

# STOCKS HALL CARE HOMES LTD. ORMSKIRK

76A Nursery Avenue  
Ormskirk  
Lancashire  
L39 2DZ

## SERVICE USER GUIDE

Reviewed November 2006

The Registered Provider is :  
 Stocks Hall Care Homes Ltd  
 50c Whitemoss Road  
 Skelmersdale

Lancashire WN8 8BL  
 Telephone Number is: 01695 556996

The Responsible Person is **Mrs Sue Lace**, company Director, who has 17 years experience in the care sector.

The Registered Manager is **Mrs Ann Williams**, who can be contacted at the Home's address. Mrs Williams has worked for Stocks Hall Care Home's Ltd for 12 years, and as the home's manager for over six years. Mrs Williams has gained the NVQ level 4 in Care Management and also the Care Managers Award.

**Staff employed at the home**

Title and qualifications	Number employed at the home	No. of years experience
Deputy Manager NVQ 4	1	11
Personal Assistant/Administrator	1	6
Supervisor with NVQ 2	3	3-5
Supervisors NVQ 3	4	4-7
Supervisor	1	3
Care Assistants NVQ 2	7	5-6
Care assistants NVQ 3	3	4-10
Care Assistants	12	1-7
Housekeeper	1	2-3
Domestics	4	2-7
Chef with City & Guilds Qualification	2	3-16
Kitchen Assistants	3	2-6
Handyman	1	5
Activities Co-Coordinator	1	3

**STOCKS HALL RESIDENTIAL HOME, ORMSKIRK**

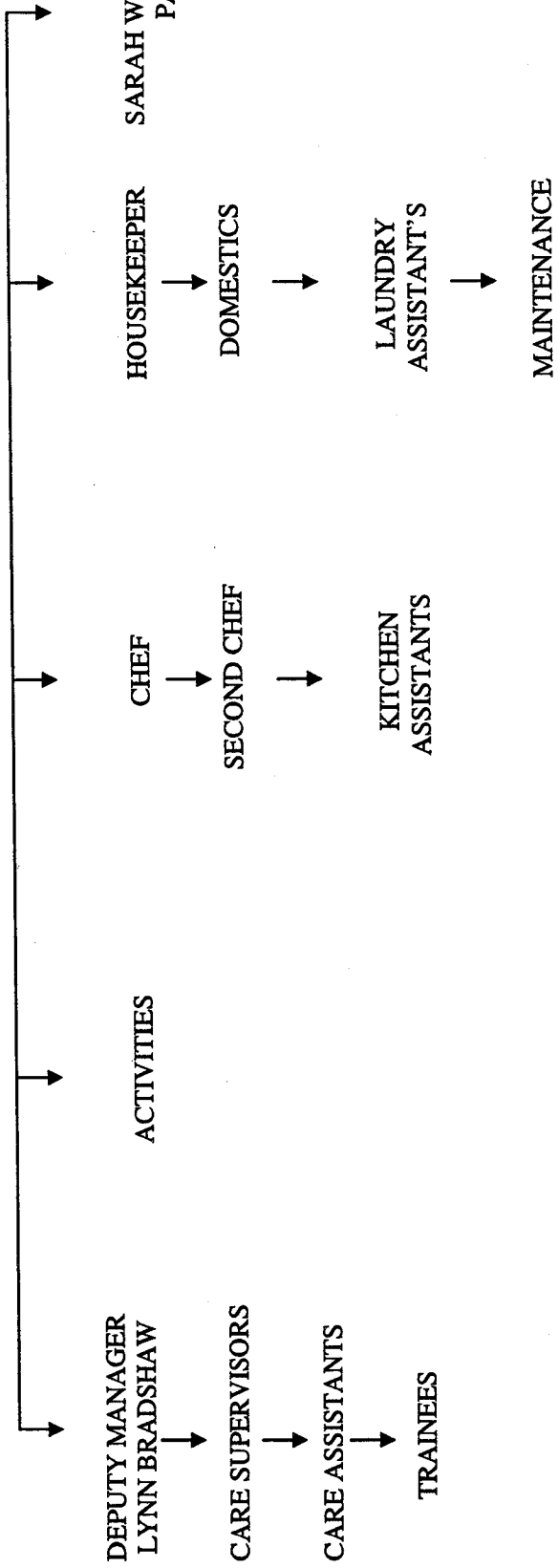
**STOCKS HALL CARE HOMES LTD**

**RESIDENTIAL HOME- ORMSKIRK**

DIRECTOR- SUE LACE



MANAGER- MRS. ANN WILLIAMS



## **Philosophy of Care Stocks Hall Care Homes**

- To ensure and promote maximum independence, allowing people to achieve their full potential.
- To provide people with accommodation that meets criteria of their own homes as closely as possible.
- To build respect between carers and people receiving care.
- To realise the complete well being of each individual.
- To encourage all levels of relationships within the home and local community.
- To ensure family and friends feel at home when visiting and that they are not intruding.

## **STOCKS HALL RESIDENTIAL HOME, ORMSKIRK**

Stocks Hall Residential Home is a care home for people over the age of 65 with varying care needs: this includes a DE (E) unit, Residential care and Rehabilitation facilities.

The home is split into three units, two of which offer specialised care.

### **DE (E) UNIT**

On the first floor is the DE (E) unit, which specialises in caring for older people with some confusion, for example dementia. This unit comprises of 27 beds, including 14 with en-suite facilities. The unit and garden are secured for the safety of the service users.

The home has it's own activities co-ordinator, who with other members of staff will be responsible for various activities on the unit. These will include reminiscence therapy and the use of the snoozelem room at our home in Skelmersdale. They will also have use of the company Mini Bus to take them on trips to local beauty spots. The secure gardens include the use of a patio area, with access to the homes Aviary.

There are times when a Service User has nobody to represent them and help them voice their needs, it is therefore necessary to involve the service of an advocate. Advocacy services are available from the Lancashire Advocacy Service and Age Concern. The service user themselves can request their service or a member of staff may ask for help on their behalf. Staff will only become involved with the permission of the service user.

### **REHABILITATION UNIT**

On the ground floor we have a rehabilitation unit which consists of 8 intermediate beds, where Service Users can stay from 2 to 6 weeks with access to physiotherapy and occupational therapy, they will also go on home visits, and will be assessed daily to ensure their safe return to their own home. This is a specialist unit where Service Users are helped to optimise their independence. These service users also have access to all other facilities within the home.

## **OLDER PERSONS UNIT**

On the ground floor we also provide individual personal care on a daily basis for the older population over the age of 65.

Individual personal care means assistance with everyday tasks such as washing, dressing, bathing, toileting, shaving, grooming of hair, care of teeth or dentures & care of nails. Giving drinks and meals, bed making and general tidying of bedrooms.

The activities co-ordinator organises various activities including arts and crafts, bingo, cards and dominoes and indoor bowls. There are a number of social clubs in the area, which are popular with our Service Users, and the abundance of garden centres and theatres in close proximity make for some enjoyable trips for the Service Users.

## **HEALTH CARE NEEDS**

The health care needs of the service users are met by on-going assessment and care planning. Service Users and their families are encouraged to be fully involved with the planning and reviewing of care needs. The care plans are drawn up as soon as after admission as possible and are reviewed at least once a month. Full use of community resources is essential to maintain the service users health at optimum levels of independence.

If nursing care is required the District Nurses attend the home as required for the individuals needs. Also there is regular input from the Community Psychiatric Nurses for those Service Users requiring this specialist care.

All service users are registered with a General Practitioner of their choice, the majority of local practises will visit the home.

Your existing dentist will meet the dental health needs of the service user. However if they are unable to visit the surgery, one of the local dental practices will visit the service user within the home.

Optical needs are met by an optician who attends the home on a regular basis.

A chiropody assessment will be carried out by the NHS community chiropody service following admission to the home. If there is an assessed on-going chiropody need they will continue to provide a service. There is also a visiting private chiropodist.

Also available from the links of the local hospital are dietetic and audiology advice and help.

Service Users are accompanied to outpatient clinics by our staff if this is required..

# **Stocks Hall Residential Home - Ormskirk**

## **Service User Guide**

### **About the Home**

The information in this pack is aimed at answering some of the questions that you may be asking, however it is strongly recommended that you visit the Home to enable you to see the facilities available, talk to the staff and possibly some of the residents, to help you decide if the character and atmosphere of the Home are suitable.

The company has three other homes and a Nursing and Care Agency. They have over fifteen years experience in the care business.

Stocks Hall Residential Home is a care home for people over the age of 65 with varying care needs; this includes a DE (E) unit, Residential care and Rehabilitation facilities.

We have 45 rooms, 29 with en-suite facilities.

The home is split into three units, two of which offer specialised care.

### **Service Users**

The Home cares for the needs of older people over the age of 65 years requiring residential care. We are able to offer specialist, individualised care for residents with different problems. These include general residential care, people with dementia type problems and also rehabilitation care.

### **Fee Structure**

The fees at the Home start at £300.00 for a room without en-suite facilities. Each resident will be individually assessed as to his or her needs and the fees will reflect the level of care required.

### **Staffing**

The staff at the home have been carefully recruited and between them they have many years experience and knowledge in caring for elderly people. We have approximately a third of the staff who have a minimum NVQ 2 qualification and are working towards over 50% having their NVQ qualification by the year 2005. The team is made up of the Manager, her deputy and each shift is run by a Supervisor.

## **Training**

All staff are given ongoing training and development opportunities. There is an induction programme for all staff and an appraisal system which gives the staff the opportunity to discuss personal development.

We have our own in-house training officer who co-ordinates our training activities. Our training activities are provided both in-house and at external locations. We also have several N.V.Q assessors on our staff team.

## **Statement of Aims and Objectives**

### **Aims:**

At Stocks Hall Residential Home, we aim to create a comfortable and stimulating environment yet in a secure and safe atmosphere where residents can enjoy a good quality of life and be as independent as possible. Where the need for care requires the staff to assist residents, the aim will be to preserve their dignity and privacy at all times.

### **Objectives:**

- Involve and encourage residents in normal living activities and encourage independence.
- Promote and maintain residents self esteem and fulfilment.
- Help residents to retain their rights and maintain contact with past community life.
- Encourage the community into the Home
- Encourage residents to continue hobbies and leisure activities.

Throughout the residents stay their freedom of choice will be honoured and respected at all times.

## **Recreation and Activities**

At Stocks Hall Residential Home we employ an Activities Coordinator. She organises daily and weekly activities including games, movement to music and gardening. She also organises entertainers to come to the Home regularly and various outings through out the year.

## **Company Minibus**

We have the use of the company minibus for all our outings. The minibus has been adapted to take wheelchairs, therefore most of our residents have the opportunity to go out if they wish.

## **Hairdressing**

There is a hairdresser that comes to the Home each week, on a Monday. Hairdressing is not part of the fees. If a resident has their own hairdresser they are welcome to continue to come to the Home.

## **Chiropody**

All residents are entitled to be seen by the NHS chiropodist. Once they have been assessed by the chiropodist the amount of visits required will be determined. This is a free service but they only attend to actual problems. Therefore we also have the services of a private registered chiropodist who visits the Home every 6 weeks.

## **Dentists and opticians**

The Optician from The Outside Clinic visits the Home on a regular basis to attend to the eye care of our residents. Residents wishing to continue to use their own optician and is able to travel can continue to do so and the staff at the home will help to facilitate this.

## **Pets**

Residents at Stocks Hall Residential Home are welcome to keep small pets if desired. Arrangements must be made beforehand with the Manager to ensure that they are suitable and adequate provisions can be made for their care.

## **Residents Meetings**

The Activities coordinator organises regular Resident's meetings where residents and relatives can express their thoughts and wishes regarding the Home, and for an exchange of information. Minutes are made of the meetings and given to all residents. Copies are available from the office.

## **Finance**

The Homes Registered Manager will deal with any queries about fees and will be happy to give advice on completing the income Support forms and attendance forms. She is also happy to act as appointee to collect pension money if this is required. The Home has secure facilities to hold small sums of money that residents can use for their personal use.

Fees increase annually in line with inflation. One months notice will be given of any increases. The fees cover accommodation, meals, laundry, snacks, beverages, entertainment, outings in the minibus

## **Visiting**

The Home has an open visiting policy and welcomes all visitors at any time. Residents are welcome to use any public areas of the Home or their own room to entertain their guests.

## **Smoking**

The Home has a designated smoking areas for the use of residents who wish to smoke. We do not allow smoking in the resident's bedrooms.

## **Fire Procedure**

As part of the Health and Safety procedures in the Home the fire alarms are tested weekly. We also have to practice evacuation of the Home in the event of a fire. We ask for your cooperation during these exercises. Enclosed is the Homes Procedure to follow in the Event of a Fire.

## **General Practitioners**

If a resident is from the Ormskirk, St Helens or Skelmersdale area they will be able to keep their own G.P., if they wish. Those moving to the Home from another area will have to choose a new G.P. If you require any help with this are staff we assist wherever possible.

## **House Keeping**

The Home employs staff that will complete the domestic tasks at the Home. There are also a laundry staff working most days who will attend to the washing and care of resident's garments. Any specialist cleaning required must be at the resident's own arrangement

## **Catering**

The cook provides a varied menu form which residents can choose their meals each day. Copies of this menu are available. All meals can be taken either in one of the dining areas or in a resident's room. Anyone wishing to invite a guest to have a meal with them is welcome to with prior arrangement with the cook.

## **Meal times**

Breakfast	7.45am to 10.00am
Morning Tea/Coffee	10.00am
Lunch	12.30pm – 1.30pm (Main Meal)
Afternoon Refreshments	3.00pm
Tea	4.45pm – 6.00pm (Light Meal)
Evening Refreshments	7.00pm
Supper	9.00pm (Warm milky drinks and a light Snack)

## **Holding of rooms**

Rooms provisionally booked prior to admission will be held for four weeks. Once a resident has been admitted rooms will be held indefinitely whilst a resident is in hospital. Should a resident wish to leave the Home four weeks notice period must be given. The home also reserves the right to serve four weeks notice on a resident whose needs have changed and cannot be meant by the Home any longer.

## **Church Services**

The home organises representatives from various local churches to attend the home and have Services on a regular basis. We also have regular visits from various clergymen on a weekly basis. We would give all assistance for any resident wishing to attend services at their place of worship.

## **Newspapers**

Daily/Weekly papers, magazines etc. can be delivered to the Home for individual residents at an extra cost.

## **Trial Visits**

At the Home we appreciate the difficulty in making the decision to come into residential care. Therefore we can arrange for trial visits to the home for all concerned to get a true feel of the home and the services we provide. These trial visits can vary in length from one day to four weeks. For further details please speak to the Registered Manager.

## **Admission**

Once Stocks Hall Residential Home has been chosen, the manager or deputy manager will complete a full assessment of the prospective resident's needs to ensure that the home can fully cater for these needs.

On admission you will be taken to your room and assisted to unpack and settle in. We will begin to devise a Care Plan with your help that will detail all the care required. This plan will be reviewed on a regular basis, again with your help.

## **Advocacy**

Sometimes a resident has nobody to represent them and help them voice their needs. It is therefore necessary to involve the service of an advocate. Advocacy Services are available from the Lancashire Advocacy Service and Age Concern. The resident themselves can request their services or a member of staff may ask for their help. They will only become involved with the permission of the resident.

Telephone Advocacy West Lancs on 01695 579666

## **Complaints Policy**

A copy of the complaints procedure is enclosed.

**Rehabilitate** <> Clients to be able to cope at home

**Encourage** <> Clients to be able to help themselves

**Help** <> Clients when experiencing difficulties

**Advise** <> Clients who to talk to and seek help from

**Build** <> Confidence when clients are confused and insecure

# **SMART OBJECTIVES**

**SPECIFIC**

**MEASURABLE**

**ACHEIVABLE**

**REALISTIC**

**TIME-BOUND**

# **SIX PRINCIPLES OF CARE:**

**PRIVACY**

**DIGNITY**

**CHOICE**

**RESPECT**

**FULFILLMENT**

**INDEPENDENCE**

# PRIVACY

To respect the privacy of the individuals rooms and relationships, and to guarantee the confidentiality of information the home holds on them. A home maximises its service users privacy in the following ways:

- Setting up a system so that staff do not enter residents own rooms without knocking and waiting for a response.
- Guarenteeing that service users can make telephone calls, carry on conversations and read their own written communications without oversight.
- Arranging that all consultations and discussions on health and other personal matters take place in a private place and that information kept on a service user is treated with as high a degree of confidentiality and respect as possible.
- Ensuring that every service user has a lockable space in his or her own room for especially private possessions.

# DIGNITY

The service users right to dignity involves recognising the value of people by respecting their qualities as individuals and the nature of each persons needs. This right to dignity can be undermined and have little voice in how things are run. A home should take care to safeguard its service users dignity in the following ways:

- Ensure that the service users have appropriate assistance with dressing and maintaining their clothes.
- Offering service users help with hairdressing, manicure and make- up so that they can achieve the sort of physical appearance to which they aspire.
- Providing efficient domestic services for service users rooms and tactful help to service users in keeping their personal possessions in good order.
- At all times treating service users with a respect which enforces their personhood and individuality addressing them in their preferred style, taking note of specific cultural demands, and aiming for relationships between staff and service users which are

# CIVIL RIGHTS

Being in a home can subtly restrict service users rights as citizens by limiting their access. A home should protect its service users civil rights by doing the following:

- Ensuring that service users face no impediment if wishing to exercise their rights to vote in elections.
- Providing service users to use health services in all ways appropriate to their medical, nursing and therapeutic needs.
- Encouraging easily usable facilities for service users and their friends and relatives to complain about any aspects of their care or services with which they are dissatisfied.
- Helping service users to participate as fully and diversely as they wish in carrying out their duties as members of a mutually dependent society through voluntary work, religious observance, involvement in associations and charitable giving.

**CARING IS ABOUT BUILDING  
A SPECIAL RELATIONSHIP  
BETWEEN INDIVIDUALS  
BASED ON MUTUAL TRUST,  
RESPECT AND A SHARED  
UNDERSTANDING OF THE  
NEEDS, CHOICES AND GOALS  
OF THE INDIVIDUAL PERSON  
TO ENABLE THEM TO WORK  
TOGETHER TO MAXIMISE  
POTENTIAL AND IMPROVE  
QUALITY OF LIFE**

## **Telephone and Facsimile Services for Management**

Telephones are located in the following places:

- The managers office
- The supervisors office on the ground floor
- The supervisors office on the first floor
- The rehabilitation unit has a dedicated telephone and fax line

The supervisors office on the ground floor has a fax machine which is available for use by all senior staff and the activities co-ordinator.

## **Telephone Facilities for Service Users – Private Use**

- A pay phone is available for use by service users
- Service Users may choose to have their own telephone or mobile phone. The home can facilitate this, but is not responsible for meeting the cost.
- Service Users may also receive or have e-mails sent from the managers office.



## Contact with Family and Friends Policy and Procedure

### POLICY

It is the company's policy that all Service Users have peer-appropriate personal, family and sexual relationships.

### PROCEDURE

1. The Home Manager and senior staff must support service users in maintaining family ties and friendships inside and outside the Care Home.
2. There is an "Open House" policy in the Homes where there are no restrictions on visiting times. However, depending on the wishes of the Service User and their health some restriction maybe advised. We also have to take the appropriate security measures to ensure the safety of our Service Users is maintained at all times.
3. There is a visitor's book, which we ask all visitors to the home to sign in and out. This must be clearly visible on entry to the home and a pen must be always be available.
4. Family and friends are welcomed, and their involvement encouraged, with the agreement of the Service User.
5. Services Users must be able to choose whom they see and when they see them.
6. Service Users can choose where in the home they would like to receive guests, in their room, in the lounge or a private area etc.
7. Service Users can develop sexual relationships with people of their choice, and information will be provided to enable the service Users to make appropriate decisions.
8. The specific wishes of a Service User must be documented and communicated appropriately in their care files.
9. Where any discussions have taken place with family regarding the care of the Service User these must be documented in the personal care file of that Service User.

Ref: ContactFam.	Board Approval: June 2004	Signed: 
Issue No: 1	Implementation Date: 1 July 04	Review Date: July 06
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## **PROCEDURE IN CASE OF FIRE**

### **GENERAL INSTRUCTIONS TO BE OBSERVED BY THE STAFF**

1. IN THE EVENT OF A FIRE IT IS THE DUTY OF ALL CONCERNED TO PREVENT INJURY OR LOSS OF LIFE.
2. FOR THIS PURPOSE YOU SHOULD MAKE CERTAIN THAT YOU ARE FAMILIAR WITH ALL MEANS OF ESCAPE FROM THE PREMISES AND THE LOCATION OF THE FIRE-FIGHTING EQUIPMENT.
3. THE BUILDING IS DIVIDED INTO AREAS SO THAT THE PEOPLE IN OUR CARE MAY BE EVACUATED TO AN ADJOINING AREA WHERE THEY CAN REMAIN IN SAFETY FOR A TIME; THIS IS THE FIRST STAGE OF THE EVACUATION.
4. THE SECOND STAGE OF THE EVACUATION IS THE MOVEMENT OF THE PEOPLE IN OUR CARE TOWARDS THE EXITS.

### **ACTION IN THE CASE OF FIRE.**

IMMEDIATELY AFTER YOU DISCOVER A FIRE OR ONE IS REPORTED TO YOU, YOU MUST SOUND THE FIRE ALARM.

THE PERSON IN CHARGE OR AUTHORISED DEPUTY IS RESPONSIBLE FOR ENSURING THAT THE FIRE BRIGADE ARE CALLED IMMEDIATELY ON SOUNDING OF THE FIRE ALARM

AS SOON AS THE FIRE ALARM HAS BEEN SOUNDED YOU SHOULD ESCORT THE PEOPLE IN YOUR CARE TO A PLACE OF SAFETY STARTING AT THE POINT OF GREATEST DANGER, AND WHEN INSTRUCTED EVACUATE TO THE ASSEMBLY POINT IN THE CAR PARK WHERE THE ROLL WILL BE CALLED BY THE PERSON IN CHARGE, WHO MUST REPORT TO THE FIRE OFFICER ON HIS ARRIVAL.

DO NOT RUN.

ACT QUIETLY

DO NOT USE THE LIFT

DO NOT STOP TO COLLECT PERSONAL BELONGINGS

DO NOT RE-ENTER THE BUILDING

OBEY ALL INSTRUCTIONS GIVEN BY THE FIRE OFFICER IN CHARGE.

# **RESIDENTS AND VISITORS**

## **In the Event of the Alarm sounding**

In the event of the fire alarm sounding please make your way to the nearest exit. The staff will assist you to move to a safe place.

**DO NOT use the lift**

**DO NOT stop to collect your belongings**

**DO use all emergency exits**

**DO follow instructions from the staff and the fire service.**

# SECURITY

There can be no doubt that a concern for security forms a major element in most service users decision to enter a home but this should not be translated into an attempt to guarantee a totally safe or risk free lifestyle.

- Ensuring that help is readily available for any service user who falls or gets into any other difficulty within the home or its grounds.
- Eliminating from the physical environment unnecessary sources of danger to vulnerable people.
- Carrying out risk assessments in relation to the premises, the equipment used, and the activities of the service users individually and as a group.
- Checking the background of new staff and regularly briefing and training staff to be sure that those undertaking care tasks always behave responsibly, professionally and with compassion and never exploit their positions to abuse service users.
- Providing protection from elements in the environment within and immediately beyond the home, which could be dangerous to service users, and from other people with whom they come into contact who might exploit or abuse them.

## **COMPLAINTS PROCEDURE**

In line with the homes 'Philosophy of Care' it is the right of every service user or member of staff to have any complaint about the service provided at the home duly investigated, and to receive full and prompt reply from the home manager.

It is the aim of Stocks Hall Care Homes Ltd to provide a confidential and credible system for the service user/staff or their advocates to communicate any complaints regarding the service.

The Service User/staff or their advocate should report any complaint or concern related to the care of services provided to the Home Manager. The Home Manager shall deal with each complaint promptly in a confidential manner within 5 working days of receiving the complaint.

Enclosed is a copy of the company's complaints procedure. y may Service Users or their family may also contact CSCI with any complaints they may have.

COMMISSION FOR SOCIAL CARE INSPECTION  
2<sup>ND</sup> FLOOR UNIT  
TUSTIN COURT  
PRESTON  
PR2 2YQ

# Complaints Policy

Our aim is that service users and advocates will be confident that their concerns and complaints are listened to and acted upon promptly and fairly. We want to explain to people how investigations will be carried out and the outcome communicated including access to appropriate interpretation and methods of communication.

The Stocks Hall Group (Stocks Hall Care Homes, Stocks Homecare Services and Stocks Nursing Services) is committed to providing a quality service so that everyone that uses its services has a positive experience. Consequently, we welcome complaints from service users and/or their advocates because we consider it as an opportunity for us to learn, adapt and continually improve our services. To demonstrate this commitment we wish to make it as easy as possible for you to make a complaint or register a concern. We give an assurance that it will be taken seriously and dealt with in an open and honest approach and at the earliest opportunity. If the complainant is not the service user we are required to verify that they have explicit permission to speak on their behalf.

This policy is not designed to apportion blame, to consider the possibility of negligence or to provide compensation and does not form part of the company's disciplinary policy.

Informal complaints (oral complaints) will be dealt with by front line staff in the first instance and then by the relevant manager if they are not settled to either party's satisfaction.

Formal complaints (written complaints or unresolved informal complaints) will be acknowledged by the relevant manager in writing to the complainant within three days of receipt and the investigation will normally be completed within 28 days of receipt. If the investigation will take longer than 28 days then the complainant will be kept fully informed in writing of the progress and of the expected completion date. The result of the investigation will be communicated in writing to the complainant and the manager will always be more than willing to meet and discuss the outcome of the investigation with the complainant.

All formal complaints should be directed to the manager responsible for the delivery of your care, i.e. the registered person. The manager/registered person will monitor all complaints to identify any emerging patterns that may require investigation.

The Informal Complaints Procedure and the Formal Complaints Procedure are located in the Procedures File reference ICPr1 and FCPr2 respectively. The Complaints Form must be instigated as soon as a complaint is received and is located at CFo1. When a complaint is concluded all information must be retained and placed as a record on file and entered into the Complaints Log located at CLFo1

Most complaints will be concluded locally between the complainant and the relevant manager. Where resolution is unsuccessful due to either the manager or the