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:		Ffynnone Care Home	
The provider was registered on:		21/03/2019	
The following lists the provider conditions:	There are no imposed conditions associ	iated to this provider	
The regulated services delivered by this provider were:	Ffynnone Care Home		
	Service Type	Care Home Service	
	Type of Care	Adults Without Nursing	
	Approval Date	21/03/2019	
	Responsible Individual(s)	Michael Harris	
	Manager(s)	Richard Morgan	
	Maximum number of places	8	
	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 identify training through a needs-based assessment of reside nts specified by their condition and training requirements that me et that need. We also through supervision identify the training ne eds of individual staff members. We use various training platforms. College, Online training, and p rivate training providers.
Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider	Over the last year, we have increased capacity and therefore required additional staff. We have employed various media marketing strategies. It has been difficult in obtaining staff of a caliber that we accept working for us.
	Retention of staff has been good. We pay above average wages. The staff have the support of management and are available to di scuss issues they may have quickly. RI now is the manager of staf f/Resident's welfare and well-being.

Service Profile

Service Details

Name of Service	Ffynnone Care Home
Telephone Number	01994230183
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	

Service Provision

People Supported

How many people in total did the service provide care and support to during the last financial year?	8
------------------------------------------------------------------------------------------------------	---

Fees Charged

The minimum weekly fee payable during the last financial year?	1600
The maximum weekly fee payable during the last financial year?	3256

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?	

Service Environment

How many bedrooms at the service are single rooms?	8
How many bedrooms at the service are shared rooms?	0
How many of the bedrooms have en-suite facilities?	7
How many bathrooms have assisted bathing facilities?	7
How many communal lounges at the service?	3
How many dining rooms at the service?	1
Provide details of any outside space to which the residents have access	Residents have access to 2 acres of land. Some areas are not available to people in wheelchairs.
Provide details of any other facilities to which the residents have access	The Hydro pool is also nearly built for use by residents. Most peo ple have access to their own vehicles for outings and others have access to vehicles provided by the home.

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	Yes
List 'Other' forms of non-verbal communication used	Signalong that the local CTLD use. Do not use Makaton anymore. Outdated with requirements from SALT team at the CTLD

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 People living within the home help develop their personal activit have choice about their care and support, and opportunities ies each week. They are supporting with these if they are practi are made available to them. cal and able to participate in them. Discussion is made on their care with them. A key worker works closely with them to identify any concerns and needs. RI discusses with them anything that t hey would like to change in relation to their care and support n eeds. This happens every 4 weeks. The extent to which people are happy and supported to We support the individuals in daily clinical observation to identif maintain their ongoing health, development and overall y any change that is not noticeable. We support all medical app wellbeing. For children, this will also include intellectual, social ointments. We support them in checking their weight every mon and behavioural development. th. All dietary intake is recorded. All bowel movements are recor ded. We use the help of the primary care teams if required to s upport. We monitor any signs of skin integrity and any signs of skin deference from day to day are documented. People living at Ffynnone have different nutritional needs that are met by the Monitoring of health and well-being including changes in behavi The extent to which people feel safe and protected from abuse and neglect. or can indicate signs of abuse and neglect. There are senior st aff on duty at all times to ensure good working practice and wor king closely with the residents we can identify any issues. Resid ents are able to discuss issues with key workers, management, and RI at any time. Any concerns will be brought to the attentio n of the RI. These issues would be dealt with very quickly. The extent to which people live in accommodation that best Oversight of people's well-being is done by RI. Working closely supports their wellbeing and achievement of their personal with managers and appropriate professionals. We work closely outcomes. with the physiotherapist who has a large input on the people livi ng at the home due to their impairments. Working closely with t hem, family, professionals, and the local authority we ensure th e best outcome. We have annual reviews on each person with commissioning from health and social services inspecting that w e are achieving the best outcome for the people living at Ffynn

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)

20

one.

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 T	ype

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	
		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'.		
Indu	uction	1	
Hea	alth & Safety	1	
	uality, Diversity & Human Rights	1	
•	ction, prevention & control	1	
	nual Handling	1	
	equarding	1	
	dicine management	1	
	mentia	1	
	itive Behaviour Management	1	
Foc	od Hygiene	1	
	ase outline any additional training undertaken tinent to this role which is not outlined above.	Dysphagia training, Peg feed training, Peg insertion training by RI and Manager. First aid FAW, Physiotherapy training through physiotherapist, Epilepsy training.	
	Contractual Arrangements		
No.	of permanent staff	1	
No.	of Fixed term contracted staff	0	
No.	of volunteers	0	
No.	of Agency/Bank staff	0	
	of Non-guaranteed hours contract (zero hours)	0	
staf	• , ,		
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		
be ı	of staff who have the required qualification to registered with Social Care Wales as a Service nager	1	
qua	of staff working toward required/recommended lification to be registered with Social Care les as a Service Manager	0	
Dep	Deputy service manager		
	es your service structure include roles of this	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	
No. or posts vacant]0	
Training undertaken during the last financial year Set out the number of staff who undertook relev provided is only a sample of the training that may can be added to 'Please outline any additional to 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.	Dysphagia training, Peg feed training, First aid FA W, Physiotherapy training through physiotherapist, Epilepsy training.	
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	ed 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		

	T
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 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	4
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	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.	Dysphagia training, Peg feed training, First aid E W, Physiotherapy training through physiotherapi Epilepsy training.
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 fixe	d term contact staff by hours worked per week.
No. of full-time staff (35 hours or more per week)	3
No. of part-time staff (17-34 hours per week)	1
No. of part-time staff (16 hours or under per week)	0
Typical shift patterns in operation for employed	staff
r ypical shift patterns in operation for employed	วเลเเ

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.	A minimum of 2 senior staff on the Morning shift from 7 till 2 and a minimum of 1 senior staff on the aft ernoon shift from 2 till 9. 2-night staff from 9 pm to 7 am.	
Staff Qualifications		
	Ι.	
No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker	4	
No. of staff working towards the	0	
required/recommended qualification		
Other social care workers providing direct care		
Does your service structure include roles of this	Yes	
type?		
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	13	
No. of posts vacant	2	
Tion of poole 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'.		
Induction	13	
Health & Safety	13	
Equality, Diversity & Human Rights	13	
Infection, prevention & control	13	
Manual Handling	13	
Safeguarding	13	
Medicine management	5	
Dementia	13	
Positive Behaviour Management	13	
Food Hygiene	13	
Please outline any additional training undertaken pertinent to this role which is not outlined above.	Dysphagia training, Peg feed training, First aid EFA W, Physiotherapy training through physiotherapist, Epilepsy training.	
Contractual Arrangements		
No. of permanent staff	13	
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)	12	
No. of part-time staff (17-34 hours per week)	1	
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.	A minimum of 7 staff on the Morning shift from 7 till 2 and a minimum of 5 staff on the afternoon shift from 2 till 9. 2-night staff from 9 pm to 7 am. These n umbers include senior and management staff who work on the floor.	
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	4	
Domestic staff		
Does your service structure include roles of this type?	Yes	
Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year.		
Filled and vacant posts		
No. of staff in post	1	
No. of posts vacant	0	
Training undertaken during the last financial year for this role type. Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'.		
Induction	1	
Health & Safety	1	
Equality, Diversity & Human Rights	1	
Infection, prevention & control	1	
Manual Handling	1	
Safeguarding	0	
Medicine management	0	
Dementia	0	
Positive Behaviour Management	0	
Food Hygiene	1	
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)	1	
No. of part-time staff (16 hours or under per week)	0	
Staff Qualifications		
No. of staff who have the required qualification	0	
No. of staff working toward required/recommended qualification	0	
Catering staff		
Does your service structure include roles of this type?	No	
Other types of staff		
Does your service structure include any additional role types other than those already listed?	No	