

# ***THE LAURELS***

*Residential Care Home*

## **Statement of Purpose**

**November 2015**

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# **The Laurels**

## **MISSION STATEMENT and PHILOSOPHY OF CARE**

The prime concern of the Home and the staff is the residents quality of life.

Our philosophy is to look after the residents in a caring and sympathetic way so that their privacy and dignity are respected and to encourage active independence where possible.

## **RESIDENTS RIGHTS**

We place the rights of residents at the forefront of our philosophy of care. We seek to advance these rights in all aspects of the environment and the services we provide and to encourage our residents to exercise their rights to the full.

### **Privacy**

We recognise that life in a communal setting and the need to accept help with personal tasks are inherently invasive of residents ability to enjoy the pleasure of being alone and undisturbed. We, therefore, strive to retain as much privacy as possible for our service users in the following ways.

- Giving help in intimate situations as discreetly as possible.
- Helping residents to furnish and equip their rooms in their own style and to use them as much as is practical for leisure and entertaining.
- Use of the office for residents to be alone or with selected others.
- Providing locks on residents storage space and bedrooms (on request).
- Guaranteeing residents privacy when using the telephone, opening and reading post and communicating with friends, relatives or advisors.
- Ensuring the confidentiality of information the home holds about residents.

### **Dignity**

Disabilities quickly undermine dignity, so we try to preserve respect for our service users intrinsic value in the following ways.

- Treating each resident as a special and valued individual.
- Helping residents to present themselves to others as they would wish through their own clothing, their personal appearance and their behaviour in public.
- Offering a range of activities that enables each resident to express themselves as a unique individual.
- Tackling the stigma from which our residents may suffer through age, disability or status.
- Compensating for the effects of disabilities which residents may experience on their communication, physical functioning, mobility or appearance.

### **Independence**

We are aware that our residents have given up a good deal of their independence in entering a group living situation. We regard it as all the more important to foster our service users remaining opportunities to think and act without reference to another person in the following ways.

- Providing as tactfully possible human or technical assistance when it is needed.
- Maximising the abilities our residents retain for self-care, for independent interaction with others, and for carrying out the tasks of daily living unaided.
- Helping residents take reasonable and fully thought-out risks.
- Promoting possibilities for residents to establish and retain contacts beyond the home.

- Using any form of restraint on residents only in situations of urgency when it is essential for their own safety or the safety of others.
- Encouraging residents to have access to, and contribute to, the records of their own care.

### **Freedom From Restraint**

The Laurels have developed a detailed policy on restraint which will be provided to ensure the safety and well being of the residents.

Residents have the same rights as anyone else in society and staff will promote and enable residents to exercise these rights. To achieve this it is recognised that staff will need to accept, assess and manage any risks to residents safety that may occur as a result of residents exercising their rights.

Any risks will be assessed in consultation with the residents and their advocates and a risk management plan developed so that all parties are fully aware of the possible consequences and responsibilities for the actions taken.

Restraint can be described as an action intended to curb or restrict another persons freedom or action. This may happen under many circumstances which include situations where the risks to a persons safety are considered too high to be acceptable. A common situation where restraint may be indicated is where there is need to protect a person from harming themselves or others. The use of restraints may be quite reasonable and acceptable in some situations but unreasonable in others and the home recognises this fact.

There are many forms of restraint which are considered to be inappropriate and unacceptable and the home will not tolerate or accept any such practice. Examples of these are:

- Residents environments will not be arranged in such a way as to restrict their freedom of movement eg. Being seated in chairs from which they cannot get up without assistance.
- Mobility aids, harnesses, cot sides etc will only be used to ensure a residents safety and not to control and restrain behaviour and be fully risk assessed before use.
- The home deploys the use of any drugs and medication which are used solely to control and restrain behaviour. The home accepts that any medication which has an effect on a persons behaviour will be prescribed only after a full medical assessment by the G.P or Consultant and its use is fully demonstrated in relation the care plan.

The use of restraint is only acceptable when a persons safety is clearly at risk. Restraining interventions will then be appropriate to the situation and will be discontinued when the immediate danger has gone. An example may be where a resident leaves the building by an exit door (possibly left open by a visitor) who may not have the capacity to realise they are in danger and approaches the busy main road.

Preventing the person being run over if they attempt to cross the road, in most circumstances would be considered an appropriate form of restraint that anyone may use if it meant saving someones life. However, the home then has to determine the reason as to why that person attempted to exit the building and update the care plan accordingly.

Staff actions will be directed at preventing the need for any form of restraint. If physical or any other form of restraint is needed it will be undertaken solely with the interests of keeping the person and other people safe. The least restrictive form of intervention appropriate to the situation will always be used. The home will undertake to provide its staff with appropriate guidance, supervision and training in these interventions that are seen to be acceptable and reasonable to the residents.

It will always be the policy of 'best interest' which will apply in these situations. Deprivation of Liberty applications are made automatically when a resident comes into the Home who has been assessed as not having capacity to make decisions regarding their safety and well-being.

### **Security**

We aim to provide an environment and structure of support which responds to the need for security in the following ways.

- Offering assistance with tasks and in situations that would otherwise be perilous for residents.
- Protecting residents from all forms of abuse and from all possible abusers.
- Providing readily accessible channels for dealing with complaints by residents.
- Creating an atmosphere in the home which residents experience as open, positive and inclusive.

### **Civil Rights**

Having disabilities and residing in a home can all act to deprive our residents of their rights as citizens. We, therefore, work to maintain our service users place in society as fully participating and benefiting citizens in the following ways.

- Ensuring that residents have the opportunity to vote in elections and to brief themselves fully on the democratic options.
- Preserving for residents full and equal access to all elements of the National Health Service.
- Helping residents to claim any appropriate benefits and social services.
- Assisting residents access to public services such as libraries, further education and lifelong learning whenever practical or possible.
- Facilitating residents in contributing to society through volunteering, helping each other and taking on roles involving responsibility within and beyond the home.

### **Choice**

We aim to help residents exercise the opportunity to select from range of options in all aspects of their lives in the following ways.

- Providing meals that enable residents as far as is practical to decide for themselves with whom they consume food and drink of their choice.
- Offering residents a wide range of leisure activities from which to choose.
- Enabling residents to manage their own time as is practical around meal times.
- Avoiding wherever possible treating residents as a homogeneous group.
- Respecting individual, unusual or eccentric behaviour in residents.
- Retaining flexibility in the routines of the daily life of the home.

### **Fulfilment**

We want to help our residents to realise personal aspirations and abilities in all aspects of their lives. We seek to assist this in the following ways.

- Informing ourselves as fully as each resident wishes about their individual histories and characteristics.
- Providing a range of leisure and recreational activities to suit the tastes and abilities of all residents, and to stimulate participation.
- Responding appropriately to the personal, intellectual, artistic and spiritual values and practices of every resident.
- Respecting our residents religious, ethnic and cultural diversity.
- Helping our residents to maintain existing contacts and to make new liaisons, friendships, and personal or sexual relationship if they wish.
- Attempting always to listen and attend promptly to any residents desire to communicate at whatever level.

### **QUALITY CARE**

We wish to provide the highest quality of care and to do this we give priority to a number of areas relating to the operation of the home and the services we provide.

### **Choice of Home**

We recognise that every prospective resident should have the opportunity to choose a home which suits their needs and abilities. To facilitate that choice and to ensure that our residents know precisely what services we offer, we will do the following.

- Provide detailed information on the home by publishing a statement of purpose and a detailed service user guide.
- Give each resident a contract or a statement of terms and conditions specifying the details of the relationship. For those residents funded by the Local Authority, it is their contract which will be used.
- Ensure that every prospective resident has their needs appropriately assessed before a decision on admission is taken.
- Demonstrate to every person about to be admitted to the home that we are confident that we can meet their needs as assessed.
- Offer introductory visits to prospective residents and avoid unplanned admissions except in cases of emergency.

### **Personal and Healthcare**

We draw on expert professional guidelines for the services the home provides. In pursuit of the best possible care we will do the following.

- Produce with each resident, regularly update, and thoroughly implement a service user plan of care, based on an initial and then continuing assessment.
- Seek to meet or arrange for appropriate professionals to meet the healthcare needs of each resident.
- Establish and carry out careful procedures for the administration of residents medicines.
- Take steps to safeguard residents privacy and dignity in all aspects of the delivery of health and personal care.
- Treat with special care residents who are dying and sensitively assist them and their relatives at the time of death.

### **Lifestyle**

It is clear that residents may need care and help in a range of aspects of their lives. To respond to the variety of needs and wishes of service users, we will do the following.

- Aim to provide a lifestyle for residents which satisfies their social, cultural, religious and recreational interests and needs.
- Help residents to exercise choice and control over their lives.
- Provide meals which constitute a wholesome, appealing and balanced diet in pleasing surroundings.

### **Concerns, Complaints and Protection**

Despite everything that we do to provide a secure environment, we know that residents may become dissatisfied from time to time and may even suffer abuse inside or outside the home. To tackle such problems we will do the following.

- Provide and, when necessary, operate a simple, clear and accessible complaints procedure.
- Take all necessary action to protect residents legal rights.
- Make all possible efforts to protect residents from every sort of abuse and from the various possible abusers.

### **The Environment**

The physical environment of the home is designed for residents convenience and comfort. In particular, we will do the following.

- Maintain the buildings and grounds in a safe condition.
- Make detailed arrangements for the communal areas of the home to be safe and comfortable.
- Supply toilet, washing and bathing facilities suitable for the residents for whom we care.
- Arrange for specialist equipment to be available to maximise residents independence.

- Provide individual accommodation which at least meets the National Minimum Standards.
- See that residents have safe, comfortable bedrooms with their own possessions around them.
- Ensure that the premises are kept clean, hygienic and free from unpleasant odours, with systems in place to control the spread of infection.

### **Staffing**

We are aware that the homes staff will always play a very important roll in residents welfare. To maximise this contribution, we will do the following.

- Employ staff in sufficient numbers and with the relevant mix of skills to meet residents needs.
- Provide at all times an appropriate number of staff with qualifications in health and social care.
- Observe recruitment policies and practices which both respect equal opportunities and protect residents safety and welfare.
- Offer our staff a range of training which is relevant to their induction, foundation experience and further development.

### **Management and Administration**

We know that the leadership of the home is critical to all its operations. To provide leadership of the quality required, we will do the following.

- Always engage as registered manager a person who is suitably qualified, competent and experienced for the task.
- Aim for a management approach which creates an open, positive and inclusive atmosphere.
- Install and operate effective quality assurance and quality monitoring systems.
- Work to accounting and financial procedures that safeguard residents interests.
- Offer residents appropriate assistance in the management of their personal finances.
- Supervise all staff and voluntary workers regularly and thoroughly.
- Keep up-to-date and accurate records on all aspects of the home and its residents.
- Ensure that the health, safety and welfare of residents and staff are promoted and protected.

### **Quality Assurance**

The national minimum standards for care homes for older people requires that providers have their own systems for maintaining, reviewing and evaluating the quality of their accomodation and services.

The Laurels approach to quality assurance will be based on the following:

- To ensure continuous self monitoring, using objective and reputable methods, which involve residents and their families.
- We have an annual development plan for the home, based on a systematic cycle of planning, action and review and internal audit that reflects aims and outcomes for residents.
- We will seek the views of residents, families, friends, other stakeholders and people providing services to the home as an integral part of our approach.
- We will publish the results of user satisfaction and other surveys and make them available to current and prospective residents, their representatives and other stakeholders including the C.S.S.I.W.
- We will inform residents and their relatives about planned C.S.S.I.W. visits so that they can have access to inspectors and their views included in inspection reports.
- We will revise and review policies, procedures and practices in light of changing legislation and good practice, advice from the department of health, local and health authorities, professional organisations and other relevant bodies.
- We will progress actions and improvements within agreed timescales to implement requirements identified in quality assurance activities and C.S.S.I.W inspection reports.
- Our focus will be on quality improvement and management and our aim is to improve quality continuously beyond the minimum standards. Our approach will be participating and largely self motivating and flexible. We will take actions on a wide range of measures to ensure all round development and improvement.

## **THE UNDERPINNING ELEMENTS**

A series of themes both cut across and underpin the aims we have relating to the rights of residents and quality care.

### **Focus on residents**

We want everything we do in the home to be driven by the needs, abilities and aspirations of our residents, not by what staff, management or any other group would desire. We recognise how easily this focus can slip and we will remain vigilant to ensure that the facilities, resources, policies, activities and services of the home remain resident-led.

### **Fitness for purpose**

We are committed to achieving our stated aims and objectives and we welcome the scrutiny of our residents and their representatives.

### **Comprehensiveness**

We aim to provide a total range of care, in collaboration with all appropriate agencies, to meet the overall personal and health care needs and preferences of our residents.

### **Meeting assessed needs**

The care we provide is based on the thorough assessment of needs and the systematic and continuous planning of care for each resident.

### **Quality Services**

We are aiming for a progressive improvement in the standards of training at all levels of our staff and management.

## **FACILITIES AND SERVICES OF THE HOME**

### **The homes management**

The person officially registered as carrying on the business of the home is Mr Keith L Jones, who can be contacted at 23 Meirion Street, Trecynon Aberdare, CF44 8NH.

The person officially registered to manage the home is Mrs Julie Ward and is the person in day to day control of the homes operations. Mrs Karen Drenthe is employed as matron and is responsible for the day to day care of residents.

### **The managements qualifications and experience**

The relevant qualifications and experience of Mrs Julie Ward - manager are as follows:

- Registered General Nurse.
- D32 and D33 NVQ Assessor.
- 25 years experience in working and managing care homes.
- LMC4 Management.

The relevant qualifications and experience of Mrs Karen Drenthe - Matron are as follows:

- Registered general nurse.
- Diploma in management.
- Training champion award.
- Teaching certificates.
- D32 and D33 NVQ Assesor.
- Numerous care related courses.
- 19years experience as matron of a care establishment.

### **The homes staff**

The homes total staff establishment is 20 persons of whom seventeen have duties involving direct care of residents.

All Senior Carers have completed a Level 3 Certificate NVQ / QCF in Care and all carers have completed or are working towards a Level 2 Certificate NVQ / QCF in care

A minimum of three staff are on duty during the day and a minimum of two staff (plus a person sleeping in) are on duty during the night.

Arrangements for staff recruitment, training and supervision, accord with the relevant government guidance and with good personnel practice and the requirements of the national minimum standards.

### **The organisational structure of the home**

#### **SENIOR STAFF-SPECIFIC DUTIES**

All staff have duties and responsibilities as described in their job descriptions. However, individual staff have specific areas of responsibility as detailed below.

Staff Name	Areas of Responsibility	Staff Assisting or Deputising
K L Jones	Finances General maintenance	R Evans
J Ward	Responsibility to manage the home and meet the Requirements of the Care Standard Act 2000	K Drenthe
K Drenthe	Resident care and all associated documentation.	J Ward, L James, H Sedgemore, A. Perry J Griffiths, C Joseph
R Evans	Administration Activities/Residents Liason Officer	Carers Volunteers
H Sedgemore	Housekeeping	J Ward
K L Jones	Staff welfare correspondent	R Evans
J Griffiths L James	Medication and all associated documentation	J Ward, K Drenthe,
A Perry C Joseph	To be agreed	

### **Residents accommodation**

The home provides care and accommodation for eighteen persons who are aged 65 years and above. Our registration allows the home to provide care to older persons and older persons with dementia and a mental infirmity. We are able to accommodate men and women although the majority of our residents have traditionally been women.

### **The range of needs met**

The home aims to provide a service for these older persons who find they are unable to cope with living alone in the community or in a sheltered housing complex. The needs of existing residents varies considerably, varying from individuals who are virtually self caring to those who require support and assistance with mobility, dressing, undressing, bathing, washing, toileting, eating, medication and all personal care. It is important that the mix of residents is appropriate for all who live in the home with particular emphasis placed on the effects of dementia sufferers on those older residents who are fully mentally alert.

### **Admissions**

Under government regulations, potential residents must have their needs thoroughly assessed before entering a home: this is intended to provide each resident with the best possible information on which to make an informed choice about their future. For potential residents who are already in touch with a social service or social work department, the initial assessment will be undertaken as part of the care management process, but we also need to assure ourselves and the resident that this particular home is suitable for them.

For potential residents who approach the home direct, appropriately trained staff will make a full assessment of need, with the residents permission, calling on specialist advice and reports as necessary.

The assessment will cover the range of health and social needs set out in the Care Standards guidance. All information will be treated confidentially. The assessment process helps the homes staff to be sure that the home can meet a potential residents requirements and to make an initial plan of the care we will provide.

We will provide prospective residents with as much information as possible about the home to help them make a decision about whether or not they want to live here. We offer the opportunity for a prospective resident to visit the home and join current residents for a meal. We are happy for a prospective resident to involve their friends, family or other representatives in seeing the home and the care and facilities we can provide before making the final decision about admission.

If we feel the home is not suitable for a particular person we will try to give advice on how to look for help elsewhere.

If, exceptionally, an emergency admission has to be made, we will inform the new resident within 48 hours about key aspects, rules and routines of the home and carry out the full information and assessment process within five days.

## **Social activities, hobbies and leisure interests**

We try to make it possible for our residents to live their lives as fully as possible. In particular, we do the following.

- We aim as part of the assessment process to encourage potential residents to share with us as much information as possible about their social, cultural and leisure interests, as a basis for helping them during the period of residence in the home.
- We try to help residents to continue to enjoy as wide a range of individual and group activities and interest as possible both inside and outside the home, to carry on with existing hobbies, pursuits and relationships, and to explore new avenues and experiences. All residents are entitled to use the dining room, the communal lounge, the conservatory and the grounds of the home, but those who wish to, may remain in their own rooms whenever they like. Residents are encouraged to personalise their own rooms with small items of furniture and other possessions and we try to follow individual preferences in matters of decoration and furnishings.
- We have regular organised social activities such as coffee mornings, musical movement, quizzes, parties, outings, entertainers, events involving other organisations or volunteers. We hope that friendships among residents will develop and that residents will enjoy being part of a community, but there is no compulsion on a resident to join in any of the communal social activities.
- The homes facilities include a covered outside patio with comfortable seating, spacious grounds with lawns and flower beds with wheel chair access to all areas. A two person passenger lift and a stair lift are available to assist residents to upper floor levels within the home.
- Mrs Rosey Evans is Activities Co-ordinator at the Home, she is responsible for organising and arranging all in house activities, as well as trips out, entertainment and the Laurels Monthly Newsletter. Newspapers are delivered daily and the local library arrange a regular visiting service for books and DVD's. Local shops are close to the home but staff are always on hand to purchase items on behalf of residents as necessary. A programme of forthcoming events is placed on the notice board and itemised in our monthly newsletter.
- We recognise that food and drink play an important part in the social life of the home. We try to provide a welcoming environment in the dining room and to ensure that meals are pleasant, unhurried occasions providing opportunities for social interaction as well as nourishment. As far as possible we encourage residents to choose where they sit in the dining room. Three full meals are provided each day, there is a regularly changed menu for lunch and the evening meal, residents are always offered a choice at meals, menus are displayed weekly and daily on the notice board, we cater for special and therapeutic diets as advised by specialist staff and as agreed in each residents care plan and care staff are available to provide discreet, sensitive and individual help with eating and drinking for those needing it. Snacks and hot and cold drinks are available between main meal times. We aim to make all of

the food and drink we provide attractive, appealing and appetising and to mark special occasions and festivals.

- We try to ensure that the home is a real part of the local community, so in principle we encourage visits to the home such as local councillors, members of parliament, representatives of voluntary organisations, students, school children and others. Naturally we respect the views of residents about whom they want to see or not to see.
- We recognise that risk-taking is a vital and often enjoyable part of life and of social activity and that some residents will wish to take certain risks despite or even because of their disability. We do not aim therefore to provide a totally risk-free environment though we take care to ensure that residents are not subjected to unnecessary hazards. When a resident wishes to take part in any activity which could involve risk, we will carry out a thorough risk assessment with that individual, involving if they so desire a relative, friend or representative, and will agree and record action which will appropriately balance the factors involved. Such risk assessments will be regularly reviewed, with the participation of all parties, in the light of experience.
- It is a legal requirement for of all residents, visitors and staff, that all areas inside the home are designated as non-smoking. Residents who wish to, may smoke outside under the covered patio area and will need to be supervised by care staff in the interests of safety.
- There may be a charge associated with some social activities and services and where this applies, the details will be made clear to the resident in advance.
- Consulting residents about the way the home operates.

We aim to give residents opportunities to participate in all aspects of life in the home. In particular, residents are regularly consulted both individually and collectively about the way the home is run. Our objective is always to make the process of managing and running the home as transparent as possible and to ensure that the home has an open, positive and inclusive atmosphere.

#### **Fire precautions, associated emergency procedures and safe working practices**

All residents are made aware of the action to be taken in the event of a fire or other emergency, and copies of the homes fire safety policy and procedures are available on request. A copy for residents and visitors is located on the notice board in the hallway and will be included in the residents guide. The home conforms to all relevant government guidance on promoting and protecting the health, safety and welfare of residents and staff.

#### **Arrangements for religious observances**

Residents who wish to practise their religion will be given every possible help and facility. In particular we will do the following.

- We will try to arrange transport for residents to any local place of worship if required.

- If asked to we will make contact with any local place of worship on a residents behalf. We can usually arrange for a minister or a member of the relevant congregation to visit a resident who would like this.
- In the public areas of the home we celebrate the major annual Christian festivals. Residents have the opportunity to participate or not as they wish.
- Particular care will be taken to try to meet the needs of residents from minority faiths. These should be discussed with the manager before admission.

### **Relatives, friends and representatives**

- Residents are given every possible help to maintain the links they wish to retain with their families and friends outside the home, but can choose whom they see and when and where.
- If a resident wishes, their friends and relatives are welcome to visit at anytime convenient to the resident and to become involved in daily routines and activities.
- If a resident wishes to be represented in any dealings with the home by a nominated friend, relative, professional person or advocate, we will respect their wishes and offer all necessary facilities.

### **Concerns and Complaints**

The management and staff of the home aim to listen to and act on the views and concerns of residents and to encourage discussion and action on issues raised before they develop into problems and formal complaints. We therefore welcome comments and suggestions from residents and their representatives, friends and relatives. Positive comments help us to build on our successes, but we can also learn from comments which are critical. We undertake to look into all comments or complaints as quickly as possible and to provide a satisfactory response. Anyone who feels dissatisfied with any aspect of the home should, if possible, raise the matter in the first instance with a responsible member of staff. It may be that the staff member can take immediate action to respond and if appropriate apologise. If the complainant feels uncomfortable about raising the behaviour of a particular member of staff with the individual directly, they should approach someone more senior. Any staff member receiving a complaint about themselves or a colleague will try to sort out the matter as quickly as possible.

If anyone is dissatisfied with any aspect of the home and feels that when they raised the matter informally it was not dealt with to their satisfaction or is not comfortable with the idea of dealing with the matter on an informal basis, they should inform the manager of the home that they wish to make a formal complaint. The manager will then make arrangements to handle the complaint personally or will nominate a senior person for this task.

The person who is handling the complaint will interview the complainant and will either set down the details in writing or provide the complainant with a form for them to do so. The written record of a complaint must be signed by the complainant, who will be provided with a copy, together with a written acknowledgement that the complaint is being processed, outlining the timescale for responding.

The complainant will be informed of their rights at any stage to pursue the matter with the CSSIW and will be given details of how CSSIW can be contacted.

The person handling the complaint will then investigate the matter, interviewing any appropriate staff. If it is necessary to interview other residents or anyone else, the complainants permission will be sought. Complaints will be dealt with confidentially and only those who have a need to know will be informed about the complaint or the investigation. The investigation will be completed within 20 days unless there are exceptional circumstances, which will be explained to the complainant. As soon as possible the person investigating the complaint will report back to the complainant, explaining what they have found and providing them with a written copy of their report.

The person who investigates a complainant will initiate any action which needs to be taken in response to their findings, will inform the complainant about any action, and will apologise or arrange for an apology if that is appropriate. We hope that this will satisfy the complainant and end the matter. If the complainant is satisfied, they will be asked to sign a copy of the report of the investigation and the action taken. If a complainant is not satisfied with the investigation or the action taken, they will be informed of their right to pursue the matter with CSSIW, or RCT Complaints Unit. It should be noted though, that at any stage of the complaints procedure, the complainant or their advocate can advise the CSSIW of such complaint.

Alternatively, the Public Services Ombudsman for Wales can be contacted with any concerns or complaints. Details for CSSIW, RCT Complaints Unit or the Ombudsman can be found in the complaints procedure.

### **Residents plan of care**

At the time of a new residents admission to the home, we work with the resident, and their friend, relative or representative if appropriate, to draw up a written plan of the care we will aim to provide. The plan sets out objectives for the care and how we hope to achieve those objectives, and incorporate any necessary risk assessments. At least once a month, we review each residents plan, setting out whatever changes have occurred and need to occur in the future. From time to time further assessments of elements of the residents needs as required to ensure that the care we are providing is relevant to helping the resident achieve their full potential. Every resident has access to their plan and is encouraged to participate as fully as possible in the care planning process.

### **Rooms in the home**

The home has eighteen bedrooms for residents all of which are for single occupancy and have at least 10 square metres of useable floor space. No rooms have en-suite facilities. Five bedrooms are on the ground floor and 13 bedrooms are on the first floor, with stair or lift access. Communal rooms within the home include a lounge, conservatory and dining room.

There are five separate toilets for resident use and three assisted bathrooms which also contain toilet facilities.

In addition there are some areas of the home which are generally for staff use only.

These include a kitchen, office, pharmacy, laundry room, food stores, linen stores and general stores.

There is also a two bedroom flat on the second floor which is used for staff to sleep in as night cover.

**REVIEW OF THIS DOCUMENT**

We keep this document under regular review and would welcome comments from service users and others.

Signed:

Date:

Review Date:            November 2016