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:		Anheddau Cyf
The provider was registere	ed on:	26/07/2019
The following lists the provider conditions:	There are no imposed conditions associated to this provider	
The regulated services delivered by this provider	Anheddau Cyf	
were:	Service Type	Domiciliary Support Service
	Type of Care	None
	Approval Date	26/07/2019
-	Responsible Individual(s)	Claire Higgins
	Manager(s)	Susan Hart
	Partnership Area	North Wales
	Service Conditions	There are no conditions associated to this service

raining and Workforce Ranning	
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	During the year we concentrated on Core/Mandatory Training whi ch differentiates between new starters and established staff and S ervice Specific or Bespoke Training which focuses on individual c are plans and incidents. We actively encouraged individual emplo yees to raise training needs. Continuous improvement discussed between employees and their line managers during probation revi ews, team meetings, improvement plans supervision sessions and annual appraisal.
Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider	Anheddau recruited in line with its policy of employing and promoti ng the most appropriate employees in a fair and consistent mann er free from discrimination whilst exercising its duty under the Soci al Care Regulatory Framework. The recruitment process from sho rtlisting to final onboard was underpinned by a process that supp orted the advancement of candidates to job offer stage who had t he knowledge, competence, skills and qualifications to provide the levels of care and support required.

Service Profile

Service Details

Name of Service Anheddau Cyf

Telephone Number	01248675910
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	English and Welsh are the only languages used however other forms of communication are utilised with the individuals we supp ort ie makaton

Service Provision

People Supported

How many people in total did the service provide care and support to during the last financial year?	134
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Fees Charged

The minimum hourly rate payable during the last financial year?	17.90
The maximum hourly rate payable during the last financial year?	19.69

Complaints

	T
What was the total number of formal complaints made during the last financial year?	1
Number of active complaints outstanding	0
Number of complaints upheld	0
Number of complaints partially upheld	0
Number of complaints not upheld	1
What arrangements were made for consulting people who use the service about the operation of the service during the last financial year?	We sent out a questionnaire to each individual, and their family or representative. This year the new RI also wrote to all inviting feedback. The RI me t with each commissioner and all but 7 of the individuals supporte d to gain their views on services provided. Managers did unannounced visits to gain feedback. We held Person Centred Reviews where we identified where we h ave or have not been able to successfully support people to their maximum and where we can do things differently to improve servic es offered. Families are fully involved and met regularly to consider changes to support. We operate a Commencement of Service (COS) process that ide ntifies steps taken to ensure we know what matters to an individua I and how we can best support them. Our Quality Assurance process ensures compliance against the S tatement of Purpose and COS including ensuring individuals are s upport and ongoing review.

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)	Yes
Other	Yes
List 'Other' forms of non-verbal communication used	Many individuals that Anheddau support are non verbal, yet they all develop a way of communicating. This can be facial and body I anguage, pointing and the use of pictures. PODD and light writer.

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 sectent to which people feel their voices are heard, they have choice about their care and support, and opportunities are made available to them. A headdau operates a Commencement of Service process and the service is a ormissioned that we identify what matters to an individual and how we can best support them. Our Quality Assurance process ensures compliance against the Statement of Purpose and iden tifies and ensures outcomes have been met through the ongoin g review and reassessment and that people have been given the choice and opportunities in the delivery of the support. We support the individual to choose who to invite to their annua I PCP review and reassessment and that people have been able to succes stilly support an individual to their maximum. We utilise active Support as a model enabling individuals to gain skills and live an active and full life. We utilise information contained within our recording systems to ensure any decisions that are made or action to be taken in respect of an individual we support is informed by the robust information that bas been collected. This information is collated from an range of activities including team meetings, PCP reviews and active support monitoring. Graphs are used to monitor individuals and isparticipation and outcomes as a way of determining level s of engagement and includes unannounced visits. The se visits also ensure the individuals we support are part of the decisions made about their lives and that they are given choices. Good practice examples include: Supported individuals to follow the advice of professionals and to communicate their choices to them. Anadvocate would be sought where needed. Staff support individuals are supported to attend clubs and be an active an emer emore upport provided was safely reduced. Individuals are supported to attend clubs and be an active mer emer of proves. 		
	have choice about their care and support, and opportunities	his identifies the steps taken to ensure when a new service is c ommissioned that we identify what matters to an individual and how we can best support them. Our Quality Assurance process ensures compliance against the Statement of Purpose and iden tifies and ensures outcomes have been met through the ongoin g review and reassessment and that people have been given th e choice and opportunities in the delivery of the support. We support the individual to choose who to invite to their annua I PCP review and through this process they make choices on th e life they want to lead and opportunities they wish to pursue. T his process also identifies where we've not been able to succes sfully support an individual to their maximum. We utilise Active Support as a model enabling individuals to gai n skills and live an active and full life. We utilise information contained within our recording systems to ensure any decisions that are made or action to be taken in res pect of an individual we support is informed by the robust infor mation that has been collected. This information is collated fro m a range of activities including team meetings, PCP reviews a nd active support monitoring. Graphs are used to monitor individuals participation and outcomes as a way of determining level s of engagement and inclusion in decisions and opportunities. Our internal quality procedure includes unannounced visits. The se visits also ensure that the individuals we support are part of the decisions made about their lives and that they are given ch oices. Good practice examples include: 1) Supported individuals may experience issues with co-tenants and express a wish to move. In such an instance a discussion a nd if possible a move would be supported. 2) An advocate would be sought where needed. 3)Staff support individuals to follow the advice of professionals and to communicate their choices to them. 4)Increased independence would lead us to support a discussi on with a Social Worker and ensure support provided was safel y reduced. 5) Ind

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.	All individuals are supported to access health care and records kept of all medical or health interventions. Anheddau has adopted the approach that everyone's health w ell-being is of equal value be that the individuals we support or the staff employed. We circulated information regarding well-being and stress whic h helped staff but also gave them appropriate information to en able discussions with individuals they support. All individuals are encouraged and supported to attend the ann ual health check. Health appointments can cause distress for some so this is man aged and risk assessed to ensure distress is reduced. Staff kn ow the individual well and this helps with identifying issues earl y to prevent escalation of concern. Where an individual chooses to decline medical intervention su pport is provided to ensure this decision is understood and whe re capacity is possibly affecting the decision support from the M DT is obtained ensuring we are operating within Mental Capacit y Act guidelines. Some good practice examples are: 1) Individuals are supported to manage ongoing medical conditi ons and access support from professionals. They are supporte d to ensure they understand information provided. 5) Individuals may be prescribed medication that support staff c annot legal administer we then support them to arrange for the district nurse to attend. Ensuring their health needs are met. 6)OT assessments occur where there is concern around deteri orating mobility and risk of falls. Appropriate equipment would b e sourced and individuals supported to ensure safe use. 7)Community Nurses are involved where an individual may pres ent a behaviour of concern and staff are trained to follow plans and protocols.
	in healthy food courses to develop new skills and greater indep endence.

The extent to which people feel safe and protected from abuse and neglect.	We have a robust safeguarding policy. Staff receive annual training based on our internal policy and national guidance. Staff are instructed to record and report all incidents and near misses. The Organisation uses the 'My Compliance' electronic recording system to record these. Once an incident is recorded the management team are notified of the incident automatically and can then act immediately. This system is robust as informat ion cannot be deleted once it is entered. Staff are always very aware to remind individuals of their rights, our effective recording system is used to capture all concerns, this includes body maps and bruising charts. Staff are issued with Performance Advice notes for non-recording. We have a number of individuals who make allegations about staff (this is recorded in their risk assessments) this can be very difficult to manage. We have improved both our Safeguarding Policy and Performance Improvement and Capability Policy to support during such reports.
	ff in respect of Mental Capacity and DOL's. We have a Quality Assurance process which ensures complian ce against all aspects of service Delivery. The Service Delivery and Safeguarding Group which consists o f Trustees, CEO/RI, Head of Service and the Registered Manag er meets on a quarterly basis and examines all safeguarding re
	 both a quarterity basis and oral for an early grad any reports. Examples of good practice: During Covid individuals were supported to make choices ar ound vaccination and boosters. Where there were concerns ar ound a persons capacity to decide Best Interest meetings were arranged. Staff contact GP's, specialists, community nurses and district nurses for health reviews including supporting access to emerg ency appointments if there is concern about an individual's heal th and well-being. Support staff encourage individuals to manage their own fina nces recognising where additional support is needed. Where individuals raise concern around any matter it is recorded and dealt with robustly. Where needed we report things to outside agencies with the individuals consent or knowledge.
	In line with our Health and Safety policy risk assessments are u pdated every six months (unless there are issues that arise in t he meantime). If any incidents occur staff complete incident rep orts and risk assessments are updated so the situation is either resolved or managed.
	We promote positive risk taking as part of people's rights and c hoices.

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)

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
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 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	1
Manual Handling	1
Safeguarding	1
Dementia	0
Positive Behaviour Management	1
Food Hygiene	1
pertinent to this role which is not outlined above.	Fire safety: Emergency First Aid At Work level 3 RQF (Highfie ABC): Epilepsy awareness and the safe administration of buccal midazolam: Tissue viability and pressure area care: Bespoke manual handling / Safe moving of people
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
	1
No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager	

Does your service structure include roles of this type?	No
Other supervisory staff	
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 posi	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	43
No. of posts vacant	0
Training undertaken during the last financial years Set out the number of staff who undertook relevan 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	43
Health & Safety	43
Equality, Diversity & Human Rights	43
Manual Handling	43
Safeguarding	43
Dementia	0
Positive Behaviour Management	43
Food Hygiene	43
Please outline any additional training undertaken pertinent to this role which is not outlined above.	Infection prevention and control/ COSHH: 43 Fire safety: 43 Emergency First Aid At Work level 3 RQF (Highfie ABC): 14 Professional practice in health and social care: 4 All Wales induction framework workbook 1- Princip es and values: 5 Bespoke WAV training: 27 Bespoke manual handling and Safe moving of peo- ple: 25 Bespoke PBS training: 3 ABC charts and analysis: 2 Epilepsy awareness: 3 Epilepsy awareness: 3 Epilepsy awareness: 3 Epilepsy awareness: 1 Accredited L2 understanding substance abuse: 1 Tissue viability and pressure area care: 2 All Wales induction framework workbook 5- Profesonal practice: 1 All Wales induction framework workbook 7- Health and safety: 1 Care plan specific training
Contractual Arrangements	
No. of permanent staff	43
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	d term contact staff by hours worked per week.
No. of full-time staff (35 hours or more per week)	24
No. of part-time staff (17-34 hours per week)	19
No. of part-time staff (16 hours or under per week)	0
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Staff Qualifications	
No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker	43
No. of staff working towards the required/recommended qualification	0
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?	
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	Emergency First Aid At Work level 3 RQF (Highf ABC): 153 Safe Moving of People N/S- 101 Bespoke WAV training: 60 Bespoke manual handling and Safe moving of p ple: 60 Bespoke PBS training: 14 Epilepsy awareness: 35 Dysphagia awareness: 57 Bespoke electric wheelchair training: 2 Autism awareness: 26 Epilepsy awareness and the safe administration buccal midazolam: 28 Hepatitis awareness: 13 Stoma care training- 3 Mental health awareness for frontline staff: 3, Ketamine awareness: 2 Self neglect awareness: 2 Self neglect awareness: 2 Accredited L2 understanding substance abuse: All Wales induction framework workbook 3- heal nd wellbeing: 35 All Wales induction framework workbook 6- Safe arding: 55 All Wales induction framework workbook 6- Safe arding: 55
Contractual Arrangements	and safety: 45
No. of permanent staff	260
No. of permanent staff No. of Fixed term contracted staff	260 0
No. of Fixed term contracted staff	0
No. of Fixed term contracted staff No. of volunteers	0
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