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: | | A1 Care Services Ltd |
|---|---|--|
| The provider was registered on: 29/03/20 | | 29/03/2019 |
| The following lists the provider conditions: | There are no imposed conditions associated to this provider | |
| The regulated services delivered by this provider | A1 Care Services trading as Ty Ceirios Nursing Home | |
| were: | Service Type | Care Home Service |
| | Type of Care | Adults With Nursing |
| | Approval Date | 29/03/2019 |
| | Responsible Individual(s) | |
| | Manager(s) | Loiuse Williams |
| | Maximum number of places | 39 |
| | 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

Our Training and Development Officer ensures that all of our staff attends and complete mandatory training in a timely manner. TLC our e-learning training provider allows us to provide tailor made m andatory training for both care and domestic staff.

Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider

Recruitment and retention has remained challenging throughout the period, however we have adopted a more flexible approach to working hours offering school time and flexi options.

Service Profile

Service Details

| Name of Service | A1 Care Services trading as Ty Ceirios Nursing Home |
|--|--|
| | |
| Telephone Number | 01495 752358 |
| What is/are the main language(s) through which your service is provided? | English Medium |
| Other languages used in the provision of the service | Currently there is no provision for other languages at Ty Ceirio s, however we hope to work towards the Welsh offer during the next review period. |

Service Provision

People Supported

| How many people in total did the service provide care and | 68 |
|---|----|
| support to during the last financial year? | |

Fees Charged

| The minimum weekly fee payable during the last financial year? | 909.77 |
|--|---------|
| The maximum weekly fee payable during the last financial year? | 1325.00 |

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? | Our interaction with relatives and residents was difficult during the last period, due to infectious disease outbreak and changes to m anagement. Whilst there were some meetings with relatives, frien ds and residents held, we certainly feel that these can and will be improved upon during the next period. |

Service Environment

| · | |
|--|---|
| How many bedrooms at the service are single rooms? | 37 |
| How many bedrooms at the service are shared rooms? | 1 |
| How many of the bedrooms have en-suite facilities? | 0 |
| How many bathrooms have assisted bathing facilities? | 5 |
| How many communal lounges at the service? | 4 |
| How many dining rooms at the service? | 3 |
| Provide details of any outside space to which the residents have access | Ty Ceirios has extensive, well tended outdoor spaces that can be utilised by residents with support from staff, family or friends. We have a woodland walk area and numerous picnic bench areas that both staff and residents can utilise during the day. |
| Provide details of any other facilities to which the residents have access | For our more frail residents we also have a large conservatory ar ea that brings the out doors in - Offering view of the garden and s urroundings, our residents are able to experience the tranquillity of our gardens whilst remaining within a stable environment. |

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.

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.

The last period has been difficult at Ty Ceirios Nursing Home, we have experienced significant changes which has impacted on our ability to ensure that our residents, friends, relatives and st aff are able to have a voice. Whilst our residents appear to be happy, we have been unable to measure their input into the home and life at Ty Ceirios. System updates now allow for us to be able to measure and monitor and encourage our residents relatives, friends and staff to have a voice and for it to be heard. Monthly relative friends and residents meeting will be held to provide our residents and they representatives with the opportunity to

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.

Whilst our residents have continued to receive visits from exter nal health professionals during the period, our data collection methods do not necessarily reflect this. Our residents received specialist care that provided them with access to specialist hoist s, slings and seating ensuring that they are able to continue enj oying the community and its facilities at Ty Ceirios. The ongoin g health and wellbeing of our residents is paramount, and so w e are establishing systems that will allow for us to ensure that o utcomes for our residents are achieved and recorded in the ap propriate manner. Staff training has remained a stable and func tional area that we can be proud of. Our Training and Develop ment officer has ensured that our staff have accessed and com pleted our e-learning programme of training supplied by an ext ernal provider. This in turn has ensured that our staff are able t o meet requirements from social care wales in relation to registr ation requirements. This, in turn has provided our residents wit h a knowledgeable care team and a Nursing team with up to dat e skills who are able to meet the majority of their health and wel lbeing needs in the comfort and familiar surrounds of their own home. The company recognises that whilst we may have not ac hieved establishing systems to effectively monitor outcomes for our residents during the last period, we certainly will have achie ved this by the next.

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

Our rolling maintenance programme ensures that environment receives the care and attention that it requires. The maintenan ce team work tirelessly, decorating and upgrading the environm ent to ensure that we remain both compliant and safe. Changes to regulations with regards to fire door requirements have lead to some doors being replaced causing some disruption, due the staged approach, this process has required we expect this process to be completed soon.

The safety of both our residents and staff are important to us a nd so we have established working relationships with both our Governance Nurse at ABUHB, Torfaen Commissioning Team a nd Torfaen Safeguarding Team to ensure that our internal proc esses and systems are functional and up to date. Our staff have demonstrated during the period that they understand and are capable of using these systems to protect themselves and the residents. There are stablished systems in place to protect the rights of our residents. DoLS applications and authorisations have been made during the period supporting our residents rights and ensuring their human rights are protected and upheld. Whilst our data collection methods and reports require attention we are confident that our residents feel safe and supported.

The extent to which people live in accommodation that best supports their wellbeing and achievement of their personal outcomes.

Establishing if we have achieved personal outcomes for our res idents has been challenging during the period. Whilst our resid ents have had access to services and had their health care ne eds met, it is difficult to establish if we have supported their well being and in the right way. A full review of processes and data collection methods will ensure that going forward we will be able to establish if our residents are achieving their personal outcom

The following section requires you to answer questions about the staff and volunteers working at the service.

Number of posts and staff turnover

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

The following section requires you to answer questions about each staff type including information about the number of filled and vacant posts, the training undertaken, the contractual arrangements in place and the qualifications of those staff.

The information entered should relate to the period during which the staff member has been working for the provider only.

Staff Type

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.

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 | 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. | Supervision 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 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 |
| No. of part-time staff (10 flours of 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 | 1 |
| Deputy service manager | |
| Does your service structure include roles of this type? | Yes |
| Important: All questions in this section relate spe stated, the information added should be the pos | ecifically to this role type only. Unless otherwise ition as of the 31st March of the last financial year. |
| Filled and vacant posts | |
| No. of staff in post | 1 |
| No. of posts vacant | 1 |
| Training undertaken during the last financial year Set out the number of staff who undertook releving provided is only a sample of the training that make can be added to 'Please outline any additional training the continuation of outlined above'. | ant training. The list of training categories |
| Induction | 0 |
| Health & Safety | 1 |
| Equality, Diversity & Human Rights | 1 |
| Infection, prevention & control | 1 |
| Manual Handling | 1 |
| Safequarding | 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. | Catheter training istumble falls training flow care feeding pump pressure and ulcer training Stress management |
| Contractual Arrangements | |
| No. of permanent staff | 0 |
| 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 |

| | T |
|---|---|
| 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? | Yes |
| Important: All questions in this section relate spe stated, the information added should be the pos | cifically to this role type only. Unless otherwise ition as of the 31st March of the last financial year. |
| Filled and vacant posts | |
| No. of staff in post | 13 |
| No. of posts vacant | 0 |
| not outlined above'. | y have been undertaken. Any training not listed aining undertaken pertinent for this role which is |
| Induction | 0 |
| Health & Safety | 13 |
| Equality, Diversity & Human Rights | 13 |
| Infection, prevention & control | 13 |
| Manual Handling | 13 |
| Safeguarding Madisira assessment | 13 |
| Medicine management | 13 |
| Dementia Positive Behaviour Management | 13 |
| Food Hygiene | 13 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | |
| 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 fixe | d term contact staff by hours worked per week. |
| No. of full-time staff (35 hours or more per week) | 11 |
| No. of part-time staff (17-34 hours per week) | 2 |
| No. of part-time staff (16 hours or under per week) | 0 |
| Staff Qualifications | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 13 |

| Nursing care staff | |
|--|--|
| Does your service structure include roles of this | Yes |
| type? | |
| 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 | 5 |
| No. of posts vacant | 0 |
| Training undertaken during the last financial year Set out the number of staff who undertook relevance provided is only a sample of the training that macan be added to 'Please outline any additional transcript outlined above'. | ant training. The list of training categories |
| Induction | 0 |
| Health & Safety | 5 |
| Equality, Diversity & Human Rights | 5 |
| Infection, prevention & control | 5 |
| Manual Handling | 5 |
| Safeguarding | 5 |
| Medicine management | 5 |
| Dementia | 5 |
| Positive Behaviour Management | 5 |
| Food Hygiene | 5 |
| | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Catheter training Falls management and prevention Pump feed course |
| Contractual Arrangements | |
| No. of permanent staff | 5 |
| 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 | 3 |
| 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) | 1 |
| No. of part-time staff (16 hours or under per week) | 0 |
| Typical shift patterns in operation for employed s | staff |
| Set out the typical shift patterns of staff employed at the service in this role type. You should also include the average number of staff working in each shift. | 1 x Nurse on shift during the day and 1 x nurse dung the night. |

| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 0 | |
|--|---|--|
| No. of staff working towards the required/recommended qualification | 0 | |
| Registered nurses | | |
| Does your service structure include roles of this type? | Yes | |
| | ecifically to this role type only. Unless otherwise sition as of the 31st March of the last financial year. | |
| Filled and vacant posts | | |
| No. of staff in post | 5 | |
| No. of posts vacant | 0 | |
| Training undertaken during the last financial ye | ar 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 | 0 | |
| Health & Safety | 5 | |
| Equality, Diversity & Human Rights | 5 | |
| Infection, prevention & control | 5 | |
| Manual Handling | 5 | |
| Safeguarding | 5 | |
| Medicine management | 5 | |
| Dementia | 5 | |
| Positive Behaviour Management | 5 | |
| Food Hygiene | 5 | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Catheter care Food pump course | |
| Contractual Arrangements | | |
| No. of permanent staff | 5 | |
| 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 | | |
| 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) | 4 | |
| 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. | 1 x Qualified Nurse during the day 1 x Qualified Nurse during the night | |

| 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 | |
| | | |
| 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 | 7 | |
| 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 | 0 | |
| Health & Safety | 7 | |
| Equality, Diversity & Human Rights | 0 | |
| Infection, prevention & control | 7 | |
| Manual Handling | 7 | |
| Safeguarding | 0 | |
| Medicine management | 0 | |
| Dementia | 7 | |
| Positive Behaviour Management | 0 | |
| Food Hygiene | 0 | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | None | |
| 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 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) | 7 | |
| 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 who have the required qualification | | |
| No. of staff working toward required/recommended qualification | 0 | |
| Catering staff | | |
| Does your service structure include roles of this type? | Yes | |
| Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year. | | |
| Filled and vacant posts | | |
| No. of staff in post | 5 | |
| No. of posts vacant | 0 | |
| Training undertaken during the last financial year 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 | 0 | |
| Health & Safety | 5 | |
| Equality, Diversity & Human Rights | 0 | |
| Infection, prevention & control | 5 | |
| Manual Handling | 5 | |
| Safeguarding | 0 | |
| Medicine management | 0 | |
| Dementia | 0 | |
| Positive Behaviour Management | 0 | |
| Food Hygiene | 5 | |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | None | |
| Contractual Arrangements | | |
| No. of permanent staff | 5 | |
| 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) | 0 | |
| No. of part-time staff (17-34 hours per week) | 5 | |
| 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 | |
| Other types of staff | | |

| Does your service structure include any additional role types other than those already listed? | Yes |
|---|--|
| List the role title(s) and a brief description of the role responsibilities. | Administration staff - Manage daily administration t asks including but not limited to accounts. Maintenance - carry out repairs and maintenance Activities Coordinator - engages our residents in m eaningful activities |
| Filled and vacant posts | |
| No. of staff in post | 5 |
| No. of posts vacant | 0 |
| Training undertaken during the last financial year Set out the number of staff who undertook releven provided is only a sample of the training that may can be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training that may be added to 'Please outline any additional training | ant training. The list of training categories |
| Induction | 0 |
| Health & Safety | 5 |
| Equality, Diversity & Human Rights | 0 |
| Infection, prevention & control | 0 |
| Manual Handling | 5 |
| Safeguarding | 0 |
| Medicine management | 0 |
| Dementia | 0 |
| Positive Behaviour Management | 0 |
| Food Hygiene | 0 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | GDPR |
| Contractual Arrangements | |
| No. of permanent staff | 5 |
| 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) | 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 |