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: | | sharon davies |
|---|---------------------------------------|--|
| The provider was registered | ed on: | 05/06/2018 |
| The following lists the provider conditions: | There are no imposed conditions assoc | iated to this provider |
| The regulated services delivered by this provider | Honeyhome | |
| were: | Service Type | Care Home Service |
| | Type of Care | Adults Without Nursing |
| | Approval Date | 05/06/2018 |
| | Responsible Individual(s) | Sharon Davies |
| | Manager(s) | Sharon Davies |
| | Maximum number of places | 5 |
| | Service Conditions | There are no conditions associated to this service |

Training and Workforce Planning Describe the arrangements in place during the last financial year for identifying, planning and meeting the training needs of staff employed by the service provider All staff have access to online training. We use social care tv. All s taff carry out the 5 core training required annually. They also attend all wales moving and positioning. They are encouraged to acc ess any other relevant training to the home or of personal interest . Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider All new staff will have had basic training, provided 2 references and d a DRB check prior to employment.

Service Profile

Service Details

 Name of Service
 Honeyhome

| Telephone Number | 01646698063 |
|--|----------------|
| What is/are the main language(s) through which your service is provided? | English Medium |
| Other languages used in the provision of the service | |

Service Provision

| How many people in total did the service provide care and support to during the last financial year? | 7 | |
|--|---|--|
|--|---|--|

Fees Charged

| The minimum weekly fee payable during the last financial year? | 1772.00 |
|--|---------|
| The maximum weekly fee payable during the last financial year? | 1772.00 |

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 users are asked to fill in a quality assurance questionnair e with members of staff or with family . We also speak to family on a weekly basis to discuss any problem s or worries they might have. We try to organize annual reviews which has been difficult during covid. We have 1 arranged 1 done and 1 tba. |

Service Environment

| How many bedrooms at the service are single rooms? | 5 |
|--|---|
| | 5 |
| How many bedrooms at the service are shared rooms? | 0 |
| How many of the bedrooms have en-suite facilities? | 1 |
| How many bathrooms have assisted bathing facilities? | 2 |
| How many communal lounges at the service? | 1 |
| How many dining rooms at the service? | 1 |
| Provide details of any outside space to which the residents have access | We have a lovely secure back garden which there is a log cabin/g ames room for service users to have a change of scenery. We als o have a sun room at the back of the house. There is a patio area and table to sit at to eat. It has been made specially for wheelchai r access. |
| Provide details of any other facilities to which the residents have access | The log cabin is used for arts and crafts/botcha/darts /netball. so mewhere to have lunch. Watch tv/listen to music. They also all have activity plans to access the community and visit places of interest. i.e bowling, train rides, bus rides, visit horses, p icnics, shopping, garden centres, cinema. etc |

Communicating with people who use the service

| Identify any non-verbal communication methods used in the pro- | ovision of the service |
|---|------------------------|
| Picture Exchange Communication System (PECS) | Yes |
| Treatment and Education of Autistic and related Communication- handicapped CHildren (TEACCH) | No |
| Makaton | Yes |
| British Sign Language (BSL) | No |
| Other | No |

Statement of Compliance

The Responsible Individual must prepare the statement of compliance.

CIW have published 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. | Service-users all have their own weekly activities which they ch oose to do either as a group or individually. Choice is promoted throughout their daily living i.e. clothes to w ear, menu for the day or activities to join in. Management speak to the service users regularly to check that they are happy that their needs are being met and that they fee I valued living at Honeyhome. |
|--|--|
| 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. | Service users records demonstrate that specialist. medical, and social work support is sought appropriately. All service users be nefit from a healthy diet and encouraged to choose healthy ho me cooked meals Attention is given to nutrition and hydration a nd recorded daily and weight recorded weekly. |
| The extent to which people feel safe and protected from abuse and neglect. | All staff are dbs checked and are employed to create a safe ho mely environment which is aimed at making the service user fee I safe. Staff are competent and understand the importance of p rotecting each service user from any form of abuse or neglect' t raining is provided annually. Management speak to service users and /or their representativ es regularly so any concerns they may have will be dealt with i mmediately. |
| The extent to which people live in accommodation that best supports their wellbeing and achievement of their personal outcomes. | We are very particular who comes to live at Honeyhome. It is ve ry important to us that the mix of service users is right and that t hey all get on well. Honeyhome is a calm , relaxed ,homely atmo sphere where personal choice is promoted daily. People are en couraged to come and visit , have short stays and respite befor e they choose to live permanently. This interim period enables us, them and their families to be confident that Honeyhome is th e right choice of home to meet those individual needs. |

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) $% \left(1-\frac{1}{2}\right) =0$ | 5 |
|---|---|

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. |

| No. of staff in post | 7 |
|--|---|
| No. of posts vacant | 0 |
| Training undertaken during the last financial yea | ar for this role type. |
| Set out the number of staff who undertook releva provided is only a sample of the training that ma 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 raining undertaken pertinent for this role which is |
| Induction | 2 |
| Health & Safety | 7 |
| Equality, Diversity & Human Rights | 0 |
| Infection, prevention & control | 7 |
| Manual Handling | 7 |
| Safeguarding | 7 |
| Medicine management | 7 |
| Dementia | 3 |
| Positive Behaviour Management | 0 |
| Food Hygiene | 7 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | |
| Contractual Arrangements | |
| No. of permanent staff | 7 |
| 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) | 4 |
| No. of part-time staff (17-34 hours per week) | 3 |
| 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 |
| Deputy service manager | |
| Does your service structure include roles of this type? | No |
| Other supervisory staff | |
| | |

| Registered nurses | |
|--|----|
| Does your service structure include roles of this type? | No |
| Senior social care workers providing direct care | |
| Does your service structure include roles of this type? | No |
| Other social care workers providing direct care | |
| Does your service structure include roles of this ype? | No |
| Domestic staff | |
| Does your service structure include roles of this type? | No |
| Catering staff | |
| Does your service structure include roles of this type? | No |
| Other types of staff | |
| Does your service structure include any additional role types other than those already listed? | No |