

## STATEMENT OF PURPOSE - BCVS HOMES

**This Statement of Purpose sets out what a resident can expect when looking for a care home that will meet their personal needs. Please also refer to our Information Pack and Brochure. We hope this information will help you make an informed decision on whether one of our Homes is the right one for you.**

### **OBJECTS OF THE ASSOCIATION**

BCVS Homes Housing Association is a not for profit charitable organization incorporated as an Association under the Co-operative and Community Benefit Societies Act 2014, reference No 13216R. BCVS Homes is non-profit making.

The objectives of this Association have been agreed between the National Housing Federation (NHF) and the Charity Commissioners as charitable objectives.

The objects of the Association shall be to carry on for the benefit of the community the business of

- (a) providing housing and any associated amenities for a specified number of persons in necessitous circumstances upon terms appropriate to their means and
- (b) providing for aged persons in need thereof of housing and any associated amenities specifically adapted to meet the disability and requirements of such persons.

The Board of BCVS Homes is non-operational, responsible for corporate decisions, its voluntary members interested in the provision of care for the elderly, thus helping to keep management costs to a minimum.

### **AIMS OF THE ASSOCIATION**

Our aim is to provide sympathetic and personal care to the elderly residential care setting, providing personal care according to their needs. To offer the opportunity to enhance quality of life by providing a safe, manageable, happy and comfortable environment with support and stimulation to help maximise Human, Emotional and Social needs. This means the resident being allowed and encouraged to make his/her own decisions and assistance, if necessary, will be given. by the Home management and staff.

All necessary care and attention day and night will be given and the Home will be appropriately staffed through the 24 hours of each day. During the day there is a Home Manager on duty, carrying out managerial and care duties; a minimum of two care assistants, a senior care Assistant and general ancillary staff. At night there are two waking night care assistant. A duty Manager “sleeps” on the premises and is “on call”.

As a non profit making organisation we aim to give value for money. This means a fair provision of services and accommodation for a fair fee.

Prospective residents will be provided with full information as to the home's purpose, setting out aims, objectives, philosophy of care, services and facilities, and terms and conditions. Information as to the accommodation and services provided, staff qualifications. Residents will be able to view recent inspection reports and will be given access to the home's complaints procedure which will include the address of the

CQC and the Housing Ombudsman.

## **General Information**

**Home: Greystones** accommodates 26 residents. 4 rooms have full en suite facilities, 3 with w.c. facility and 19 rooms without an en suite facility.

Registered Manager: Mrs P Ball.

All residents are offered their own private accommodation. Rooms are not shared unless requested. Due to spatial requirements it will be necessary for a couple sharing to be offered two rooms, one as a bedroom, the other as living quarters. The current fee for each room will apply.

### **1. Accommodation – What we provide in your room**

The Home will supply in residents bedrooms the following: a bed, table, chest of drawers, comfortable seating, wardrobe or cupboard space, lockable storage space, a wash-hand basin or en suite facilities, space for usual possessions, electric sockets, a TV aerial point, a telephone point or access to a cordless phone, bedding, curtains and floor covering of good quality, a window which opens, fitted with limiters, good lighting and ventilation and individually controlled heating. Residents may personalise their rooms subject to fire and safety requirements. Residents can be provided with keys to their bedrooms unless there is a satisfactory case to the contrary written into a risk assessment as part of their care plan.

### **2. Age Criteria - Elderly**

Our Homes are registered with the Care Quality Commission. We are described as Care Homes Without Nursing, registered to provide Accommodation and Personal care. Our specialty is to provide residential care to elderly ladies and gentlemen whose personal care needs can be met in a residential care setting.

### **3. Adaptations and equipment**

We cannot accommodate wheel chair users due to the physical characteristics of our buildings, but wheel chairs may be used for “in house” transfer of residents by care staff or on outings away from the homes for the comfort of the residents.

### **4. Admissions - Meeting needs**

The Home Manager will demonstrate the home's capacity to meet the assessed needs of people admitted. The Home owned by BCVS Homes is registered with the Care Quality Commission as Care Homes Without Nursing, registered to provide Accommodation and Personal Care. While we do not specialise in any specific area, we can accommodate residents with a manageable degree of confusion if considered by the medical profession to be attributed to the normal process of ageing. The Home will liaise with the medical profession as to whether the resident’s personal care needs can be met in a residential care home.

#### **4.1 Admissions - Needs Assessment**

Before admission, a full assessment by the Home Manager will be carried out with the involvement of the prospective resident. This is to ensure that his or her needs will be met by the care the home provides. The resident can expect the assessment to cover personal care and physical well-being, diet, weight and dietary preferences, sight, hearing and communication, oral health, foot care, mobility and dexterity, history of falls, continence, medication, mental state and cognition..

#### **4.2. Admissions - Short Term**

Any elderly person admitted for a holiday or respite stay will be cared for by experienced staff. Personal care needs must meet the criteria of residential care. Should permanent accommodation be requested at a later date it will be necessary to fulfill the requirements of the admission process for long term care, which will include completing the Application for Accommodation and Financial Questionnaire.

#### **4.3 . Admissions - Trial visits & unavoidable Planned Admissions.**

Prospective residents will be invited to visit and view the home, to meet staff and to move in on a trial basis before making a decision to stay. When this is not possible wherever practicable residents will be visited in their own home or in hospital. In the case of an unavoidable unplanned admission, the resident will be informed about key aspects of the home within 48 hours and receive a thorough assessment within 5 days of admission.

#### **5. Agreement to Terms (The Contract)**

Each resident will be provided with an Agreement to Terms and Conditions whether privately funded or funded by a local authority. Those funded by the Local Authority are provided with written details direct from their own Local Authority. The statement will include details of the room to be occupied, the care and services covered by the fee, the fees payable, additional services which may be charged for, the rights and obligations of the resident and the home, and the terms and conditions of occupancy including period of notice.

#### **6. Attending Appointments (Transport)**

Due to the importance of maintaining staffing levels it may not always be possible to provide residents with an escort when attending appointments away from the home. In particular hospital appointments when the hospital ambulance service is used. When staff cannot leave the home's premises we rely on the goodwill of our staff and volunteers. Families and friends are asked to assist the home in the organisation of outside appointments. The resident and family will be informed if we are unable to provide transport or an escort. The cost of transport is met by the resident or family unless transport is provided or a volunteer driver who does not require repayment of fuel costs can be found.

#### **7. Autonomy and Choice**

Residents will be helped to exercise as much choice and control over their lives as they wish, including handling their own financial affairs, contacting representatives or advocates, bringing with them reasonable personal belongings, and access to their records. Staff will respect as fully as possible residents rights to make decisions of their own and will be given every support. Where appropriate, records of decision

taking, and the reasons why they are taken will be kept. Residents have rights to privacy, dignity and choice. Information will only be divulged to those who have a “need to know” usually GPs.

If a resident expresses a wish not to divulge personal information to a third party then their rights to confidentiality and privacy will be respected.

### **8. Care Plans**

During the trial period and reviewed on a regular basis thereafter an individual care plan will be drawn up with each resident, outlining how health, personal and social care needs are to be met. The resident will be fully involved with the drawing up of the care plan, the adherence to clinical guidelines and the process for assessing risks. To understand how Care Plans work please refer to the Hand Book.

### **9. Communal Rooms**

The lounges, dining rooms and conservatories are for the sole use of the residents. Guests are welcome at the invitation of the residents.

### **10. Community Contact**

Residents will be encouraged to maintain contacts with their families, friends, representatives and local community groups and volunteers as they wish, with no official restrictions on visits and appropriate arrangements for privacy. Unless unavoidable or in an emergency for the security of the Home late night visits should be avoided.

### **11. Complaints,**

Residents are able to make suggestions, have access to an effective complaints procedure. Residents and their relatives and friends can be confident that complaints will be listened to, taken seriously and acted on. The complaints policy describes fully the procedures.

### **12. Crisis Management**

Policies are in place in the homes on how to deal with emergencies including pandemics.

### **13. Daily Life & Social Activities**

Residents have a right to have their social, cultural, recreational, religious and cultural needs treated with respect. Residents will be encouraged to retain their link with family, the local community and any social interests. We will promote independence, The Residents plan of care will be based on individual need.

### **14. Dying and Death**

Dying residents will be treated with sensitivity, respect and propriety, and appropriate rites and functions observed. Further information can be found in the Handbook. We would respectfully ask if the Home could be provided with details of the residents wishes in the event of death i.e. cultural or religious requirements and the name of preferred funeral director.

## **15. Environment of the Home**

The home's aim is to provide an accessible, safe and well-maintained environment, comfortable, clean and homely atmosphere, with tidy, safe gardens or grounds for residents to use.

Planned maintenance, renewal and redecoration programmes, and the Home complies with fire and environmental health requirements.

Regular electrical wiring checks take place and that the supply of gas is in line with the Gas Safety (Installation and Use) Regulations 1998 (SI 1998 No.2451). Regular appliance checks are also made.

## **16. Equality**

The aim is to protect all who reside, work, live or visit the Home against discrimination and unequal treatment. Our Equality for All Statement, Equal Opportunities and Discipline Procedures refer meeting the requirements under the Equality Act 2010.

## **17. Ethos**

The ethos of the Company is that the needs of the residents are paramount. The management of the home aims to create an open, positive and inclusive atmosphere, where the manager can communicate a clear sense of direction. Residents and Staff will be able to affect how service is delivered, creativity and innovation will be encouraged, with a commitment to equal opportunities, and any Code of Practice published by the DHSC, Department of Health and Social Care. Residents are encouraged to attend residents meetings to put forward suggestions or ideas. Regular staff meetings also take place.

## **18. Financial Procedures**

The Company operates appropriate and professional accounting and financial procedures, has taken out insurance at full replacement cost to cover loss or damage to assets, provide insurance for business interruption costs and for contract liabilities to a minimum of £5 million. The Company keeps records of all transactions, and produce an annually reviewed business and financial plan.

### **18.1. Finance - Personal**

Residents are able to control their own money except where they state that they do not wish to or if they lack capacity. It is preferable that the Home is not involved with the resident's personal finance. The manager may only be appointed as agent for a resident when no-one else is available and then only, if both the Manager and resident are in agreement; in such cases the registration authority and if appropriate the DSS will be informed. Secure facilities for safe-keeping of monies are provided. In all instances where the money or the possessions of individuals are handled by staff, proper records and receipts will be kept.

## **19. Health Care**

Residents' personal health care needs will be fully met and information about and access to primary and all other external health services will be assured.

## **20. Health & Safety**

Policies and procedures are in place with regard to all aspects of health and safety. Further reference can be found in the Information Folders. Policies cover Risk Assessments, COSSH, Accidents, Fire Safety, First Aid and Manual Handling, Food Hygiene, Legionella, General Hygiene and Control of Waste.

Residents are advised that to ensure the safety of our staff we practice safe transfer of residents by the use of “aids” in the home. Our staff have been trained in all aspects of manual handling and safe transfer. For the safe transfer of our residents it is essential that a minimum of two members of care staff involved in the transfer. This is to avoid injury to both the resident and our staff.

## **21. Inspection Reports from the Care Quality Commission (CQC)**

The CQC, our Registration Authority inspects the Homes. Their findings are available for viewing in the home or on CQC web site. [www.cqc.org.uk](http://www.cqc.org.uk).

## **22. Lavatories and Washing facilities**

Our Home provides an adequate number of lavatories and washing facilities all conveniently situated throughout the Home. Rooms that do not have en suite facilities have vanity units with wash hand basins and commodes for nighttime use.

## **23. Meals & Refreshments**

Residents will receive a varied, appealing, wholesome and nutritious diet, in pleasing surroundings. Fresh food is locally sourced wherever possible. Special dietary needs will be catered for and staff will be available to give assistance. Snacks and drinks will be available throughout the day and night and on request.

## **24. Medication**

Residents will be helped to take responsibility for their own medication if that is their wish or can be managed by the Home. Policies and procedures are in place for all aspects of dealing with medicines. Medication will never be given crushed or disguised by mixing with food. If a resident does not wish to take their medication, then the Manager will discuss with the resident and their GP.

## **25. Mental Health Act**

The Home follows the Guidance of B&NES Policies and the Mental Health Act Code of Practice 1983, updated in 2015 and Mental Health Act (MHA) and Care Act 2014 in respect of treatment/care guardianship under the Mental Health Regulations. Training is provided to staff cover the Act include Deprivation of Liberty and Safeguarding.

## **26. Passenger lifts and chair lifts**

A passenger lift and chair lift is available for the use of the residents. These are maintained and serviced on a regular basis as laid down by regulations.

## **27. Pets**

The Home’s policy regrettably states that pets cannot be accommodated. In coming to this decision, consideration was given to the fact that although the importance of pets was recognised, the physical characteristics of the home would make their

accommodation difficult. Pets cannot be allowed to wander in any of the food preparation or food storage areas or have the freedom of the home in general as this could adversely effect the comfort of the other residents. Also by accepting a “first” pet there could be many future requests to accommodate animals, which could have an adverse impact on the home One person's favourite pet might not be acceptable to a neighbouring resident.

## **28. Premises**

The cost of all heating and lighting is included in the weekly fee. The premises are pleasant in appearance and atmosphere, free of offensive odours, suitably lit, heated and ventilated. The premises are suitable for their purpose, accessible, safe and well maintained, comfortable and homely. There is access to local amenities, transport and support services. Furnishing has been carefully chosen to give a homely and comfortable appearance.

The building meets all legal, health and fire requirements. There are planned and recorded maintenance and renewal programmes.

Gardens and grounds are maintained throughout the year for the pleasure and use of the residents. Safety is paramount and gardens are designed and landscaped with this in mind.

## **29. Privacy**

Residents' privacy and dignity will be respected at all times, particularly with regard to personal functions such as bathing or using the toilet, consultations with health and social care professionals and legal and financial advisors, contacts with relatives and friends, staff entering bedrooms, toilets and lavatories. Residents will have access to a telephone and receive their mail unopened, wear their own clothes, be able to specify their preferred term of address, be treated with respect at all times, have medical examinations and treatments in the privacy of their own rooms.

The routines and daily living and the available activities are varied to suit individual's expectations, preferences and capacities. Disabilities taken into account, and full and accessible information supplied to residents.

## **30. Property (Money & Valuables)**

Records of all money or other valuables that the resident wishes to have deposited for safekeeping will be kept and is monitored regularly. To ensure there could be no possible misunderstandings employees are not permitted to accept gifts, apart from token gifts, from the residents.

## **31. Protection & Background Checks by the Disclosure & Barring Service .**

Employees and volunteers are subject to a disclosure by the Disclosure & Barring Service. To ensure the Home is fully staffed an employee may commence work chaperoned provided a satisfactory AdultFirst statement has been obtained while waiting for a full Background Disclosure which can take up to eight weeks. It is our policy to obtain a “Life Long” Background Disclosure for all prospective employees or volunteers or provide an appropriate risk assessment. Candidates who have not permanently resided or not born in the UK will be asked to produce satisfactory

background checks from their country of origin or other places of residence outside the UK.

### **32. Quality Assurance Compliance with CQC**

The Home has in place Quality Assurance Programmes for both residents and family/representatives and Visitors to the Homes. This enables us to monitor that the needs of the residents are being met, thus ensuring we continue to meet our aims and objectives. In addition each home will participate fully with any CQC requirements.

### **33. Record Keeping**

Any information provided to the Home by residents will be kept strictly confidential between the senior management team of the home and the resident. Health Care needs and personal information will be restricted to those employees who have a “need to know” and external professional agencies.

Accurate and up-to-date records of all aspects of the business are kept. Residents will be encouraged to help maintain their own records and have access to information about them held by the home.

### **34. Relationships**

Family and friends are welcome in the home with the resident’s agreement. Residents are able to choose their guests, entertain in private, given assistance, where necessary, to meet and establish new friendships. Unless there is concern that a vulnerable resident is being exploited, the Home will ensure there is no prejudice against older people's enjoyment of a close relationship which could prevent relationships to develop. However, should there be concerns regarding mental capacity the Managers will follow guidelines under Mental Health Act.

### **35. Residents Outings**

It is recognised that travel provides a mental and physical stimulation, which is useful in preventing depression and poor health. Few residents, on entering a care home, will have anticipated giving up outdoor mobility altogether, although the physical difficulties associated with ageing or disability might mean that specialist transport provision is necessary. Our Home does not have its own private transport for the residents. Whenever possible the Home or the Friends of the Home organise outings and day trips using the facilities of local organisations who can provide specialist transport eg Bath Community Transport which has an electric lift and locking space for wheelchairs.

### **36. Restraint, Aggression & Abuse (SOVA)**

The Home has in place policies on how to deal with aggression, restraint and abuse. The Home also follows the guidance provided by B&NES Social Services in their Inter-Agency Procedure for the Safeguarding of Vulnerable Adults and the Publication “No Secrets”, repealed by the Care Act 2014 on 1 April 2015 and guidance on Safeguarding. We have a “no restraints” policy.

### **37. Rights**

Residents' legal and civic rights, including the right to vote in elections and to have

access to advocacy services, will be protected and facilitated.

### **38. Review of Care Needs**

The Home will put in place individual care plans and these will be regularly reviewed with the resident and/or family to ensure we continue to meet the personal care needs of the resident.

### **39. Safeguarding of Vulnerable Adults**

The Department of Health has published a document “Care and Support Statutory Guidance’ updated 21<sup>st</sup> April 2021 and B&NEs have introduced a Safeguarding and Deprivation of Liberty policy and guidance. A copy is held in the Home. We are determined that elderly people residing with us can be secure in the knowledge that they are in a place of safety. We will follow the guidelines in this document. Should abuse be suspected whether by an employee or any other individual then it is likely that the Police will need to be involved and the outcome reported to the relevant authority. We will work with Social Services , CQC and any other authorities that require to be informed.

**39.1.** Employees will also face disciplinary procedure should abuse be suspected. Every employee is required to undergo a Criminal Background Check and the Home will have obtained two satisfactory references from the last two places of employment before their employment is confirmed. Photocopied references or “to whom it may concern” references supplied by the potential employee will not be accepted.

**39.2.**All employees are required to attend a Safeguarding of Vulnerable Adults Course. (SOVA). All Senior Care Officers, Company Secretary/HR will attend a SOVA Investigators course to ensure they follow the correct procedures when investigating a claim of abuse.

### **40. Safe Working Practices – Training**

The health, safety and welfare of residents and staff must be protected at all times. Safe working practices and training is provided to ensure this. Residents may view the timetable of training events and make suggestions if they so wish.

### **41. Smoking in the Home.**

The Home has a no smoking policy, which applies, to all areas of the house.

### **42. Staff Complement**

Appropriate Staff numbers and skill mix will be employed. Full information can be found in the Company’s Operational & Organisational Policy.

#### **42.1. Greystones**

Number of Care Team on duty Care Staff work to a fixed hourly contract.

**Morning shift Monday to Friday**– Duty Manager. 4 Care Assistants, majority of shifts includes Senior Care Assistant.

**Afternoon Shift Monday to Friday.** Duty Manager, 2 Care Assistants, majority of shifts includes Senior Care Assistant.

**Weekend Day** staff work to a fixed hourly contract.

**Night Shift** Monday to Sunday - Duty Manager (sleeping in) Two Care Assistants.

**Additional member** of staff employed on a full time basis to provide cover for absent employees and be involved in organising Activity Programme.

**Weekend Morning shifts**– Duty Manager plus 3 Care Assistants.

**Weekend Afternoon Shifts** - Duty Manager plus 2 Care Assistants.

**General Staff.** Cooks, Kitchen Domestic, General domestic, laundry assistant.

#### **42.2. Maintaining Staffing Levels.**

In times of short staffing, the Board recognises that it is essential for the home to be fully staffed to continue to meet the needs of its residents and to be compliant under health and safety we employ a full time flexible care assistant specifically for this purpose. Relief cover can also be sought from, bank staff, agencies or from the other homes. Overtime worked by staff will be closely monitored to ensure they do not work excessive hours per day or per week and take adequate rest breaks.

**42.4.** All grades of staff are provided with in house and external training. If working outside their normal shift normal hourly rate is paid.

#### **42.5. Staff - Registered Manager**

Relevant qualifications at Registration level will be held by the Registered Manager and Deputy Managers.

#### **42.6. Staff – Deputy Managers**

Deputy Managers will be expected to hold senior level qualifications and encouraged to aim for a qualification at Registration level. This will enable them to work as Acting Manager in the event of long term absence of the Manager.

#### **42.7. The Responsible and Nominated Individual**

The Registered Managers report to the Company Secretary/HR and the Nominated Individual in liaison with the CQC and is the link between the Homes and the Board of Directors. The Nominated individual oversees the supervision of the service.

#### **43. Staff Trainers/Training**

Our Homes has appropriate staff training and development programmes in place. Our “in house” training company is Healthcare Training Ltd and online, Care Skills Academy and Skills for Care, Age Concern and various health and safety specialists. Our employees are aware of their responsibilities to undertake mandatory and care related training and forms part of their Terms of Employment.

#### **44. Staff supervision & Appraisals**

All employees are entitled to formal supervision covering all aspects of practice; the philosophy of care in the home and career development needs, and all other staff and will be supervised on a continuous basis. A formal appraisal system is in place for all staff.

#### **45. Trips Out**

It is recognised that travel provides a mental and physical stimulation, which is useful in preventing depression and poor health. Few residents, on entering a care home, will have anticipated giving up outdoor mobility altogether, although the physical difficulties associated with ageing or disability might mean that specialist transport

provision is necessary. Our Home does not have its own private transport for the residents. Whenever possible the Home or the Friends of the Home organise outings and day trips using the facilities of local organisations who can provide specialist facilities for the disabled.

**46. Volunteers.**

Volunteers play an important role in funding raising, social activities and visiting as Friends to the residents. Volunteers will not be involved in the personal care or the finances of the residents, nor can they be permitted as volunteers take the place of an absent employee or fill a vacant position. All volunteers will be subject to a Disclosure and Barring check.

**47. Whistle-blowing Policy- Public Interest Disclosure**

Details of the Company's Whistle-blowing Policy can be found in the Company Hand Book.

**48. Where you can find further information**

Please contact the Manager of the Home or the Company Secretary at the Registered Office, BCVS Homes, Top Floor, Greystones, Hayesfield Park, Bath. BA2 4QE.