Annual Return 2022/2023

2023.	completed for you. There are no acti	out this provider and its associated services on the 31st March
Provider name:		Stokes Case management Ltd
The provider was registere	ed on:	06/04/2020
The following lists the provider conditions:	There are no imposed conditions as	sociated to this provider
The regulated services delivered by this provider	Stokes Case Management Gwent	
were:	Service Type	Domiciliary Support Service
	Type of Care	None
	Approval Date	06/04/2020
	Responsible Individual(s)	Rhiannon Stokes
	Manager(s)	Joanna Ali
	Partnership Area	Gwent
	Service Conditions	There are no conditions associated to this service
	Stokes Case Management North Wales	
	Service Type	Domiciliary Support Service
	Type of Care	None
	Approval Date	06/04/2020
	Responsible Individual(s)	Rhiannon Stokes
	Manager(s)	Joanna Ali
	Partnership Area	North Wales
	Service Conditions	There are no conditions associated to this service
	Stokes Case Management Cardiff and Vale	
	Service Type	Domiciliary Support Service
	Type of Care	None
	Approval Date	06/04/2020
	Responsible Individual(s)	Rhiannon Stokes
	Manager(s)	Joanna Ali
	Partnership Area	Cardiff and Vale
	Service Conditions	There are no conditions associated to this service
	Stokes Case Management West Glamorgan	
	Service Type	Domiciliary Support Service
	Type of Care	None
	Approval Date	06/04/2020
	Responsible Individual(s)	Rhiannon Stokes
	Manager(s)	Joanna Ali
	Partnership Area	West Glamorgan
	Service Conditions	There are no conditions associated to this service

Service Type	Domiciliary Support Service
Type of Care	None
Approval Date	06/04/2020
Responsible Individual(s)	Rhiannon Stokes
Manager(s)	Joanna Ali
Partnership Area	Cwm Taf Morgannwg
Service Conditions	There are no conditions associated to this s
Stokes Case Management	
Service Type	Domiciliary Support Service
Type of Care	None
Approval Date	06/04/2020
Responsible Individual(s)	Rhiannon Stokes
Manager(s)	Joanna Ali
Partnership Area	West Wales
Service Conditions	There are no conditions associated to this s
Stokes Case Management Powys	
Service Type	Domiciliary Support Service
Type of Care	None
Approval Date	06/04/2020
Responsible Individual(s)	Rhiannon Stokes
Manager(s)	Joanna Ali
Partnership Area	Powys
Service Conditions	There are no conditions associated to this s

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 new staff undergo a full and robust induction and probation re- iew when joining Stokes so we can assure ourselves that new star f are right for the organisation and can deliver the quality of care needed. Further training required, specific to their role and client need, is determined during ongoing support through supervision and appraisal, where managers can agree and address areas of earning and personal development planning as well as any areas of difficulty and offer further support.
Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider	Where recruitment has taken place, for new Stokes employees of where Stokes have supported clients to take on new support staf full recruitment compliance is adhered to and all required pre-em loyment checks and reason for leaving previous employment, car ied out. Staff Engagement surveys are completed as well as an a nnual training and development needs assessment. We provide staff with a Health and Wellbeing plan and regular tea m days. Exit interviews completed to gain feedback.

Service Profile

Service Details

Name of Service

Stokes Case Management

Telephone Number

02920351420

What is/are the main language(s) through which your service is provided?	English Medium
Other languages used in the provision of the service	English is the man language, however, where Stokes are asked to provide Case Management to a client who's first language is not English, we would support the client (or their representative) to recruit suitable support staff, able to speak the first languag e of the client.

Service Provision

People Supported	
How many people in total did the service provide care and support to during the last financial year?	11

Fees Charged

The minimum hourly rate payable during the last financial year?	25	
The maximum hourly rate payable during the last financial year?	25	

Complaints

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	1
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?	Feedback questionnaires sent to clients, this process is being revi ewed as response rate was disappointing, however, the feedback we did receive was mainly positive and that clients were happy wit h the support provided. Regular Case Manager meetings with clie nts (or their representative) to ensure the client was happy with, a nd involved, in all aspects of their care & support. This includes w here appropriate involving family, friends, and advocates. The ca se managers explain processes, for example bringing in a private physio to support them with their mobility, and ensure, by asking t he client or their representative, if they have any complaints, conc erns or worries.

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)	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.

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.	We ensure that the clients we support understand their rights. Consent is an integral part of the care we provide. We work clo sely with clients (and/or their families) to obtain it. We can evidence how we have gained consent in the care we p rovide to each person we support with our Consent to Treat do cuments and in the Client Support Plan. We ensure support staff routinely ask for clients consent on a d ay-to-day basis before giving assistance and seek a response. When people decline, staff are respectful and return to try this t ask later where practical. Feedback from people who use our service and their families, a Ithough limited, confirmed they were happy with the service pro vided by Stokes. Clients are central to the planning of their sup port, which is planned during direct meetings but also ensure th e client is listened to regarding what they want and would like, a nd making sure this is also built into their individual support pla n. People's care plans are developed with the person, their familie s and other health professionals involved in the person's suppor rt. Staff receive a client specific induction before supporting pe ople, which covers the clients support needs and goals. Staff receive appropriate training relevant to the people they su pport and their individual needs. Staff work with other health pr ofessionals (MDT) involved in people's care and support. Peopl e are supported to have maximum choice and control of their liv es and staff support them in the least
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.	Case managers complete an initial needs assessment which, wi th discussion with client (or their representative) and other heal thcare professionals involved in the client's overall support and rehabilitation, identifies current health needs as well as the clie nts' personal goals. From the feedback we received from our clients, all confirmed t hey were happy with the support they received from staff and th at they liked their support staff. The Case Managers through their relationship with the client, g et to know what is important to them and support to meet their e motional wellbeing needs. For example the Client Support Plan will include how staff can support the client to remain independ ent and connected with people, activities, hobbies, external org anisations and interests important to them to benefit their wellb eing. Clients are encouraged and supported to achieve their person al goals in relation to their own care, treatment, and wellbeing, t hey are involved in discussions and decisions related to their h ome and living arrangements. We work jointly and alongside the MDT to ensure clients are su pported to access specialist/adaptive equipment to keep them c onnected and able to access the community, including wellbein g and healthcare support. The Case Manager identifies risk of loneliness and facilitates s upport to clients to make connections and engage with others, r espectful of their own preferences.

The extent to which people feel safe and protected from abuse and neglect.	From the feedback we have received, clients (and their family o r representative) have said they feel safe and protected from a buse. Stokes have a clear Safeguarding policy & procedures in place and safeguarding training is undertaken by all (Stokes an d client) staff. Stokes have a Complaints, Concerns and Compli ments procedure in place and clients are informed of who they can contact should they have a complaint or a concern. Record s of all complaints, concerns and compliments are kept and the se are reviewed, along with any feedback, as an opportunity to improve services for people we support. Risk assessments are completed and staff supporting the client are made aware of any risks. All incidents, accidents are report ed and reviewed, with updates to risk assessments made as ne eded by Case Managers, and staff updated. Stokes carry out a 'lessons learnt' process where an incident such as a safeguardi ng referral, is made. We ensure staff are trained to proactively recognise and report bullying, harassment, abuse and challenge discrimination. Stok es management team check staff understanding by regularly in cluding safeguarding discussions in staff supervisions and tea m meetings. We ensure our day-to-day practice complies with Mental Capac ity Act and Liberty Protection Safeguards. Safeguarding notifications are sent to CIW as required and ens ure our safeguarding policies and procedures are aligned to th e latest good or best practice, including local requirements. Safeguarding incidents are thoroughly investigated in an open and transparent way. We clearly document evidence of safegu arding incidents, including how they were dealt with, which agen cles were involved and follow up action undertaken.
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Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 10.37 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?
 No

 Deputy service manager
 Does your service structure include roles of this type?

 Does your service structure include roles of this type?
 No

 Other supervisory staff
 Does your service structure include roles of this 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.

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 releva provided is only a sample of the training that ma can be added to 'Please outline any additional the not outlined above'.	ant training. The list of training categories
Induction	0
Health & Safety	4
Equality, Diversity & Human Rights	4
Manual Handling	4
Safeguarding	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.	Stokes MD and the Clinical Director offer clinical s pport to Case Managers along with the Head of C se management Services . Stokes employ 2 Registered Managers (Wales ar England, both offering support), HR Manager and Head of Case Management Services. These four eople offer support and mentoring and training re ting to CIW, RISCA Regulations and provider requ ements to Associates (self employed) Case mana ers and directly employed (by clients) Team Lead s overseeing and managing client cases. Case Managers oversee and monitor individual sivice provision to clients. Case managers are all healthcare professionals, r example; nurses, OT's, Physio's or Social Workets s - all of whom undertake required courses to mal ain their professional registrations and many curr ntly work in NHS or Local Authority, and undergo levant required training (Health & Social Care) for heir role, to ensure professional update. Case Managers complete client specific training a required.
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)	4
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	2

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?	No
Other types of staff	
Does your service structure include any additionary role types other than those already listed?	al No

Service Details

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Telephone Number	02920351420
What is/are the main language(s) through which your service is provided?	English Medium
Other languages used in the provision of the service	Where the client's first language is not English, Stokes will activ ely look to provide a case manager or interpreter to assist the c lients communication and expression of needs. Where Stokes a re supporting clients to actively recruit support staff, we would s eek to recruit a support worker who could speak the language of the client. We are working toward the 'Active Offer'.

Service Provision

People Supported		
How many people in total did the service provide care and support to during the last financial year?	1	

Fees Charged

The minimum hourly rate payable during the last financial year?	25	
The maximum hourly rate payable during the last financial year?	25	

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?	Feedback questionnaires are sent to clients, by post or online, as king for their feedback and comments. Unfortunately, the respons e rate was disappointing, however, the feedback we did receive w as mainly positive and that clients were happy with the support pr ovided. Case Managers met with clients (or their representative) d irectly, or virtually to carry out welfare checks as well as to ensure the client was happy with, and involved, in all aspects of their care & support. This forum is also used by case managers to ensure th at planning or reviewing of support is led by the client, taking full a ccount of the client's needs and wishes, and to confirm clients un derstand what they can and should expect from Stokes.
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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	Yes
List 'Other' forms of non-verbal communication used	Awareness of clients sensory disability following a brain injury. Ne ed to allow time for client to process information in order to respo nd, make their decision or wishes known.

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.

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.	We ensure that the clients we support understand their rights. Consent is an integral part of the care we provide. We work clo sely with clients (and/or their families) to obtain it. We can evidence how we have gained consent in the care we p rovide to each person we support with our Consent to Treat do cuments and in the Client Support Plan. We ensure support staff routinely ask for clients consent on a d ay-to-day basis before giving assistance and seek a response. When people decline, staff are respectful and return to try this t ask later where practical.
	Feedback from people who use our service and their families, a lthough limited, confirmed they were happy with the service pro vided by Stokes. Clients are central to the planning of their sup port, which is planned during direct meetings but also ensure th e client is listened to regarding what they want and would like, a nd making sure this is also built into their individual support pla n. People's care plans are developed with the person, their familie s and other health professionals involved in the person's suppo rt. Staff receive a client specific induction before supporting pe ople, which covers the clients support needs and goals. Staff receive appropriate training relevant to the people they su pport and their individual needs. Staff work with other health pr ofessionals (MDT) involved in people's care and support. Peopl e are supported to have maximum choice and control of their liv es and staff support them in the least restrictive way possible a nd in their best interests; the policies and systems in the servic e also support this practice. Staff understand and respect each person's individual characte ristics, and respect people's privacy and dignity. People are inv olved in choosing the staff that support them. Staff are supported and trained to understand the client's com munication methods and can support and encourage the client to have their say, and their voice heard.

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.	Case managers complete an initial needs assessment which, wi th discussion with client (or their representative) and other heal theare professionals involved in the client's overall support and rehabilitation, identifies current health needs as well as the clie nts' personal goals. From the feedback we received from our clients, all confirmed t hey were happy with the support they received from staff and th at they liked their support staff. The Case Managers through their relationship with the client, g et to know what is important to them and support to meet their e motional wellbeing needs. For example the Client Support Plan will include how staff can support the client to remain independ ent and connected with people, activities, hobbies, external org anisations and interests important to them to benefit their wellb eing. Clients are encouraged and supported to achieve their person al goals in relation to their own care, treatment, and wellbeing, t hey are involved in discussions and decisions related to their h ome and living arrangements. We work jointly and alongside the MDT to ensure clients are su pported to access specialist/adaptive equipment to keep them c onnected and able to access the community, including wellbein g and healthcare support. The Case Manager identifies risk of loneliness and facilitates s upport to clients to make connections and engage with others, r espectful of their own preferences.
The extent to which people feel safe and protected from abuse and neglect.	We ensure staff are trained to proactively recognise and report bullying, harassment, abuse and challenge discrimination. Stok es management team check staff understanding by regularly in cluding safeguarding discussions in staff supervisions and tea m meetings. We ensure our day-to-day practice complies with Mental Capacity Act and Liberty Protection Safeguards. Safegu arding notifications are sent to CIW as required and ensure our safeguarding policies and procedures are aligned to the latest good or best practice, including local requirements. Safeguardin ng incidents are thoroughly investigated in an open and transp arent way. We clearly document evidence of safeguarding incid ents, including how they were dealt with, which agencies were i nvolved and follow up action undertaken. Stokes regularly revie ws safeguarding incidents to identify trends. Stokes safe recruit ment practices and staffing levels are essentials of delivering s afe care. We make sure there are enough qualified, skilled, an d experienced staff, who receive effective support, supervision and development and work together effectively to provide safe care that meets people's individual needs. The Case Managers work closely with their clients and families to understand what b eing safe means to them. Stokes values are to concentrate on i mproving clients lives while protecting their right to live in safety , free from bullying, harassment, abuse, discrimination, avoidab le harm and neglect. From the feedback we have received, clie nts (and their family or representative) have said they feel safe and protected from abuse. Stokes have a lear Safeguarding p olicy & procedures in place and safeguarding training is undert aken by all (Stokes and clients) staff. Stokes have a Complaints , Concerns and Compliments procedure in place and clients ar e informed of who they can contact should they have a complaint or a concern. Records of all complaints, concerns and compli- ments are kept and these are reviewed, along with any feedback k, as an opport

Number of posts and staff turnover	
The total number of full time equivalent posts at the service (as at 31 March)	11.50

taff Type	Service Manager	
	Does your service structure include roles of this type?	No
	Deputy service manager	
	Does your service structure include roles of this type?	No
	Other supervisory staff	
	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 type?	No
	Other types of staff	
	Does your service structure include any additional role types other than those already listed?	No

Service Details

Name of Service	Stokes Case Management Cwm Taff
	·
Telephone Number	02920351420
What is/are the main language(s) through which your service is provided?	English Medium
Other languages used in the provision of the service	Where the client's first language is not English, Stokes will activ ely look to provide a case manager or interpreter to assist the c lients communication and expression of needs. Where Stokes a re supporting clients to actively recruit support staff, we would s eek to recruit a support worker who could speak the language of the client. We are working toward the 'Active Offer'.

People Supported		
How many people in total did the service provide care and support to during the last financial year?	2	

Fees Charged

The minimum hourly rate payable during the last financial year?	25
The maximum hourly rate payable during the last financial year?	25

Complaints

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	0
What arrangements were made for consulting people who use the service about the operation of the service during the last financial year?	Feedback questionnaires are sent to clients, by post or online, as king for their feedback and comments. Unfortunately, the respons e rate was disappointing, however, the feedback we did receive w as mainly positive and that clients were happy with the support pr ovided. Case Managers met with clients (or their representative) d irectly, or virtually to carry out welfare checks as well as to ensure the client was happy with, and involved, in all aspects of their care & support. This forum is also used by case managers to ensure th at planning or reviewing of support is led by the client, taking full a ccount of the client's needs and wishes, and to confirm clients un derstand what they can and should expect from Stokes.

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	Yes
List 'Other' forms of non-verbal communication used	Eye gaze

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.

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.	We ensure that the clients we support understand their rights. Consent is an integral part of the care we provide. We work clo sely with clients (and/or their families) to obtain it.We can evide nce how we have gained consent in the care we provide to eac h person we support with our Consent to Treat documents and in the Client Support Plan. We ensure support staff routinely as k for clients consent on a day-to-day basis before giving assist ance and seek a response. When people decline, staff are res pectful and return to try this task later where practical. Feedbac k from people who use our service and their families, although li mited, confirmed they were happy with the service provided by Stokes. Clients are central to the planning of their support, whic h is planned during direct meetings but also ensure the client is listened to regarding what they want and would like, and makin g sure this is also built into their individual support plan. People' s care plans are developed with the person, their families and o ther health professionals involved in the person's support. Staff receive a client specific induction before supporting people, whi ch covers the clients support needs and goals. Staff receive ap propriate training relevant to the people they support and their i ndividual needs. Staff work with other health professionals (MD T) involved in people's care and support. People are supported to have maximum choice and control of their lives and staff sup port them in the least restrictive way possible and in their best i nterests; the policies and systems in the service also support this is practice. Staff understand and respect each person's individ ual characteristics, and respect people's privacy and dignity. P eople are involved in choosing the staff that support them. Staff are supported and trained to understand the client's communic ation methods and can support and encourage the client to have e their say, and their voice heard.
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.	Case managers complete an initial needs assessment which, wi th discussion with client (or their representative) and other heal thcare professionals involved in the client's overall support and rehabilitation, identifies current health needs as well as the clie nts' personal goals. From the feedback we received from our cli ents, all confirmed they were happy with the support they receive ed from staff and that they liked their support staff. The Case M anagers through their relationship with the client, get to know w hat is important to them and support to meet their emotional well lbeing needs. For example the Client Support Plan will include h ow staff can support the client to remain independent and conn ected with people, activities, hobbies, external organisations an d interests important to them to benefit their wellbeing. Clients a re encouraged and supported to achieve their personal goals i n relation to their own care, treatment, and wellbeing, they are i nvolved in discussions and decisions related to their home and living arrangements. We work jointly and alongside the MDT to ensure clients are supported to access specialist/adaptive equi pment to keep them connected and able to access the commun ity, including wellbeing and healthcare support. The Case Mana ger identifies risk of loneliness and facilitates support to clients to make connections and engage with others, respectful of their own preferences

The extent to which people feel safe and protected from abuse and neglect.	We ensure staff are trained to proactively recognise and report bullying, harassment, abuse and challenge discrimination. Stok es management team check staff understanding by regularly in cluding safeguarding discussions in staff supervisions and tea m meetings. We ensure our day-to-day practice complies with Mental Capacity Act and Liberty Protection Safeguards. Safegu arding notifications are sent to CIW as required and ensure our safeguarding policies and procedures are aligned to the latest good or best practice, including local requirements. Safeguardi ng incidents are thoroughly investigated in an open and transp arent way. We clearly document evidence of safeguarding incid ents, including how they were dealt with, which agencies were i nvolved and follow up action undertaken. Stokes regularly revie ws safeguarding incidents to identify trends. Stokes safe recruit ment practices and staffing levels are essentials of delivering s afe care. We make sure there are enough qualified, skilled, an d experienced staff, who receive effective support, supervision and development and work together effectively to provide safe care that meets people's individual needs. The Case Managers work closely with their clients and families to understand what b eing safe means to them. Stokes values are to concentrate on i mproving clients lives while protecting their right to live in safety , free from bullying, harassment, abuse, discrimination, avoidab le harm and neglect. From the feedback we have received, clie nts (and their family or representative) have said they feel safe and protected from abuse. Stokes have a clear Safeguarding p olicy & procedures in place and safeguarding training is undert aken by all (Stokes and clients) staff. Stokes have a Complaints
	care that meets people's individual needs. The Case Managers work closely with their clients and families to understand what b eing safe means to them. Stokes values are to concentrate on i mproving clients lives while protecting their right to live in safety , free from bullying, harassment, abuse, discrimination, avoidab le harm and neglect. From the feedback we have received, clie nts (and their family or representative) have said they feel safe and protected from abuse. Stokes have a clear Safeguarding p olicy & procedures in place and safeguarding training is undert
	e informed of who they can contact should they have a complaint or a concern. Records of all complaints, concerns and compliments are kept and these are reviewed, along with any feedbac k, as an opportunity to improve services for people we support. Risk assessments are completed and staff are made aware of a ny risks. All incidents, accidents are reported and reviewed, with updates to risk assessments made as needed by Case Mana gers. Whilst it is essential for risks to be managed Stokes look t o minimise risk and discuss with the client to enable the individual to achieve their wishes. Through a lessons learnt process implements and the set of the

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 31 March) 11.50

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	Service Manager		
	Does your service structure include roles of this type?	No		
	Deputy service manager			
	Does your service structure include roles of this type?	No		
	Other supervisory staff	1		
	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 type?	No		
	Other types of staff			
	Does your service structure include any additional role types other than those already listed?	No		

Service Details

Name of Service Stokes	s Case Management Gwent

Telephone Number	02920351420
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 would look to provide a case manager or support client to r ecruit support staff who was able to speak the clients' first lang uage. Use of an interpreter would also be an option.

Service Provision

How many people in total did the service provide care and	2
support to during the last financial year?	5
es Charged	
es Charged	
the minimum hourly rate payable during the last financial year?	25

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?	Feedback questionnaires are sent to clients, by post or online, as king for their feedback and comments. Unfortunately, the respons e rate was disappointing, however, the feedback we did receive w as mainly positive and that clients were happy with the support pr ovided. We continue to review how we can gain feedback from clients and their representatives and have this year, reviewed the questionna ire for clients, as well as other stakeholders. We are also planning for Stokes' registered managers to carry out visits to clients to sp ecifically gain more, direct feedback and to confirm clients underst and what they can and should expect from Stokes, all which will b e used to help us improve our services. Case Managers met with clients (or their representative) directly, virtual, to carry out welfare checks ensure ensure the client was h appy with, and involved, in all aspects of their care & support.

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	Yes
List 'Other' forms of non-verbal communication used	The cl8ient is unable to verbalise but does communicate through sound, expression and body language. The parents and carers ar e aware of the clients communication methods.

Statement of Compliance

The Responsible Individual must prepare the statement of compliance.

CIW have published <u>guidance</u> on completing the quality of care review which provides advice on what could be contained within the statement of compliance.

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.	We ensure that the clients we support understand their rights. Consent is an integral part of the care we provide. We work clo sely with clients (and/or their families) to obtain it. We can evide nce how we have gained consent in the care we provide to eac h person we support with our Consent to Treat documents and in the Client Support Plan. We ensure support staff routinely as k for clients consent on a day-to-day basis before giving assist ance and seek a response. When people decline, staff are res pectful and return to try this task later where practical. Feedbac k from people who use our service and their families, although li mited, confirmed they were happy with the service provided by Stokes. Clients are central to the planning of their support, whic h is planned during direct meetings but also ensure the client is listened to regarding what they want and would like, and makin g sure this is also built into their individual support plan. People' s care plans are developed with the person, their families and o ther health professionals involved in the person's support. Staff receive a client specific induction before supporting people, whi ch covers the clients support needs and goals. Staff receive ap propriate training relevant to the people they support and their i ndividual needs. Staff work with other health professionals (MD T) involved in people's care and support. People are supported to have maximum choice and control of their lives and staff sup port them in the least restrictive way possible and in their best i nterests; the policies and systems in the service also support th is practice. Staff understand and respect each person's individ ual characteristics, and respect people's privacy and dignity. P eople are involved in choosing the staff that support them. Staff are supported and trained to understand the client's communic ation methods and can support and encourage the client to have e their say, and their voice heard.
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.	Case managers complete an initial needs assessment which, wi th discussion with client (or their representative) and other heal thcare professionals involved in the client's overall support and rehabilitation, identifies current health needs as well as the clie nts' personal goals. From the feedback we received from our cli ents, all confirmed they were happy with the support they receiv ed from staff and that they liked their support staff. The Case M anagers through their relationship with the client, get to know w hat is important to them and support to meet their emotional wel lbeing needs. For example the Client Support Plan will include h ow staff can support the client to remain independent and conn ected with people, activities, hobbies, external organisations an d interests important to them to benefit their wellbeing. Clients a re encouraged and supported to achieve their personal goals i n relation to their own care, treatment, and wellbeing, they are i nvolved in discussions and decisions related to their home and living arrangements. We work jointly and alongside the MDT to ensure clients are supported to access specialist/adaptive equi pment to keep them connected and able to access the commun ity, including wellbeing and healthcare support. The Case Mana ger identifies risk of loneliness and facilitates support to clients to make connections and engage with others, respectful of their own preferences.

The extent to which people feel safe and protected from abuse	We ensure staff are trained to proactively recognise and report
and neglect.	bullying, harassment, abuse and challenge discrimination. Stok
	es management team check staff understanding by regularly in
	cluding safeguarding discussions in staff supervisions and tea
	m meetings. We ensure our day-to-day practice complies with
	Mental Capacity Act and Liberty Protection Safeguards. Safegu
	arding notifications are sent to CIW as required and ensure our
	safeguarding policies and procedures are aligned to the latest
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	ng incidents are thoroughly investigated in an open and transp
	arent way. We clearly document evidence of safeguarding incid
	ents, including how they were dealt with, which agencies were i
	nvolved and follow up action undertaken. Stokes regularly revie
	ws safeguarding incidents to identify trends. Stokes safe recruit
	ment practices and staffing levels are essentials of delivering s
	afe care. We make sure there are enough qualified, skilled, an
	d experienced staff, who receive effective support, supervision
	and development and work together effectively to provide safe
	care that meets people's individual needs. The Case Managers
	work closely with their clients and families to understand what b
	eing safe means to them. Stokes values are to concentrate on i
	mproving clients lives while protecting their right to live in safety
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	le harm and neglect. From the feedback we have received, clie
	nts (and their family or representative) have said they feel safe
	and protected from abuse. Stokes have a clear Safeguarding p
	olicy & procedures in place and safeguarding training is undert
	aken by all (Stokes and clients) staff. Stokes have a Complaints
	, Concerns and Compliments procedure in place and clients ar
	e informed of who they can contact should they have a complai
	nt or a concern. Records of all complaints, concerns and complaints
	ments are kept and these are reviewed, along with any feedbac
	k, as an opportunity to improve services for people we support.
	Risk assessments are completed and staff are made aware of a
	ny risks. All incidents, accidents are reported and reviewed, wit
	h updates to risk assessments made as needed by Case Mana
	gers. Whilst it is essential for risks to be managed Stokes look t
	o minimise risk and discuss with the client to enable the individu
	al to achieve their wishes. Through a lessons learnt process im
	provement or further risk management implemented.

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 31 March) 11.50

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?	No
	Deputy service manager	
	Does your service structure include roles of this type?	No
	Other supervisory staff	1
	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 type?	No
	Other types of staff	
	Does your service structure include any additional role types other than those already listed?	No

Service Details

Name of Service Stokes Case Management North Wales	Stokes Case Management North Wales
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Telephone Number	02920351420
What is/are the main language(s) through which your service is provided?	English Medium
Other languages used in the provision of the service	Always look to provide case manager or when assisting client to recruit support staff, a person who is able to speak the clients' f irst language.

Service Provision

How many people in total did the service provide care and support to during the last financial year?	0
es Charged	
The minimum hourly rate payable during the last financial year?	25

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?	NA

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.

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.	We ensure that the clients we support understand their rights. Consent is an integral part of the care we provide. We work clo sely with clients (and/or their families) to obtain it.We can evide nce how we have gained consent in the care we provide to eac h person we support with our Consent to Treat documents and in the Client Support Plan. We ensure support staff routinely as k for clients consent on a day-to-day basis before giving assist ance and seek a response. When people decline, staff are res pectful and return to try this task later where practical. Feedbac k from people who use our service and their families, although li mited, confirmed they were happy with the service provided by Stokes. Clients are central to the planning of their support, whic h is planned during direct meetings but also ensure the client is listened to regarding what they want and would like, and makin g sure this is also built into their individual support plan. People' s care plans are developed with the person, their families and o ther health professionals involved in the person's support. Staff receive a client specific induction before supporting people, whi ch covers the clients support needs and goals. Staff receive ap propriate training relevant to the people they support and their i ndividual needs. Staff work with other health professionals (MD T) involved in people's care and support. People are supported to have maximum choice and control of their lives and staff sup port them in the least restrictive way possible and in their best i nterests; the policies and systems in the service also support th is practice. Staff understand and respect each person's individ ual characteristics, and respect people's privacy and dignity. P eople are involved in choosing the staff that support them. Staff are supported and trained to understand the client's communic ation methods and can support and encourage the client to hav e their say, and their voice heard
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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.	Case managers complete an initial needs assessment which, wi th discussion with client (or their representative) and other heal thcare professionals involved in the client's overall support and rehabilitation, identifies current health needs as well as the clie nts' personal goals. From the feedback we received from our cli ents, all confirmed they were happy with the support they receiv ed from staff and that they liked their support staff. The Case M anagers through their relationship with the client, get to know w hat is important to them and support to meet their emotional wel lbeing needs. For example the Client Support Plan will include h ow staff can support the client to remain independent and conn ected with people, activities, hobbies, external organisations an d interests important to them to benefit their wellbeing. Clients a re encouraged and supported to achieve their personal goals i n relation to their own care, treatment, and wellbeing, they are i nvolved in discussions and decisions related to their home and living arrangements. We work jointly and alongside the MDT to ensure clients are supported to access specialist/adaptive equi pment to keep them connected and able to access the commun ity, including wellbeing and healthcare support. The Case Mana ger identifies risk of loneliness and facilitates support to clients to make connections and engage with others, respectful of their own preferences.
The extent to which people feel safe and protected from abuse and neglect.	We ensure staff are trained to proactively recognise and report bullying, harassment, abuse and challenge discrimination. Stok es management team check staff understanding by regularly in cluding safeguarding discussions in staff supervisions and tea m meetings. We ensure our day-to-day practice complies with Mental Capacity Act and Liberty Protection Safeguards. Safegu arding notifications are sent to CIW as required and ensure our safeguarding policies and procedures are aligned to the latest good or best practice, including local requirements. Safeguardin ng incidents are thoroughly investigated in an open and transp arent way. We clearly document evidence of safeguarding incid ents, including how they were dealt with, which agencies were i nvolved and follow up action undertaken. Stokes regularly revie ws safeguarding incidents to identify trends. Stokes safe recruit ment practices and staffing levels are essentials of delivering s afe care. We make sure there are enough qualified, skilled, an d experienced staff, who receive effective support, supervision and development and work together effectively to provide safe care that meets people's individual needs. The Case Managers work closely with their clients and families to understand what b eing safe means to them. Stokes values are to concentrate on i mproving clients lives while protecting their right to live in safety , free from bullying, harassment, abuse, discrimination, avoidab le harm and neglect. From the feedback we have received, clie nts (and their family or representative) have said they feel safe and protected from abuse. Stokes have a clear Safeguarding p olicy & procedures in place and safeguarding training is undert aken by all (Stokes and clients) staff. Stokes have a Complaints , Concerns and Compliments procedure in place and clients ar e informed of who they can contact should they have a complai nt or a concern. Records of all complaints, concerns and compli ments are kept and these are reviewed, along with any feedbacc k, as an oppor

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at	11.50
31 March)	

aff Type	
	Service Manager
	Does your service structure include roles of this type? No
	Deputy service manager
	Does your service structure include roles of this type? No
	Other supervisory staff
	Does your service structure include roles of this type?
	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?
	Other types of staff
	Does your service structure include any additional No role types other than those already listed?

Service Details

Name of Service Stokes Case Management Powys	Name of Service	Stokes Case Management Powys
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Telephone Number	02920351420
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 would seek to provide a case manager able to speak the cli ents first language, where not possible an interpreter would be brought in. Where Stokes support clients to recruit their own su pport staff, we would recruitment for a person able to speak the clients first language

Service Provision

People Supported

How many people in total did the service provide care and support to during the last financial year?	1	
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Fees Charged

The minimum hourly rate payable during the last financial year?	25	
The maximum hourly rate payable during the last financial year?	25	

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?	Feedback questionnaires are sent to clients, by post or online, as king for their feedback and comments. Unfortunately, the respons e rate was disappointing, however, the feedback we did receive w as mainly positive and that clients were happy with the support pr ovided. Case Managers met with clients (or their representative) d irectly, or virtually to carry out welfare checks as well as to ensure the client was happy with, and involved, in all aspects of their care & support. This forum is also used by case managers to ensure th at planning or reviewing of support is led by the client, taking full a ccount of the client's needs and wishes, and to confirm clients un derstand what they can and should expect from Stokes.

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

Γ

The Responsible Individual must prepare the statement of compliance.

CIW have published <u>guidance</u> on completing the quality of care review which provides advice on what could be contained within the statement of compliance.

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.	We ensure that the clients we support understand their rights. Consent is an integral part of the care we provide. We work clo sely with clients (and/or their families) to obtain it.We can evide nce how we have gained consent in the care we provide to eac h person we support with our Consent to Treat documents and in the Client Support Plan. We ensure support staff routinely as k for clients consent on a day-to-day basis before giving assist ance and seek a response. When people decline, staff are res pectful and return to try this task later where practical. Feedbac k from people who use our service and their families, although li mited, confirmed they were happy with the service provided by Stokes. Clients are central to the planning of their support, whic h is planned during direct meetings but also ensure the client is listened to regarding what they want and would like, and makin g sure this is also built into their individual support plan. People' s care plans are developed with the person, their families and o ther health professionals involved in the person's support. Staff receive a client specific induction before supporting people, whi ch covers the clients support needs and goals. Staff receive ap propriate training relevant to the people they support and their i ndividual needs. Staff work with other health professionals (MD T) involved in people's care and support. People are supported to have maximum choice and control of their lives and staff sup port them in the least restrictive way possible and in their best i nterests; the policies and systems in the service also support th is practice. Staff understand and respect each person's individ ual characteristics, and respect people's privacy and dignity. P eople are involved in choosing the staff that support them. Staff are supported and trained to understand the client's communic ation methods and can support and encourage the client to have e their say, and their voice heard.
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The extent to which people feel safe and protected from abuse	We ensure staff are trained to proactively recognise and report
and neglect.	bullying, harassment, abuse and challenge discrimination. Stok
	es management team check staff understanding by regularly in
	cluding safeguarding discussions in staff supervisions and tea
	m meetings. We ensure our day-to-day practice complies with
	Mental Capacity Act and Liberty Protection Safeguards. Safegu
	arding notifications are sent to CIW as required and ensure our
	safeguarding policies and procedures are aligned to the latest
	good or best practice, including local requirements. Safeguardi
	ng incidents are thoroughly investigated in an open and transp
	arent way. We clearly document evidence of safeguarding incid
	ents, including how they were dealt with, which agencies were i
	nvolved and follow up action undertaken. Stokes regularly revie
	ws safeguarding incidents to identify trends. Stokes safe recruit
	ment practices and staffing levels are essentials of delivering s
	afe care. We make sure there are enough qualified, skilled, an
	d experienced staff, who receive effective support, supervision
	and development and work together effectively to provide safe
	care that meets people's individual needs. The Case Managers
	work closely with their clients and families to understand what b
	eing safe means to them. Stokes values are to concentrate on i
	mproving clients lives while protecting their right to live in safety
	, free from bullying, harassment, abuse, discrimination, avoidab
	le harm and neglect. From the feedback we have received, clie
	nts (and their family or representative) have said they feel safe
	and protected from abuse. Stokes have a clear Safeguarding p
	olicy & procedures in place and safeguarding training is undert
	aken by all (Stokes and clients) staff. Stokes have a Complaints
	, Concerns and Compliments procedure in place and clients ar
	e informed of who they can contact should they have a complai
	nt or a concern. Records of all complaints, concerns and complaints
	ments are kept and these are reviewed, along with any feedbac
	k, as an opportunity to improve services for people we support.
	Risk assessments are completed and staff are made aware of a
	ny risks. All incidents, accidents are reported and reviewed, wit
	h updates to risk assessments made as needed by Case Mana
	gers. Whilst it is essential for risks to be managed Stokes look t
	o minimise risk and discuss with the client to enable the individu
	al to achieve their wishes. Through a lessons learnt process im
	provement or further risk management implemented.

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 31 March) 11.50

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.

Service Manager	
Does your service structure include roles of this type?	No
Deputy service manager	
Does your service structure include roles of this type?	No
Other supervisory staff	
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 type?	No
Other types of staff	1
Does your service structure include any additional role types other than those already listed?	No
	Does your service structure include roles of this type? Deputy service manager Does your service structure include roles of this type? Other supervisory staff Does your service structure include roles of this type? Senior social care workers providing direct care Does your service structure include roles of this type? Other supervisory staff Does your service structure include roles of this type? Other social care workers providing direct care Does your service structure include roles of this type? Other social care workers providing direct care Does your service structure include roles of this type? Other social care workers providing direct care Does your service structure include roles of this type? Other types of staff Does your service structure include any additional

Service Details

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Telephone Number	02920351420
What is/are the main language(s) through which your service is provided?	English Medium
Other languages used in the provision of the service	N/A

Service Provision

sople Supported	
How many people in total did the service provide care and support to during the last financial year?	2
es Charged	
tes Charged The minimum hourly rate payable during the last financial year?	25

Complaints

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	1
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?	Feedback questionnaires are sent to clients, by post or online, as king for their feedback and comments. Unfortunately, the respons e rate was disappointing, however, the feedback we did receive w as mainly positive and that clients were happy with the support pr ovided. Case Managers met with clients (or their representative) d irectly, or virtually to carry out welfare checks as well as to ensure the client was happy with, and involved, in all aspects of their care & support. This forum is also used by case managers to ensure th at planning or reviewing of support is led by the client, taking full a ccount of the client's needs and wishes, and to confirm clients un derstand what they can and should expect from Stokes.

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

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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.	We ensure that the clients we support understand their rights. Consent is an integral part of the care we provide. We work clo sely with clients (and/or their families) to obtain it. We can evide nce how we have gained consent in the care we provide to eac h person we support with our Consent to Treat documents and in the Client Support Plan. We ensure support staff routinely as k for clients consent on a day-to-day basis before giving assist ance and seek a response. When people decline, staff are res pectful and return to try this task later where practical. Feedbac k from people who use our service and their families, although li mited, confirmed they were happy with the service provided by Stokes. Clients are central to the planning of their support, whic h is planned during direct meetings but also ensure the client is listened to regarding what they want and would like, and makin g sure this is also built into their individual support plan. People's care plans are developed with the person, their families and o ther health professionals involved in the person's support. Staff receive a client specific induction before supporting people, whi ch covers the clients support needs and goals. Staff receive ap propriate training relevant to the people they support and their individual needs. Staff work with other health professionals (MD T) involved in people's care and support. People are supported to have maximum choice and control of their lives and staff sup port them in the least restrictive way possible and in their best in therests; the policies and systems in the service also support their support and respect people's privacy and dignity. P eople are involved in choosing the staff that support them. Staff are supported and trained to understand the client's communic ation methods and can support and encourage the client to have e their say, and their voice heard.

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The extent to which people feel safe and protected from abuse and neglect.	We ensure staff are trained to proactively recognise and report bullying, harassment, abuse and challenge discrimination. Stok
	es management team check staff understanding by regularly in
	cluding safeguarding discussions in staff supervisions and tea
	m meetings. We ensure our day-to-day practice complies with
	Mental Capacity Act and Liberty Protection Safeguards. Safegu
	arding notifications are sent to CIW as required and ensure our
	safeguarding policies and procedures are aligned to the latest
	good or best practice, including local requirements. Safeguardi
	ng incidents are thoroughly investigated in an open and transp
	arent way. We clearly document evidence of safeguarding incid
	ents, including how they were dealt with, which agencies were i
	nvolved and follow up action undertaken. Stokes regularly revie
	ws safeguarding incidents to identify trends. Stokes safe recruit
	ment practices and staffing levels are essentials of delivering s
	afe care. We make sure there are enough qualified, skilled, an
	d experienced staff, who receive effective support, supervision
	and development and work together effectively to provide safe
	care that meets people's individual needs. The Case Managers
	work closely with their clients and families to understand what b
	eing safe means to them. Stokes values are to concentrate on i
	mproving clients lives while protecting their right to live in safety
	, free from bullying, harassment, abuse, discrimination, avoidab
	le harm and neglect. From the feedback we have received, clie
	nts (and their family or representative) have said they feel safe
	and protected from abuse. Stokes have a clear Safeguarding p
	olicy & procedures in place and safeguarding training is undert
	aken by all (Stokes and clients) staff. Stokes have a Complaints
	, Concerns and Compliments procedure in place and clients ar
	e informed of who they can contact should they have a complai
	nt or a concern. Records of all complaints, concerns and compli
	ments are kept and these are reviewed, along with any feedbac
	k, as an opportunity to improve services for people we support.
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	ny risks. All incidents, accidents are reported and reviewed, wit
	h updates to risk assessments made as needed by Case Mana
	gers. Whilst it is essential for risks to be managed Stokes look t
	o minimise risk and discuss with the client to enable the individu
	al to achieve their wishes. Through a lessons learnt process im
	provement or further risk management implemented.

Number of posts and staff turnover

The total number of full time equivalent posts at the service (as at 31 March) 11.50

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?	No		
	Deputy service manager			
	Does your service structure include roles of this type?	No		
	Other supervisory staff			
	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 type?	No		
	Other types of staff			
	Does your service structure include any additional role types other than those already listed?	No		