

# Parkwood House Residential and Nursing Home

## Statement of Purpose



February 2007

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**This document has been written in accordance with the Care Standards Act 2000. The document will be reviewed every six months unless circumstances dictate that it should be reviewed earlier.**

## Aims and Objectives

With many years experience, the management of Parkwood House Nursing and Residential Home offer a highly professional care service for the elderly, with a personal touch. We are pleased to accept service users for long term, short term, for convalescence and holiday stays.

When people have worked hard throughout their life and have been committed to helping others, we think they deserve extra cherishing. They need a Home where individuality is emphasised, with staff who have time to give attention to small detail, and where they have the choice of enjoying the company of like-minded fellow service users.

Our main aim at Parkwood House is to provide the highest quality of Care Home with a happy and homely atmosphere, in which each service user feels at home, cared for and contented.

- PRIVACY:** A service users room is their own personal place and personal privacy is respected at all times.
- DIGNITY:** The service user can expect to be treated with respect at all times.
- INDEPENDENCE:** We encourage service users to be as independent as they wish, and to keep up the outside activities they may have and generally to lead a happy and contented life in a way that suits their individual needs.
- CHOICE:** We will keep the service users informed generally of any important matters or developments and welcome any suggestions from the service users, their families and staff.
- RIGHTS:** We endeavour to maintain the rights of service users and all entitlements associated with citizenship.
- FULFILMENT:** We will encourage each service user to continue with hobbies both inside and outside the home, whilst providing a secure, clean and well-maintained environment, with privacy and hospitality to make visitors and friends feel welcome.

## Philosophy of Care

Parkwood Nursing 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/therapeutic (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.

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 |

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 Commission for Social Care Inspection.

**BELONGINGS:** Service users are actively encouraged to bring in personal items of their own, such as a favourite chair, pictures and photographs etc, and to make their room as homely as possible. A copy of an inventory kept by each party will be necessary.

If the resident leaves the Home or dies leaving the effects in the Home, the Management shall make reasonable effort to contact the Resident's next of kin or solicitor for instruction. In the absence of instruction or if no provision has been made within 14 days, the Home's Management shall be entitled to treat the effects as abandoned. Any money received from the sale of such effects shall be used for Residents' outings or donated to charity.

In a case where a Resident wishes furniture to be brought into the Home this must be specifically agreed. The cost of transporting such furniture in or out of the Home is the Resident's responsibility

The Management reserves the right to charge a Resident for the replacement cost of any furniture, furnishings, defects or

equipment which has been damaged by default, or wilful act of the Resident. This shall not apply to fair wear and tear.

- BEDDING:** Although bedding is provided, service users may use their own.
- TELEPHONE:** There is a service user's payphone for incoming and outgoing calls although many service users can install their own telephone, if they wish to do so. Some service User's have their own mobiles.
- ELETRICAL:** All electrical appliances need to be approved by the Home before use for safety reasons. Any appliances need to be agreed as to their suitability for use in the Home. Such an appliance shall be given a safety examination by a qualified electrician and may have to be paid for by the Resident.
- HOSPITAL:** Should the service user require a hospital stay their room would be kept available until assessment of the situation, and then the individual position would be reviewed in consultation with the service user or family as appropriate.
- PETS:** Some pets may be acceptable after prior consultation with Management. Visitors will be allowed to bring pets into the Home after prior consultation with the Manager.
- SMOKING:** For safety reasons, please be aware that smoking is not permitted in bedrooms either by service users, visitors or staff. Smoking is permitted as arranged with Manager to suit the individual.
- DOMESTIC:** If a service user wishes to help in any way, for example make their own bed or help in the dining room they are very welcome to do so.
- HYGIENE:** Service users may bath or shower as often as they wish.
- All service users have a bath at least once a week, unless for medical reasons they are unable to do so.
- We also carry out all personal laundry washing, which is usually returned the next day. We recommend that all clothing be labelled as soon as it comes into the Home. However, if a service user wishes to make other arrangements for their laundry, they may do so. Please discuss with the Manager any clothing that may require specialist cleaning.
- INTERESTS:** We hope service users will keep up all interests they may have, and also join in the many activities of the home.

- GOING TO BED:** Service users may go to bed whenever they wish.
- MEDICATION:** We take great care of all medication and distribute this daily whilst keeping precise records.
- GP:** A service user may keep their own GP if they are local, or we can arrange one for you from the local surgery with which we have a service contract. If a service user wishes to visit a GP or have an appointment at hospital, a member of staff will accompany them if required.
- MEAL TIMES:** Whilst these are flexible, in the main they are as follows:
- |           |                 |
|-----------|-----------------|
| Breakfast | 8.00 – 9.30 am  |
| Lunch     | 12.30 – 1.30 pm |
| Tea       | 4 .30 – 5.30 pm |
- We use a four-week rotating menu, which is reviewed regularly. We cater for varied and special diets. Also meals can be put by for service users who are out or who may be late back.
- GOING OUT:** As in one's own home, a service user is welcome to come and go as they please, although a member of staff should be informed of their plans.
- VISITORS:** Visitors are always welcome at any reasonable time, preferably between the hours of 10am and 6pm. If any family member wishes to help tend their relatives outside these hours they are most welcome to do so.
- VALUABLES:** We discourage all service users to keep any valuables in the Home. However, important valuables and money should be made known to the Manager as they can be kept locked in the safe. The Home will not be responsible for any valuables kept in the service users bedroom. Pocket money may be kept in the Home for general use, however we do ask that this amount does not exceed £100.
- It is suggested that specialised hearing aids are insured by the family as they could become damaged.

# Home Organisational Structure

## Proprietor

Mr Geoffrey Cox

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## Director Of Nursing (Manager)

Mrs M Whittaker

## Director of Administration

Mrs K Bolt

## Consultant Organisational Psychologist

Dr I Anderson

## Human Resources Manager

Mr D Leyland

## Purchasing Officer

Mr R Stimpson

## Accountant

Mr N Jones

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## Home Manager

Kate Wells-McCulloch

## Trained Staff

Carol Prout  
Jenny Johnson  
Jaya George  
Rajesh Mani  
Diana Mortimer  
Maria De Vos

## Administrator

Rachel Buley

## Kitchen Staff

Nicola Pearce  
Colin Healy

## Chef

Karen Dunford  
Lucy Foster

## Domestic Staff

Sharon Crowther  
Theresa McGreevey  
Janet Thomson  
Roy Gale  
Christine Easterbrook

## Head Carer

Lorna Smith

## Handyman

Geoff Dustan

## Care Staff

Steph Vardy  
Marie Therisa  
Elizabeth Mejorada  
Sabina Abdullayeva  
Mary Jane Gamino  
Michal Suchorak  
Aniceta Tolentino  
Katherine Smeathers

## Care Staff

Debbie Johnston  
Donna Sly  
Arlen Jetuya  
Shirley Bishop  
Marek Babecka  
Iskara Stavreva  
Jenny Edwards  
Manju Abraham

## Care Staff

Sue Bishop  
Emma Chu  
Elizabeth Arado  
Marion Easterbrook  
Ilonka Mitova  
Velichka Zheleva  
Serena Milne

## Details of Staff Numbers and Staff Training

The Home employs one Manager, 2 Registered Nurses grade 1, and 2 Registered Nurses grade 2, 1 head carer and 8 senior care assistants and 18 care assistants. The Homes staff are selected for their qualities of reliability, integrity, skill, friendliness and professionalism. They are carefully screened and references are always checked thoroughly. During induction all staff are trained in-house by experienced qualified senior staff in the following critical subjects:

- ❖ The Southern Healthcare Ethos
- ❖ Care code of conduct
- ❖ Confidentiality
- ❖ The rights of Service user's
- ❖ Manual Handling
- ❖ Fire Safety
- ❖ Diet & Nutrition
- ❖ First Aid
- ❖ Health and Safety
- ❖ Food Hygiene and Safety
- ❖ Personal Care Tasks
- ❖ Care Assistants Responsibilities

All new staff will complete an induction that follows the TOPSS guidelines. 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 external training courses for such topics as Food Hygiene, Lifting and Handling, Care of the Elderly, First Aid, Drugs Practice etc, and will continue to update their knowledge and skills in the care for the elderly. All staff will be assessed and appraised as appropriate. Senior members of staff will be continuously monitoring all other staff on a day-to-day basis.

Staff will adhere to their professional code of conduct and that of the Home. Any complaints about staff will be investigated immediately through our complaints procedure.

## Accommodation

Parkwood Care Home has been offering a high standard of care for the elderly for a great many years, it is a secure, happy and relaxed home situated in a pleasant residential area of Stoke.

Parkwood House is situated within easy reach of Plymouth City Centre and is close to many local amenities.

Parkwood House has 28 single bedrooms, 6 of these being en-suite and 9 twin rooms, 3 of these being en-suite. All rooms are nicely decorated and fully furnished, however we do encourage residents to bring in smaller articles of their furniture, pictures and ornaments to personalise their rooms. Each room has a washbasin, a call system and radiators with their own thermostat controls. Residents are welcome to bring in their own televisions.

The Communal areas include 3 lounges, dining room and library.

Externally there is a small well-kept garden for residents use.

At Parkwood House we consider it important to maintain a high standard of cleanliness and hygiene, staff are fully trained in hygiene control, resident's rooms and the communal areas are routinely cleaned. Maintenance is carried out regularly to keep the Home in good decorative order; this is to ensure that we provide a safe, hygienic and pleasant environment for residents, staff and visitors.

## Admission

Service user's interested in coming to Parkwood House Nursing Home are encouraged to visit the Home to sample the atmosphere and level of service. Often day-care is arranged on a regular weekly basis while waiting for a vacancy. 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.

The Home is registered to accommodate 4 terminally ill (TI), 14 old age, not falling within any other category (OP), 38 physically disabled over 65 years of age (PD (E)), 38 physically disabled (PD), 14 of whom may have mental frailty falling within the registration category of DE (E). These numbers apply to both sexes.

Often a relative, friend or social worker will contact Parkwood House and will arrange to view the Home. Any questions or individual concerns regarding the service users stay, such as medical needs/requirements are discussed with the Home Manager at the time of the initial assessment. After a full assessment of the potential service user to ensure their needs can be met by the Home, as soon as a room becomes available a date will be arranged for the service user to move in. A deposit will secure the room agreed upon.

There will be an initial period of one month for all parties to ensure the service user is happy and becomes settled. If a service user is not happy at this point, they can of course leave without notice. After a month, a month's notice is required to be given either by the service user or the Matron on behalf of the Home, if the arrangement is not suitable for the service users needs.

## Privacy and Dignity

The staff 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.

## Smoking and Alcohol

The Home has a designated smoking area. With regard to alcohol, service users will normally make their own arrangements, but as for smoking this may require to be supervised.

## Fire Safety

- ❖ The Home has a modern Fire Alarm System fitted, with “Fire Exit Notices” and “Fire Emergency Instruction Notices” displayed at strategic points throughout the Home, as advised by the local Fire Department.
- ❖ Staff are instructed during Induction training with regard to the Fire Prevention and Drills Policy which includes use of the Homes fire appliances, evacuation, muster points, raising the alarm, etc. Service users 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 are tested weekly by staff of the Home and 12 monthly by the local Fire Officer. Records are kept of all such testing as part of the Proprietor/Managers responsibilities.
- ❖ All fire fighting equipment will be checked annually by a qualified fire extinguisher maintenance engineer.
- ❖ Where possible, furniture, fixtures and fittings must be made of fire-resistant or fire-retardant fabrics and materials.
- ❖ Fire training sessions are carried out by both a qualified instructor and internal instructors throughout the year at 3 monthly intervals.

## 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.

## Contact 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.

## Service Users Plan Review

Once developed the service users care plan will be reviewed monthly and updated to reflect any changing needs and ensure that the objectives for health, personal and social care are actioned. Any plan that is developed includes the involvement of the service user.

Family and relatives will be encouraged to participate in the service user's daily routine as far as is practicable, and are invited to 6 monthly formal reviews, or as required. Service users and their Relatives are always welcome to chat with a member of the care staff if they have any concerns.

The service users 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 with care staff on a monthly basis.

All amendments to the care plan will require the authorisation of the Home Manager. Certain amendments may require the authorisation of the service user's GP. All amendments to the service users plan are recorded in full.

## Complaints

The Home operates a pro-active comments and complaints process in the hope of continually improving service.

If as a service user, relative or visitor, you feel that there is cause for complaint, you should first discuss the matter with the person in charge i.e. Manager. If the matter is in your opinion, a serious one, or if you remain dissatisfied, you can follow our complaints procedure a copy of which is kept in each room.

If after this investigation, you are still not satisfied, or if you feel that the complaint is of a serious nature and you wish to speak to a registration officer first, then you should contact the Commission for Social Care Inspection.

Should any matter arise that does not satisfy the service user, then the service user, a relative or social worker may contact a member of the Commission for Social Care Inspection. The local office of the CSCI is the South Devon Area Office, Unit D1, Linhay Business Park, Ashburton, Devon. TQ12 7UP.

## 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. More in here staff encourage, and in certain instances help service user’s to pursue their hobbies and interests:

### Service user’s can play the following games

- ❖ Cards.
- ❖ Scrabble.
- ❖ Bingo.
- ❖ Draughts.
- ❖ Or any other favourite board games.

### Activities with the staff (On a Daily Basis)

- ❖ Chatting to Individual service users.
- ❖ Going for walks.
- ❖ Manicures
- ❖ Playing games.
- ❖ Armchair exercises.
- ❖ Reading letters/magazines/newspapers.
- ❖ Helping to choose Library books.
- ❖ Music and singalongs.
- ❖ Maintain life long hobbies, crossword puzzles etc
- ❖ Facials
- ❖ Aromatherapy
- ❖ Hair dressing
- ❖ Physiotherapy
- ❖ Arts and crafts

### 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:

- ❖ Visits to local Pub.
- ❖ Visit to a garden Centre.
- ❖ Visit to a pantomime or play.
- ❖ Bus journeys around the local countryside.
- ❖ Bus journeys to local beauty spots.

## 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.

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 circulate a service users questionnaire quarterly, which assists in assuring that we continue to provide a quality service.

We offer a relative and resident support meeting every 3 months to discuss any relevant issues and often this is led by the Manager.

## Practices of the Home

- ❖ To hold current a registration certificate and adhere to its code of practice.
- ❖ To ensure bedrooms are treated as each individual's home. Knocking on doors before entering will be respected at all times.
- ❖ To ensure service users are addressed by staff in the way the service user chooses.
- ❖ That service users independence is promoted and avoiding set rules where possible: i.e. Bedtimes etc.
- ❖ That service users are encouraged to be as independent as possible, and to make their own decisions about themselves and their home.
- ❖ That service users are actively encouraged to participate in their care, and the planning of their care.
- ❖ That service users may smoke in appropriate designated areas.
- ❖ That service users may choose where they take meals, either in private or in the dining areas.
- ❖ That service users may have meals for a relative or friend.
- ❖ That all care and personal needs are assessed, monitored and evaluated, including the service user, and/or their advocate or relatives, as the service user chooses.

## Procedure and Record Keeping

- ❖ All procedures will be carried out, ensuring the service users' privacy and dignity are respected.
- ❖ All nursing procedures will be carried out in accordance with the Clinical Procedure Manual of the Royal Marsden Hospital.
- ❖ Service users may refuse any procedure or nursing intervention if they choose.
- ❖ Service users have the right to any information they seek regarding: -
  - Complaints procedure
  - Access to notes/documents
- ❖ All documentation will be confidential
- ❖ Service users may choose their own General Practitioner.
- ❖ Any procedure that restricts personal choice or infringes service users' rights will be recorded and reviewed.

## Monitoring of Standards/Quality Assurance

Parkwood House seeks to maintain high standards of care by: -

- ❖ Continually talking to service users, staff, advocates and relatives
- ❖ Identifying service users needs and care to be provided.
- ❖ Setting clear and explicit standards of care to be used as the criteria from which professional judgements can be made.
- ❖ To provide competent staff who are continually updated with training in the care of the elderly.
- ❖ Ensuring staff practices are in accordance with their code of professional conduct and to discuss practices at staff appraisals.
- ❖ To continuously discuss service users' rights, privacy, dignity, choice, independence and fulfilment at staff meetings.
- ❖ Diligently observe the general day-to-day care provided.
- ❖ Liase with all other services to ensure all requirements are being met.

- ❖ Provide meetings of staff, service users, relative's etc. to discuss standards of care and highlighting any areas of concern.
- ❖ Providing at random, questionnaires for staff, visitors, relatives and service users to complete.

## Service User's Rights

1. Service users have the right to as much personal and physical independence as possible. This includes personal choice and responsibility for their own actions. Service users will not be compelled to undertake anything against their will.
2. Service users have the right to have their cultural, religious, political, sexual and emotional needs respected; permitting and facilitating chosen personal relationships, sexual or otherwise including marriage between service users and between service users acquaintances.
3. Service users have the right to freedom of conscience and to participate in chosen activities, religious or otherwise.
4. Service users have the right to be consulted about decisions affecting their daily lives, including participation in the planning and evaluation of care and treatment.
5. Service users have the right to have their personal dignity respected by others in every way possible, without discriminating on any grounds, whether gender, age, race, creed, language, religion or other status or political or other opinion.
6. Service users have the right to privacy for themselves, their belongings and their affairs, including the right to receive visitors in private and confidentiality of personal affairs and personal space will be respected.
7. Service users have the right to have the same services and facilities in the surrounding community as any other citizen. This may include registration with Medical Practitioners and a Dentist of their own choice, permitting and facilitating opportunities for social and other gatherings for whatever purpose inside and out of the home, placing no restriction.
8. Service users have the right to choose whether or not to mix with other people in the community either by going out or inviting people into the home.
9. Service users have the right to be addressed by staff in the way they chose.
10. Service users have the right to freedom of expression, the right to complain, to hold opinions and to receive and impart information and ideas, particularly regarding personal care and treatment.

11. Service users have the right to any information and are encouraged to exercise such right.
12. Service users have the right to have access to their nursing records.
13. Where it is deemed necessary, the interference or restriction of an individual's right for the protection of that person, or the rights or freedoms of others or for any other reason, such actions are recorded, explained to the individual and other interested parties and shall be reviewed regularly according to proper procedure.
14. Service users have the right to form their own representative group, to liaise with staff and give their opinions on how to help improve services to them.

## How to look at your Contract

A contract is a legally binding agreement so look at it very carefully before you sign it. Please make sure that all areas of the Contract are clear to you before signing.

Fees are normally received and adjusted annually. If you have concerns about your fees, you may wish to talk in confidence to the Manager.

If, at any time, you wish to move to another bedroom in the home, you should ask the Manager if a move is possible. The reasons for the move should be recorded and you should indicate you are happy with the move by signing the amendment to your care plan. There may be a change to your fees when moving bedrooms, either an increase or decrease depending on the room you have chosen.

As a service user you should be satisfied that your care needs are being met and you are receiving the amount and quality of help required. The Manager of the Home should be satisfied that they are able to provide the level of care required and that you will benefit from this care. It may take time to properly assess these care needs and to allow understanding to develop between each other.

### SERVICES PROVIDED AND INCLUDED IN FEES

This contractual agreement is for Care. This means the day-to-day care of the service user that is required in respect of their individual and personal needs. It includes:

- The provision of accommodation, decoration, furnishings, carpets, etc. Plus the use of our lounge and dining room facilities suitably furnished and decorated.

- Meals are included and consist of breakfast, lunch and tea. Mid-morning, afternoon and evening hot drinks with biscuits. Suitable refreshments when required at other times of the day.
- Domestic services such as laundering of personal clothing (not including dry-cleaning), bed linen and blankets, towels etc.
- The provision of heating, lighting and electrical supply.
- The cleaning of bedrooms, public rooms and corridors etc. is provided.
- The provision of towels, face cloths, soap, toilet rolls, light bulbs etc. is included.
- Fair 'wear and tear' on furnishings and equipment including soft furnishings is included in the fee.
- The provision of personal care during the day and night is included. The amount and type of care will vary and depends on your needs.
- When required, assistance with oral care, bathing, washing and dressing will be given. Assistance with mobility, help with toileting, provision of a commode when necessary.
- We will also provide opportunities for exercise and physical activities. We will assess the needs in relation to nutrition and monitor weight gain or loss.
- The health of each service user will be assessed on a daily basis and the service user's General Practitioner will be called in as and whenever necessary.
- Medication and drugs will be safely stored and issued to the service user in accordance with the doctor's instructions and recorded as necessary. Records are kept on all medication used.

### ADDITIONAL SERVICES NOT INCLUDED IN FEES

A service user may require services that are not detailed above and we facilitate access to these as required for an additional charge. Examples of such services are: hairdressing or haircutting, private chiropody or dentistry, private hearing or sight tests, newspapers and magazines, personal; telephone calls, personal television, incontinence pads, personal toiletries, clothing etc.

### CARE DURING ILLNESS

Where an illness does not require hospital admission, care will continue to be provided within the Home. Co-ordination between the Home management and staff, the General Practitioner, the Community Nurse and other community service facilities shall be maintained for the benefit of the service user during the period of illness.

## FEE REVIEW

Fees shall normally be reviewed annually and the new fee shall usually apply from April. In the case of service user's in receipt of income support the review shall coincide with the DSS income support review. Additional care demands may necessitate a fee adjustment outside the annual review.

This will only apply in cases of a significant increase in care needs.