

ENHANCING LIFE, EXCELLING IN CARE

Service User Guide

Updated May 2019



St Catherines Nursing Home Spring Road Letchworth Garden City Hertfordshire, SG6 3PR 01462 678888 info@saint-catherines.co.uk



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1. Introduction to the Home

St Catherines Nursing Home is a dual registered care home situated in a quiet, wooded area only minutes away from the centre of Letchworth Garden City. The home benefits from the local area's amenities including shopping centres, transport links, churches and plenty of open spaces. In addition, the home is set in its own grounds, with a lovely courtyard and lawn area for residents to relax in and enjoy. Visitors are always welcome to stay and spend time with their loved ones and there is parking provided at the front of the premises.

St. Catherines is owned by Grovewell Estates Ltd whose Director, Ramesh Dalton, is committed to ensuring that the home provides the highest standard of care whilst creating a comfortable and homely surrounding.

The home has 35 rooms to cater for varying needs, including one double room which can be used for couples or siblings. The majority of our rooms are designed for single occupancy with a few benefitting from en suite facilities. Most of the ground floor rooms have french doors leading onto one of the garden areas.

All our rooms are all fully furnished and include electric profile beds & televisions. Residents may personalise their rooms by bringing small items of furniture, for example a favourite armchair, if they wish, provided they meet fire safety specifications. A telephone can be installed in the room if required but the account will be the responsibility of the resident or their representative.

There is a large conservatory, communal lounge and dining room, all comfortably furnished and situated around the building for the easy access and enjoyment of all residents. Additional bathrooms and shower wet rooms equipped with a variety of bathing apparatus to suit our residents' needs are also located throughout.

Fresh and nutritrious meals are prepared daily using the finest quality ingredients and any residents with special dietary requirements are equally catered for, after prior consultation with the team. Throughout the year we organise parties and social events for our residents including a Fireworks Night, Christmas party and Summer BBQ's. Daily activities are provided for those residents who wish to get involved such as quizzes, music, arts and crafts, therapies, flower arranging, board games and outside entertainers etc.

At all times we endeavour to give our clients their own choice, independence, privacy and dignity. Our team of experienced and qualified staff are on duty 24 hours a day to meet all the needs of our residents.

2. Statement of Purpose

2.1 Aims & Objectives

Our Aim is:

- To provide all residents with as normal a life as is possible, given their individual health, in homely surroundings.
- To provide residents with a quality of care that will enable them to live as independently as is possible with dignity, privacy and the opportunity to make their own choices.

Our Objective is:

- To carry out assessments of need and risk that will be used to develop individual care plans with the objective of meeting the aims of the Home for each resident.
- To provide a Home, equipment and competent staff to enable the aims and objectives to become a reality for each resident.

2.2 Philosophy of Care

A statement of the philosophy of the Home

The Company's philosophy is based upon a belief that all residents are entitled to be treated as individuals.

Whilst it requires the staff of the Home to operate according to the procedures, laid out in the Home's policies, for the safe delivery of our service, this should not institutionalize care. This will be achieved by the needs of all residents being assessed individually, and from this information developing personalized and individually tailored plans. In order to achieve the Aims and Objectives, the Company is committed to the ongoing development of the best practices in clinical and social care.

PHILOSOPHY OF CARE

At St. Catherines we are constantly working towards improving our residents' care by applying our philosophy to every aspect of our work.

We aim to:

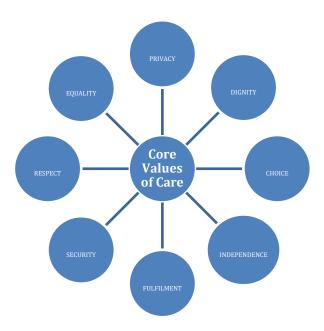
- provide total care to each resident.
- take a sympathetic approach towards each resident from the beginning, even prior to admission.
- provide support and reassurance to relatives.
- encourage residents to bring in personal possessions, to ease their transition into a new environment.
- retain an individual's dignity at all times and to prolong independence.
- maintain an individual's choice as much as is possible in the setting.
- improve morale by encouragement and providing such facilities that will lead to this.
- provide choices and a willingness to proceed at the individual's pace.
- ❖ When required, total nursing care, achieved by working as a team.
- provide person centred care for each individual.
- contribute towards the care and treatment we would wish to receive ourselves.
- encourage relatives to participate in any way they can.
- ensure our care never falls short of the ideals we feel are important by assessing and reevaluating our performance.
- provide for the spiritual, physical and mental well-being of each resident.
- ensure we give all the necessary comfort and support at the time of bereavement.

St Catherines Nursing Home aims to provide its service users with a secure, relaxed, and homely environment in which their care, well-being and comfort is of prime importance. We aim to provide the highest quality of holistic care within a homely and family-structured environment.

Carers will strive to preserve and maintain the dignity, individuality and privacy of all our residents within a warm and caring atmosphere, and in so doing, will be sensitive to each individuals ever-changing needs. Such needs may be medical and/or therapeutic (for physical and mental welfare), cultural, psychological, spiritual, emotional and social.

Residents are encouraged to participate in the development of their individualised "Plan of Care" in which the involvement of family and friends may be appropriate and is greatly valued. Invitations are sent regularily to attend care review meetings.

This will be achieved through programmes of activities designed to encourage mental alertness, self-esteem, social interaction with other service users and with recognition of the following core values of care which are fundamental to the Philosophy of our Home:



All care staff within the home will be appropriately qualified to deliver the highest standards of care. A continuous staff training programme is implemented to ensure that these high standards are maintained in line with the latest initiatives and developments in care practices as may be laid down in appropriate legislation, regulations and the Quality Care Commmissionn guidelines.

We are a Complex Care Premium Home. Several of our staff members have completed Champion Pathways and Continous Professional Development in their specialist areas. They meet regularly to look at ways that the lives and care of residents with complex care needs can be improved. The areas of specialism are: Wounds, Complex Health, Falls & Frailty, Nutrition, Dementia and Engagement. The Champions advise of changes to ensure the Home is kept updated in their field. They teach staff and lead good practice.

Each resident has a keyworker who is the first point of contact for the resident and their family and who will spend time getting to know them. The keyworker will help the resident with any day to day tasks such as shopping and writing cards and letters.

2.3 Facilities & Services

The following services are offered to our residents as part of our programme of care:

- Manager in attendance 40 hours plus per week
- Qualified Nurses and trained carers in 24 hour attendance
- Excellent liaison & multi-disciplinary relations
- Monthly evaluation of all care aspects
- Good home cooking with choice of menu including provision for special diets
- Laundry Service
- GP Visits

- Daily Activity Programme
- Fund Raising Activities
- Entertainment and Outings*
- Communion
- Church Visits
- Residents' Meetings
- Private telephone installation and calls*
- Dentist*
- Optician*
- Physiotherapist*
- Chiropodist*
- Weekly Hairdressing Visit*
- Daily Newspaper*

If you require any of the above services and would like us to arrange it please inform a member of staff who will make the arrangements.

GP's from Sollershott Surgery visit the Home routinely and also on request. Should you require a visit please discuss with the nurse who will make the arrangements with your GP.

2.4 About the Registered Provider

Ramesh Dalton

Ramesh Dalton is a director of Grovewell Estates Ltd who has been in the care industry for the last 16 years. He currently owns 5 other care homes and is committed to provide an excellent delivery of quality care and service, within a homely environment that surpass expectations and motivates our well qualified and experienced staff to maintain a high sense of well-being and quality lifestyle for our residents.

2.5 About the Manager

Claire Greener

Claire is a Level 1 Registered Nurse with over 34 years experience, 30 of these have been in the elderly and palliative care field. She is a QCF instructor and assessor and has been involved in training Health & Social Care and First Aid for the past four years. She believes every person has the right to the highest standards of care and is committed to providing these in a holistic, open, homely envoirnment.

2.6 About the Clinical Lead

Nineveh Toles

Nineveh qualified as a Level 1 Registered General Nurse over 20 years ago and has 15 years experience in elderly care. She has also worked as an online tutor for the Skills Network UK. She has also completed the pathways for Dementia Care, End of Life Care and Advanced Wound Management.

^{*}Please note an additional charge will be incurred for these services. For more details please ask a member of staff, who will be happy to assist you.

2.7 Champions

Our Champions receive in depth training in their area of expertise and keep up to date with new innovations and changing practices. They cascade their knowledge to the staff team and provide a source of support and information for residents and visitors. Currently our Champions and their roles are:

Safeguarding Champion

Tresha Gordon

- Promoting a culture of safety abuse for residents with the Home.
- Promoting person centred approaches in care and ensuring the requirements of the Mental Capacity Act is followed in the Home.
- Acting as a point of contact for safeguarding information and concerns.

Diabetes Champion

Naila Tariq

- Overseeing the care of those residents with diabetes.
- Ensure the nutritional needs of residents with diabetes are met.
- Act as a source of information for residents, relatives and staff.

Engagement Champion

Kemi Ajibawo

- Leading engagement and making sure meaningful activities have been created and are delivered on a regular basis.
- Encouraging individuals to engage to their best ability by promoting person centred practice.
- Ensuring engagement and activities are appropriate for each individual.

Nutrition Champion

Angela Dockerill

- Promoting expert nutritional awareness and provision of healthy diets.
- Identifying and providing support and solutions for residents with eating and drinking difficulties.
- Promoting person centred approaches in the provision of nutritional awareness and care.

Falls Champion

Vida Ocran

- Promoting good practice around falls and fragility
- Improving early falls intervention to maintain or restore independence.
- Working in partnership to prevent frailty, preserve bone health and prevent falls related injuries.

Wound Champion

Ninay Toles

- Promoting expert wound care management.
- Implementing care interventions and monitoring the risks when changes are identified around wound care management.
- Maintaining expert practice around skin integrity.
- •

Dementia Champions

Gemma Windsor and Zeeta Corne

- Promoting good practice in dementia care through person centred planning and developing a pro active team approach.
- Making sure the service has a dementia friendly environment.
- Providing positive behaviour support and tailored interventions around individuals.

Infection Control Champions

Cecilia Brobbey and Lisa Page

- Monitoring and implementing infection control procedures
- Promoting good practice and supporting and educating staff with the latest information
- Promoting preventative practices

End of Life Care Champion

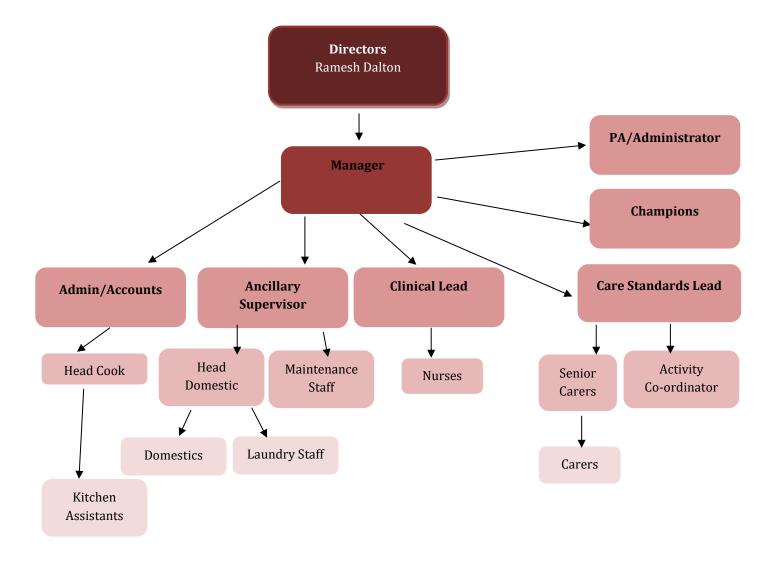
Alison Chamberlain

- Supporting residents and families at end of life
- Supporting and training staff to provide high standards of care
- Monitoring practice and ensuring the home stay up to date with latest information.

2.8 Staff Training

- All staff undergo mandatory training at the start of their employment within the home
- All staff undergo annual mandatory training and refreshers.
- ❖ All staff are competent to nurse the individual client condition.
- All staff receives regular in-house training covering a wide range of nursing issues.
- External training companies provide a variety of subjects throughout the year
- All staff receive ongoing supervision and training needs analysis
- Ad hoc training is provided by Senior staff to junior staff as issues arrive
- Regular study days are taken to keep the staff updated with new procedures and legislation.
- All problems/complaints are seen as a positive event with learning taken from the experience and training provided

2.9 Organisational Structure



2.10 Your Needs

2.10.1 - Typical Demographic of Residents

St Catherines Nursing Home provides accommodation suited to an age group of over 55 years but we are able to cater for the needs of residents out of this age range. Male and female residents are catered for at St Catherines with any special requirements being identified during the assessment.

2.10.2 - The Range of Needs we Meet

We are able to take residents suffering from a wide variety of conditions and needs such as:

- Cardiac problems
- Cerebral Vascular Accident
- Respiratory Problems
- Parkinsons Disease
- Diabetes
- Terminal Care
- Catheterisation
- Respite Care

- Intermediate care
- PEG feeds
- Dementia

This list is not exclusive and all potential residents will undergo a pre-admission assessment prior to moving to the home. Where needs cannot be met, the client, relative or care manager will be informed immediately to enable alternatives to be sought. We like to recommend that service users visit the home and question the staff as to how their individual needs can be met. This is not always possible however and trial periods of stay can be arranged which are highly successful and invariable become a "settling in period".

2.10.3. Nursing Care

The Home is registered to care for residents over 55 years old with nursing and residential needs.

2.10.4 - Nutrition

We provide a wholesome, nutritious, varied and appetising menu designed to fulfil the dietary requirements of the residents. Specialist diets can also be catered for and when required, referals and advice are sought from the Speech and Language Therapist and Dietician teams at the local hospital.

- Breakfast is served from 8.30am. Our carers will discuss the service users' requirements on admission and the chef will be instructed accordingly.
- ❖ Mid morning coffee/tea is served with a choice of biscuits and fruit
- Lunch is the main meal of the day and is served in the dining room, or in the resident's own room (whichever option is preferred), at 12.30pm.
- Afternoon tea, fresh juice or smoothies are served with homemade cakes and biscuits.
- ❖ Supper is served at 5.00pm and there is a choice of both hot and cold meals.
- ❖ A <u>Late supper</u> for those who wish is served with a choice of tea, coffee and night time drinks, at a time of their choosing.
- ❖ A carafe of water or variety of juices will be available in rooms at all times.
- Snacks and light meals are available on request throughout the day.
- For residents with special requirements meals can be provided containing soft food, pureed or liquified as advised by the Speech & language Therapist, well as variety of other choices to suit everyone's needs.

2.10.5 - Pets

Certain domestic pets can be accommodated by prior agreement with the Manager. Please see the home's policy on visiting pets if your visitors plan to bring animals in to visit.

2.11 Our Policies & Procedures

Our policies are available to view on request. Please ask a member of staff who will be able to assist.

2.11.1 - Criteria for Admission

Prior to admission, potential residents will be comprehensively assessed to establish whether the home is able to meet their identified range of needs. All residents will be admitted to the home on a one month trial basis equally residents may choose to be admitted for a trial period.

Our staff will consider factors such as:

- Whether prospective new residents would be compatible with those already living in the home.
- If there will be a suitable room available for occupation.

2.11.2 - Emergency Admissions

Emergency admissions will be accepted on an initial short-term basis to allow a full assessment to be undertaken, provided there is a suitable bed available. Staff in the Home will undertake an in-house assessment within 48 hours of admission, following which a decision will be made as to whether or not the placement is appropriate.

2.12 Resident & Relatives Meetings

The Home periodically holds meetings with the residents and their relatives and/or friends to which all are invited. Details of scheduled meetings will be displayed on the Residents noticeboard and in the bi-monthly news letter. The Directors, Manager and management team value our residents' opinions and welcome any suggestions or feedback they wish to provide. The Manager operates an 'open door' policy to discuss any issues, alternatively appointments may be booked via the administrator.

2.12 Maintaining Contact with Family & Friends

The Home operates an 'open visiting policy'. This means that visiting is permitted throughout the day or night with the exception of the 'Protected Lunchtime' period $12.30 \, \text{pm} - 1.30 \, \text{pm}$. Visitors are welcome to visit during this period if they are sharing a meal with thir family member. It is advisable to check with the person in charge, prior to arranging an out-of-hours visit, that the resident is awake and prepared to receive visitors. Below is a summary of the services we offer or facilitate for communicating with friends and loved ones:

- Facilities are available for residents to meet with visitors in private.
- Residents who wish to make or receive telephone calls may have access to the cordless handset which can be taken to their bedside.
- Residents who are able to choose, are free to have a private telephone line installed in their own room (the cost of which will be the responsibility of the resident)
- ❖ A Fax machine is available for residents to send and receive documents.
- The staff will provide assistance, if required, with letter writing, sending emails, Skype video chats or any similar method of communication.
- All personal mail will be delivered to residents unopened and on the day it is received where possible or otherwise, as soon as is reasonably practicable after delivery to the Home.
- Relatives brining in food items for residents should inform the nurse. Items will be stored in line with our food safety policy. Items requiring refrigeration will be named and dated and stored in a fridge in the kitchen These will be available for the resident at any time at their request.

2.14 Social Activities, Hobbies & Interests

Residents are encouraged to pursue their interests within the Home. Our activity co-ordinator visits every resident regularily and develops a programme of activities suited to that individual. An activities programme is displayed on the residents noticeboards on each floor. Activities include:

- Reminiscence Sessions
- 'News & Views'
- Poetry
- 'Knit & Natter'
- Quizzes
- Gardening
- Board Games
- Floor Games
- Flower arranging
- Entertainers
- Exercise Sessions
- Sensory sessions
- Music appreciation

- Entertainers
- Church services
- Parties /BBQ / celebrations etc

We also organise day trips to the seaside, local attractions, wildlife parks, local garden centres and the local theatre. There are regular visits from the Hairdresser, Chiropodist and Library. New ideas for activites and places to visit are always welcomed.

2.15 Emergency Procedures & Fire Precautions

The home has a fire detection and alarm system installed that includes automatic smoke detectors, emergency lighting, alarm bells and fire call points. All parts of the fire detection and alarm system are routinely serviced and tested by external contractors assisted by our in-house maintenance staff. The alarms and fire doors are routinely tested **every Friday at 11am**, this is not a fire drill. When a fire drill takes place, staff will inform visitors who will be expected to evacuate the home and assemble at the designated assembly point. The home is equipped with fire fighting equipment, which includes a variety of extinguishers, which staff are trained to use. The home is divided into zones to facilitate and easy evacuation procedures. All staff receives initial fire training as part of their induction to the home and thereafter attend annual refresher training on the correct action to be taken in the event of fire. This includes at least one fire drill in which evacuation techniques are practiced.

On admission to the home all residents have a fire evacuation care plan produced – identifying how they would be evacuated in the event of a fire

Written procedures are prominently displayed around the home describing action to be taken in the event of fire.

2.16 Infection Control

We take the prevention and control of infection very seriously at St Catherines. All staff receive training on induction and are required to update their training annually. Additionally we have an Infection Control Champion to oversee the programme and ensure policies and procedures are updated and adhered to. There may be times when a resident who has an infection may be requested to stay in their own room to prevent it spreading to others. This will be discussed with the resident and family member at the time.

Your visitors are asked to assist us in controlling the spread of infections around the Home by phoning and speaking to the Nurse before visiting if they have any of the following:

- Coughs & Colds
- Sickness or Diarrhoea within the last 48 hours
- Skin or eye infections

It may be that their visit may need to be postponed to a later date.

There are also wall mounted automatic dispensers at locations around the Home containing hand gel. We ask that your visitors use these before, during and after visits.

Your co-operation in helping us is much appreciated.

2.17 Religious Services

The management of the home recognises the right of the individual resident to live the lifestyle of his/her choosing, subject to an appropriate Health & Safety Risk Assessment of the individual. The Home has a comprehensive policy that summarises the arrangements in place to enable service users to attend their chosen places of worship and / or receive visits from their appropriate Ministers of Religion.

Father Paul from St Michaels Church visits weekly and brings communion for those who wish to receive it.

2.18 Complaints Procedure

Please find a full copy of the complaints procedure in Section 3. Signs on how to make complaints are also on display throughout the home.

2.19 Care Plan Reviews

Care plans will be discussed with the resident and their relative or advocate on admission and this will be a record of their assessment needs to make their stay at St Catherines Nursing Home as comfortable as possible.

Arrangements will be made for regular reviews of the care plan which will involve the resident and their choice of relative/friend or other. Should you wish any changes to be implemented prior to a review this can be arranged.

2.20 Accomodation

Accommodation is provided over two floors which and is accessible by a lift. There are a total of 36 rooms, of these 35 are single occupancy rooms, 2 rooms have en-suite facilities.

There are plenty of toilets and bathrooms throughout the home, which also have assisted facilities and separate accessible shower rooms.

There are two large lounge areas for the residents to relax in, one with a dining area. There is also a separate dining room and small library. Meals can be taken in the residents' own rooms if preferred.

2.21 Price Guide

Self Funding Residents our rooms are charged from £850 - £1050 per week (excluding funded nursing care). This depends on the needs of our resident which is based on the assessment done by our home.

These prices do not include the following:

- Funded Nursing Care
- Newspapers & magazines
- Hairdressing
- Chiropody
- Telephone
- Luxury items
- Clothing
- Carer escorts to external appointments and transport
- Trips, days out and personal hobbies

Our administrators are able to give information on funding options and help with forms and applications.

2.22 Privacy & Dignity

The staff at the home will at all times respect the right to individual privacy. All staff are trained in the principles of maintaining privacy and dignity as laid down in our aims and objectives.

2.23 Safeguarding

Adult safeguarding is the term used for protecting adults from abuse or neglect.

Safeguarding relates to the need to protect people over the age of eighteen who may be in vulnerable circumstances. There are many different types of abuse. If you are experiencing treatment from a staff member, visitor or other health professional that you are not happy with or that makes you feel worried or unhappy you should report it as soon as possible.

If you or someone you know is being abused or neglected:

Report immediately to the Nurse in Charge/Manager

Alternatively:

- Call Herts County Council Adult Safeguarding Team on 0300 123 4042 (24 hours a day).
- If there is a danger to life, a risk of injury or a crime is taking place, call the police by dialing 999.

2.24 Confidentiality

We have a duty to:

- Maintain full and accurate records of the care we provide;
- Keep records about you confidential, secure and accurate;
- Provide information in a format that is accessible to you (i.e., in large type if you are partially sighted).

We will not share information that identifies you for any reason, unless:

- you ask us to do so;
- we ask and you give us specific permission;
- we have to do this by law;
- we have special permission for health or research purposes

We may share your information, with your consent and always in line with our information sharing procedures, with:

- Social Services
- 2. Hospital Services
- 3. Local Authorities
- 4. Your GP
- 5. Your family or representative

Anyone who receives information from us also has a legal duty to keep it confidential.

You have the right to confidentiality under the Data Protection Act 1998 (DPA), the Human Rights Act 1998 and the common-law duty of confidentiality (the Disability Discrimination and the Race Relations Acts may also apply).

You have the right to ask for a copy of all records about you. Please speak to a member of staff to see your records. If you think anything is inaccurate or incorrect, please let us know.

Our full privacy notice is available to read on our website <u>www.Stcatherineslgc.co.uk</u> and a hard copy is available at the reception desk in the Home.

Notification:

Social Care information sharing is subject to the principles which have been set out by the National Data guardian in the Caldicott Reports of 2013 and 2016.

The Data Protection Act 1998 requires organisations to notify the Information Commissioner's Office (ICO) of the purposes for which they process personal information: www.ico.org.uk

If you have any concerns or questions about the use of your personal information please let us know.

3. Complaints Procedure

Are you unhappy about the care your relative or friend is receiving?

At St Catherines Nursing Home we all try very hard to ensure that we deliver only the very best care, service and attention to our clients and their families. We believe that relatives deserve to be treated with the utmost respect and should be given every assistance by our staff to cope with any difficulties that might arise from their relatives' stay in our home.

We sincerely hope that any complaints will be of a nature that can be dealt with quickly and courteously at the time any particular incident occurs, however, we will respond to any complaint immediately, and advise in writing the result of our investigation of the complaint within 28 days.

Our policy is to encourage residents, relatives, friends and representatives of residents to feel free to express their opinion on any aspect of the running of the home. In this way wishes of all parties can be taken into consideration and ongoing improvements can be made.

If possible the problem should be discussed with the resident's Keyworker or the Nurse in Charge, who will do their best to resolve the problem quickly and satisfactorily. Should it not be possible to resolve the matter informally then residents or their representatives have the right to see the Manager, privately. If at this stage the issue can still not be resolved, the complaint should be sent in writing to:

Ramesh Dalton
St Catherines Nursing Home
Grovewell Estates
Spring Road,
Letchworth,
SG6 3PR
077 8624 7980

Your complaint may also be made directly to the CQC or the Local Authority. The Home is registered with CQC under the provisions of the Care Standards Act 2000 and the Care Home Regulations 2001 through their Registration and Inspection Unit, and encourages residents, relatives or their representatives to contact them about any issues at any time.

The contact details for the CQC are as follows:



Care Quality Commission

Citygate
Gallowgate
Newcastle
NE1 4PA
Tel 03000 616161

The Contact details for the Local Authority are:

Adult Care Services

County Hall

Pegs Lane

Hertford

Hertfordshire

SG13 8DQ

Tel: 0300 123 4042

3.1 Patient Advocacy

If you have any concerns about your welfare whilst at the St Catherines Nursing Home or if you have the need to discuss any matters relating to finance or the law, the following organisations will be able to offer you help and advice:



Citizens Advice

Tel: 01202 537058



Age UK

Tel: 0800 1696565

An audio version of our service user guide is available on request

4. Terms & Conditions

The acceptance of a person to stay in a rest home involves a special relationship of intimate care. You are assured that we do our utmost to care for our clients in all circumstances. However, to do so we have to maintain an extensive establishment at a substantial financial cost and therefore we have to define the relationship in business terms.

Listed below are our basic conditions of admission for our mutual benefit:

- ❖ A letter from a General Practitioner or Hospital Consultant may be required on admission.
- All drugs, medications and treatment creams must be handed in on admission. N.B. Relatives and visitors are asked not to bring in medications or foods without consulting the Manager or Registered Nurse in Charge.
- Clients are asked to discuss smoking arrangements on admission. Smoking is restricted to a signed, designated area outside of the home as the home operates a no smoking policy. Guests and visitors are also asked to comply with this policy.
- At the date of pre assessment the fees are agreed: All fees are payable 4 weeks in advance on the first day of each invoicing period. We recommend these should be remitted by standing order.
- The fees are subject to review in April of each year and, at such other times as the Management may, in its discretion, consider necessary. Please note: If the fees are to be increased, the client will be given notice of such an increase and the increase will not take effect until one month from the date of the receipt of the notice by the client.
- Fees include accommodation, full board, laundering of personal items and care as agreed.
- Registration with Doctors can be NHS or private. Clients treated under NHS will receive medical attention, drugs and medications available under the NHS. Other services can be arranged on request and will be charged as extras on the

account.

- Following pre assessment the home will provide a letter of confirmation that they are able to meet the needs of the residents.
- On admission in to the home the resident / NOK / POA will be given 2 copies of the home contract which is a legally binding contract. We request that this document is signed & dated immediately, with the resident / POA / NOK retaining one copy and returning the other to the home manager.
- ❖ Failure to sign the contract after the trial 4 week period is recognised as agreement to the terms and conditions of the home and remains legally binding.
- No gratuities shall be paid or gifts made to individual members of staff without the written consent of the management.
- ❖ Visitors are welcome at all reasonable times, but in the case of seriously or terminally ill residents we are happy to receive visitors at any time of day or night. We have a protected mealtime between 12.30pm − 1.30pm when visiting is not permitted.
- Residents are not permitted to have credit cards or cash on the premises for insurance purposes. A small amount of money may be retained in the home safe which can be withdrawn as and when by the resident.
- ❖ Accurate records will be maintained of all credit & debits.
- Our existing insurance policies cover personal effects to the total value of £500.00 per client. If property of greater value is retained these must be covered by clients own insurance.
- Every care is taken to safe guard residents belongings. We request that all valuables are taken home by family members or handed in and recorded, and kept in the home safe. A detailed list of such items must be handed in on admission and updated as appropriate thereafter. Valuables can be locked away for safe keeping when not in use, upon request to the Manager or Registered Nurse in Charge.
- No responsibility can be taken for personal possessions not clearly or permanently named, spectacles should be etch named, for clothing items, woven name tapes stitched on or indelible laundry marked.
- Clients are encouraged to bring in personal items such as pictures, books, ornaments etc where practical at the discretion of the Management. If an item is defective or dangerous the management may require it to be removed. The home will require, for it's records, a PAT testing certificate issued within the last 12 months for electrical items over 12 months old, or without a till receipt showing the date of purchase. If an electrical item is less than 12 months old, the home will require a copy of the till receipt and the item will be PAT tested as part of the home's routine annual safety programme.
- Transportation and Insurance must be the responsibility of the client.

4.1 Conditions for Immediate Termination of Residency

- Disturbing behaviour, manifested by the resident, resulting in disruption or possible danger to the staff and other residents.
- Breakdown in relationship between the home and the resident and/ or the family
- Non payment of fees following written requests.
- ❖ A change in mental or physical health, which may require more specialised facilities.
- Following the advice of a general practitioner

4.2 Sample Contract

ST CATHERINES NURSING HOME

SPRING ROAD, LETCHWORTH GARDEN CITY, HERTFORDSHIRE SG6 3PR TEL: 01462 678888 TEL/FAX: 01462 683289

CONDITIONS OF ADMISSION TO: GROVEWELL ESTATES LTD T/A ST.CATHERINES NURSING HOME

The acceptance of a person to stay in a Nursing Home involves a special relationship of intimate care. You are assured that we do our utmost to nurse and care for our residents in all circumstances. However, to do so we have to maintain an extensive establishment at a substantial financial cost and, therefore, we have to define the relationship, in business terms.

CONDITIONS AND TERMS

Below are listed our basic "Conditions of Admission", both for the benefit of the resident and the Nursing Home:

- 1. If the resident is in possession of a letter from a G.P. or Hospital Consultant, the letter should be handed to the Sister in charge on arrival.
- 2. Any drugs, medications, treatment, creams or other substances brought into the Home are to be handed to the Nurse in Charge. Relatives and visitors are asked not to bring substances or food into the Nursing Home without first consulting staff.
- 3. Residents are asked to discuss smoking arrangements and are advised that we are a non-smoking environment. Special arrangements could be considered and discussed if necessary. The consumption of alcohol is acceptable on a social basis. However, if consumption were to rise to excessive amounts this might lead to a review of the Home's ability to care for the resident.

The fees at the date of admission will be as advised by the Manager. Subsequently, fees are reviewed annually and the revised fee is introduced on 1st April each year. The following services and facilities are included within the fee:

- Full Nursing Care
- Accommodation
- Full Board
- Laundering of Personal Items
- Outings as arranged and hobby therapy

The Hairdressers visit twice weekly, whilst the Chiropodist visits every eight weeks. Newspapers and magazines are available if required. Invoices for these items are processed (along with any other extras) monthly.

Arrangements for the payment of fees will be as follows:

4. Private Residents

- a. The initial payment to cover the current month is to be paid on the day of admission. Thereafter, accounts are payable monthly in advance.
- b. Under existing regulations, the Company may agree to retain a private patient as a Government funded patient, if the patient's financial situation deteriorates to the extent that he/she becomes eligible for Government funding. A 'top up' will be required this will be discussed and agreed if the situation occurs.

5. Funded Residents

- a. Under existing regulations, for those patients eligible for full funding, Grovewell Estates is prepared to accept the agreed Government allowance as payment in full. If there is a separate agreement to pay any extra towards this fee by the resident or their relative, it will be invoiced for as a "top up" fee on the invoice.
- b. The responsibility for making a claim for support rests with the person responsible for the resident's finances. If the resident is able to manage his/her own financial affairs, the resident will complete the appropriate claim forms. Otherwise, a near relative will be required to provide the necessary financial information to complete a Financial Support Claim Form.
- c. The administrative procedures for handling payments are as follows:
 - i. If the resident is unable to manage his/her own financial affairs an Appointee will be necessary (preferably a relative). Grovewell Estates is prepared to be the Appointee if necessary and handle their personal allowance on behalf of the patient. It will be necessary for the relative to inform Social Services in writing that the relative wishes Grovewell Estates to be the Appointee if the relative is unable to do so.

- ii. If the relative wishes to be the Appointee and does not wish to follow the above procedure, this is acceptable. However, Grovewell Estates will require the Appointee to follow the same procedure as other residents, that is, to pay the appropriate fees monthly in advance.
- iii. If a resident's affairs are dealt with by a court of protection, the Nursing Home is prepared to wait for finance whilst necessary procedures are put into place, provided a guarantee in writing is given by a solicitor stating that there are sufficient funds available to pay the required fees. However, interest will be charged from the day of admission at the rate of 2% above the prevailing National Westminster Bank Plc basic rate.

All residents

- 6. Residents may retain the services of their current Doctor (if they agree). Alternatively, if moving into this 'area' from outside, arrangements will be made with the F.H.S.A. to allocate a local Doctor. Patients treated under the NHS will receive drugs, medications and paramedical services as provided under the NHS. If the patient decides to register with a Doctor as a private patient, the supply of drugs and medications will also be private and the appropriate charges will be made.
- 7. Visiting times are kept as flexible as possible there are no restrictions on visiting. The most convenient times are between 10am and 8pm daily, but visitors are welcome at other times. If visitors wish to talk privately to Matron or Sister in charge, appropriate arrangements will be made. In the event of a fire, it is essential that the senior member of staff on duty knows how many persons are in the building. All visitors are therefore respectfully requested to sign in and out of the visitor's book when they visit.
- 8. Grovewell Estates' existing insurance policies cover personal effects up to a maximum of £500 per resident. If property of greater value is retained, i.e. furs, jewelry, etc. these must be covered by the resident's own insurance. Residents are asked not to keep more than £5 in cash or valuable items in their rooms. Upon request to Matron or Sister, valuables can be locked away for safe keeping when not in use. No responsibility can be taken for items not handed in for safe keeping. Items of clothing and personal possessions must be clearly and permanently marked. The Home will do all possible to look after patient's personal clothing but, since the introduction by relatives of new items and removal of old items is out of the Home's control, Grovewell Estates cannot take responsibility for any items of personal clothing which are damaged or mislaid.
- 9. Residence in the Nursing Home does not constitute a tenancy within the meaning of the Rent Acts. Grovewell Estates therefore reserve the right to terminate the license to occupy a bed or room in the Nursing Home, on formal written notice of four weeks. On the patient's side, termination of occupation must be given by the same length of notice in writing, unless the patient's stay is for a predetermined period. Payment of fees may be made in lieu of notice. If a patient were to pass away, Grovewell Estates Ltd operate a one week (i.e.7 day) retention period, e.g. we retain one week's fees to enable us to clear the unoccupied room in readiness for another resident to occupy. The resident will be deemed to have ceased occupation when his/her possessions have been removed from the Nursing Home. So, if the resident's possessions remain in his/her room after the cease of occupation, the one week retention period will be extended for as long as the room is not empty. Fees paid in advance for any period after expiration of the notice will be refunded. Rooms may be reserved by special arrangement. Should a patient leave the Nursing Home for any reason (for example; hospitalization, holiday, etc.) the patient's room will be charged for at the full rate in his/her absence.
- 10. Every effort is made not to change resident's rooms once they are established. However, for nursing or other practical reasons it may, from time to time, be necessary to move residents to another room. If ever necessary, this will be done sympathetically and by prior consultation, if practicable.
- 11. If there should be any concern over the resident's condition or care, it should be brought to the attention of the Nurse in charge in the first instance. If there is no satisfactory resolution, the matter can be taken to the Manager, in accordance with Grovewell Estates Complaints Procedure.
- 12. Any administrative, financial or legal problems arising during the patient's occupancy may be discussed with the Nursing Home Administrator. Information regarding financial assistance with fees is also available if required.

St Catherines Nursing Home Spring Road Letchworth Garden City Hertfordshire SG6 3PR

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