



**THE ROYAL BRITISH LEGION
DUNKIRK MEMORIAL HOUSE**

**STATEMENT
OF
PURPOSE**



THE ROYAL BRITISH LEGION DUNKIRK MEMORIAL HOUSE

**Minehead Road
Bishops Lydeard
Taunton
Somerset
TA4 3BT**

Tel: 01823 432407

This Statement of Purpose (SOP):

- is prepared as a legal requirement of statute in accordance with:
s22, Care Standards Act 2000;
Regulations 4, 16, 23 and Schedule 1, Care Homes Regulations 2001
- defines those people for whom Dunkirk Memorial House expects to care
- sets out the objectives of the service
- identifies the facilities and services that are available to service users
- should be read in conjunction with contracts of terms and conditions of admission

Date of last revision: April 2009

We strive to deliver a high quality service that meets the needs and aspirations of all service users. These needs and aspirations vary between individuals and as a consequence the level of service delivery will differ according to individual requirements, identified need and package of care.

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INTRODUCTION

The Royal British Legion is a Registered Charity. It was founded in 1921 and was incorporated under Royal Charter in 1925. Its mission is:

“To safeguard the welfare, interests and memory of those who are serving or who have served in the Armed Forces”.

To achieve this mission, The Royal British Legion adopts the following values:

- Reflection - Through Remembrance of past sacrifice in the cause of freedom
- Hope - By remembering the past, a younger generation has the chance of a better future
- Comradeship - Through shared experience and mutual support
- Selflessness - By putting others first
- Service - To those in need and in support of the whole community

These values underpin the work of The Royal British Legion whose objects established under Royal Charter are:

- (a) to relieve need and to further the education of beneficiaries and their spouses, children and dependants;
- (b) to relieve need and protect the mental and emotional health of the spouses, children and dependants left by those beneficiaries who have died;
- (c) to relieve suffering, hardship and distress to spouses, children and dependants caused by the absence of those serving in the Royal Navy, Army and Royal Air Force on Regular, Reserve or Auxiliary engagements;
- (d) to promote and support schemes for the resettlement, rehabilitation, retraining and sheltered employment, of beneficiaries and their spouses, children and dependants;
- (e) to promote public benefit by the commemoration of those who have died whilst on active service with the Armed Forces of the United Kingdom.

The Royal British Legion has over 450,000 members who actively contribute to achieving its mission. However, articles incorporated under Royal Charter enables the charity to provide services, advice, and support to millions of beneficiaries in the UK and abroad. Eligibility for assistance is summarised as follows:

- Any man or woman over the age of 16 years currently serving in any of the Regular, Reserve or Auxilliary Armed Services and has received 7 days pay
- Any man or woman over the age of 16 years who is no longer serving in any of the Regular, Reserve or Auxilliary Armed Services and received 7 days pay
- any man or woman who served with the Mercantile Marine afloat in hostile waters, or as a full-time member of Allied Civil Police Forces, or who is entitled to the campaign medal issued by the Royal Navy, Army or Royal Air Force to those giving them direct support or under their command;
- Members of Voluntary Aid Societies who served full time and in uniform in support of UK Armed Forces
- any British subject (whether by birth or otherwise) who has, during hostilities in which the United Kingdom Armed Forces were engaged, served at least 7 days in the Forces of an Allied nation and received 7 days' pay from that nation; or a resistance organisation of an Allied nation.
- Any man who served in the Home Guard for 6 months, or Bomb and Mine Disposal Unit for 3 months or was awarded the Defence Medal for their services

Eligibility as a beneficiary also includes the children, spouses and dependants of the above:

Child: any child who is financially dependent or dependent for care on a beneficiary or spouse.

Dependants: any person who is financially dependent or dependent for care on a beneficiary or spouse, or any person on whom a beneficiary is dependent for care.

Spouse: any partner of a beneficiary by marriage, civil partnership, or cohabitating relationship, those who are divorced or separated partners or widows or widowers of a beneficiary, and those surviving a deceased civil partner or cohabitating partner who was a beneficiary.

Care homes are one of many varied services that come under the umbrella of The Royal British Legion's Welfare division. From its base in London, it has a significant responsibility in delivering the charity's mission and leads thousands of paid staff and volunteers across the UK and abroad to achieve the Welfare division's strategic objectives. In undertaking continuous review, evaluation and development of services it has a strong lobbying voice in Parliament and has recently published a series of reports to inform development that were the result of a national welfare needs survey.

The first Royal British Legion care home was established in 1925 to meet the long term nursing needs of ex-service personnel. Since then, the number has grown to seven, and each provides flexible services for eligible persons relating to age, disability or ill health where their needs can no longer be appropriately met in their own homes. Care home services, resources and facilities are continuously reviewed to enhance quality of life for the ex-service community in what is now affectionately termed The Royal British Legion's "Poppy Homes".

PROVIDER DETAILS

Responsible Individual:

Laura Morton RGN
Acting Head of Homes
Welfare Division

Address:

The Royal British Legion
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London
SE1 1AA

Registered Charity Number: 219279

Telephone:

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Email:

lmorton@britishlegion.org.uk

Laura previously held the role of Operations Manager for Poppy Homes North and West. She is a Registered Nurse and has many years of experience working with older people, including dementia care and services for the visually impaired, in both the private and charitable sectors.

PHILOSOPHY AND VALUES

Dunkirk Memorial House was established in 1995. It is a purpose built Home for personal and nursing care. The Home currently provides services for 60 persons.

We embrace a set of core values that inform every aspect of our service delivery:

Quality of care and service delivery to the highest standards

Respect for each person as an individual with their own beliefs, values and culture

Dignity protection in the environment and delivery of care

Privacy in personal space and for personal transactions

Rights of continued citizenship and consultation

Choice in daily routines and activities

Fulfilment of mind, body and spirit

Independence maintained to maximum potential both physically and mentally

Inclusive and participatory presence in wider local community

Security of a safe and supportive environment

Fairness and transparency in all of our business

In order to measure our success in meeting service user needs, we have established clear aims and objectives for service delivery that incorporate our values.

AIMS

- To provide for the most frail and vulnerable persons care and services to a standard of excellence that are safe, sound, supportive and inclusive and respects each person's values relating to religion, culture, race or ethnic origin, gender, sexual orientation, disability, political affiliation, or service record
- To foster friendships and camaraderie of group living, facilitate spiritual support, and uphold the rights and privacy of individuals
- To meet legislative requirements and strive to exceed the recommendations of national minimum standards for care homes
- To represent and support the work of The Royal British Legion in the local community and the Welfare Division's strategic objectives

OBJECTIVES

1. To foster a mutually inclusive and non-discriminatory culture based on trust and the shared values, respect and aspirations of all those who live and work in Dunkirk Memorial House
2. To provide personal and social care to a standard of excellence that is sensitive to the wishes and feelings of the service user
3. To provide skilled nursing care that embraces the principles of clinical effectiveness and professional codes of conduct
4. To consult and involve service users or their representatives in identifying need, determining services and understanding Dunkirk Memorial House terms and conditions
5. To consult service users or their representatives in agreeing and reviewing a person centred plan of care reflecting need, choice and personal aspirations
6. To provide a stimulating, and therapeutic programme of social and leisure activity that reflects interests, choice and abilities
7. To provide a quality dining experience reflecting a varied and nutritious menu of choice
8. To maintain service user access to a range of NHS and Local Authority services
9. To effectively manage complaints and actively involve service users and stakeholders in service improvement and development
10. To effectively manage enquiries to enable potential service users, representatives and stakeholders to make informed choices about the suitability of Dunkirk Memorial House to meet their existing and future needs
11. To foster links and partnerships with the local community, volunteers, and to facilitate continued involvement of service users with membership or voluntary organisations
12. To provide skilled and compassionate care and support for service users and their families that reflects the wishes of service users at the end of life
13. To provide a high quality living environment that satisfies the needs and taste of service users; is comfortable, safe, clean and maintained to the highest standard
14. To maintain a risk management framework that provides an environment and care practices that reflect personal choice and protects the safety and welfare of service users, visitors and staff
15. To recruit and train a workforce who support the philosophy, aims and values of The Royal British Legion and Dunkirk Memorial House, providing staff in sufficient numbers and relevant skills throughout each day to effectively meet the needs of service users

16. To support and consult staff to achieve the objectives of Dunkirk Memorial House and continued service development
17. To effectively maintain documents and correspondence relevant to each service user's care respecting confidentiality and accessibility
18. To manage services efficiently and effectively and make the best use of available resources
19. To implement a quality assurance system to assess service user satisfaction, measure outcomes against objectives of service, and inform continuous development plans

LOCATION

Dunkirk Memorial House is situated 8 miles from Taunton on the Minehead Road (A358) near the village of Bishops Lydeard. A frequent bus service runs between the village and Taunton. An attractive feature of the area is the close proximity of the West Somerset Steam Railway which runs along the boundary of the Home providing a train service between Bishops Lydeard and Minehead in the summer months. Extensive visitors and residents car parking is available within the Homes grounds.

FACILITIES

Dunkirk Memorial House provides a variety of private and communal facilities. The residents' rooms are situated on 2 floors, with the upper floor accessible by 2 lifts and staircases. The 60 rooms of which 6 are double rooms are all en-suite shower rooms and comply with current legislation of at least 12 sq. metres. The rooms have TV, aerial and telephone points. Computer access is available via individual telephone points (dial-up facility) or the opportunity is available for service users to purchase broadband at an extra cost. A computer is available for all residents to access in the Devon Lounge, provided through the Home's Amenity Fund.

All rooms are fully air conditioned with individual controls. A nurse call system is available in every bedroom to summon assistance whilst every effort is made to respond quickly to calls this is not always possible at times of high activity. The emergency call is always responded to promptly. Variable height beds are in every room and a selection of floor standing hoists are available.

There are 2 residents lounges situated on the ground floor, the Devon and Somerset Lounges, a water and beverage machine is available at all times in the Devon Lounge. The Dorset Restaurant is located on the ground floor with automatic doors for easy wheelchair access. A grade 2 listed building is connected to the Home by a link corridor with provision for the Chapel and The Cornwall Lounge which includes a Bar. The Home provides 2 assisted bathrooms.

All public areas are non smoking and have nurse call facilities. A Hairdressing salon and a small kitchen are located on the 1st floor. Residents and visitors are able to make use of this room at anytime. Activities take place in the Somerset Lounge.

SERVICES

Nursing and personal care is provided according to needs assessment and agreed plan of care.

The services that compliment and support direct care include:

Housekeeping

All residents' rooms and communal rooms are cleaned daily. The Home also provides a daily laundry service.

Catering

Our experienced catering department provides a choice of meals from our menu. Alternatives can be provided as requested. Specialised dietary requirements and

preferences are met as requested. The Home provides a mid morning, afternoon and evening drinks and snacks service to the rooms. Friends and relatives are welcome to dine with service users at minimal additional cost. Anniversaries and special occasions are celebrated.

Maintenance

A programme of safety checks, repairs, and redecoration is undertaken by our maintenance personnel. Equipment and systems maintenance and health and safety audit is conducted at intervals throughout the year via external contractors.

Hairdressing

A hairdressing service is provided by a local hairdresser twice a week. Residents can pay directly against a set of charges or through their personal accounts.

Representation

An Age Concern Representative visits the Home on a Monday morning.

NHS/LA services

- Due to the rural location of the Home it is necessary for residents to register with the local GP Surgery. For residents who cannot access the surgery a weekly clinic is available within the Home. Access to the GP and the District Nurse is through the Nurse in Charge.
- Audiology services visit by arrangement through the duty nurse.
- A private Chiropodist visits the Home every 3 weeks. One session per year is free of charge; over and above this residents are required to pay the required fee directly.
- Local opticians provide limited domiciliary visits. Residents are required to make their own private arrangements.
- There are no NHS dental services locally, all are private. Local dentists provide limited domiciliary visits. Residents are required to make their own private arrangements.
- The continence service is provided by the PCT (Primary Care Trust) Specialist nurse.
- Additional NHS services include dietician, speech and language therapist, psychiatric services. Visits are made to the home via GP referral as needed.
- Local authority care managers and Taunton Primary Care Team (PCT) nurses arrange their own visits to review care packages as determined by contract or funding. Dunkirk Memorial House will arrange additional or new visits as requested or as need dictates.

Transport

Dunkirk Memorial House has its own transport, insured equipped and maintained to carry disabled passengers. Whilst we endeavour to provide a transport and staff escort service for medical appointments, it cannot always be guaranteed and is subject to an assessment of need and availability. Relatives and friends are requested to assist wherever possible in the provision of transport and escort to medical appointments or personal social outings.

REGISTERED MANAGER

Mrs Pauline Shields RGN

- Background of hospital management. Achieved RMA qualification.
- Employed by TRBL since July 2001
- Responsible for day to day running of Home
- Meeting residents needs through provision of staff who are knowledgeable and competent
- Ensuring compliance with statutory and legislative requirements

The registered manager is supported by a senior operational manager and other personnel from TRBL's administrative headquarters in London.

During any absence of the registered manager, the persons with day to day responsibility for the running of the home are:

Monica Watterson Head of Care; and **Adam Mulligan** Head of Support Services.

STAFF

Dunkirk Memorial House employs a total of 80 staff. Each department has defined responsibilities in relation to service provision and the smooth running of the home. Each department has a head of department who is directly responsible to the registered home manager.

Nursing and Personal Care:

Monica Watterson, RGN is experienced within the care sector and is responsible for the clinical and care management of the residents and the management of the nurses and care staff.

The /Home employs 10 registered nurses who are responsible for assessing, planning, evaluating and delivering nursing care. 2 nurses are on both shifts during the day, and one nurse on night duty.

There are 28 care staff with NVQ 2 or NVQ 3 qualifications who work within teams and groups of 5 residents to deliver the personal care and activities programme.

Staffing levels and skill mix at each of the 3 shifts per day are calculated and planned in relation to the number and needs of service users at that time and the layout of the building. These are continuously reviewed by the registered manager who is advised by the Head of Care.

Staffing and normal routines may from time to time be affected at short notice by unforeseen and unplanned circumstances such as illness. In these circumstances all efforts will be made to fill the shortfall through bank or agency staff

Support Services:

Adam Mulligan, Head of Support Services manages the following departments:- Catering, Housekeeping and Laundry, Maintenance and Administration.

Recruitment procedures for suitability for employment with TRBL follows statutory requirements including Criminal Records Bureau checks.

Newly recruited staff follow an induction programme until competence and confidence is assured.

Staff from all departments access continuous training and development relevant to their area of practice, statutory requirements and the values and ethos of TRBL via TRBL training department and external sources.

All care staff are encouraged and supported to undertake National Vocational Qualifications in Care

Staff from all departments are subject to appraisal on an annual basis. Nursing and care staff are further supported via continuous personal supervision.

Disciplinary processes are implemented where performance or behaviour deficits are identified.

VOLUNTEERS

Currently 18 volunteers help in the Home with a variety of activity and personal interaction, but are not involved in delivery of personal care. The volunteers are recruited according to the Legion's recruitment policy, including CRB checks.

HOUSE AMENITIES COMMITTEE

The Chairman of the House Amenities Committee (HAC) is Mr. Graham High and together with the 12 members of the Committee administer the social amenity budget and pursue fund raising opportunities. The group meet quarterly and have resident involvement and minutes are taken.

ORGANISATIONAL STRUCTURE

See Appendix 2

REGISTRATION

Dunkirk Memorial House is registered with the Care Quality Commission (CQC) to provide nursing and/or personal care on a long or short term basis for men and women over the age of sixty five (65) years whose needs are primarily associated with frailty, disability or ill health. Dunkirk Memorial House does not provide services for persons whose primary need is related to a functional or organic mental health diagnosis. The home is registered for a maximum occupancy of 60 persons.

ADMISSION CRITERIA

Admission to Dunkirk Memorial House is exclusive to ex-service personnel and their dependants as determined by Royal Charter and detailed in the introduction to this SOP.

Enquiries/applications are accepted from Welfare Officers, Social Workers, relatives and prospective residents themselves.

Service history is required on the relevant application form. Each Service record is verified by original documentation or via written confirmation by the relevant Armed Forces administration unit.

The Matron/Manager and Head of Care, or a designated representative undertake all assessments for new residents within reasonable travelling distance. This will determine the level of care required and ensure that the home is able to meet the care needs. The needs assessment will be carried out in partnership with the prospective service user and/or their representative, and any other health or social care professional involved in their care at that time.

Following confirmation of eligibility, and determining that Dunkirk Memorial House can appropriately meet an individual's needs, admission is confirmed by letter. Terms and conditions of admission are issued which includes details about fees. A Service User Guide is further issued which provides general information about the Home.

Emergency Admission

Dunkirk memorial House aims at all times to implement the above planned procedure for all persons seeking admission and do not accept emergency admissions.

CARE PLANNING

All service users have a comprehensive plan to meet care needs. The comprehensive needs assessment provides a basic plan of care for admission to meet immediate needs. Within the first few days following admission, the named nurse or key worker will complete or update further safety and health risk assessments. Over the next three weeks in partnership with the service user and/or their representative (according to choice or capacity), the named nurse or key worker will complete comprehensive person centred assessments to devise an agreed plan to direct care that reflects the unique physical, psychological and social needs, choices and values of each individual. Where it is difficult because of service user capacity and availability of family or friends to gather such information, the process may take longer and may be based on prior knowledge or observation of the resident and their history. This person centred care plan format has been developed by The Royal British Legion in partnership with Bradford University and is introduced gradually during 2009. The plan of care will be evaluated and reviewed by named staff monthly. The service user and/or their representative will be invited to participate in a full review of the plan of care on an annual basis.

The choices and rights of service users are respected when planning care. However, these choices may involve an element of risk. Dunkirk Memorial House has a duty to protect service users from any action that may put themselves or others at risk of harm

whilst remaining committed to promoting choice and independence and upholding individual's rights. In these circumstances, a compromise will be sought but the Matron Manager's decision will be final.

ACCESS TO HEALTH RECORDS

Adopting a person centred philosophy extends to resident access to their care plans. To these ends The Royal British Legion has supplied all residents rooms with a digital locked storage box that meets Data Protection requirements whilst enabling those residents, who wish to and are able to, to have continuous access to their care plan. This automatic right of access does not extend to representatives of the service user, unless it is with the service user's consent. However, an application to view the care plan of a service user who does not have capacity to consent may be made to the Matron Manager by the resident's representatives. Access may be granted provided the reason for access is justifiable.

In order to record the monitoring and delivery of care to meet each service user's needs, the care plan must remain accessible to personnel of Dunkirk Memorial House involved in the delivery of care. Should a service user not wish to be disturbed at night by staff wishing to write in the care plan, their request is respected within reason. Further access may be needed from time to time by relevant stakeholders including GP, District Nurse, or other allied health and social care professionals involved in caring for the service user.

Access to records written by health and social care professionals other than those employed by The Royal British Legion may be granted following application to the relevant NHS service or Local Authority using their advised protocols.

CONFIDENTIALITY

All personnel at Dunkirk Memorial House are instructed in maintaining confidentiality. All personal records are stored securely and confidentially, and access granted only to relevant personnel. All personnel are instructed to disclose to a senior person any information told to them in confidence if they feel that information indicates an individual is at risk.

SOCIAL ACTIVITIES, HOBBIES AND INTERESTS

Dunkirk Memorial House employs an Activity Organiser each week day who provides a weekly calendar of events which is distributed individually and displayed on the notice board. There is a limited service at weekends. A minibus allows for weekly trips to places of interest and shopping. There are a variety of activities provided by other organisations visiting the Home such as bread making, art and theatre.

CONSULTATION AND QUALITY ASSURANCE

The residents appoint a Spokesperson to represent their views. A re-election takes place every 3 years. Residents meetings take place quarterly. They are chaired by the

Spokesperson who plans the Agenda and takes the Minutes. The registered manager and other heads of department attend by invitation, and act on issues fed back by the residents' spokesperson. Views are sought from the residents who cannot attend by the Spokesperson. A Suggestion Box is available in reception. A weekly Newsletter is produced and distributed to all the residents by the Activity Organiser.

The Royal British Legion Care Services Department implemented a Quality Assurance System in January 2008. This involves the collection and analysis of information about our care and services over the course of each year. Information is collected via questionnaire and interview surveys of residents, relatives and representatives, visiting health and social care professionals, and staff. The purpose of quality assurance is to continuously improve the quality of our care and services based on survey feedback, and additional evidence collected via systems and practice compliance audits conducted periodically throughout the year. A quality assurance report, containing our improvement plans for the coming year, is produced each July and is disseminated to our service users. We are also required by statutory legislation to provide information about our quality assurance and quality improvement activities to CSCI on an annual basis to enable them to determine our statutory quality rating.

FIRE PRECAUTIONS AND EMERGENCY PROCEDURES

The Home is equipped with sensors, alarms, self closing retaining doors, emergency lighting and fire fighting equipment. The alarm is tested weekly, and systems and equipment checked and serviced annually under contract. All fire exits and fire doors are clearly marked and instructions in the event of fire posted in all rooms. Fire safety training is provided to personnel twice per year

All catering personnel access food hygiene training and the kitchen area subject to independent and statutory inspection.

All personnel access control of infection training and universal precautions are adopted throughout the Home.

All personnel access first aid training. Any person sustaining an accident is attended to by an appropriately qualified member of staff. Further review by a GP or transfer to hospital is undertaken where an injury is considered to require medical attention.

Instructions in the case of lift breakdown are posted inside the passenger lift. An emergency call out service is available to Dunkirk Memorial House.

ARRANGEMENTS FOR ATTENDING RELIGIOUS SERVICES OF CHOICE

An Interdenominational communion service is held every Friday in the Chapel. Communion can be taken to residents who are unable to attend the Chapel service. The service is conducted by a volunteer Minister and supported by the local village Church of England Vicar. The local R/C Priest is accessible on request that will organise communion within the Home as requested. There are times when the Chapel is not available for personal prayer or meditation; however, this is brought to the residents' attention through the weekly newsletter. Information is provided on other places of worship in the local area.

Transport is only provided by the Home for attending Remembrance Day services. Residents are asked to make their own arrangements when attending local church services of choice.

VISITING ARRANGEMENTS AND BEHAVIOUR OF VISITORS

There are no restrictions on visiting residents. However it must be remembered that it is the service users' home and visitors do so only with the consent of the individual service user. Visitors are requested to consider residents' individual requests.

Residents and members of staff can access the building at all times through the main entrance door which is secure from the outside. Visitors are asked to identify themselves before entry is allowed. All visitors are required to sign in and out of the visitors book located at reception to satisfy security and fire safety arrangements. Our entrance doors are secured in the evenings and access is granted via staff which may at times result in delay in accessing the building if staff are engaged with residents. On occasions when we have Fetes and Open Days every effort is made to protect the residents' privacy in their rooms.

Every effort is made to support residents to maintain contact with relatives and friends by several ways. Through the Homes e-mail system or an e-mail address on the residents' computer. The administrative staff assist with writing and posting letters and parcels.

The Home has 2 guest rooms for use by relatives/friends. There is a small charge for this facility excluding meals.

The Royal British Legion has a duty to safeguard the welfare of its employees in the course of carrying out their duties. We expect that visitors, whether related to the resident or representing them, will respect our employees during their visits. Abuse, harassment, unreasonable or offensive behaviour will not be tolerated and visitors may be asked to leave in such circumstances.

Visitors who are unhappy with level or quality of care or service or staff performance may make an appointment to discuss the issue with the Matron Manager. Alternatively they are welcome to access the complaint procedure to investigate and resolve the matter to their satisfaction. Further, appropriate family members or nominated representatives are invited to participate in care reviews, with resident consent or on behalf of residents where applicable, to ensure the best possible care is delivered to their satisfaction.

However, continued unreasonable visitor requests or behaviour may lead to a multidisciplinary review of the resident's placement (where applicable) or ultimately lead to notice being issued if it is clear following all evidenced efforts that we are unable to satisfy demands or unwilling to tolerate unreasonable behaviour.

COMPLAINTS

The Home recognises that residents may, from time to time, have complaints as to the way the home operates. The Home wishes to know of all complaints with a view both to satisfy the residents and learn for the benefit of other service users. All complaints will be taken seriously and will be acknowledged within 7 days and resolved within 28 days.

No resident will be treated in any way adversely as a result of the complaint being made and no-one should fear to make a complaint which the Home will regard as a 'helpful suggestion' rather than an adversarial dispute.

The complaint procedure is attached as Appendix 1 and is further included in the Resident's handbook.

THERAPEUTIC TECHNIQUES

Physiotherapy is available in a weekly 4 hour session according to individual need and assessment and provided free of charge through the Homes Amenity fund.

Physiotherapists are regulated by their own professional organisation, confirmation of which is requested on engagement. CRB clearance is also undertaken by TRBL.

Aromatherapy and massage, manicurist and hairdressing is available by appointment. These are private practitioners and arrangements are made by the resident who pays directly.

Professional bodies submit confirmation of their qualifications

Other services including art therapy and IT skills are recruited by the volunteer process which requires 2 references and CRB clearance.

Appointments can be made by the resident for all therapies via the Key worker or the Nurse in Charge.

PRIVACY AND DIGNITY

Staff are instructed in preserving and respecting the privacy and dignity of service users. This includes, but not exclusively, addressing individuals by their name of choice, knocking on doors before entering, promoting and supporting rights and choices, sensitivity during delivery of personal care, respecting personal relationships and the service user's room as their own personal space reflecting their personality. Service users may access a key to their room, however it should be noted that staff have access to a master key for safety reasons.

The adoption of person centred care planning is central to the ethos that every service user is an individual with their own beliefs and values. Equally, The Royal British Legion expects that each service user respects other residents and staff who together make up the community of Dunkirk Memorial House.

MENTAL CAPACITY and ADVANCED CARE PLANNING

Following introduction in 2007, Dunkirk Memorial House complies with the Mental Capacity Act 2005 by conducting its care and services with regard to the rights of residents to make their own decisions on a day to day basis. Dunkirk Memorial House will uphold this right even if cognitive abilities are compromised through illness, injury or disease by assessing a resident's mental capacity at the time the decision is being made. By applying this principle, Dunkirk Memorial House recognises that residents' decision making ability may fluctuate, and that capacity may be compromised when making some decisions but not others. Where mental capacity is judged to be impaired,

or where a resident's decision is judged to place their welfare at risk, Dunkirk Memorial House will provide via the person centred care plan the documentary evidence that confirms, in language and format understood and agreed by the resident (where able) that:

- In making a decision it is evidenced that the resident has capacity unless it is established that they do not
- That the resident has been provided with all assistance to help them make that decision in a format acceptable to them and is understood by them
- That they have been able to retain the information long enough to be able to make a decision
- That they have been able to weigh up the information to come to a decision
- That they have been able to communicate their decision
- Whether any assistance provided to the resident has been successful or not
- That any resident decision perceived as unwise by staff is supported by evidence that confirms the resident understands the consequences of their decision and whether following evidence of information, advice, or mediation they maintain that decision
- That any decisions made by staff on behalf of a resident who lacks capacity is made in their best interests, justified through comprehensive evidence including consultation with representatives (formal or informal) or health and social care professionals where appropriate

Dunkirk Memorial House recognises the powers and responsibilities of attorneys and appointed representatives and will consult them and work with them in a resident's best interests. Copies of certificates are requested on admission for proof of registration with the Office of the Public Guardian. Matron Managers will refer to statutory agencies should Dunkirk Memorial House staff at any time have concerns about the conduct of attorneys or representatives.

Dunkirk Memorial House recognises the rights of residents to engage in lifestyle activities and demand or refuse care or treatment according to their choice. However, where such personal decisions compromise the health or well being of that resident or others we may seek compromise through consultation and mediation that may include family members, representatives or professionals in the wider health and social care community.

On admission and via post admission reviews, we seek information for advanced care planning purposes. Dunkirk Memorial House believes that strongly held values, beliefs or requests about future care or medical treatment are best managed via Advanced Decisions recorded whilst a resident has capacity to make their wishes known. Dunkirk Memorial House must be informed of the existence of such Decisions in order that we can act according to a resident's wishes at a time when they may lose capacity to make their own decisions. We will provide published information and guidance to enable residents to draw up Advanced Decisions where requested but TRBL employees are prohibited from advising or witnessing contents of Advanced Decisions.

BEHAVIOUR, RESTRAINT AND DEPRIVATION OF LIBERTY

Dunkirk Memorial House endeavours to provide an environment that promotes a lifestyle that is unrestrictive but compatible with reasonable care and safety, thus

balancing our duty of care to our resident community with the needs, choices and best interests of individuals. Service users will be informed of limitations in terms of access inside and outside of the building on admission. Any practice considered restrictive will be subject to risk assessment, discussed and agreed with the service user or their representative where appropriate, documented in the care plan and reviewed at frequencies appropriate to the individual.

Restrictive practices that **are not** promoted at Dunkirk Memorial House include:

- Inappropriate and non-consensual use of bed safety rails
- Arranging furniture to impede movement
- Use of bedclothes or bandages to contain movement
- Sedative drugs
- Removal of nurse call bells
- Authoritarian attitudes and institutionalised routines
- Unjustified locked doors
- Medical or Nursing Treatment against an individual's will (satisfying the principles of mental capacity assessment)

Staff are not trained in physical restraint practices. However, The Royal British Legion has a duty of care to protect any person whose personal safety is placed at risk from an action or another person. In such situations staff will intervene through mediation and diversion, and will physically restrain only as a last resort using the minimum of force to protect immediate safety.

The Royal British Legion does not tolerate behaviour which is abusive or threatening either verbally or physically. Further, we do not condone individual lifestyle choices that are illegal, inappropriate or offensive or bring The Royal British Legion into disrepute. Wherever possible, the Matron Manager will endeavour to meet with the service user to agree compromise, or resolve any issues giving cause for frustration and distress and review the plan of care if indicated. However, continued demonstration of such behaviour or lifestyle choices may lead to issuing of notice to leave (see Terms and Conditions).

Changes in resident behaviour may be symptomatic of an underlying health problem and therefore will be monitored and investigated to determine cause. If appropriate, medical assistance will be sought to resolve the problem. However, Dunkirk Memorial House does not currently provide facilities and services for persons with definitive cognitive disorders. Where such a diagnosis is made, a case conference will be called with the service user, representatives and stakeholders to determine whether continued residence at Dunkirk Memorial House is in the best interests of the service user and other residents of the Home, and an alternative placement may be requested if we are unable to meet specialised needs.

Covert medicine administration is not routinely condoned. If following assessment of mental capacity it is confirmed that a resident does not have capacity to understand that the continuous refusal of a prescribed medication places their health at risk, covert administration may be undertaken under strict guidelines described in The Royal British Legion Care Services consent and covert administration guidelines. Dunkirk Memorial House will be guided by the multidisciplinary team and resident representative, and will contact the relevant local supervisory authority to check if an application under Deprivation of Liberty Safeguards is required.

Residents at Dunkirk Memorial House are free to come and go at will, commensurate with mental capacity assessments, agreed plan of care and appropriate risk assessments. Dunkirk Memorial House has a duty of care to protect the safety of all residents and employees within the environment of Dunkirk Memorial House and to those ends secure access doors at entrances include digital locks and staff operated manual release mechanisms. Residents are provided with the means, either with support or independently, to use these access methods according to individual ability, capacity and choice commensurate with agreed plan of care. Residents are free to move around the Home and gardens at leisure and will be provided with assistance where required, but are restricted from entering the kitchen, laundry and plant areas for health and safety reasons.

Residents are also free to leave the home accompanied by visitors at any time. If, under Mental Capacity and Deprivation of Liberty Safeguards or Vulnerable Adult Safeguards, the Home has concerns about the welfare of a resident during such trips away from the Home, the Matron Manager or Head of Care will refer to the appropriate statutory agency or appointed representative in the resident's best interests.

Dunkirk Memorial House will never knowingly deprive a resident of their liberty. Staff will endeavour to meet needs and choices in the least restrictive way whilst considering an individual's safety or welfare. We will review the care plan with the resident, or according to mental capacity their representative or multidisciplinary team, to determine alternative options should a resident's liberty become compromised. If following these processes it is clear that care required in a resident's best interests does confirm eligibility to deprive them of their liberty, the Matron Manager will make an application to the local supervisory body as described in the Mental Capacity Act 2005 Deprivation of Liberty Safeguards and local arrangements from April 2009. Any authorised deprivation of liberty will then be monitored by the Matron Manager according to deprivation of liberty guidelines to determine continued or discontinued eligibility within statutory timescales.



THE ROYAL BRITISH LEGION

DUNKIRK MEMORIAL HOUSE

COMPLAINTS NOTICE

Appendix 1

1. We view complaints as an opportunity to identify anything that is going wrong in our organisation and to make it right. We are committed to providing our residents with a quality service and your comments and suggestions for improvements are always welcome.
2. Verbal complaints should in the first place be made to your named nurse/key worker or to the Head of Care who will respond to rectify the issue immediately. If you are not satisfied with the response you should refer your complaint to the matron/manager.
3. Written complaints should be addressed the Matron/Manager of Dunkirk Memorial House, Ms Pauline Shields. Dunkirk Memorial House endeavour to resolve all complaints within 28 days of the date of receipt of the complaint. A written letter of acknowledgement will be sent to the complainant within seven days. The Matron/manager will then investigate the complaint and will outline the investigation, conclusion and outcome to the complainant in writing within a further 21 days.
4. Should the complaint or investigation be complex, requiring extensive investigation, the 28 day process may not be achievable. The complainant will be notified and kept informed of any delays in the complaint process
5. If the complainant is unhappy with the outcome of the investigation, they may refer their complaint to:

Laura Morton
Head of Care Services
Welfare Division
199 Borough High Street
London SE1 1AA

6. Service Users have the right to complain directly to the Commission for Social Care Inspection; or their local purchasing authority. Contact details are:

Care Quality Commission South West Regional Team Colston 33 33 Colston Avenue Bristol BS1 4 UA Tel: 0117 930 7110	Somerset Social Services County Hall Corporation Street Taunton Somerset CT10 5JJ	Somerset Primary Care Trust Wynford House Lufton Way Yeovil BA22 8HR
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If you have any comments or suggestions, please speak to the Registered Manager or Head of Care or utilise the suggestion box located in reception. Residents meetings are held quarterly, chaired by the residents spokesperson, and are advertised on the notice board.





APPENDIX 2: ORGANISATIONAL CHART THE ROYAL BRITISH LEGION DUNKIRK MEMORIAL HOUSE

