

Park House Home Care Services

Martinstown, Dorchester, DT2 9JN



Home Care Office Telephone: 01305 889027

parkhousehomecare@ymail.com

www.parkhousecare.org

Welcome to Park House Home Care Services

Park House Care (UK) Limited is jointly owned by Mr Stephen and Mrs Karen Cannie. Before purchasing Park House in October 2006, Mrs Cannie had seven years' experience managing three care homes. Her most recent was a 69 bedded care home with nursing in Wimborne, Dorset, where she was the Registered Manager for four years. Mrs Cannie has completed her NVQ 4 in Care Management.

Park House Home Care believes in open and honest information sharing with its Clients. This document sets out the responsibilities of both parties in working in partnership to achieve the desired outcomes for the Client.

This document summarises basic information about Park House Home Care for users of our service, people who are considering using our service, and the friends, relatives, carers' and representatives of users and potential users. It includes the material required by the *Health and Social Care Act 2008 (Regulated Activities) regulations 2010*.

Our Aims and Objectives

Park House Home Care aims to provide an enabling care and support service in order to meet its Clients' diverse needs. The service is provided within your own home at times convenient to you and in ways which are agreed between Park House Home Care and you the Client.

Park House Home Care aims to provide care and support for people who are unable to look after themselves. We provide our service in your own home, at times convenient to you, and in ways you find most agreeable. We have sound principles for the way we run our service. Central to these is our belief that the rights of Clients are paramount.

We aim to keep our domiciliary care service locally based in order that we can respond appropriately and accordingly to our client's needs. The Live in care services will cover up to approximately a three hour radius from our Martinstown office. This means that geographically, we can provide our Live in Care Service up to an approximate radius of radius of 150 miles from our Martinstown Office.

Review and Revision of this Document

Park House Home Care reviews all of its policy documents annually or as required. We welcome any comments on the contents of this Statement of Purpose.

Our Staff

Mr James Ivers– Nominated Individual

Profile:

James has been working in the care industry since 2006. This includes domiciliary, nursing and residential care. During this time James has gained his Level 5 Diploma in Leadership

and Management, in addition to his NVQ 2 and 3 in Health and Social Care. James has comprehensive knowledge and experience of Dementia, Learning Difficulties and Psychiatric Care. James' previous leadership roles have included Registered Manager, Care Manager, Deputy Manager, Care Co-ordinator, Senior Care Assistant, Office Supervisor for a local domiciliary agency, Quality Assurance Administrator, Auditing Assistant, and General PA work.

Role:

James's role is to primarily manage the day-to day operation of the Residential Home (Park House) in the capacity of Registered Manager/ Nominated Individual. James is also Nominated Individual for the Home Care Services provided and is primarily in situ to provide support to the management/ office team and to ensure the Home Care Services are being operated as per company policy. In addition to this James also is primarily responsible for the home care services staff availability and visit scheduling.

Qualifications:

Level 5 Diploma in Leadership and Management

NVQ Health & Social Care Level 3

OCR Diploma Health & Social Care Level 2

NCFE Business & Administration Level 2

NCFE Team Leading Level 2

NCFE Customer Service Level 2

Various Care Related Courses

Mrs Rachel Gray – Registered Manager

Profile:

Rachel has been working in the care industry since 2003. This includes domiciliary, and residential care. During this time Rachel has gained her Level 5 Leadership and Management Diploma in Health & Social Care. Rachel has comprehensive knowledge and experience of Elderly Care and Dementia. Most recently Rachel held the position of Registered Manager for a privately owned residential home.

Role:

Rachel's role is to be responsible for maintaining the Domiciliary Care Services in line with Park House Care (UK) Ltd policy and procedure, Care Quality Commission Compliance, Local Authority Guidelines, and any other relevant bodies as applicable. Rachel's primary role is to oversee and manage all aspects of service provision. In addition to organising and managing the team (where applicable of Care Co-ordinators, Office Staff, Care Field

Supervisors, and Care Workers ensuring high quality of services and continuity of care is delivered.

Qualifications:

Level 5 Diploma in Leadership and Management in Health and Social Care

Level 3 Diploma in Health and Social Care

NVQ Level 2 in Health and Social Care

Various Care Related Courses

Ms Kristy Horne – Care Field Administrator

Profile:

Kristy has been working in the care industry since 2011. This includes domiciliary, nursing and residential care. During this time, Kristy has gained her NVQ Level 2 in Health and Social Care and is looking to complete her Level 3 Diploma in Health and Social Care in the near future. Kristy has comprehensive knowledge and experience of Dementia, Learning Difficulties and Nursing Care. Kristy has previously held senior positions including Senior Care Assistant within Park House Residential Home.

Role:

Kristy's role is to primarily cover care visits within the care field before completing the remainder of her day in the domiciliary care office providing administrative support to the Registered Manager. Kristy is also responsible for quality assurance, auditing, recruitment, supervision of staff, staff training, risk assessing, care planning, client assessments/ reviews, and general record keeping. Extending to being responsible for the service in the absence of the Registered Manager, with the support from the Nominated Individual of the company.

Qualifications:

Level 3 Diploma in Health & Social Care (To be completed)

NVQ Level 2 in Health & Social Care

Various Care Related Courses

Mrs Clare Clarke– Residential Care Home, Assistant Manager

Profile:

Clare has been working in the care industry since 1997, and adult care from 2011. This includes domiciliary, dementia, and residential care. During this time Clare has gained her NVQ 4 and Level 5 in Leadership and Management. Clare has comprehensive knowledge and experience of Dementia and Learning Difficulties care. Clare's previous leadership

roles have included, Deputy Manager, Care Supervisor, and Management status's within other industries.

Role:

Clare's role within Park House Care (UK) Ltd is to primarily co-ordinate and assistant manage the Residential Care Services. Clare provides administrative, organisational, and leadership skills within the Residential Care office and is responsible for quality assurance, auditing, recruitment, advertising, payroll, supervision of staff, staff rostering, staff training, risk assessing, care planning, client assessments/ reviews, and general record keeping. In addition to this Clare Clarke also supports the home care office staff and care staff with general administration duties.

Qualifications:

Level 5 Diploma in Leadership and Management
Level 4 NVQ in Leadership
and Management
NCFE Business & Administration Level 2
Various Care Related Courses

The Organisation's Care Field Supervisor(s)

We recognise that for most Clients the most important people in our organisation are the Care Workers and Care Field Supervisors with whom Clients will have regular contact. We take great care in recruiting, training and supervising our staff. Our Care Field Supervisors wear a 'bottle green' uniform in addition to their identification badge, to enable you to clearly see their position within the company.

Our Care Field Supervisors have a wide range of qualifications which reflect the requirements within the Health and Social Care Act 2008. These include National Vocational Qualifications/ Diploma level 2, 3, 4 and five in care or health and social care.

In addition to supervisory/ team management qualifications and relevant administration skills also form part of the Diploma qualification. The Care Field Supervisors are subject to a robust recruitment and selection process which includes criminal record checks such as ISA and DBS procedures.

Care Field Supervisors providing care to Park House Care Clients are supervised and monitored regularly. This is done by regular unannounced spot-checks, supervisions, appraisals, and at least weekly contact. Care Field Supervisors are regularly issued with correct Personal Protective Equipment (PPE) and are aware of Park House Care (UK) policy and procedure.

Care Field Supervisors are responsible for monitoring the quality of service being provided in the care field, and also for the ongoing monitoring of the organisations Care Workers. In addition to ensuring that all Client Care Plan updates are reported, actioned, and reviewed as required.

The Organisation's Care Workers

We recognise that for most Clients the most important people in our organisation are the Care Workers with whom Clients will have regular contact. We take great care in recruiting, training and supervising our staff. Our Care Workers wear an 'aqua green' uniform in addition to their identification badge, to enable you to clearly see their position within the company.

Our staff have a wide range of qualifications which reflect the requirements within the Health and Social Care Act 2008. These include National Vocational Qualifications/ Diploma level 2, 3, 4 and five in care or health and social care. In addition management qualifications and relevant administration skills also form part of the Diploma qualification. The Care Workers are subject to a robust recruitment and selection process which includes criminal record checks such as ISA and DBS procedures.

Good training and development is an essential part of a Care Workers role. All new Care Workers will attend a rigorous induction programme in accordance with 'Skills for Care' Care Certificate. Training then forms part of an on-going process where we continually identify training needs.

All our Live in care workers work on a self-employed basis and are available to Park House Care (UK) Ltd on an as and when required basis, this forms part of their contract with us. Domiciliary Care Workers are employed on a P.A.Y.E. basis.

All Care Staff providing care to Park House Care Clients are supervised and monitored regularly. This is done by regular unannounced spot-checks, supervisions, appraisals, and at least weekly contact.

All Care Workers are regularly issued with correct Personal Protective Equipment (PPE) and are aware of Park House Care (UK) policy and procedure.

How to Access our Services

We accept referrals from individual Clients, their families or representatives, the GP or social worker. Our services can be accessed either by telephone, website, email, or by visiting us directly.

Office Hours

Our office is generally open Monday to Friday 09:00hrs till 17:00hrs, however there may be occasions where the office is closed if either the Registered Manager or Care Co-ordinator are carrying out assessments, reviews or care calls. In this event, we can be contacted on our out of hours number which is detailed below. The office is closed on Public Bank Holidays. Our office address is:

Park House Home Care, Martinstown, Dorchester, Dorset, DT2 9JN

Our Telephone Number is: 01305 889027

Our Fax Number is: 01305 889648

Out of Hours (On-Call)

Park House offers all Clients use of our Out of Hours Service, which is managed and operated by the Office Supervisor, Administrators, Care Field Supervisors and Registered Manager on a rota basis.

Our Out of Hours Number is: 07956242033

Website and E-mail

Our services can be viewed with some additional information at:

www.parkhousecare.org

Park House Care office can be contacted via e-mail if preferred at:

parkhousehomecare@ymail.com

Response Times

As Park House Care is devoted to providing a quality service to our Clients, we recognise that sometimes within the event of an emergency a response will be required. In all emergency situations Park House Care will take the appropriate action once aware. Where necessary an office representative will respond and arrive to your home or chosen destination within our service area within approximately three hours from confirmation of the visit request.

Services Provided by Park House Care

Park House Care provides a service which is tailored to the individual's needs of their Client. Domiciliary Care and Live in Care are the two primary services offered to people within their own homes. We additionally can offer individuals night care, sitting services, respite care, and care for individuals wishing to go on holiday.

Care Workers are able to provide any or all of the following tasks - personal care, assistance with medication, night care, preparation of meals, shopping duties, sitting services, companionship, welfare visits, transportation to and from appointments, and domestic duties.

Domiciliary Care is available seven days a week, every day throughout the year. It is usually delivered between the hours of 07:00hrs and 22:30hrs with a sleep-in or waking night as required. Domiciliary Care is defined as care visits within your own home. The

purpose of Domiciliary Care is to enable you to remain as independent as possible whilst receiving visits as determined by your care needs.

Live in Care is available seven days a week, everyday throughout the year. The Live in care service is a service where a Care Worker will live in your own home on a continuing basis. Live in care is an excellent alternative to care home admission, and is often cheaper.

Park House Care is aware that live in care may not be easy for a Client, and it is essential that the right Care Worker is assigned for each period of time required. The levels of support available for live in care vary from general companionship up to palliative care. Our weekly fee reflects the level of support you require.

We are able to provide services to the following groups:

- All adults aged 18 years and above, including:
- Younger Physically Disabled
- Mental Health
- Dementia
- Learning Disabilities
- Older People

Services we are not able to provide are:

- Nursing Care
- Children's Services/ Care

We are unable to provide the following duties/ tasks:

- Administering Suppositories and Enemas
- Bowel Evacuation
- Changing Sterile Dressings
- Cutting Nails
- Giving Injections
- Lifting unaided from floor

This List is Not Exhaustive

Park House Care only provides Social Care Support. The only exception this is when our Care Workers are specifically trained by an appropriate health professional in order to assist a Client with their health care tasks. This may be apparent when there has been an assessed need and health care services are unable to provide the service needed.

Park House Care services are based on criteria called the 'Fair Access to Care Guidance' which is set out by the 'Department of Health' (DOH). The criteria is shown below in the four categories (The Criteria is primarily applicable to our live in care service only):

Critical - when

- Life is or will be threatened: and / or
- Significant health problems have developed or will develop: and / or

- There is or will be little or no choice and control over vital aspects of the immediate environment: and / or
- Serious abuse or neglect has occurred or will occur: and / or
- There is or will be an inability to carry out vital personal care or domestic routines and / or
- Vital involvement in work, education or learning cannot or will not be sustained: and/ or
- Vital social support systems and relationships cannot or will not be sustained: and / or
- Vital family and other social roles and responsibilities cannot or will not be undertaken.

Substantial - when

- There is or will be only partial choice and control over the immediate environment: and / or
- Abuse or neglect has occurred or will occur: and / or
- There is or will be an inability to carry out the majority of personal care or domestic routines: and / or
- Involvement in many aspects of work, education or learning cannot or will not be sustained: and / or

Substantial - when (continued from overleaf)

- The majority of social support systems and relationships cannot or will not be sustained: and / or
- The majority of family and other social roles and responsibilities cannot or will not be undertaken.

Moderate - when

- There is or will be an inability to carry out several personal care or domestic routines: and / or
- Involvement in several aspects of work, education or learning cannot or will not be sustained: and/ or
- Several social support systems and relationships cannot or will not be sustained: and / or
- Several family and other social roles and responsibilities cannot or will not be undertaken

Low - when

- There is or will be an inability to carry out one or two personal care or domestic routines: and / or
- Involvement in one or two aspects of work, education or learning cannot or will not be sustained: and / or

- One or two social support systems and relationships cannot or will not be sustained: and/ or
- One or two family and other social roles and responsibilities cannot or will not be undertaken.

The Fair Access to Care Criteria is intended to ensure that equitable and fair fees are open and transparent to every client. A banding system of fees is directly linked to the assessment process using the above criteria.

This also ensures that when a Client's needs are reviewed, if there are any changes to their care then there is a clear fee structure which is easily understood by the Client/ Clients Representative should the review determine a change in the fee banding, ie Low to Moderate needs. Please note that this primarily applies to live in care services or when a Client moves to palliative care.

Park House Care (UK) Ltd will ensure that it keeps up to date with any relevant changes to the Department of Health (DOH) Guidance and ensure that any information relevant to any changes is incorporated into information for our Clients.

Our Principles

Pursuant to the Health and Social Care act 2008 (Regulated Activities) Regulations 2010 we set out below good principles which are yours as of right. The care is delivered with these principles at the core of our partnership working.

To focus on Clients, we aim to provide personal care and support in ways which have positive outcomes for Clients and promote their active participation in the assessment process.

1. To ensure that we are fit for our purpose. We examine our operations constantly to ensure that we are successfully achieving our stated aims and purposes. We welcome feedback from our Clients and their friends and relatives.
2. To work for the comprehensive welfare of our Clients. We aim to provide for each Client a package of care that contributes to his or her overall personal and healthcare needs and preferences. We will co-operate with other services and professionals to help to maximise each Client's independence and to ensure as fully as possible the services user's maximum participation in the community.
3. To meet assessed needs. Before we provide services, we ensure that a potential Client's needs and preferences are thoroughly assessed. We aim to ensure that the care the agency provides meets the assessed needs of each Client, that needs are re-assessed as frequently as necessary, and that the care and support provided have the flexibility to respond to changing needs or requirements.

4. To provide quality services. We are whole-heartedly committed to providing top quality services and to continuous improvement in the level of the care we offer.
5. To employ a quality workforce. Standards for our managers and staff are based on the national occupational standards for the care industry set by the Skills for Care the social care sector leader in training.

Clients' Rights

Your rights as summarised below are taken from a variety of government guidance which sets out for providers the principles and parameters of how they interact with their Clients.

The aim of good quality care must always be to promote a way of life for Clients which permits them to enjoy, to the greatest possible extent, their rights as individual human beings. The following rights are fundamental to our agency's work.

Privacy

An individual's right to privacy involves being free from intrusion or unwelcome attention. We aim to maximise our Clients' privacy in the following ways.

1. Staff will enter a Client's property and rooms within the property only with express consent.
2. A Client has the right not to have to interact with or be interrupted by a Care Worker when, for example, they are entertaining a visitor or are engaged on an intimate activity on their own account.
3. We respect the fact that a Client's possessions are private and always act in accordance with the principle that our workers are guests.
4. Our staff respect a Client's right to make telephone calls and carry on conversations without being overheard or observed by a worker.
5. We ensure that records of the service provided are seen only by those with a legitimate need to know the information they contain.

Dignity

The right to dignity involves recognising the intrinsic value of people as individuals and the specific nature of each person's particular needs. We aim to maximise our Clients' dignity in the following ways.

1. We arrange for Clients who require assistance with bodily tasks such as dressing, bathing and toileting to be helped as far as possible by the Care Worker of their own choice and, if desired, of the sex of their choice.
2. We ensure if asked that Clients receive the necessary assistance with dressing and maintaining their clothes.
3. We will try to provide assistance for Client's with make-up, manicure, hairdressing and other elements of their appearance so that they can present themselves as they would wish.
4. We aim to minimise any feelings of inadequacy, inferiority and vulnerability which Clients may have arising from disability.

5. We treat Clients with the sort of respect which reinforces personhood and individual characteristics, addressing them and introducing them to others in their preferred style, responding to specific cultural demands and requirements, and aiming to maintain relationships which are warm and trusting but appropriate to the relationship of Care Worker to Clients.

Independence

Independence means having opportunities to think, plan, act and take sensibly calculated risks without continual reference to others. We aim to maximise our Clients' independence in the following ways.

1. We assist Clients to manage for themselves where possible rather than becoming totally dependent on Care Workers and others.
2. We encourage Clients to take as much responsibility as possible for their own healthcare and medication.
3. We involve Clients fully in planning their own care, devising and implementing their Care Plans and managing the records of care.
4. We work with carers, relatives and friends of Clients to provide as continuous a service as is feasible.
5. We aim to create a climate in the delivery of care and to foster attitudes in those around a Client which focus on capacities rather than on disabilities.

Security

In providing services to people with disabilities, there is a difficult balance to be struck between helping them to experience as much independence as possible and making sure that they are not exposed to unnecessary hazards. Taking care for the security of Clients therefore means helping to provide an environment and support structure which offers sensible protection from danger and comfort and readily available assistance when required. This should not be interpreted as a demand for a totally safe or risk-free lifestyle; taking reasonable risks can be interesting, exciting and fun, as well as necessary. We respond to our Clients need for security in the following ways.

1. We endeavour to make sure that help is tactfully at hand when a Client needs or wishes to engage in any activity which places them in situations of substantial risk.
2. We hope to help to create a physical environment which is free from unnecessary sources of danger to vulnerable people or their property.
3. We always carry out thorough risk assessments in relation to premises, equipment and the activities of the Client who is being helped.
4. Our staff will advise Clients about situations or activities in which their disability is likely to put them or their property at risk.
5. The staff of our agency are well selected, trained and briefed to provide services responsibly, professionally and with compassion and never to exploit their positions to abuse a Client.

Civil rights

We aim to help our Clients to continue to enjoy their civil rights in the following ways.

1. If Clients wish to participate in elections, we will try to access the necessary information and either provide or obtain any assistance which they need to vote.
2. We want to help our Clients to make use of as wide a range as possible of public services, such as libraries, education and transport.
3. We will encourage our Clients to make full use of health services in all ways appropriate to their medical, nursing and therapeutic needs.
4. We will provide easy access for our Clients and their friends, relatives and representatives to complain about or give feedback on our services.
5. If we can, we will support our Clients in their participating as fully and diversely as they wish in the activities of their communities through voluntary work, religious observance, involvement in associations and charitable giving.

Choice

Choice consists of the opportunity to select independently from a range of options. We will respond to our Clients' right to choice in the following ways.

1. We avoid a pattern of service delivery which leads to compulsory timings for activities like getting up and going to bed.
2. We will manage and schedule our services so as to respond as far as possible to Clients' preferences as regards the staff with whom they feel most comfortable.
3. We respect Clients' eccentricities, personal preferences and idiosyncrasies.
4. We hope to cultivate an atmosphere and ethos in our service delivery which welcomes and responds to cultural diversity.
5. We encourage Clients to exercise informed choice in their selection of the organisation and individuals who provide them with assistance.

Fulfilment

Fulfilment has been defined as the opportunity to realise personal aspirations and abilities. It recognises and responds to levels of human satisfaction separate from the physical and material, but it is difficult to generalise about fulfilment since it deals with precisely those areas of lifestyle where individuals differ from each other. We respond to Clients' right to fulfilment in the following ways.

1. We try to assist Clients to participate in as broad a range of social and cultural activities as possible.
2. If requested, we will assist a Client to participate in practices associated with religious or spiritual matters and to celebrate meaningful anniversaries and festivals.

3. We aim to respond sensitively and appropriately to the special needs and wishes of Clients who wish to prepare for or are close to death.
4. We make particular efforts to understand and respond to the wish of any Client to participate in minority-interest events or activities.
5. We will do everything possible to assist a Client who wants to achieve an unfulfilled task, wish or ambition before the end of their life.

Diversity

Britain's social care services are used by people from a wide diversity of ethnic and cultural backgrounds. Services therefore need to be accessible. We need to make particular efforts to reach out to vulnerable people who might have been deterred from approaching agencies which appear not to relate to their special needs and aspirations, and to demonstrate that we welcome and celebrate the wide range of people in the community generally and among the users of services in particular. We respond to Clients' right to express their diversity in the following ways.

- Positively communicating to our Clients that their diverse backgrounds enhance the life of the community.
- Respecting the ethnic, cultural and religious practices of Clients.
- Outlawing negative discriminatory behaviour by staff and others.
- Accommodating individual differences without censure.
- Helping Clients to celebrate events, anniversaries and festivals which are important to them.

Our Policies and Procedures

Our policies and procedures cover the following areas:

1. Statement of purpose, with the aims and objectives of the organisation
2. Conditions of engagement for staff
3. Staff contracts and job descriptions
4. Range of activities undertaken and the limits of responsibility
5. Personal safety for staff at work
6. Quality assurance system
7. Confidentiality of information
8. Non-discriminatory practice
9. Equal opportunities, including our response to sexual or racial harassment
10. Health and safety
11. Moving and handling
12. Dealing with accidents and emergencies
13. Dealing with abuse and bad practice
14. Data protection and access to records by Clients

15. Assisting with medication
16. Handling money and financial matters on behalf of a Client
17. Maintaining the records in the home
18. Gifts and legacies made by Clients
19. Dealing with violence and aggression
20. Entering and leaving the Client's home
21. Safe keeping of keys
22. Complaints and compliments
23. Staff discipline and grievances
24. Training and staff development.

All policies and procedures are updated annually and are available for perusal by Clients, their families or representatives at the office. They are available in different formats as appropriate. This List is Not Exhaustive.

Initial Referral & Delivery of Service

Initial Referral

When you need care you can be referred to us in many different ways, you can self-refer, or your family, friends, neighbour, your GP, district nurse or your local social services office can make the referral on your behalf. In any of these scenarios, information about you which is passed to us will be dealt with sensitively and in confidence.

Before providing any services we will need to undertake a care needs assessment visit which involves you, your family, or a representative as applicable in order that we can gather sufficient information to be sure that the services we provide are suitable for you.

Assessing the Need

If someone comes to us from a social services department, the local authority Care Manager will have carried out an assessment of what you need and have a care diary prepared.

On receipt of any initial referral an assessment of need visit is agreed at a time convenient to the Client family or representative. A competent, qualified member of staff undertakes this assessment and the Client, and the Clients family or representative are expected to be fully involved in the process. This assessment visit is the first step in being able to deliver the required service. This is an in depth assessment of the Clients ability to manage on a day to day basis so questions of a highly sensitive and private nature have to be asked in order to gain the complete picture of how the Client manages their daily activities.

This is usually undertaken at the Clients home so the visit will also include checking any aids or equipment that are in situ and the Clients ability to mobilise. The assessment visit usually lasts anything between 45 minutes and 2 hours dependent on the complexity and level of care required. The assessment process enables Park House Care to be sure that

they can meet the potential Clients needs and to make an initial plan of care that will be provided. The assessment will include the following areas:

- Full medical history
- Personal care and physical well being
- Diet and weight, including dietary preference
- Sight, hearing and communication
- Oral health
- Foot care
- Mobility and dexterity
- History of falls
- Continence
- Medication usage
- Mental state and cognition
- Social interests, hobbies, religious and cultural needs
- Personal safety and risk
- Other Care Worker and family involvement and other social contacts/ relationships
- Client and family expectations

Client Care Plan

Should you the Client wish to continue and use Park House Care Services a comprehensive care plan will be tailored to suit your needs and be maintained regularly to ensure that your individual needs are met.

Two Client files are completed, one is held in the office and the other is held in the Clients' home. It is essential therefore that you the Client allow the file to be kept in a safe and secure place which is accessible only to the people for whom access to the file and its contents applies.

The Client Care Plan will specify the services we will provide, with details like timings of Care Worker visits and any tasks to be performed, and will state the aims and outcomes of the service provided and how we plan to achieve those outcomes.

We hope that you do not find the process by which we get to know your needs too intrusive. We want to build up a full picture and we will do this as quickly and tactfully as possible. Remember, all the information will be treated confidentially. Our aim is always to make sure that we understand what you need and what your preferences are about services, so that we can respond in ways which really suit you.

Under the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 Outcome 21 we are required to record information which is often of a sensitive and very private nature. During the care needs assessment visit you will be asked to give consent regarding who accesses this information.

Assessing the Risks

In order for Care to be provided within your own home, it is essential we have carried a full comprehensive risk assessment of the environment and your care needs. Assessing of risk will be carried out at the time of the Care Need Assessment and updated/ reviewed as required.

Reassessing the Need and Reviewing the Care

Over time your needs may change. You may need more or less care, the type or pattern of service may have to be varied, new risks may become apparent. So, again with your help, we will keep your needs under review and take decisions about the care accordingly. If at any time there are aspects about the care which you would like to change, let us know. Your Care Worker will be carefully chosen and you will be supplied with a visit schedule list detailing the Care Workers name, date and time(s) of visits. Your package of Care will then commence as agreed.

Park House Care is aware that continuity of Care Workers is very important to most Clients and you can usually expect to receive anywhere between two to four regular Care Workers depending on the size of your care package. If a Care Package requires two Care Workers per visit then the number of regular Care Workers may increase to four to eight.

Your Care Worker will work continuously towards your desired plan of care and has the ability to adapt to your changing needs. The office has daily contact by telephone, initially for the first week. Subsequently within two weeks of the package commencing a First Response Questionnaire is sent as a check to ensure that your expectations have been met.

Confidentiality

All staff and Care Workers have signed to confirm they are aware of the Confidentiality Policy and are fully aware of their duties in relation to handling and storing confidential Client Information. Park House Care (UK) Ltd fully complies with the Data Protection Act 1998 and all subsequent amendments.

Records held by Park House Care (UK) are held securely and appropriately stored. Information will be shared by appropriate professionals where necessary, with your signed consent. This includes CQC Inspectors and Social Services Contract Monitoring Officers where applicable. Third party subject access applies and permission will always be obtained where necessary before any information is divulged.

Safeguarding of Vulnerable Adults

Park House Care is committed to protecting our clients. Our Care Workers are trained to recognise the various signs of abuse and are aware of their duties to report under the Safe Guarding Adults Protocols and multi-agency Safeguarding Policies and Procedures. All reports of suspected abuse will be processed following those policies and procedures. Please report any protection issues or concerns to:

Mrs Rachel Gray
Park House Home Care Services
Martinstown
Dorchester
Dorset
01305 889027

Quality Assurance

Park House Care is always keen to provide the best possible service and to do this we continually check on what we are doing, talk with our staff and with outsiders who have opportunities to see and judge our work, and above all listen to our service users. This process is called *quality assurance*. Our Quality Assurance systems and policies in place ensure that our Clients and Representatives always have the opportunity to feedback and comment on the services they receive. The main Quality Assurance systems involve:

- First Response Questionnaires
- Telephone Questionnaires
- Unannounced Spot Checks (to the Clients Home – With Clients Consent)
- Annual Quality Assurance Questionnaire
- Staff Supervision and Appraisal
- Care Plan Reviews
- Compliments and Complaints Received

In addition to these opportunities, please feel free to let us have your views at any time. We need your input in order to improve our services. Our Office team are dedicated to quality assurance, and ensuring the services provided meet or exceed the National Minimum Standards. Care Workers also form part of this process and regular supervision and appraisals allow their feedback and comments to be heard. This is particularly important within a Live In Care situation where care workers are often the best placed to feed back on the clients' situation and care provided.

Complaints and Compliments

Park House welcomes feedback on its services, especially from Clients and their carers, family or friends whether these are compliments, complaints or suggestions for ways of doing things better.

Clients should feel free to let the Care Workers working with them have any comments they wish to make.

If they prefer to take up the matter with someone else in the organisation or if they feel that a point that they have made is not being taken seriously or acted on, they can ask to be put in touch with the Registered Manager.

If a Client wishes their dissatisfaction to be dealt with more formally they should take the steps outlined in the complaints procedure detailed below:

If anyone feels that Park House has not dealt with a complaint to their satisfaction, they have the right to report the matter to the Care Quality Commission, which regulates our services, and to the Local Authority if they are a social services funded service user. Care Quality Commission cannot investigate the complaint made, but will add information to ongoing monitoring of our services.

Stage 1

Grumbles or minor irritants with the service delivery can be quickly dealt with by speaking to the Office staff, however all members of staff are trained to deal with this level of dissatisfaction.

Stage 2

Where the grumble has now grown into an issue with the service being delivered Clients are encouraged to complain formally. A written complaint can be sent to the office at Park House where the complaint will be acknowledged within five working days of receipt. An investigation of the complaint will then be undertaken by the registered manager; this investigation will be completed within ten working days and reported back to the Client in a written form within twenty-one days of the instigation of the investigation.

All Written Complaints should be sent to: **Mrs Rachel Gray, Park House Home Care Services, Martinstown, Dorchester, Dorset, DT2 9JN**

Stage 3

If after following the first two stages you remain unhappy with the outcome of your complaint or the way it has been handled there are two options you can consider depending on who pays for your care.

If your care has been paid for by Social Services then you have the right to use their complaints procedures. By law, Social Services Departments must have an efficient procedure for dealing with complaints. You should contact the Complaints Manager at Social Services and ask them to deal with your complaint.

If you are unhappy with the way they manage your complaint then you can contact the Local Government Ombudsman Their contact details are below. If you tell them you are complaining about a Social Services Department then they will provide advice and guidance about what you need to do next.

If you pay for the care yourself and you are unhappy with the way the provider has managed your complaint then you can contact the Local Government Ombudsman directly.

Since 01 October 2010 the Local Government Ombudsman has been the second stage of the complaints procedure for people who pay for their own social care. They have a dedicated team for dealing with these issues and they will provide you with advice and guidance. The Local Government Ombudsman has the power to investigate individual complaints.

You can contact the Local Government Ombudsman at:

The Local Government Ombudsman, P.O Box 4771, Coventry, CV4 0EH, Telephone: 0300 061 0614 or 0845 602.

Terms and Conditions for the Provision of Home Care Services

Please refer to the separate Terms of Business information, which can be obtained by contacting Park House Care (UK) Ltd on 01305 889027.

Schedule of Fees – Domiciliary Care

Park House Care has a set fee structure which changes according to the length and time of your chosen visits. The basic rate is between the hours of 07:00hrs and 18:00hrs. The weekend rate is fixed without change. Night Care is between the hours of 22:00hrs and 07:00hrs. The prices below are as of 01st April 2018.

Basic Hour Rate	£21.50	Weekend Hour Rate	£23.00
Basic 45 Minute Rate	£17.50	Weekend 45 Minute Rate	£19.00
Basic 30 Minute Rate	£16.00	Weekend 30 Minute Rate	£17.50
Basic 15 Minute Rate	£14.50	Weekend 15 Minute Rate	£15.50
Domestic Basic Rate	£17.50	Sleeping Night Basic	£166.50
Domestic Weekend Rate	£21.50	Sleeping Night Weekend	£175.50
(Domestic Rate Per Hour Charge)		Waking Night Basic	£180.00
		Waking Night Weekend	£189.00

Schedule of Fees –Live in Care

Live-in Care Services are priced using the 'Fair Access to Care Criteria' as set out by DOH. Below is the table showing the bandings and potential fees. When Live-in Care is for two people the minimum stating fee is £700.00per week. All Costs below are the fee per week.

	Minimum Cost	Maximum Cost
Low	£650.00	£749.99
Moderate	£750.00	£899.99
Substantial	£900.00	£1100.00
Critical	£16.00 Per Hour	

Additional Service Charges

Client Needs Assessment and Home Visit

Park House Care (UK) Ltd do not charge any charges for the Client's Needs Assessment and Home Visit. Initial Inquiries are free and are with no obligation.

Bank Holidays and Public Holidays

Please be aware that all fees for Domiciliary and Live-in Care will be charged at time and a half on Bank Holidays.

Night Time Disturbance

Additional Night time disturbances will be charged at the rate of £12.00 per disturbance.

Night Disturbances are defined as when a Care Worker is called by the Client between the hours of 22:30hrs and 07:00hrs. Only one Night Disturbance will be charged per a one hour period.

Mileage

Mileage will be charged at the rate of £0.45 per mile to Clients where applicable.

Cheque Processing

There will be a standard charge of £04.99 per cheque to cover the cost of banking and administration costs.

Respite Care Fee

There will be a charge of £50.00 per respite period, when the service provided by Park House Care is seven days or under. This charge will not be applicable to Clients who will use the Park House Care services twice or more within a one month period.

Emergency Response Fee

There will be a charge of £75.00 per emergency response, this is applicable when Park House Care services are required to commence with under 72 Hours' notice.

The Organisation

Listed below is information regarding Park House Home Care which we hope you will find useful:

Service Provider

The person/organisation registered with the Care Quality Commission as the registered provider for Park House Home Care Services is:

Park House Care (UK) Ltd
Park House
Martinstown
Dorchester
Dorset
DT2 9JN

Telephone and Fax Number: 01305 889420 Out of hours mobile: 07584197728

E-mail: parkhousehomecare@ymail.com

Website: www.parkhousecare.org

Registered Manager/ Responsible Individual

The person currently registered with the Care Quality Commission as the registered manager for Park House Home Care Services is:

Mrs Rachel Gray- Address and Contact Information, as above.
Registered Manager ID – CON1-3657468270

Mr James Ivers was previously Registered Manager for the Home Care Services Provided, and remains registered as Registered Manager for our Residential Care Service and Nominated Individual for both the residential and domiciliary care services.

Directors/ Proprietors

Mr Stephen and Mrs Karen Cannie – Address and Contact Information, as above.

Registered Office

(Companies House Registration: 05869596)

Park House
Martinstown
Dorchester
Dorset
DT2 9JN

Useful Contacts

The Commission for Social Care Inspection
Care Quality Commission (South West)
National Correspondence
City Gate
Gallowgate
Newcastle-upon-Tyne
NE1 4PA

Telephone: 03000 616161

The Complaints Officer (Adults)
Adult Services Directorate
County Hall
Colliton Park
Dorchester
DT1 1XL

Telephone: 01305 224322

Dorchester Social Services Local Office
Acland Road
Dorchester
Dorset
DT1 1SH

Telephone: 01305 251414

Dorset Advocacy
Units 13 – 15
Jubilee Court
Paceycombe Way
Dorchester
Dorset
DT1 1TP

Telephone: 01305 251033

Dorset County Council
Safeguarding Adults Triage Team
County Hall
Colliton Park
Dorchester
Dorset
DT1 1XL

Telephone: 01929 557712
Out of Hours: 01202 657279