

BAY HOUSE

Distinctive Nursing Care for the Older Person



QUALITY ASSESSMENT

Service Evaluation

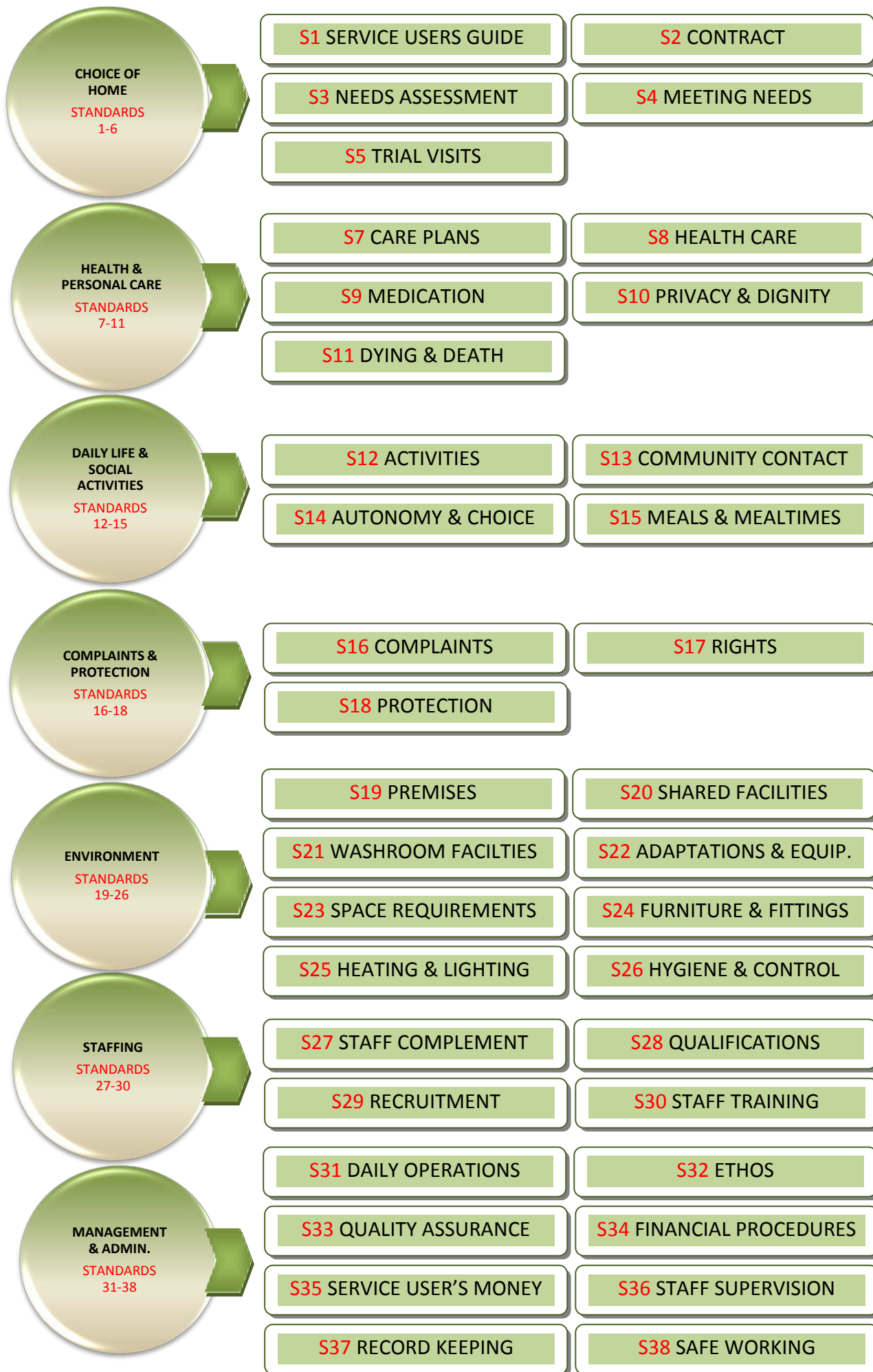
ASSESSOR:

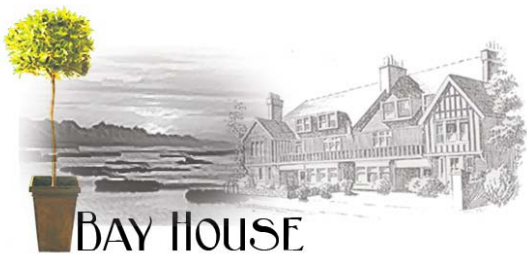
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Minimum Standards





SERVICE USERS GUIDE

- Philosophy of Care
- Description of Accommodation and Services
- Relevant Qualifications & Experience of Provider, Manager & Staff
- Number of places provided and any special needs catered for
- Copy of most recent inspection report
- Copy of Contract
- Copy of Fire Procedures
- Copy of Complaints Procedure
- Service User’s Views
- Guide available in Braille
- Guide available in Audio
- Copy of Monthly Newsletter

NOTES/ACTION	DEADLINE

CONTRACT

- Clearly states the room to be occupied
- Overall services covered by fee
- Fees payable and by whom
- Details of additional services not included in fee
- Rights and Obligations and who is liable in the event of breach
- Termination procedures

NOTES/ACTION	DEADLINE



NEEDS ASSESSMENT

- Full and comprehensive Needs Assessment carried out
- Assessor to be accompanied by a Care Assistant
- Prospective Service User and/or representatives involved
- Special Brochure for prospective Service User given
- Copy of Social Services Assessment obtained prior to offer of place
- Confirmation from Social Services that Reg. Nursing input required
- Copy of Assessment sent to Service User and/or representative
- Letter to confirm that Needs will be met sent

NOTES/ACTION	DEADLINE

MEETING NEEDS

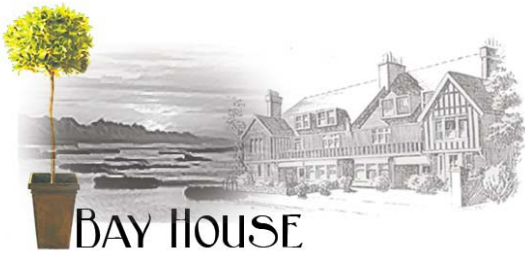
- Assessment letter to confirm that home can meet the needs
- Specialised services based on current NICE guidelines
- Evidence in the SU’s Guide to show that all cultural groups catered for
- Staff possess the skills to deliver the care we offer
- Relevant Information is collated from other professionals
- Advocacy service offered to any SU unrepresented

NOTES/ACTION	DEADLINE

TRIAL VISITS

- Copy of Assessment letter accompanied by ‘Taster Invitation’
- Assessment Letter to include info on ‘Trial Visits’
- Evidence to show that SU,Family and friends invited to visit

NOTES/ACTION	DEADLINE



HEALTH &
PERSONAL
CARE
STANDARDS 7-11



CARE PLAN

- Care Plan compiled using info from Needs Assessment
- Care Plan to detail action required to meet all needs
- Care Plan meets guidance set out by professional bodies
- Risk Assessment for all areas completed
- Reviews take place every month
- Changes to needs of individuals documented and reviewed
- Evidence of action taken relating to any changes to needs
- Care Plans acknowledge Individuals on the Care Programme Approach
- Evidence that the formation of the Care Plan has SU involvement
- Family/Representatives fully involved in Care Plan formation
- Care Plan signed off by SU and/or representative
- SU choices and preferences recorded in Care Plan
- Social Plan of care completed

NOTES/ACTION	DEADLINE



HEALTH CARE

- Evidence that SU has access to health care services to meet needs
- Care Staff maintain the personal and oral hygiene of each SU
- Care Staff facilitate SU own capacity for self care
- Evidence of correct Wound Care Management in place
- Record of any Skin Integrity issues or risks of noted in Care Plan
- Equipment promoting tissue viability in place
- Continence Management systems in place
- Professional advice/consultation sought for continence issues
- Correct continence aids and equipment in place
- SU's psychological health monitored and appropriate care provided
- Opportunities for appropriate exercise available
- Evidence of regular maintenance of mobility aids
- Evidence of records entered in Care Plan for SUs at risk of falls
- Nutritional screening is undertaken on admission
- Records of nutritional intake kept in order (Food Diary)
- Intake/Output Charts in order and kept up to date
- Evidence in Care Plan of action taken towards a change in SU's intake
- Weights are taken monthly
- Appropriate action taken in the event of drastic weight gain/loss
- Evidence of action taken entered into Care Plan
- SU able to choose the GP they use
- Access to services below clearly evident

Medical/Nursing Professionals	Dental	Any Therapeutic
Pharmaceutical	Chiropody	
- SUs have the access to access to hearing and sight tests
- Provision for the appropriate aids arranged
- SUs are provided with information on NHS services available to them
- SU clinic appointments are kept and records in order
- Risk Assessment completed for any SU self-medicating
- Contact with specialist health professionals recorded
- SUs look clean and presentable at all times
- Staff receive training on various health care topics

NOTES/ACTION

DEADLINE



MEDICATION

- Medication Policy in place
- Systems in place for the correct disposal of unused Medicines
- Medication administered as per guidelines
- Medication Trolley in order
- MAR charts accurate and complete
- Record of current medication for each SU maintained
- Clinical Room in order and secure
- Risk Assessment completed for any SU self-medicating
- Lockable space for SU self-medicating provided
- Safe Handling of Medication training courses provided to RNs
- Controlled Drugs stored correctly in the appropriate cupboard
- Controlled Drugs Record Book in order
- Regular Audits carried out both internally and by the Pharmacist
- Staff regular monitor the effect of medication given to SUs
- In the case of SU death, medication is kept for a period of 7days

NOTES/ACTION	DEADLINE





PRIVACY & DIGNITY

- SUs feel that they are treated fairly and with respect
- All Staff knock and wait for a reply before entering any SU's room
- Care Staff maintain privacy and dignity when :
 - Bathing
 - Washing
 - Toileting/Using the Commode
- SU's privacy is respected:
 - When they are being nursed
 - When they are examined/consulted by a health professional
 - When they have a legal/financial advisor
 - When they have family/friends visiting
 - When they wish to practice their faith
 - When they have passed away
- SUs have the right to make a phone call in private
- Care Staff must make arrangements for SUs who wish to talk privately
- SUs must have all personal mail passed to them unopened
- SUs wear their own clothes at all times
- All staff address the SUs by the name they prefer to be called
- Induction training covers how SUs should be treated
- Staff aware that any rude behaviour towards a SU is an offence
- Medical examinations must be carried out in the SUs personal room

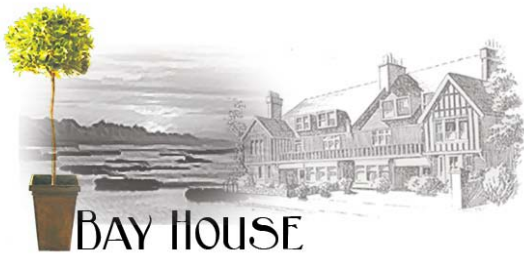
NOTES/ACTION	DEADLINE



DYING & DEATH

- SUS are assured that they will be treated with respect when dying
- Care and comfort are given to SUs who are terminally ill or dying
- Care Staff ensure that SUs receive extra attention and pain relief
- Advice on planning for and dealing with increased infirmity offered
- Requests/Wishes during end stage accommodated
- Discussions about arrangements after SU dies have taken place
- Record of wishes noted in Care Plan and where appropriate actioned
- SU's request of family/representative involvement responded to
- Privacy & Dignity maintained at all times for SU who is dying
- SUs able to stay at home during final days where appropriate
- Where necessary Palliative Professional Services offered
- Tools to communicate with SUs who are deteriorating available
- Records of Intake/Output closely monitored
- End stage SU's rooms kept pleasant, clean and peaceful
- Relatives and friends are made welcome and looked after
- Family and friends are able to stay if the dying SU requests it
- The body of a SU who has died is handled with respect
- Friends and family have time to pay their respects
- Policies regarding Dying and Death are in place
- Spiritual/Cultural wishes at time of death taken to account
- Staff receive training and advice on matters surrounding death of SUs
- Staff have moral support from line managers for anxiety and concern

NOTES/ACTION	DEADLINE



SOCIAL CONTACT & ACTIVITIES

- The provision of activities/social contact is on a full time basis
- The coordinator is trained and has experience
- Activities are developed taking into account SU's personal preferences
- Choices offered and capabilities taken into account
- Leisure time is available to all SUs
- Leisure time to be split between group activities and one to one time
- Coordinator offers one to one companionship to SUs who prefer it
- One to one time to be person centred
- Leisure time to include shopping trips and excursions
- Cultural/Religious interests catered for
- Appropriate Leisure time organised for SUs with cognitive impairments
- Appropriate Leisure time organised for SUs with Dementia
- Appropriate Leisure time organised for SUs with physical disabilities
- Appropriate Leisure time organised for SUs with Learning disabilities
- Individual SU's daily routine taken into account when planning
- Involvement from SU's family/friends actively encouraged
- Invitations for 'Lunch dates' accommodated
- VIP dinners arranged
- SUs are informed about activities and when they are to take place
- All activities and response recorded
- Activity File in order and clear evidence recorded with photographs
- Regular functions arranged and SUs involved in planning

NOTES/ACTION	DEADLINE



COMMUNITY CONTACT

- Regular contact with Family/representatives accommodated
- Phone calls can be made and received at any time of the day
- Visitors can call in and without appointment at any reasonable time
- SUs are able to receive visitors in private if they so wish
- SUs choose who they see and who they do not
- SU's family/friends are given written information on the home
- Family and friends involvement is encouraged when SU first moves in
- SU has the opportunity to access outside sources for their Leisure time
- Excursions to other homes and clubs are regularly arranged
- Local news is delivered to SU in various formats

NOTES/ACTION	DEADLINE

AUTONOMY & CHOICE

- SUs handle their own financial affairs if they so wish to/able to do so
- SUs feel that they have control over their lives
- SUs offered on how to access these services
- SUs are advised on Advocacy Services available them
- SUs are given the opportunity to bring their personal possessions in
- SUs are entitled to access to their records and files
- SUs are given choice where and when to eat
- SUs are given the choice what to wear
- SUs are asked (where appropriate)whether they want to use a bib
- SUs have the opportunity to request special items of food

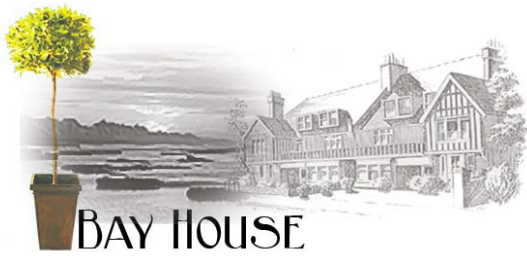
NOTES/ACTION	DEADLINE



MEALS & MEALTIMES

- Weekly menus rotated and adhered to
- Menus are flexible and SUs have the choice of alternatives
- Alcohol is available and offered to SUs (where appropriate)
- Food is fresh, well balanced and nutritional
- SUs have the opportunity to have their meals at times they choose
- SUs have their assessed nutritional needs met
- SUs are unhurried during mealtimes
- 3 meals a day are offered of which one is cooked
- Hot and cold drinks and snacks should be provided throughout the day
- Late night snacks and drinks are offered
- Food is presented to promote appetite and nutrition
- Pureed food is well presented and items are separated on the plate
- Feeds are carried out by sensitive, discreet and patient care staff
- Staff are conscious of other SUs feelings when feeding
- Independent eating is promoted and maintained for as long as possible
- Advice and direction is sought from dieticians and implemented
- Religious and cultural needs are met
- Care Staff are aware of the day's menu and pass this on to the SUs
- SUs choosing to eat in the Dining Room are offered a pleasant setting
- Tables are well set and crockery/cutlery is clean
- SUs choose where they sit and who they sit with
- Records are maintained and any changes are highlighted and acted upon
- Special Functions are planned with a menu catering for the SUs

NOTES/ACTION	DEADLINE



COMPLAINTS

- The Home’s Complaint Policy is on display
- The Home’s Complaint Procedure is readily available
- Both the Policy and Procedures are simple and clear to follow
- SUs families/representatives are aware about how to complain
- The procedures detail clearly the stages and timescales involved
- The Home operates an active ‘Open Door’ Policy
- Complaint Forms and how they are used are understood by all staff
- Complaint Forms are handed in sealed in an envelope
- Any complaint is handled efficiently in the absence of a manager
- The processing of these forms and their contents are kept confidential
- Any complaints are brought to the attention of the Manager and Owner
- Minor issues are recorded and acted upon
- Minor incidents are recorded and used for assessing risk
- Written responses are delivered within 28 days
- Unsatisfactory resolutions are escalated with assistance
- Details of governing bodies are readily available to SUs
- Investigation and notes are kept on file
- Action Plans are compiled and implemented from constructive feedback
- SUs feel that they can raise a concern or make a complaint
- SUs feel that their concerns will be taken seriously

NOTES/ACTION	DEADLINE



RIGHTS

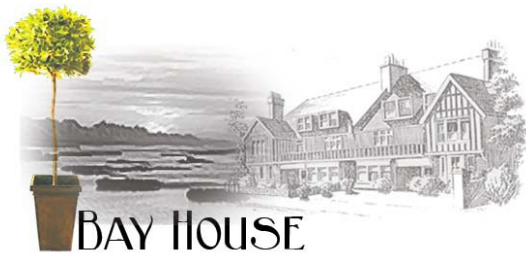
- SU’s rights are protected
- SU’s rights are respected especially with regards to communal living
- SU’s legal rights are upheld
- SUs who lack capacity are offered assistance in arranging advocacy
- SU’s are able to vote if they want to

NOTES/ACTION	DEADLINE

PROTECTION

- There is a great awareness surrounding the safeguarding of the SUs
- All types of abuse and their effect are clearly understood by all staff
- All staff are trained in the protection of SUs in our care
- Staff understand their obligations to report/Whistleblow
- Clear Safeguarding Policy is available
- Any reports are recorded and acted upon appropriately
- Professional Guidelines are available and followed
- SUs and/or their representative knows about the home’s Policy
- Robust Recruitment Procedures involve the checking all new staff
- All staff are CRB checked prior to working unsupervised
- Disclosure results are kept on file and kept confidential
- Any incidents are reported to the Authorities immediately
- There is conscious awareness surrounding types of restraint
- Restraint will only be used under guidance of professionals
- Assessments take place involving the use of restraints for individual SUs

NOTES/ACTION	DEADLINE



PREMISES

- Routine Maintenance Walk-thru conducted
- Records of these and action plans kept on file
- Any planned maintenance’s timescales are met
- Grounds and Gardens are kept tidy and SU friendly
- Any compliance issues are addressed
- EHO inspections are documented and issues rectified
- Fire Safety checks are carried out stringently
- All Health & Safety issues are addressed as priority
- The decor is of high standard throughout
- Any building work is risk assessed and cordoned off

NOTES/ACTION	DEADLINE

SHARED FACILITIES

- Communal Amenity space is at the required minimum level
- Communal area can accommodate varied activities
- SUs are offered a private area to receive visitors
- Dining room caters for all SUs
- Outside space is maintained for communal use
- Outside space is accessible for all groups of SUs
- Seating arrangements are planned to offer SUs choice in where to sit
- Lighting is appropriate for reading and all other activities
- Furniture and fittings are of a high standard and suitable for any SU

NOTES/ACTION	DEADLINE



ENVIRONMENT
CONTINUED



LAVATORIES & WASHING FACILITIES

- There are lavatories close to the lounge & dining room
- All lavatories and washrooms are accessible to all SUs
- There are lavatories within the close proximity of all SU bedrooms
- En-suite facilities are accessible to SUs who use mobility aids
- Sluice rooms are kept separate from SU lavatories and washrooms

NOTES/ACTION	DEADLINE

ADAPTATIONS & EQUIPMENT

- An assessment of the premises and equipment has been carried out
- SUs have access to all communal areas by the use of lifts etc
- Aids such as grab rails are provided throughout the home
- Aids, Hoists, Assisted Baths and toilets are provided to meet the needs
- All doorways have a clearance of min.800mm
- Communication aids are provided for SUs with impairments & LD
- Storage areas are provided for hoisting equipment and wheelchairs
- Call Bell System in working order and a point in every room

NOTES/ACTION	DEADLINE



INDIVIDUAL ACCOMODATION: SPACE REQUIREMENTS

- Space requirements meet current standards
- Room provided either side of the bed for access for carers and equipment
- No more than 2 sharers per room and a min.16sqm
- Sharers choice clearly recorded

NOTES/ACTION	DEADLINE

INDIVIDUAL ACCOMODATION: FURNITURE & FITTINGS

- Rooms have the minimum of :
 - A table to sit at
 - Seating for two
 - 2x double sockets
 - Curtains
 - Washbasin
 - Overhead and bedside lighting
 - Adjustable bed
 - Wardrobe and drawers
 - Mirror
 - Carpet
- Locks fitted to all bedrooms
- Keys to bedrooms provided to SU subject to risks assessed
- Staff have access to bedrooms in an emergency
- Lockable storage provide with a key subject to assessment
- Screening is provided in shared rooms
- SUs have choice in the layout of the room if appropriate
- SUs are welcome to bring in small belongings to furnish their room

NOTES/ACTION	DEADLINE



ENVIRONMENT
CONTINUED



SERVICES : HEATING & LIGHTING

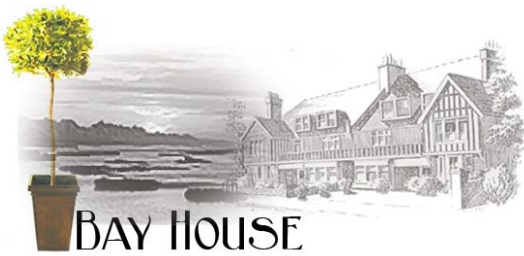
- All rooms and bathrooms have ventilation
- Bedrooms have thermostatically controlled heating
- Radiator and pipes are guarded
- Ample lighting in all bedrooms
- Emergency Lighting provided throughout the home
- Water Temperatures are regularly checked and recorded
- Water is distributed at 50C minimum

NOTES/ACTION	DEADLINE

SERVICES : HYGIENE & INFECTION CONTROL

- All staff receive training in Infection Control
- All staff use appropriate protective clothing when carrying out duties
- Alcohol Gel readily available at points throughout the home
- Soiled items are not carried through the dining room during meals
- Soiled items are not transported where they may intrude on SUs
- Hand washing facilities are provided where clinical waste is handled
- Laundry room has impermeable and cleanable floor surfaces
- Infection Control Policy & Procedures detail best practices
- Sluicing rooms are kept clean and have disinfecting equipment
- Soiled linen and clothing is washed at min 65c for at least 10 minutes
- Washing Machines have the appropriate programmes for soiled linen
- Compliance with Water Fittings Regulations 1999
- SU personal clothing is well laundered and cared for
- The home manages unpleasant odours well

NOTES/ACTION	DEADLINE



STAFF COMPLEMENT

- Staff rotas are posted showing which staff are working at all times
- Ratios of staff to SU is assessed and calculated using official guidelines
- The home is appropriately staffed to meet peak times of activity
- Appropriate numbers of domestic staff to maintain standards of service
- Off-peak/Weekends managed well
- Staff par levels are managed to cover shortages/leave/sickness

NOTES/ACTION	DEADLINE

QUALIFICATIONS

- A minimum of 50% of the Care Assistants are trained to NVQ II

NOTES/ACTION	DEADLINE

RECRUITMENT

- Robust recruitment procedures ensure SU safety
- Recruitment/Selection procedures are written
- Equal Opportunities are observed
- 2 written references are obtained and any gaps in work are explored
- No staff to work unsupervised unless CRB result has been returned
- All staff are employed in accordance with code of conduct and practice
- All staff receive copies of contracts, job description, code of conduct
- All contracting professionals sign a statement of purpose/duty of care
- All contracting professionals are CRB checked and have PI in place
- All recruitment of overseas staff is processed using HMBIA guidelines
- All Bank staff are regularly CRB checked
- Permanent posting only offered once staff successfully complete induction

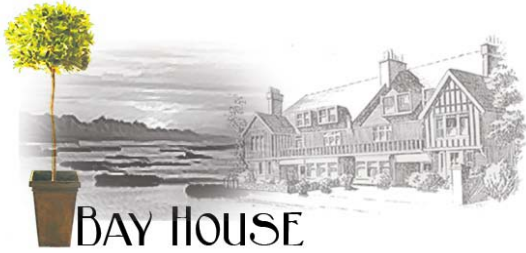
NOTES/ACTION	DEADLINE



STAFF TRAINING

- Staff Induction is carried out using S4C Common Induction Standards
- Staff are inducted with this process within 6 weeks of starting
- Staff are inducted and trained by competent Trainers
- All Induction documentation is in order and checklists signed off
- All staff have individual training files
- A maintained Training Matrix is kept
- A record of all training is kept
- Bite-size training is regularly scheduled and there is good uptake
- All staff receive mandatory training in aspects of their job role
- Further training is arranged for staff to expand their knowledge
- Staff are trained to deliver care in a person centred way
- Staff are urged to get to know SUs well
- SUs know the names of the staff
- Staff skills, knowledge and experience meet the needs of service users

NOTES/ACTION	DEADLINE



DAY TO DAY OPERATIONS

- Registered Manager is a RN and has a management qualification
- Registered Manager continues to update her knowledge
- All managers familiar of conditions/diseases associated with old age
- There are clear lines of accountability for all managers
- Managers Meetings are held regularly are documented
- Managers are developed by the Provider using Management Training Tools
- The Provider provides resources for the managers to meet NMS

NOTES/ACTION	DEADLINE

ETHOS

- The homes creates an atmosphere of openness
- The Registered Manager maintains an 'Open Door Policy'
- The Registered Manager communicates a clear sense of direction
- The Registered Manager maintains the focus on the PoC & 5 Star Values
- The Registered Manager facilitates the delivery of the service
- Staff relate and respond to the Leadership of the Registered Manager
- The management team clearly affect the way the service is delivered
- The management team encourage innovation & autonomy amongst staff
- A commitment is made to equal opportunities
- The Registered Manager follows the GSCC guidelines/codes of practice

NOTES/ACTION	DEADLINE



QUALITY ASSURANCE

- Annual Quality of Service Assessment is carried out
- Information derived from AQSA used to form Annual Development Plans
- Development Plans based on Planning, Action and Review
- All AQSA to be supported by Staff and SU feedback evaluation
- The results of these evaluations are available to existing/prospective SUs
- Commitment to lifelong learning and development for SUs demonstrated
- Bi-annual Open Forums to be held and feedback recorded and acted upon
- Satisfaction Surveys to be carried out bi-annually
- Feedback (where appropriate) is sought directly from the SUs
- SUs informed about Key Inspection Process and advised of outcomes
- Inspection Reports are available to the public
- Written Policies and Procedures are in place and reviewed regularly
- Action is progressed within timescales agreed at Key Inspections

NOTES/ACTION	DEADLINE

FINANCIAL PROCEDURES

- Full Insurance cover is in place against loss/damage
- The entire building, fittings and equipment should be covered
- Cover is in place to cover business interruption
- SUs and employees should be protected under this cover
- A minimum cover should be no less than £5m
- Record keeping is accurate and efficient
- Compliance with Tax Laws and Accounting Principles is adhered to
- All transactions are clearly recorded

NOTES/ACTION	DEADLINE



SERVICE USERS' MONEY

- All transactions are recorded
- SUs are able to manage their own money if they wish to
- SUs are assessed for having the capacity to manage their own money
- All expenses incurred by SUs are passed to the Provider
- All expenses incurred by SUs are settled by the home
- Any expenses are invoiced accordingly to SU or representative
- Secure facilities provided for the safe keeping of SU valuables/money
- A record is kept of possessions brought into the home by the SU
- A record is kept of possessions handed in for safe keeping

NOTES/ACTION

DEADLINE

STAFF SUPERVISION

- Care Staff receive formal supervision at least 6 times a year
- All other staff receive supervision on a regular basis
- Supervision is an opportunity for staff to discuss any issues they have
- Staff meetings are held regularly and feedback is sought from staff
- Staff find the supervision to be useful and helpful
- Notes are taken at each meeting/supervision sessions and kept on file

NOTES/ACTION

DEADLINE

RECORD KEEPING

- Records are kept to protect the employees and SUs
- SUs have access to their records and information held about them
- Records are kept confidential and stored in a secure area
- Records are kept and used in accordance with the Data Protection Act

NOTES/ACTION

DEADLINE



SAFE WORKING PRACTICES

- The Registered Manager aims to ensure the H&S of SUs and staff
- The home ensures the following safe working practices:

Moving & Handling

Techniques involved in moving people/objects to avoid injury

Record of any incidents

Fire Safety

Understanding and implementation of appropriate fire procedures

Record of all Fire Drills, tests and incidents

First Aid

Knowledge of how to deal with accidents and emergencies

Provision of First Aid boxes

Qualified First Aider on at all times

Records of all cases

Food Hygiene

Correct procedures for the safe handling and serving of food

Correct storage, labelling and preparation of food

Infection Control

Measures to prevent the spreading of infections and other diseases

- The Registered Manager ensures the Health and Safety of SU/staff
 - Safe storage and disposal of hazardous substances*
 - Regular servicing of boilers and central heating systems*
 - Maintenance/testing of electrical systems and electrical equipment*
 - Regular testing of water systems for temperature and infections*
 - Provision of window restrictors where appropriate and necessary*
 - Maintenance of kitchen and laundry equipment*
 - Upkeep of outdoor steps and pathways*
 - Security of premises*
- The Registered Manager ensures Risk Assessments are carried out
- All accidents/injuries are recorded and entries are kept confidential
- All staff receive regular updates/bulletins on safe working practices