

STATEMENT OF PURPOSE



**ARUNDEL HOUSE
34 HAROLD ROAD, FRINTON ON SEA, ESSEX
C013 9BE**

THE REGISTERED PROVIDER

The Registered Provider is:

Aitch Care Homes (London) Limited
Unit 2 Buckingham Court
Rectory Lane
Loughton
Essex
IG10 2QZ

EXPERIENCE AND QUALIFICATIONS:

The Aitch Care Homes Group is a high quality professional provider of community care homes for people with a learning disability who may have additional mental health, social or emotional needs and may present behaviours that challenge.

The Aitch Care Homes Group has been operating since November 2001 and has achieved some excellent results in terms of the standard of care provided and acclaim for its achievements in the development of residents with complex needs.

The company is committed to not only providing high levels of care and excellent accommodation, but also in developing a strong management team to maintain and develop these objectives.

The management team has a wealth of experience gained from the care industry, the property development industry and financial accountancy.

THE SUPPORT STAFF

THE HOMES' WEEKLY ESTABLISHMENT FIGURES:

1 Home Manager 39 hours
1 Deputy Manager 39 hours
1 Assistant Manager 39 hours
4 Senior Support Workers 156 hours
13 Support Workers 491 hours

Total: 764 hours per week

This equates to approximately 5 staff members on every day shift (plus the manager) and 2 waking night staff.

In addition to the above, the home has a 'bank' of support workers.

STAFFING HOURS OF THE HOME:

The home is staffed between the hours of 7.00 am and 9.30 pm by the day staff and from 9.30 pm to 7.30 am by the waking night staff.

The home is also supported by a 24 hour 'On-Call' facility by the Home Managers and Senior Management.

QUALIFICATIONS OF THE CARE STAFF:

Over fifty percent of staff at Arundel House is qualified to, NVQ 2, NVQ 3, or NVQ 4 standard

All staff have completed or will complete shortly after commencing employment the mandatory qualifications of Basic First Aid, Basic Health & Safety, Basic Food Hygiene, Manual Handling and Fire training.

They will also take further courses relevant to the needs of the home, such as specialist autism training and epilepsy training.
All care staff will be encouraged to work their way through the NVQ programmes.

THE REGISTERED MANAGER

The Registered Manager for Arundel House is:

Mr. Steve Chawner

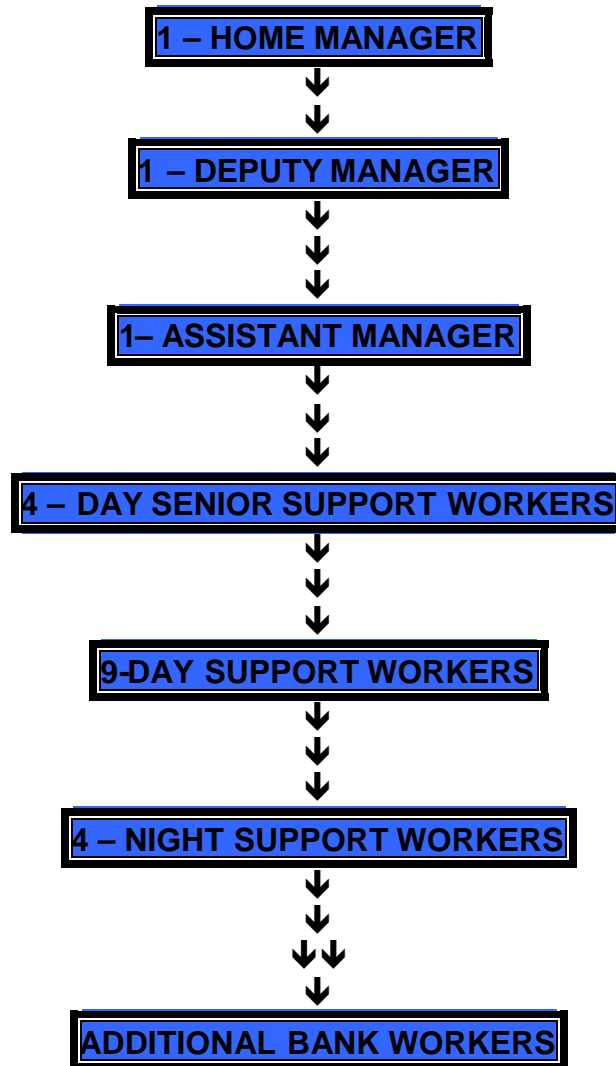
QUALIFICATIONS:

Steve has the NVQ 4 Registered Manager's Award, an Advanced Certificate Care in Management Qualification, the certificate in Professional Development along with full D32/D33 + A1 conversion NVQ Assessors award.

BACKGROUND HISTORY:

Steve has over 28 years of extensive management experience within the field of learning disability care gained in the London and Essex areas, including running and overseeing learning disability care services for local authorities.

ORGANISATIONAL STRUCTURE OF ARUNDEL HOUSE



THE RESIDENTS

Arundel House is home to ten residents from the age of 18, who are registered as having a learning disability. Their needs are also complex and can present a challenge to the service. Some of the residents may have autism and/or epilepsy and have specific needs associated to this.

There will be male and female residents living in the home.

The home does not provide nursing care to individual residents.

However, some of the residents do require support with their personal care and mobility.

The aim for Arundel House is to support individuals to develop their daily living skills and independence and to have a fully inclusive lifestyle within the local community.

The development philosophy for residents at Arundel House is that we do not see it as being a 'home for life'; the main goal will be for some to move to a supported living environment in the future, if they so wish. However, we recognize that this will not be the case for some people.

THE ADMISSION CRITERIA



1. Interested parties would be invited to view the home
2. Following these visits, should the home be identified as suitable, the Client Placement Manager and the Home Manager would then visit the prospective Resident and a full assessment would be carried out to identify whether the home could meet the persons assessed needs.
3. The Home Manager would invite the prospective resident to visit the home and meet the other residents and staff. If the resident likes the home, they would be offered further visits and a possible over-night stay before a decision has been made.
4. During the interim period, key professionals/family members would meet to share any information, which would facilitate a smooth transition for the resident.
5. The relevant authorities would be required to confirm acceptance of the placement and their financial responsibility.
6. The organisation would provide the resident with a written, costed contract, and terms and conditions.
7. A minimum 'settling-in' period of three months would be offered for long-term placements, followed by a review with the resident and relevant parties.
8. On admission, the Community Learning Disabilities Team would be informed and an agreement of continuing care made.
9. The resident will be registered with a local G.P. and other care professionals.
10. There will be **no** emergency admissions without a full assessment having been received from the Care Manager and our own been undertaken by the Home Manager.
11. Respite will not be provided, however, there may be times when a specific assessment period be offered.

SOCIAL ACTIVITIES, HOBBIES AND LEISURE

At Arundel House we feel that social activities play an important part in home life, and are dependent on each individual's likes, dislikes and aspirations. With this in mind, we work with each person to find out what social activities they like and then work towards putting these in place.

We draw up weekly activity schedules for each resident. From this the staffing roster is adjusted around to meet the needs, ensuring that sufficient staff are on duty to carry out the activity.

We are very aware of the need for structured day activities, especially for people diagnosed with Autistic Spectrum Disorder.

We encourage residents to maintain contact with family and friends. The Key-worker will also contact the family once a month; this will only be done if in agreement with resident.

Some of the residents go on regular home visits and we can arrange visits to see their friends. Some residents enjoy socialising with their own peer group and therefore, we ensure that they have access to various social clubs. It is also important that horizons are broadened and new friendships forged within their local community.

RESIDENT INVOLVEMENT/PARTICIPATION

The aims for Arundel House is for residents to be given as much choice as possible and are actively involved in the home's decision making, however large or small their participation may be.

We acknowledge that this may be difficult at times, as some of the residents have non-verbal communication. Therefore we develop formats appropriate to the person's needs to support them to make informed choices.

Makaton is used along with pictorial formats and we enlist the help of the Speech & Language Therapists and other care professionals to assess the needs, so that we can ensure the resident is fully included and can communicate in a format, which suits them. During 2008 we hope to become an Inclusive Communication Establishment (ICE)

Residents are actively encouraged to participate in monthly residents meetings and will be asked to provide representation at staff and managers meetings.

All residents have their own bank accounts and will be encouraged to manage their own financial affairs as much as possible.

If decisions have to be made on the resident's behalf, this will be recorded in their Care Plans along with the reason why the decision had to be made and done in accordance with the Mental Capacity act 2005.

We can access on behalf of the resident an Independent Advocacy Services if they so wish. Advocates work with the resident on a 1-1 basis to get to know them in order to effectively represent their needs.

FIRE PRECAUTIONS AND EMERGENCY PROCEDURES

The Home Manager has ultimate responsibility to ensure that all fire precautions and emergency procedures are carried out within the home.

The home designates Health & Safety Representatives who are responsible for carrying out the weekly/monthly fire checks, which include fire alarm and emergency lighting tests. Fire evacuations are carried out every three months and a record maintained in the Health & Safety folder.

The home has an annual maintenance contract for the servicing of fire extinguishers, fire blankets, alarm systems, emergency lighting and automatic fire doors,

Risk Assessments are in place and are assessed yearly or sooner if necessary.

All staff must be involved in a fire evacuation at least once annually. All staff receives annual fire training, which is recorded in their training file.

Fire action signs are on display throughout the home.

All employees have a responsibility to report immediately any concerns around fire or health & safety.

As some of the residents are not able to communicate verbally and do not understand the written word, the home has produced a pictorial fire procedure.

MEETING THE RESIDENTS SPIRITUAL NEEDS

Residents at Arundel House are given every opportunity to follow their religious beliefs. Through consultation with the resident and the family we will do our utmost to facilitate it.

Cultural needs in areas such as diet, dress and customs will be respected. We acknowledge that not all residents want to attend religious services and this will be down to individual choice.

ARRANGEMENTS MADE FOR CONTACT BETWEEN RESIDENTS AND THEIR RELATIVES AND FRIENDS

Staff at Arundel House believe that it is important for residents to maintain contact with their family and friends, but further acknowledge, that it may be their choice not to do so. We support any choice they make on this matter.

Whatever their choice, staff at Arundel House will do their utmost to ensure that the residents maintain contact if they wish to do so and that there is always a welcoming atmosphere when friends and relatives visit.

The home has a separate room where guests can be entertained in private. Residents can entertain guests in their own bedroom if they wish.

Residents have full access to a telephone.

We acknowledge that residents may have friends in other areas – we aim to help them to maintain contact with them.

*The home has two fully air-conditioned vehicles including a people carrier and arrangements can be made to drop off residents with their family or friends and pick up later. One vehicle is specifically geared to accommodate wheelchairs.

*We can also pick up family and friends and bring them to the home if necessary.

*Depending on staffing and driver availability.

THE COMPLAINTS PROCEDURE

ACH Care Homes (London) Limited, will endeavour to provide the highest quality service under our Quality Assurance Procedure and to ensure the smooth running of the home. However, we recognize that, on occasions, things do go wrong, and if they do, we are committed to putting them right.

The Management of ACH will deal with any complaint professionally and compassionately, under the following complaint procedure.

We recognize the importance of the right for anyone to give voice to any concerns that they may have regarding the care or related aspects to Arundel House. To avoid conflicts of interest for the staff we will ensure that all residents have access to an independent advocate.

Information of the whereabouts of the Complaint Book is available to visitors in the Visitors Book. Staff will be advised of this procedure on induction and residents informed of the procedure at the time of moving in.

All residents' will have a copy of the complaints Procedure. We have adapted the procedure into a format that is accessible to residents', by using signs and symbols. Further adaptations will be made depending on the level of understanding.

All complaints, whether they are communicated verbally or in writing will be dealt with via the following procedure:

1. Any member of staff taking a complaint must take the details down in writing, if verbally communicated.
2. The complaint will be passed immediately to the relevant Manager.
3. The Manager will consider the complaint and give the complainant and the appropriate parties formal, verbal acknowledgement within 24 hours of the complaint being lodged. This will include an indication of the intended actions within the investigation and a formal written confirmation sent within 7 working days.
4. Actions will be discussed between the agency and any other parties involved and the outcome will be decided upon on a joint basis.
5. A written record will be kept of the complaint at all stages.
6. Should the complaint be of a nature which is more complex, and the

Manager cannot come to an agreeable outcome with the involved parties, the Managing Director of ACH will consider the complaint and work with the parties to come to an agreement.

Investigating a complaint;

All complaints will be acknowledged by letter, within 7 working days. The letter will clearly detail the name of the member of staff investigating the complaint. The investigating member of staff may contact the complainant for further information, and will carry out initial enquiries. If the problem or difficulty can be resolved in a straightforward way, the member of staff will take whatever steps are necessary, and write to inform the complainant what will be done. The complainant will receive a reply within 28 days of the complaint being received. The reply will detail the result of the investigation and what action will be taken.

Investigating a complex complaint;

If the complaint is complicated, it may take longer than 28 days to investigate. In such cases, a letter will be sent to the complainant explaining that the investigation will be completed within 3 months, unless the time limit is extended with all parties' agreement.

The investigating member of staff will conduct a full investigation. This may include more detailed discussions with the complainant and other people. There may be formal meetings, which will be properly conducted and recorded. A person of their choice to help and support them at this stage of the procedure may accompany them if they wish.

The investigating member of staff will write a report when the investigation is completed. The complainant will receive a reply detailing the conclusions and recommendations of the investigator.

Appeal

Should the complainant not feel that satisfactory resolution has been achieved through informal measure they may appeal using the company's grievance procedure.

Monitoring

All complaints will be retained in the complaints file. Formal complaints of harassment will be monitored to identify any patterns to ensure that no victimization occurs.

On induction staff will be trained on dealing with complaints i.e. harassment, the Whistleblowers' Charter, equal opportunities and documentation of complaints. It is the responsibility of the staff to acquaint themselves with and abide by all and each of the issues current for the time being of the company's dealing with complaint procedure.

All persons have the right to make a complaint to the Inspection Officer:

Commission for Social Care Inspection (CSCI)
Eastern Region Contact Team
CPC1
Capital Park
Fulbourn
Cambridge
CB21 5XE

Tel: 01223 771300

Fax: 01223 771397

E-mail: enquires.eastern@csci.gsi.gov.uk

On occasions of a Complaint of Harassment or in conjunction with the Whistleblowers' Charter, we may need to implement our disciplinary procedure.

Grievances are considered as seriously as complaints and both residents and Staff are encouraged by the manager of the home to voice any such grievance.

ARRANGEMENTS MADE FOR RESPECTING THE PRIVACY AND DIGNITY OF RESIDENTS

It is not easy sharing a home with other residents, so it is important therefore, that staff and residents are aware and respect each other's need to privacy and dignity.

At times, residents enjoy the peace and solitude of their own bedrooms and both the staff and other residents should respect this right to privacy.

Staff therefore, **should not enter** any resident's bedroom without knocking first and being invited in. This also should apply to other residents, and they are reminded that they should not enter any other residents' bedroom without permission. **Staff also need to gain permission to show anyone into a residents bedroom for maintenance purposes.**

Each resident has a key to his or her own bedroom, although not every resident takes advantage of this facility. They also have a locked facility within their bedroom in which to keep their valuables. Any infringement of this right would be discussed with the resident and family and would be documented in their Care Plan.

Arundel House has one communal lounge area and one dining room downstairs. It also has a separate room downstairs where residents can entertain guests in private.

The dignity of the residents is of utmost importance and must be maintained at all times, especially with residents that require support with their personal care.

SPECIFIC OR ALTERNATIVE THERAPIES USED IN THE HOME

We provide in-house sensory sessions and a variety of art & craft sessions.

If the resident so wishes alternative therapies such as Aroma, reflexology, massage or beauty therapy will be accessed locally in Frinton.

REVIEW OF RESIDENTS SUPPORT PLANS

Review of all residents support plans is held in consultation with the resident's family/representatives/advocates at least annually.

Should a resident wish to review their plan more frequently than this, then an arrangement can be made for them to do so.

Although support plan review meetings would generally be multi-disciplinary with relatives, advocates and Social Service representatives being invited, the final decision on who is actually invited would be with the resident themselves.

It is hoped that support plans at Arundel House will be produced in both written and pictorial format, according to each individual's needs. Each plan will be person centred and will be drawn up with the resident, with assistance from staff as and when required.

If for any reason the support plan needs to be revised, this would be in consultation with the resident and their advocate.

THE ACCOMMODATION PROVIDED

Arundel House is adapted for the purpose of being a Registered Care Home. The downstairs accommodation consists of a hallway, office, lounge, laundry, dining room, visitor's room, kitchen, one lavatory, one assisted bathroom and three bedrooms (one with en-suite bathroom, two with en-suite showers. The upstairs accommodation consists of seven bedrooms with fully en suite bathrooms.

The communal room sizes are as follows (measured in square metres):

Lounge – 27.5
Dining Room – 17.4
Visitors Room – 11.3

The bedroom sizes are as follows (measured in square metres):

Bedroom 1 – 12.2
Bedroom 2 – 12.2
Bedroom 3 – 12.2
Bedroom 4 – 12.2
Bedroom 5 – 12
Bedroom 6 – 12
Bedroom 7 – 14.8
Bedroom 8 – 15
Bedroom 9 – 15
Bedroom 10 – 17.5

External doors are operated by a key fob system for security reasons. Residents are issued with these where appropriate.

Each bedroom has a chest of drawers with a lockable drawer facility in which the resident can keep any valuable items. A key is issued for this facility and a key to the bedroom door.