	4
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	4
Health & Safety	4
Equality, Diversity & Human Rights	4
Infection, prevention & control	4
Manual Handling	4
Safeguarding	4

Medicine management	4
Dementia	4
Positive Behaviour Management	4
Food Hygiene	4
Please outline any additional training undertaken pertinent to this role which is not outlined above.	SKIN RISK ASSESSMENT RECORD KEEPING PERSON CENTERED CARE NUTRITION & DIET CONFIDENTIALITY COVID 19 CARE OFFICER TRAINING CARE PLANNING COMMUNICATION CONTINENCE COSHH DOLS DEVELOP AS A WORKER DIABETES FIRE FIRST AID HACCP
Contractual Arrangements	
No. of permanent staff	4
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)	4
No. of part-time staff (16 hours or under per week)	0
Typical shift patterns in operation for employed staff	
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.	<p>The home provides 24-hour care, and this is divided up into 3 shifts. Morning shift 07.45 – 16.00 Afternoon shift 15.45 – 22.00 Night shift 21.45 – 08.00</p> <p>The Registered Manager/Deputy Manager carry out the regulatory paperwork tasks and remain in a supportive capacity to the home between the hours of 09.00 – 17.00 on weekdays, sharing the on-call duty out of office hours.</p> <p>The morning and afternoon shift both comprise of one Care Officer and one Care Workers to meet the needs of the residents throughout the day and into the evening. The manager adopts a flexible approach and can increase staffing to three during peak times.</p>
Staff Qualifications	
No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker	0
No. of staff working towards the required/recommended qualification	4
Domestic staff	

Does your service structure include roles of this type?	Yes
<p>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.</p>	
<p>Filled and vacant posts</p>	
No. of staff in post	1
No. of posts vacant	0
<p>Training undertaken during the last financial year for this role type.</p> <p>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'.</p>	
Induction	1
Health & Safety	1
Equality, Diversity & Human Rights	0
Infection, prevention & control	1
Manual Handling	1
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.	CONFIDENTIALITY FIRE COSHH FIRST AID HAND HYGIENE HACCP RISK ASSESSMENT COMMUNICATION MOVING & HANDLING DEVELOP AS A WORKER
<p>Contractual Arrangements</p>	
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
<p>Outline below the number of permanent and fixed term contact staff by hours worked per week.</p>	
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
<p>Staff Qualifications</p>	
No. of staff who have the required qualification	1
No. of staff working toward required/recommended qualification	0
<p>Catering staff</p>	

Does your service structure include roles of this type?	Yes
<p>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.</p>	
<p>Filled and vacant posts</p>	
No. of staff in post	1
No. of posts vacant	0
<p>Training undertaken during the last financial year for this role type.</p> <p>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'.</p>	
Induction	1
Health & Safety	1
Equality, Diversity & Human Rights	0
Infection, prevention & control	1
Manual Handling	1
Safeguarding	1
Medicine management	1
Dementia	1
Positive Behaviour Management	1
Food Hygiene	1
Please outline any additional training undertaken pertinent to this role which is not outlined above.	SKIN RISK ASSESSMENT RECORD KEEPING PERSON CENTERED CARE NUTRITION & DIET CONFIDENTIALITY ORAL CARE CAREPLANNING COMMUNICATION COSHH COVID 19 DOLS DEVELOP AS A WORKER DIABETES FIRE FIRST AID HACCP
<p>Contractual Arrangements</p>	
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
<p>Outline below the number of permanent and fixed term contact staff by hours worked per week.</p>	
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
<p>Staff Qualifications</p>	

No. of staff who have the required qualification	1
No. of staff working toward required/recommended qualification	0
Other types of staff	
Does your service structure include any additional role types other than those already listed?	No