



STATEMENT OF PURPOSE

***Registered Manager:
Heidi Stephens***

***Head Office:
QRC
Valley View Barn
Chidingly Road
Horam
East Sussex
TN21 0JL***

THIS DOCUMENT IS AVAILABLE IN ALTERNATIVE LANGUAGES UPON
REQUEST, IN TAPE FORM OR LARGER PRINT.

Introduction

QRC provides care and support to individuals within their own home. QRC specialises in the provision of care to individuals with complex needs such as Learning Disabilities, Autism and Physical Disabilities.

QRC provides consistently high standards of professional care in order that those we care for can live as normally as possible where their individuality, independence and dignity are respected and upheld.

Our aim is to work alongside Social Services, other care providers, family and friends to enhance service delivery.

Aims and objectives

QRC offers care and support services to adults with a learning disability of both sexes.

Our objective is to provide quality support for people who are in need of extra help to ensure they can live as independently as possible within their own home.

We strive to make a positive difference to all those who use our service.

We aim to offer individualised services by involving the service users and where appropriate, their families.

Our service is flexible with an emphasis on mental, social and spiritual health.

Service user's privacy and dignity will be respected at all times.

The head office is located at Valley View Barn and is subject to regular inspection by the care quality commission.

A person-centred approach, based on evidence of best practice and national minimum standards, is utilised to integrate domiciliary care in our service user's home and in the community to meet the needs of each individual.

Principles

Choice

Individual service users will be encouraged to make choices concerning day-to-day issues and major life events, except where the law deems otherwise. This will include arrangements for consultation with service users, in a form appropriate to individuals' needs as far as is practicable, about the operation of their service. QRC will actively promote and support individual rights. Where individual service users are unable to make informed decisions, opportunities for advocacy support will be explored and individual issues will be considered using the mental capacity act.

Presence in the community

Individual service users will not be segregated or denied opportunities, except where the law deems otherwise. The aim is to ensure that people are present in, or returned to, the mainstream of community life. Service users will be actively supported to engage in social activities, hobbies and leisure interests according to their individual preferences, as far as is practicable. This will be supported by each service user having an individualised weekly plan that will provide equitable opportunities for community presence.

Racial, Gender, Age, Cultural and religious sensitivity

QRC will respond with respect and sensitivity to the particular needs of individual service users as they relate to race, gender, sexuality, age, culture or spiritual needs. Participation in local community facilities for preferred activities, such as attendance at religious services, will be supported.

Rights and Respect

QRC will ensure anti-discrimination practice and actively encourage and promote service user acceptance as valued individuals in society according to their human rights, respect and dignity.

Communication

QRC will ensure that communication, in whatever form, will be clear and understandable. The service will undertake to consult service users and its services and respond accordingly to express views/requests.

Confidentiality

Information relating to individuals will remain confidential and only disclosed where legal or professional requirements direct.

Relationships

Service users will be actively encouraged to maintain existing relationships that are important to them, and to develop new relationships.

Philosophy

The service user or advocate, has the fundamental right to challenge all aspects of service provision, and that it is a duty of the service to adapt and modify itself to the changing needs and wishes of the consumers, except where the law, or issues of safety, deem otherwise.

The service places great emphasis on service users being accorded respect and dignity as is their right. To this end, service users will receive constant encouragement, support and guidance to become increasingly independent and to exercise, wherever possible, personal choice over their own environment. This will include accessing and being registered with, local primary care provision e.g. GP, dentist, chiropodist etc. where appropriate, the service users will also have access to support through the local community team.

Service users will be actively supported by staff to engage in social activities, hobbies and leisure interests. Ordinary community facilities will be accessed and opportunities provided to develop and maintain social contacts. A 'Weekly Planner' will be established, for each service user that allocates specific leisure time and access to preferred activities. A record will be made of these interactions and of responses to offered opportunities.

Except where the law deems otherwise, each individual will be presented with assessed and appropriate levels of risk taking. Essential to this is the reinforcement of self-esteem and confidence by the support of the staff team and will be realised by-

- Taking assessed risks and making mistakes
- Making decisions and exercising choice
- Being treated with respect and dignity
- Developing personal sexuality
- Having the rights to privacy and personal space
- Forming relationships
- Improving social/life skills

Care provision

Care plans are agreed with the Service user, Key worker and Manager. QRC does not provide nursing care. Care is provided through our well-trained Support workers and by liaising with external professionals to source additional services or equipment when required.

Assessment - Prior to commencement of our care services the Registered Manager will meet with the service user to discuss and agree the range of services offered, the care plan arrangements and the date when this will commence.

Before service is provided a report from the service user's current G.P. will be requested in order that the Manager can establish past medical history and medication being prescribed.

Further medical reports may need to be obtained with permission of the service user. (The above procedure is always followed even in emergency cases.)

Individual Care Plan - This will be agreed with the service user and details what level of support is required and how the service user wishes this support to be delivered. This will be formally reviewed with the service user and/or their representatives after one month and thereafter six monthly or as care needs change.

Planning of care

The house leader will lead any required specialist support/care input. Service users will be registered with local GP and have access to nursing input via the primary care services. Long-term nursing needs will be assessed and provided by primary care services, however the staff team where required will be trained and undertake competency based assessments, to meet the needs of individuals with additional health needs. Identified health care needs will be agreed via the primary health i.e. GP, District and consultants. Additional therapeutic intervention will be accessed according to need, via written referral to the community team. This may include psychology, speech and language therapy, Physiotherapy, Occupational therapy and Complementary therapies. Therapists are supervised by their head of profession and are subject to the policies of their professional bodies. Service users will have a copy of their agreed treatment plan within their PCP

Health protection and promotion will be the responsibility of the registered GP with appropriate input from the staff team.

All service users will have a risk assessment and management plan, based on multi- professional input that allows assessed risk taking as well as formulating measures to ensure protection from harm. The care of all service users will be under constant review. However, the person centred plan of care will be formally reviewed at least every six months.

All care staff will demonstrate a positive commitment to including service users, families and advocates, wherever possible, in the decision-making processes relating to the individual related issues i.e. service user surveys/audits and service users will be consulted about operational issues by using the developing service user questionnaire.

Nature of the personal care services provided.

QRC support workers are trained, supervised and supported to provide quality personal care services to service user's with a learning disability:-

- Each service user is valued and has the right to control their own lives.
- Each service user has control over how they live their life, make their own decisions and freely express their wishes and preferences.
- All service users have equal rights and are entitled to protection against any form of discrimination.

Service users may be given support with the following:

Bathing,

Dressing and undressing

Mobility and transfers

Feeding

Continence care

Administration of prescribed medicine both orally and topically

Reminders/verbal prompts

Shopping

Cleaning

From time to time support workers may be asked to undertake some tasks which may be considered to be specialist. These tasks may be undertaken following appropriate risk assessments and only after specific training. The support worker will be trained in the procedure before undertaking the task with the person with care needs. The trainer will have a relevant qualification e.g. Occupational Therapist, Speech Therapist, Physiotherapist or District Nurse and will sign a form to indicate the Support worker's competence. Such tasks may include assistance with eye or ear drops, changing of catheter bags.

Support workers WILL NOT undertake tasks that require the skills and expertise of clinical professionals. Such tasks include, but are not limited to:

- Toe nail cutting
- Ear syringing
- Removing or replacing urinary catheters
- Bowel evacuations, use of suppositories, enemas or pessaries
- Bladder wash outs
- Injections – involving assembling syringes, administering intravenously, controlled drugs
- Filling of oxygen cylinders
- Tracheotomy care – changing tubes

QRC does not provide nursing care.

Medication

All medication will be prescribed by the GP and dispensed by the GP or local pharmacy service. Where a service user is unable to self-medicate, staff will support them. A standard medication-recording sheet will be used and monitored by the team leader, local pharmacist and the GP.

All medications will be stored in a secure place, as per QRC's medication policy. Details of medications, and their possible side effects, will be given to the service user in a way that is appropriate to help inform their understanding. Individuals' rights to refuse medication will be recognised and assessed under the mental capacity act accordingly.

Physical intervention

Where physical intervention is required, the service is committed to using the least restrictive means possible to address the management issues relating to challenging behaviour. Psychological and behavioural interventions, in conjunction with such techniques as distraction, developing self-management skills etc. will be utilised. Physical intervention, other than bodily contact during support with daily activities, will only be used where a service user poses a risk of harm to themselves or others, where challenging behaviour presented may seriously inhibit an individual's ability to participate in a community activity or in a dangerous emergency situation. Where a need to use

physical intervention has been identified, the service user will have an individual behaviour support plan. All staff will be trained in physical intervention and will receive regular training and monitoring from a licensed instructor. Non-substance staff will receive an initial induction that will enable them to assist in an intervention if required.

All staff will adhere to QRC policies and protocols at all times.

Safety

Adult protection

QRC is committed to the protection of vulnerable adults from abuse. East Sussex multi-agency policy, protocols and procedures, agreed by social services, health authorities, police and other agencies, have been formally adopted by QRC.

Policies & Procedures

The policies and procedures provide information on most areas of QRC activities and explain what is expected of its employees. All staff must be aware of the existence and location of policy files and will adhere to regulations set down by QRC at all times.

Confidentiality

All staff will adhere to the policy on confidentiality and the requirements under Data Protection Act. The service will provide an area for safe and secure storage of service user documentation.

Finances

Under normal circumstances all decisions relating to service user monies will be made in conjunction with the individual and the appointee. Entitlements or allowances will be paid directly into individual service user's personal bank account and any gifts of cash will be given to the management team for deposit into the service user's account. Service users will be responsible for purchasing their own clothing and personal effects with monies from their individual account. All expenditure and receipts will be recorded on the service user's monies system.

At all times the financial instructions of QRC must be adhered to. These are designed to:

- Provide adequate protection to the interests of the service user
- Provide sufficient internal controls
- Provide adequate information for finance and audit purposes
- Ensure that staff are safe-guarded against malicious accusations of negligence or malpractice.

Organisational Structure

QRC provides 24 hour care by a dedicated, experience staff team.

Responsible Individual

The Responsible Individual is **Ian Bates**, who is the Managing Director of QRC and has extensive past knowledge in management of large concerns.

QRC operates under the guidance of the Care Standards Act 2000.

Registered Manager

The Registered Manager is **Heidi Stephens** who has worked in social care for over 10 years, her experiences include; Elderly Care, Mental Health and Learning and Physical Disabilities. Heidi has achieved NVQ 2, 3 & 4 in Health and Social Care, NEBOSH general cert and A1 assessor's qualification, as well as holding qualifications to teach a variety of subjects within the care sector.

Deputy Manager

The Deputy Manager is **Romayne Fillery** who has worked in social care for over 15 years, her experiences include; Elderly Care, Mental Health and Learning and Physical Disabilities. Romayne has achieved NVQ 2 and 3 in Health and Social Care, as well as holding qualifications to teach a variety of subjects within the care sector.

Care Coordinator

The Care Coordinator is **Aimee Reed** who has worked in social care for over 4 years, her experiences include; Acquired Brain Injury, Mental Health and Learning and Physical Disabilities. Aimee has achieved NVQ 2 and 3 Health and Social Care, as well as holding qualifications to teach a variety of subjects within the care sector.

Team Leaders

QRC have specified Team Leaders who have over 2 years experience in Health and Social Care. Each Team Leader has achieved NVQ 2, 3 or 4 in Health and Social Care, as well as holding the abilities to guide and assess others in a variety of subjects within the care sector.

Key workers

Assisting with personal care is a very private activity and we recognise the importance of providing care on a consistent basis by a known support worker. Friendship, trust and understanding can be built between the service user, family, friends and support worker. Key workers will learn the routines, customs and values of each of the service users that they visit on a regular basis, familiarising themselves with their service user's background and interests in order to ensure that they are aware of activities and outings occurring on a daily basis.

Range and qualifications of support workers

The staffing team - Our team work with each individual depending on their needs and level of dependency.

Induction training – QRC's support staff possess a range of qualifications and experience in the care sector.

All staff undergoes a 12 week induction programme; this programme is known as The Common Induction standards (CIS). The CIS are supported by comprehensive training seminars held both in house and by outside agencies.

Supervision - After the induction and probationary period all staff will undertake regular supervision sessions with their direct line manager, during which further training needs will be identified and organised.

Further training – Regular in house training and external training is organised on a continual basis to ensure our staff continue to develop their knowledge.

QRC encourages and assists staff to obtain formal qualifications and all our staff are given the opportunity to gain a qualification in NVQ Level 2 or 3 in Social Care. This is a national qualification in care and the vast majority of staff employed by QRC have these qualifications.

Appraisals - All staff have annual appraisals of their overall standard of performance, training and development needs. Supervision sessions are undertaken by all staff six times a year.

Terms and Conditions

Contracts - A contract for care services is issued to all service users engaging with QRC. Any suggested change in care plan can be initiated by the service user, their family or the Registered Manager and will always be by agreement reached at a meeting facilitated for this purpose. ***Sample contracts are available upon request.***

Notice - Service users are requested to give four weeks notice if they wish to terminate the care service provided. QRC may terminate the service provided by one weeks' notice if it is felt that QRC is not a suitable provider of care for the service user, if the service user's behaviour is anti-social or if the service user needs care not able to be provided by QRC (i.e. nursing).

During the service, should a service users behaviour become a risk to others, a review will be completed within 5 days. Should the review indicate a continued risk to others, termination of the contract will require no notice period but QRC will endeavour to find alternative service providers suitable to each individuals needs.

Quality Assurance

Monitoring - Ensuring that the services being provided are individualised and of high quality, is important to QRC and its team members.

Our approach to care planning, designed to provide care according to need, is monitored constantly by feedback from service users, their representatives and support workers.

Service user's needs may change and care provided can be reduced or supplemented at any time with consultation with Social Services and/or the funding authority.

Meetings to review care are held regularly or at any time as the need arises. Any meeting to discuss care needs will usually be attended by

the service user, their representative (if requested), the Registered Manager, and the service user's key worker.

Surveys - All service users and visitors are asked to complete satisfaction surveys. This is an anonymous survey, the results of which are compiled and issued in the form of a report.

Audits – QRC is audited and evaluated against its own standards and also the National Minimum Standards as set by the Commission for Social Care Inspection.

Complaints procedure

All service users have a right to a high standard of care. Occasionally, the service user, their relatives or advocate may feel this has not happened and have the right to complain and have that complaint fully and promptly investigated. A leaflet is available to all service users, relatives or advocates that explains how to complain and to whom the complaint should be addressed. The leaflet contains details of who can be asked to help a person wishing to make a formal complaint.

If the service user, their relative or advocate is unhappy with the standard of care and support they may also contact the locality regulation inspector at:

The Care Quality Commission –

Southeast Region
City Gate
Gallow Gate
Newcastle upon Tyne
NE1 4PA

Or by telephone to:

03000616161

Fax:

03000616171

Compliments – QRC welcomes positive feedback and will use such feedback to reinforce good practice.

Suggestions - QRC welcomes any suggestions to improve the service and Service user forums are held monthly for this purpose.