

STATEMENT OF PURPOSE

THE OLD VICARAGE RESIDENTIAL HOME



***FORD STREET, WIGMORE
Herefordshire Hr6 9uw***

***Telephone Number: 01568 770564
Fax Number: 01568 770564***

Statement of Purpose

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This document has been written in accordance with the Care Standard Health and Social 2008. The document will be reviewed annually unless circumstances dictate that it should be reviewed earlier.

1.0 Aims and Objectives

MISSION STATEMENT: To provide and sustain high quality care services through the skills and dedication of the staff enhanced by training and relevant experience.

With over 10 years experience, the management of The Old Vicarage Residential Care Home pride ourselves on offering a highly professional care service for the elderly aged 65 years and over , suffering from dementia/mental infirmity, with a personal touch.

We believe that our Service Users deserve the best possible care. They need a home whose individuality is emphasised, with staff that have time to give attention to small detail, and whose they have the choice of enjoying the company of fellow Service Users:

PRIVACY: The right of a Service User to be left alone and undisturbed whenever they wish.

DIGNITY: The understanding of a Service Users needs and treating them with respect.

INDEPENDENCE: Allowing a Service User to take calculated risks, to make their own decisions and think and act for themselves.

CHOICE: Giving a Service User the opportunity to select for themselves from a range of alternative options.

RIGHTS: Keeping all basic human rights available to the Service Users and allowing them to exercise those rights, either themselves or through their advocates.

FULFILMENT: Enabling the Service User to realise their own aims and helping them to achieve these goals in all aspects of daily living.

SPIRITUAL: Allowing Service User the opportunity to continue to fulfil their religious needs.

2.0 Philosophy of Care

The Old Vicarage Residential Care Home aims to provide its Service Users with a secure, relaxed, and homely environment in which their care, well being and comfort are of prime importance.

Carers will strive to preserve and maintain the dignity; individuality and privacy of all Service Users within a warm and caring atmosphere, and in so doing will be sensitive to the Service Users ever changing needs. Such needs may be medical (for physical and mental welfare), cultural, psychological, spiritual, emotional and social, and Service Users are encouraged to participate in the development of their individualised Care Plans in which the involvement of family and friends may be appropriate and is greatly valued.

A homely, therapeutic environment has been established by the encouragement and implementation of several aspects of individualisation regarding personal possessions i.e. clothing chosen by the resident where possible, toiletries and handbags. Relatives and care staff participate in an on-going programme of reality orientation by the use of personal effects i.e. photographs associated with the residents' life in the community, with their families and by the use of reality orientation aids in the home. Residents will be escorted to visit shops to choose their own clothing and other personal requirements where possible. If this is not appropriate care staff anticipates individual needs with the help of relative's advice and from the carers' observations of the residents preferences. Small items of personal furniture are welcome.

This will be achieved through programmes of activities designed to encourage mental alertness, self-esteem, and 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:

CORE VALUES OF CARE		
PRIVACY	DIGNITY	RIGHTS
INDEPENDENCE	CHOICE	FULFILMENT
	SPIRITUAL	

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 developments in Care Practices as may be laid down in appropriate Legislation, Regulations and the National Care Standards Commission.

3.0 Home Owner/Manager

Names:

Aileen Ubhee (Home Owner/ Proprietor)
Bissessur Ubhee (Home Owner)

Joy Guanzon (Home Manager)
Romani Guanzon (Home Owner)

Experience:

Aileen Ubhee
25 years experience in
care work with the mentally ill.

Experience:

Joy Guanzon
22 years experience working in
healthcare setting.

Both Mrs Ubhee and Mrs Guanzon spent most of their working years in care work with elderly mentally ill/ learning disability.

Qualifications:

Registered Nurse -Mental Health
NVQ Level 4 Registered Manager's Award
NVQ Assessor

Qualifications:

First Level - Learning Disabilities
NVQ Level 5, Diploma Manager's award
NVQ Assessor, palliative care (level 5) EOL

Address of Home Owners and Manager

The Old Vicarage Residential Home
Ford Street, Wigmore
Herefordshire, HR6 9UW

Telephone: 01568 770564

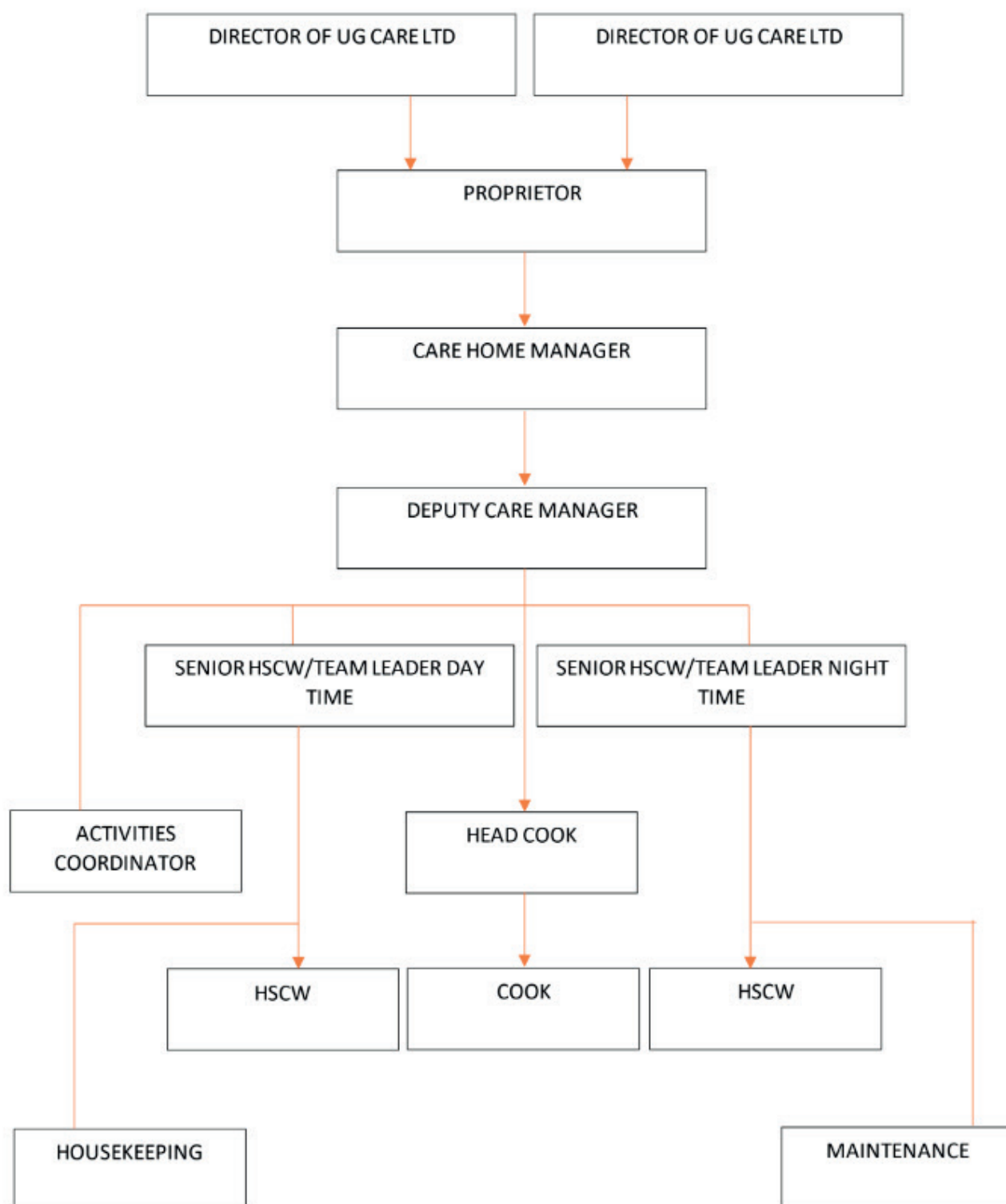
Fax: 01568 770564

Care Speciality of the Home:

The Old Vicarage Residential Care Home offers long stay care to older persons aged from 50 years to over 65 years suffering from dementia/mental infirmity and presenting some physical illnesses and disabilities associated with old age.

Home Organisational Structure

ORGANISATIONAL CHART THE OLD VICARAGE RESIDENTIAL HOME



4.0 Details of Staff Numbers and Staff Training

The home employs:

- 1 Manager (First Level Nurse - Learning Disabilities, Assessor, NVQ5 Diploma)
- 1 Deputy Manager (NVQ3 and NVQ5 Leadership Award)
- 1 Team Leaders at present (NVQ4 - Health and Social Care Award)
- 2 Senior Support Workers
- 2 Cook (Food Hygiene - Level 3) (Manager -Level 3)
- 1 working towards NVQ Level 3
- 1 working towards NVQ Level 2
- 1 Maintenance/Gardener
- 2 Domestics

Staffs are selected for their reliability, integrity, skill, friendliness and professionalism. They are carefully screened; references and CRB/POVA are always checked thoroughly.

The Home uses the induction pack for New Workers in Adult & Community Service Directorate. All new staff will complete an induction programme.

The home insists that all Care Assistants hold a minimum of NVQ level 2 in Care. All new members of staff must train to achieve this important qualification.

The home also sends all staff on internal or external training courses for such topics as Food Hygiene, Moving and Handling, Emergency First Aid, Health and Safety, Fire Training, Protection of Vulnerable Adult, Infection Control, Managing Challenging Behaviour, Dementia Care, EOL, etc...

All Staff undergo management supervision and appraisal.

The Home will endeavour to provide each service user a choice in gender to deliver their personal care but this may not always be possible.

5.0 Accommodation

The Old Vicarage is a 14-bedded home situated in rural north Herefordshire, just off the A4110/4113. Wigmore is approximately eight miles from Leominster, Ludlow and Knighton.



The village itself provides various amenities, such as a church, post office, village hall store, public houses, garage schools and village hall. Situated in a pleasant accessible gardens and panoramic views across fields to rear of the village. A beautiful building built in 1852, had an American Red Cedar Tree planted to commemorate the completion of the building. The Home offers outstanding accommodation and care.

On the ground floor there are three non-able toilet facilities for service users to use with ample space for wheelchair and frame access. There is a dining room, two sitting rooms, a quiet lounge and a T V lounge or an activity lounge. The kitchen is the centre point of this floor where meals of the day are prepared and cooked. Attached to the building is a fairly modern extension built in 1986 that met all the regulations applied at that time. There is also a laundry on site. The Home is pleasantly furnished to create a homely environment.



THE DINING ROOM*

Bed Bedroom consists of:

- 11 single rooms (2 of which are en suite)
- 2 two bedded rooms (all have privacy curtains.)

All rooms are connected to a nurse call system for the benefit and safety of service users.

ROOM NUMBER	DIMENSIONS	SQ. METRES
Room 1	3.90 m x 4.20 m	
Room 2	4.15 m x 4.40 m (double)	
Room 3	4.10 m x 3.30 m	
Room 4	5.30 m x 4.20 m	
Room 5	3.90 m x 4.20 m	
Ground Floor	Extension	
Room 11	4.05 m x 3.05 m	
Room 12	4.30 m x 4.40 m	
Room 13	5.00 m x 3.20 m	
Room 14	5.30 m x 3.10 m	
First Floor	Upstairs	
Room 6	4.00 m x 4.10 m	
Room 7	4.10 m x 5.30 m (double)	
Room 8	4.70 m x 4.20 m (double)	
Room 9	3.20 m x 5.30 m	
Room 10	4.10 m x 4.15 m	



THE SIDE GARDEN

* photos to be updated upon completion of carpet renovation

6.0 CARE SERVICES

We are a "Care Home without Nursing"

The Old Vicarage is a registered Care Home. This enables us to provide, personal care (see definition below) to the people who live here. We do not provide nursing care. As a Care Home without nursing we are not required to employ a qualified Registered Nurse or have one on duty at all times.

To offer the best possible service to the people who live at The Old Vicarage we work closely with local Health Service, who together with our staff, contribute to provide a holistic service. We can also facilitate the services of other health care professionals such as Chiropodists, Occupational Therapists, Dieticians, Physiotherapists and Complimentary therapists either through the General Practitioners or by private arrangement.

Definition of "Personal Care":

The Department of Work and Pensions (DPW) defines this as attention required in connection with bodily functions. Bodily functions can include dressing, washing, bathing, or shaving, toileting, getting in or out of bed, eating, drinking, taking medication, and communication. Seeing and hearing are also considered to be bodily function.

Dementia Care:

As a caring establishment which is registered to provide care for those suffering from Dementia, we have responsibility to ensure that our staff are trained to understand and have a high level of knowledge on this field to put into practical care and support required by the service user or individual resident who are experiencing the many aspects and forms of Dementia and Alzheimer's disease.

To ensure that the existing residents are cared for on an appropriate level, a system of monitoring and review is in place to make certain that any changes in a person's behaviour are recorded and monitored. Any concerns are discussed with the relevant professionals and the resident along with their families are kept informed and their wishes included with any proposals to way that person is cared for and that their choices are respected as far as is practicable.

Prospective residents are assessed on their individual needs to ensure that we can plan and deliver a specific level of care to suit their needs and live their lives to their individual

choice and safety. The transition into residential care can be distressing to the person and their families, we at The Old Vicarage are empathic and available to listen, help, and adapt.

The Home has a programme of activities which may promote stimulation and provide structure to a person's day to ensure that boredom is not a contributing factor to a person's decline. Each person and their families are given the opportunity to advise the Home on their personal preferences, food likes and dislikes hobbies, interests, careers, religious beliefs and family history.

We have pictorial information on doors to facilitate ways of remembering their environment; this may also help communication and interaction. It may also assist a person with choices and to answer questions and ensure that more support is given to make life as dignified as possible.

We are also developing "memory boxes" for people to orientate them to where they are now, with their lives. We are planning to create a "memory lane" wall with pictures of how things were, years ago.

We are also introducing a regular activities as such gentle exercise (yoga), to enable the residents to participate in more physical activity, art and craft resources, and gardening project to grow bedding plants, salad vegetables, and bulb planters. We have a car to take small groups out in the pub, shows, and shopping trips.

We have a regular coffee morning or sometimes a cheese and wine gatherings to enable the families to get together with the residents and staff to socialise and discuss any concern.

Mental Health Care needs:

Each individual person who wishes to live at The Old Vicarage is assessed, prior to admission to ensure that their needs may be met.

If a person is diagnosed with mental health issues, that person's mental health and behaviours must be considered as part of the pre-admission process, if it appears that these issues will not greatly impact on the lives of other people living at the Home or compromise their safety then the person may be admitted. The Home operates a four week trial period in which it may become apparent that the Home cannot meet the person's needs and alternatives accommodation will be sought.

If a person living at the Home develops mental health issues, the Home will request a referral for input from the mental health team to develop strategies to continue their care and maintain their safety, however if a solution cannot be found, the person will be supported to seek accommodation elsewhere.

7.0 Admission

Admission to the Home is by:

1. Requests from Social Workers, District Nurses, and people in the village.
2. Requests from other Care Homes.
3. Requests from General Practitioners/Psycho geriatricians.
4. Requests from Relatives, and friends.

All prospective Service Users are visited by the Manager or a Care Team Leader prior to admission to assess their needs/suitability.

Service User's interested in coming to The Old Vicarage Residential Care Home are encouraged to visit the home and sample the atmosphere and level of service.

This gives the client time to get to know the staff and adjust to new people and surroundings. A month's trial period is always given before taking permanent residency.

When an emergency admission is to happen, the manager or in their absence a team leader undertakes a full assessment to ascertain whether the Home has the capacity to meet the assessed needs of the service user.

The Team Leader is to inform the Service User within 48 hours about key aspects, rules and routines of the home and to meet all other admission criteria such as other assessments, completion of care plan both from referring agent and allocated key worker within a week.

All Service Users have the right to access their records and information about them from admission and throughout their stay at The Old Vicarage.

8.0 Privacy and Dignity

Staffs are trained to strive to preserve and maintain the dignity, individuality and privacy of all Service Users within a warm and caring atmosphere, and in so doing will be sensitive to the Service Users ever changing needs.

9.0 *Service Users Plan Review*

Once developed the personal development plan will be reviewed monthly and updated to reflect any changing needs and ensure that the objectives for health, personal and social care are auctioned. Any plan is developed with the involvement of the service user as far as is possible.

Family and relatives will be encouraged to participate in the Service User's daily routine as far as is practicable, and are invited to Home's annual reviews or more frequently if necessary. Service Users and their Relatives are always welcome to chat with a member of the Care Staff if they have any concerns.

The Personal Development Plan is reviewed at three levels:

- Daily on a shift-to-shift basis. At staff shift changeover the Service User's daily care notes are handed by the out-going shift to staff on the in-coming shift and the Service User's responses and activity patterns discussed as needed. Changes to the Service Users Plan may be proposed at this point.
- At the end of the four week settling-in period.
- Thereafter a formal review is held as agreed with the Care Manager.

All amendments to the Personal Development Plan are recorded in full.

Service Users and Relatives have the right to access documentation following completion of Application to View Individual Service User's Notes.

10.0 *Smoking and Alcohol*

Smoking is prohibited throughout the entire workplace with no exceptions. These include company vehicles. With regard to alcohol, Service Users will normally make their own arrangements, but, as with smoking, may require to be supervised.

11.0 Emergency Procedures

The Fire Precautions and Associated emergency procedures are identified within the Home.

The Old Vicarage Residential Care Home recognises its particular obligation to take all reasonably practicable steps to protect the health and safety of its workforce, its service users and others who may be affected by its work activities.

A Fire Safety Policy and Procedure is in place and reviewed annually. It is mandatory for staff to attend Fire Training, First Aid Training, Health and Safety Training and Manual Handling at least once a year.

Risk assessments are carried out regularly to identify significant risks to staff, service users and visitors for each location under the control of the Home and appropriate control measures are in place and are maintained.

12.0 Fire Safety

- The home has a Fire Alarm System fitted, with "Fire Exit Notices" and "Fire Emergency Instruction Notices" displayed at strategic points throughout the home.
- Staffs are instructed during induction training with regard to the Fire Prevention/Drills Policy this includes use of the homes fire appliances, evacuation, master points, raising the alarm, etc. Service User's are informed of the emergency procedure during admission.
- A fire exercise is carried out weekly on each shift, this ensures all staff and Service Users have a comprehensive understanding of their responsibilities.
- All fire systems and alarms will be tested weekly by the maintenance person of the home and 6 monthly by Hereford Fire Protection Limited. Records are kept of all such testing as part of the Proprietor/Managers responsibilities.
- A qualified fire extinguisher maintenance engineer will check all fire fighting equipment and emergency lights 6 monthly.
- Where possible, furniture, fixtures and fittings must be made of fire-resistant or fire-retardant fabrics and materials.

13.0 Religion (Worship/Attendance at Religious Services)

Service Users may attend religious services either within or outside the Home, as they so desire. If services are outside the home, the Service User should, if necessary and where possible, arrange for transport and accompaniment with friends or relatives. In the event of this not being possible, care staff may accompany Service Users on specific occasions if staffing levels permit.

Service Users have the right to meet clergy of their chosen denomination at any time. If required, a private room will be made available for such meetings. A Roman Catholic Priest visits the Home every weekly on Sundays to provide communion for those who wishes to.

14.0 Contacts with Family and Friends

Service User's family, relatives and friends are encouraged to visit the Service User regularly and maintain contact by letter or telephone when visiting is not possible. In these cases, staff will offer to assist the Service User to respond where help may be needed.

Visitors will be welcomed at all reasonable times, and are asked to let the Person in Charge know of their arrival and departure from the home. For Security and Fire Safety reasons, visitors must sign the visitor's book on each occasion.

The Service User has the right to refuse to see any visitor, and this right will be respected and up-held by the Person-In-Charge who will, if necessary, inform the visitors of the Service Users wishes.

15.0 Therapeutic Activities

The home policy on "Therapeutic Activities" takes into account the Service User's interests, skills, experiences, personalities and medical condition. The home offers a wide range of activities designed to encourage the client to keep mobile, and most importantly take an interest in life.

Staffs encourages and in certain instances help Service User's to pursue their hobbies and interests e.g. reading or listening to the radio or watching their own television in private.

Relatives are encouraged to take service users out to pursue their individual interests, as appropriate to the individual Service User.

Service Users are encouraged to join others in communal games and activities, including discussion groups on matters of concern or local current interest.

Both internally organised activities (e.g. music entertainment, barbecues etc.) and external activities (e.g. shopping, to sea side, to garden centres, to coffee shops etc.) should be flexible to match individual Service Users capabilities.

Mental stimulation encouraged by making activities available for Service Users including Reminiscence group which promote logical thought and intellectual consideration.

Reality orientation is fostered by discussing current affairs, matters of local and personal interests.

Programmes should be set up to enable groups of Service Users to work and play together in stimulating activities, for this purpose the Home employs an Activity Organiser.

Service User's can play the following games

- a. Cards.
- b. Scrabble.
- c. Bingo.
- d. Draughts.
- e. Other board games

Activities with the staff

- a. Chatting to Individual Service Users.
- b. Going for walks.
- c. Manicures
- d. Playing games.
- e. Armchair exercises.
- f. Reading letters/magazines/newspapers.
- g. Music and sing-alongs.
- h. Maintain life long hobbies, crossword puzzles etc
- i. Card making.
- j. Keep fit exercise

Outings

All outings are geared to Service User's needs and capabilities and due to this a limited number of Service User's can go on any one outing.

Examples of outings are listed below:

- a. Visits to local Pub.
- b. Visit to a garden Centre.

- c. Visit to theatre/pantomime
- d. Visit to the seaside.
- e. Visit to tearooms/restaurants.
- f. Shopping centre

An important part of our quality programme is to involve the Service Users and their relatives. We regularly ask for comments on the Home, the staff and services we provide. We also annually circulate a visitors and service user's questionnaire, which assists in assuring that we continue to provide a quality service. The Home has a "Suggestion Box" and our Administrator and Manager follows up comments.

16.0 Financial Arrangements and Fees

We are committed to providing value for money within our comprehensive and caring service. The fees charged are dependent on:

1. The type of facility required, and
2. The type of care package and needs of the individual Service User

Depending on the personal financial situation, a Service User can either pay the fees privately or receive benefits arranged by social services, health and local authority.

The current rules can be complicated and specific advice is available from the Home Manager.

Fees - What is included

- Fully trained staff in 24 hour attendance
- Good Home Cooking, Provision for Special Diets
- Laundry Service
- GP visits when required
- Call System
- Full (fuel) Heating
- Telephone calls (no international calls)
- Social Activities

Fees - What is not included

- Dry cleaning
- Weekly visits from the hairdresser to the home
- Clothing, shoes, slippers, tights and socks.
- Bubble bath, perfume, talc etc.
- Alcohol (if applicable)
- Cigarettes (if applicable)

- Chiropody costs (approximately every 8 weeks)
- Chocolate/sweets
- Tissues
- Escort to hospital or appointment
- Personal telephone in bedroom
- Television subject to P.A.T(this will be explained by the home manager)
- Exotic food.
- Newspaper
- Personal massage

It is helpful if the Representative asks a member of staff of their relatives needs when visiting.

If the Service User has no Representative or the Representative is unable to shop through disablement or other reason, The Home will consider administering the Personal Allowance. In this event a detailed record is kept of all purchases. This record is available for scrutiny by the family, care inspector and service user's social worker.

17.0 Pets

Whilst we acknowledge the fact that many people have pets for company during their lifetime and that they may wish to bring an animal with them when they move, the

Management has a responsibility to all the Service Users with regard to Health and Safety, also as to their choice to have animals within the home. This is not to say we do not permit pets, the Manager will however treat each case dependant on need and the amount of pets already at the home.

18.0 Medication

Most of staff in The Old Vicarage are trained in the safe handling of medication therefore they can administer 'as required' medication following assessment and observation.

Any Service User may request to see a doctor in private if they wish. Relatives are asked if they wish to provide Homely Remedies, these must be discussed first with the Home Manager.

19.0 Telephone

The home has a cordless phone, which can be used by the Service Users for incoming and outgoing calls to ensure privacy and confidentiality.

If a Service User wants to self-medicate and is safe to do so then all help and advice is given. Otherwise all drugs will be managed by senior staff and dispensed and ordered for them under the instructions of their GP.

20.0 Meals

Menus will be varied and favourite dishes and special diets can be catered for. Service Users are encouraged to eat in the dining room but may eat in their own room if this is their choice.

Each Service User is offered three full meals each day (at least two of which must be cooked). Service Users can request for supper meal before retiring to bed.

Tea, coffee and other hot drinks are served and available 24 hours a day. Special diets are provided when advised by health care and dietetic staff. Religious or cultural dietary needs are catered for as agreed at admission and recorded in the care plan.

21.0 Laundry

Laundry service is inclusive. However, relatives are requested to purchase machine washable, minimum iron clothing. Responsibility cannot be taken for clothing, which requires dry cleaning. Staff will ensure that all clothing is labelled before it is used.

22.0 Leaving or Temporarily Vacating

If a person wishes to be discharged from the Home, then 4 weeks notice must be given of this intention, or 4 weeks fees paid in lieu of notice. These conditions are waived during the 4-week trial period. If a Service User temporarily moves out of the Home (e.g. to receive hospital treatment) the bed is retained for a period of eight weeks. In the case of social work funded Service Users, this retention period would be reviewed by the Home Manager.

23.0 *Equal Opportunities*

The Old Vicarage Residential Care Home is fully committed to a policy of Equal Opportunities. No discrimination whatsoever will be permitted for any reason of race or ethnic background, colour, religion, marital status, disability, parenthood, gender or sexual orientation. All persons of any group will be treated fairly.

Manager and Owners are required to ensure that equal opportunity policies are implemented at all levels, ensuring that all staff and Service Users are treated equally. Each Service User will expect a choice in gender to deliver their care and the Home will endeavour to meet the request but this may not always be possible.

24.0 *Monitoring and Quality*

Within the Home, there are various systems, which ensure that close monitoring is maintained on all of the Home's services and procedures. Attention to the smallest detail is pivotal to everything that we do.

25.0 *Social Services and Local Health Board*

The Herefordshire Adult Social Care Services are the one that provides local social care services and they are contactable at the following address and telephone number:

Herefordshire County Council
County Offices
Plough Lane
Hereford HR4 0LE
Tel: 01432 260000
www.herefordshire.gov.uk

26.0 *Review*

The Home will review and update the Statement of Purpose once a year. Service Users, relatives and other health professionals will be involved in the review. Revised copy of the Statement of Purpose will be sent to CQC.

This was reviewed on JANUARY 2024

Next review JANUARY 2025

APPENDIX A

APPENDIX B
CQC
RECENT REPORT