# 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:		BANYAN CARE HOMES LIMITED
The provider was registere	ed on:	29/03/2021
The following lists the provider conditions:	There are no imposed conditions associ	iated to this provider
The regulated services delivered by this provider	White Rose Care Home	
were:	Service Type	Care Home Service
	Type of Care	Adults Without Nursing
	Approval Date	29/03/2021
	Responsible Individual(s)	Shahnawaz Seehootoorah
	Manager(s)	Jayne Coburn
	Maximum number of places	32
	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 complete mandatory e-learning courses and new staff ne w to care also complete the AWIF modules. All staff then must complete necessary face to face training trainin g including manual handling, emergency first aidetc We monitor all staff training through a training matrix. We also discuss training needs in 1-2-1 supervision and staff mee tings and access specific courses for staff who need or would like further training. All staff are encouraged to do their diplomas.
Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider	We complete dependency model calculations every 3 months, wh ere we ensure our staffing levels are meeting the needs of our re sidents.  We benefit from a stable staffing team, but during the period a nu mber of long serving team members left through retirement of per sonal reasons. We advertise on Indeed and always attract high vo lumes of applicants.  We pay above market rate and look after our team to have high r etention rates.

#### Service Profile

## Service Details

Name of Service	White Rose Care Home
Telephone Number	01443837183
What is/are the main language(s) through which your service is provided?	English Medium
Other languages used in the provision of the service	Welsh

#### Service Provision

# People Supported

How many people in total did the service provide care and support to during the last financial year?	57

## Fees Charged

The minimum weekly fee payable during the last financial year?	725.64
The maximum weekly fee payable during the last financial year?	1085.84

## 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?	Regular quality assurance surveys and resident meetings

## Service Environment

How many bedrooms at the service are single rooms?	32
How many bedrooms at the service are shared rooms?	0
How many of the bedrooms have en-suite facilities?	0
How many bathrooms have assisted bathing facilities?	4
How many communal lounges at the service?	3
How many dining rooms at the service?	2
Provide details of any outside space to which the residents have access	Landscaped gardens patios front and back. Back garden is secur e
Provide details of any other facilities to which the residents have access	In house gym Minibus to take residents on regular trips out.

# 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	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.

This starts with our initial preassessment when the staff membe r asked the prospective resident of White Rose themselves what their needs and preferences are. This is then incorporated into the care plan upon joining us.

These care plans are reviewed monthly and regularly with the r esidents themselves to ensure we are meeting the needs and p references. Also gives scope to develop the care plan further. I have sat with residents every week when I was working from W hite Rose. All residents I spoke to have given valuably positive f eedback regarding their care and support, regarding if they fee I we are White Rose listen to them:

- The staff are fantastic and are always happy to help
- · The staff are so kind
- · The staff spend time with me
- This is my home now and I'm not going anywhere
- · I'm only doing so well because of those girls
- Many residents continue to say they are given choice in all as pects of their daily life, from what they want to wear, what food they have, what activities to do.

Formal resident quality assurance surveys were completed in the period, and this showed some very positive and improvement in feedback we received where I noticed an improvement in scoring in this round of QA's. All residents compliment the staff and felt they were treated with dignity and respect. They all feel in cluded in the care they receive which is vitally important. We scored very highly on food, activities and standard of care. One a rea we did not score as well was the laundry service. These surveys were audited by manager for a higher-level review of the how we are performing for our residents. Previously residents made references to certain staff they were not fond of but these staff have since left our service.

Resident meetings are held by the activities coordinator and m anagement. This gives our residents another opportunity to giv e feedback and ideas for what they would like in the home. Gen erally, all residents are very happy in the home. They are happ y with the activities schedule in the home, and they have given some lovely ideas of places they would like to visit and new acti vities ideas. During the period resident meetings have been les soften as the home did have a few covid outbreaks and sickne sses.

In passing I have spoken to a number of district nurses, GP's a nd other visiting professionals. All have given positive feedback about the quality of care delivered in White Rose. They have m entioned the staff are very knowledgeable.

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.

Person centred care plans are written for everyone in our care which incorporates their views and opinions. I have reviewed m any of these and all are well written. We have become much mo re consistent with the quality of the care plans and we are now using the new support care plan module that guides you throug hall the necessary care plans and assessments etc. I want us however to be more standardised with implementing a formal minimum requirement for what is needed to complete a care plan.

Medication is relatively well managed in the home. Regular mon thly audits and ad hoc weekly checks are in place to prevent er rors from arising. The medication folder is organised and includ es correct PRN protocols, pictures...etc and the MAR charts ar e being correctly signed. This shows the health and wellbeing o f our residents are being managed by the home well. Manager has worked tirelessly with our seniors to train and monitor them as we did find more gaps in the MARs and count errors, but this has been quickly rectified.

Our residents have access to visiting health professionals in a t imely basis. The home has a good working relationship with our GP, DN's, CPN... etc. I had regularly reviewed our professional notes on Carevision which details every visit. Often the visiting professionals will write on Carevision themselves which has proven to be a great tool. Dentists are often difficult to arrange for care homes, however White Rose continues to be fantastic in ensuring the dental needs of our service users are met by taking them to appointments regularly.

Upon speaking with our residents throughout the period, they all have described how happy they are in the home and well supported they are. The residents speak very highly of the team we have at White Rose, where they feel the staff know them well a nd always feel well supported. I have observed residents being supported by staff to build friendships in the home, where staff regularly encourage residents to spend time together and do a ctivities together. This ensures ourresidents have meaningful d ays looking forward to spending time together and its lovely to see a happy and engages group of ladies and gentlemen enjoying life together.

I continue to closely monitored staff in and outside of office hours. We have CCTV in communal areas throughout the home and this has brought and air of transparency in the way we work. Staff have been monitored in being kind, empathetic and compassionate to our residents.

The extent to which people feel safe and protected from abuse and neglect.

Safeguarding starts through our recruitment process. Upon reviewing all new starter staff files, each person has a current DBS check complete and obtained 2 satisfactory references. During the induction new staff are given our safeguarding policy to read and acknowledge. All staff complete mandatory training in safeguarding, where the entire team has completed the training in the period.

Manager the manager has completed safeguarding referrals ap propriately and timely, also with the appropriate CIW notification . Upon reviewing all safeguarding referrals, Manager already p uts in place appropriate preventative safeguarding measures to which no referrals were kept open for long and social services were satisfied with how we reacted. 2 safeguarding's were raise d by us, one for an unwitnessed fall that resulted in a hip fracture, and a medication issue by a senior staff member who was since dismissed for gross misconduct. All correct processes were followed to protect our service users.

No CIW complaints were received in the period.

On admission we complete equal opportunities form (on Carevi sion) for each resident, to ensure we identify any protected cha racteristics. We use this within the care planning process to pre vent discrimination of our residents. Currently the home has ha d all white British residents mainly from Wales and a few from E ngland. We have made many purchases of sensory activities to meet the needs of our residents with more advanced dementia, and they are enjoying pamper sessions with their hands. We are better meeting the activity needs of all residents in the home. We are at the end of a sensory garden project which will be enjoyed by the whole home.

Care plans are well written and in place for all residents. I have found though that some care plans can be more person centre d regarding their specific communication needs for our more ad vanced dementia residents. Care plans need to be switched to the new support care plan module in Carevision as these are m ore informative and person centred

We assess staffing levels constantly and complete regular dep endency assessments using an NHS care home model. We are always within the average area. The home rarely feels rushed o r too busy, and residents never appear rushed. All staff are kee ping on top of their mandatory training. The extent to which people live in accommodation that best supports their wellbeing and achievement of their personal outcomes.

White Rose follows best practice guidance to ensure safe medi cation management. Staff who administer medication complete t heir administration of medication training, followed by 5 compet ency assessments and regular quarterly spot checks.

We employ a full-time maintenance person and a full-time maint enance manager who spreads their time between White Rose a nd our sister home Red Rose. They complete a series of weekl y, monthly, quarterly, and 6 monthly tasks as a preventative me asure to ensure we are compliant with health and safety. They both are part of the planning of bigger jobs and daily troublesh ooting any issues that arises daily that require maintenance. External contractors are used to cover us for all our health and safety aspects of the home:

- · Fire alarms, equipment and lighting
- Gas safe
- Electrical work
- PAT testing
- · LOLER and servicing of liftin equipment
- · Kitchen canopy clean
- Nurse call service
- · Laundry service and clean of ducts
- Legionella

These are all kept on top of and organised by me and Manager , and any remedial works are actioned promptly. The environm ent and equipment is kept to a high standard and maintained pr operly.

Health and safety advice and policies are provided by ELAS an d are contactable anytime.

We have continued to undertake significant work in the home to ensure we provide the best environment possible for our reside nts. We have improved lighting in all communal areas of the ho me by upgrading to LED daylight lights. We have also installed CCTV in communal areas which is has become a valuable tool f or the safety of our residents. We are continuously redecoratin g all our communal areas and bedrooms. We have turned our 2 main areas downstairs to lounge diners which are much more h omely and decorated nicely throughout.

Speaking with our residents in the period and looking at respon ses from our QA's all residents feel we provide a safe environm ent for them to live. All feel we respect their privacy and dignity, and this time round all the residents are complimentary of all st

We have a minibus on site and regularly take out our residents on day trips and shopping trips. All residents are offered, and w e ensure not the same residents are always taken out.

All residents are consulted in to give us their views in decoratio n ideas and also what colours their bedrooms are if they are du e to be redone. I am very satisfied with how the home is coming together.

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 | 34 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

Yes		
ecifically to this role type only. Unless otherwise sition as of the 31st March of the last financial year.		
1		
0		
No. of posts vacant  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'.		
0		
1		
1		
1		
1		
1		
1		
1		
1		
1		
n/a		
1		
0		
0		
0		
0		
ed term contact staff by hours worked per week.		
1		
0		
0		
1		

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 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	1
No. of posts vacant	0
Training undertaken during the last financial year Set out the number of staff who undertook relevent provided is only a sample of the training that make can be added to 'Please outline any additional to not outlined above'.	ant training. The list of training categories
Induction	0
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.	n/a
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	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?	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 tion as of the 31st March of the last financial year.
Filled and vacant posts	
No. of staff in post	7
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 training outlined above'.	ant training. The list of training categories have been undertaken. Any training not listed
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No. of part-time staff (16 hours or under per week)	0
Typical shift patterns in operation for employed s	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.	7-7 days and nights 2 on days 1 on nights
Staff Qualifications	
No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker	7
No. of staff working towards the required/recommended qualification	0
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	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	15
No. of posts vacant	0
Training undertaken during the last financial year Set out the number of staff who undertook relevance provided is only a sample of the training that macan be added to 'Please outline any additional training tr	ant training. The list of training categories
Induction	7
Health & Safety	
Equality, Diversity & Human Rights	15
	15
Infection, prevention & control	
	15
Infection, prevention & control	15 15
Infection, prevention & control  Manual Handling	15 15 15
Infection, prevention & control  Manual Handling  Safeguarding	15 15 15 15
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Infection, prevention & control  Manual Handling  Safeguarding  Medicine management  Dementia  Positive Behaviour Management  Food Hygiene  Please outline any additional training undertaken	15 15 15 15 15 15 15 15
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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	15 15 15 15 15 15 15 15 15 15 15 as per our training matrix
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No. of full-time staff (35 hours or more per week)	10	
No. of part-time staff (17-34 hours per week)	5	
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.	7-7 days and nights day 2-3 night 2-3	
Staff Qualifications		
No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker	10	
No. of staff working towards the required/recommended qualification	5	
Domestic 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 pos	ecifically to this role type only. Unless otherwise sition as of the 31st March of the last financial year.	
Filled and vacant posts		
No. of staff in post	6	
•		
·	0	
Training undertaken during the last financial years  Set out the number of staff who undertook relevance provided is only a sample of the training that ma	o ar for this role type.	
No. of posts vacant  Training undertaken during the last financial year  Set out the number of staff who undertook relevance provided is only a sample of the training that may can be added to 'Please outline any additional to not outlined above'.	or for this role type.  Yant training. The list of training categories ay have been undertaken. Any training not listed	
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Outline below the number of permanent and fixed term contact staff by hours worked per week.		
Cutime bolow the number of permanent and most	a term contact stail by nouro worked per week.	
No. of full-time staff (35 hours or more per week)	4	
No. of part-time staff (17-34 hours per week)	2	
No. of part-time staff (16 hours or under per week)	0	
Staff Qualifications		
No. of staff who have the required qualification	2	
No. of staff working toward required/recommended qualification	0	
quanication		
Catering 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	5	
No. of posts vacant	0	
Training undertaken during the last financial year  Set out the number of staff who undertook relevation provided is only a sample of the training that may can be added to 'Please outline any additional training that may can be added to 'Please outline any additional training that may can be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training traini	ant training. The list of training categories y have been undertaken. Any training not listed	
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No. of part-time staff (16 hours or under per week)	0	
Staff Qualifications		
No. of staff who have the required qualification	2	
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	