



Gloucestershire
COUNTY COUNCIL

**SERVICE SPECIFICATION FOR THE PROVISION OF CARE
FOR OLDER PEOPLE AND ADULTS WITH PHYSICAL
DISABILITIES
IN A REGISTERED CARE HOME
FROM APRIL 2014**

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Section One: Overview

1.1. Introduction

This document sets out a service specification relating to the provision of care by registered care homes for Older People and Adults with Physical Disabilities in Gloucestershire. This is a pre-placement agreement. It describes the key features of the service being commissioned, and should be read in conjunction with the terms and conditions section of the contract.

The purpose of the service is to provide accommodation, care, support and stimulation to those people in the service user group for whom it is not appropriate, either in the short or longer term, to live in their own homes. The Service Provider should offer Service Users the opportunity to enhance their quality of life by providing a safe, manageable and comfortable environment.

The provision of residential and nursing care is influenced by health and social care policy relevant to older people and adults with physical disabilities, carers, and the management of long-term health conditions. This includes mental health conditions which may affect older people, especially dementia, depression and anxiety.

It is a requirement that all Service Providers will be registered with the care regulator and will maintain registration throughout the duration of this contract. Therefore, the regulations required for registration (and their associated standards), and the monitoring of the achievement of those regulations and standards are not replicated in full in this specification.

Gloucestershire County Council and NHS Gloucestershire Clinical Commissioning Group expect all Service Providers to strive for excellence. Service Providers are required to comply with the relevant regulation standards including Care Quality Commission 'Essential Standards of Quality & Safety' March 2010, NICE guidance, other appropriate National and Local guidelines and relevant successor documents,

Gloucestershire County Council (GCC) and NHS Gloucestershire Clinical Commissioning Group (CCG) as the Commissioners, using a partnership approach with service users and Service Providers, wish to move toward an outcome-based approach to the purchase and provision of service and this document reflects that direction of travel.

Gloucestershire County Council and NHS Gloucestershire Clinical Commissioning Group wish to work in partnership with Service Providers in delivering a high quality of care to its service users. The aim is to maximise the use of available resources by establishing longer-term relationships with Service Providers

Older people and adults with physical disabilities need services which achieve good outcomes, offer good quality and provide care with safety and dignity. Performance of services will increasingly be judged according to the experience of people who use services, with transparent sharing of information so that people needing services can make informed choices, including the knowledge of what other people think of services. .

Prevention, early intervention and promoting independence are often thought of in terms of avoiding admission to care homes. However, care homes remain a key service for older people and adults with physical disabilities who need a lot of care and support, and this specification requires Care Home Service Providers to ensure that older people and adults with physical disabilities can access the right health care and treatment, stay as well as possible, and can live well with long-term conditions and care needs. People must be enabled to do as much as possible independently, both to promote well-being and to support dignity.

The location and layout of the home will be suitable for its stated purpose: it will be accessible, safe and well maintained; meets the Service Users individual and collective needs in a comfortable and homely way and designed with reference to relevant guidance

Services and the atmosphere in which they are provided must take full account of the personalities, interests and lifestyle, and physical, sensory and mental health needs of each Service User . Within the overall constraints of the care setting and the requirements of a Service User 's care plan, each Service User's age, gender, ethnic origin, language, culture, religion, spirituality, sexuality and disability will be taken into account. Services will be designed to address the needs of individual Service Users to ensure outcomes in the care and support plans are met. The needs and preferences of minority ethnic communities, social/cultural or religious groups catered for are respected, understood and met in full.

All work required by the Service User's care plan must be carried out in a manner which respects their privacy, wishes, and feelings of the Service User (and carer where this is appropriate). Service Users will be encouraged to assume control, whenever possible, over the delivery of their care plan. Service Users should expect that their privacy is strictly respected by all support workers, and that nothing concerning them is discussed or passed to other parties other than in circumstances set out in this Service Specification. Service Users and their families should feel confident that they are protected from avoidable harm in a safe environment.

All staff will be fully conversant with the service philosophy and subscribe to its requirements and receive regular and ongoing training as necessary to ensure its delivery.

Effective multi-agency working with all stakeholders will be undertaken to ensure Service Users receive a coordinated approach to support. A positive relationship and open communication with NHS services will be maintained to prevent unnecessary attendances at A&E Departments and crisis admissions to acute or community hospitals.

1.2. General

In order to facilitate hospital discharges Service Providers will ensure a visit will be made to the hospital within 48 hours of the request to assess prospective or returning Service Users

The Service Provider shall provide Service Users with opportunities to maximise their potential in relation to physical, spiritual, intellectual, emotional and social capacity. Where the stay is temporary the objectives will also be to re-enable, rehabilitate or build recovery.

The Service Provider shall provide the placement, where reasonable and practicable, for as long as the Service User requires it. This shall include any modification to arrangements should the needs of the Service User change.

The Service Provider is required to meet the needs of Service Users (including nursing care needs as relevant) in line with the Health and Social Care Act 2008, the Health and Social Care Act 2008 (Registration Requirements) Regulations 2009 and associated relevant statutory regulations, instruments, Codes of Practice and Standards regulations inspected by the CQC and in accordance with the requirements of this Contract.

The Service Provider shall provide care services which take into account and are consistent with the local? Health and Well-Being Strategy e.g. Health Action Plans, Improving Nutritional Care: A joint Action Plan from the Department of Health and Nutrition Summit stakeholder group, Food Standards Agency.

The Service Provider shall ensure that there are enough appropriately trained Staff (employees, volunteers and Agency workers) on duty at all times to ensure the safe and effective delivery of services to meet Service Users assessed needs.

The Service Provider will ensure that they employ Staff (employees, volunteers and Agency workers) who respect the Service User and their property, and who keep information about them confidential. The Service Provider will only recruit Staff who have satisfied all necessary recruitment checks. All Staff will be trained in safeguarding of Vulnerable Adults (SOVA) and actively support Gloucestershire County Council's Safeguarding Adults policy and procedure.

The Service Provider will ensure that there are handover arrangements in place at the beginning of each shift and that the staff providing Services are properly briefed as to the Service User's needs and respect Service User wishes, their independence, their race and their gender. Where Service Users have a disability, Service Providers must respect their need for independence and right to be consulted and must always work with them in an enabling manner.

The Service Provider will use its reasonable endeavours to maintain the Care Home and grounds in a way which will promote Service Users' safety and security.

1.3. Partnership Working

By signing up to a 'partnership approach' Gloucestershire County Council and NHS Gloucestershire Clinical Commissioning Group and Service Providers are making a commitment to:

- Share key objectives
- Collaborate for mutual benefit
- Communicate with each other clearly and regularly
- Be open and honest with each other
- Listen to, and understand, each other's point of view
- Share relevant information, expertise and plans
- Avoid duplication wherever possible
- Monitor the performance of both/all parties
- Seek to avoid conflicts but, where they arise, to resolve them quickly at a local level, wherever possible
- Seek continuous improvement by working together to get the most out of the resources available and by finding better, more efficient ways of doing things
- Share the potential risks involved in service developments
- Promote the partnership approach at all levels in the organisations (e.g. through joint induction or training initiatives)
- Have a contract which is flexible enough to reflect changing needs, priorities and lessons learnt, and which encourages service user participation.

Gloucestershire County Council and Health & Social Care Commissioners will:

- Work using a 'partnership approach' with Service Providers to improve service quality and reduce risk
- Support Service Providers with common challenges e.g. understanding the Deprivation of Liberty Safeguards
- Actively promote contact with small Service Providers and those providing for self-funders. Where there is resistance to partnership working, commissioners work jointly with CQC to encourage it
- Maintain regular communication and a feedback loop with out of area Service Providers
- Ensure small scale and user-led Service Providers are offered support with safeguarding training

1.4 Core Principles

This set of principles should apply to all contact with Service Users and their Carers.

- To treat people as individuals and promote each person's dignity, privacy and independence.
- To acknowledge and respect people's gender, sexual orientation, age, ability, race, religion, culture and lifestyle.
- To maximise people's self-care abilities and independence.
- To recognise people's personal preferences.
- To provide support for carers, whether relatives or friends, and recognise the rights of other family members.
- To acknowledge that people have the right to take risks in their lives and to enjoy a normal lifestyle.
- To provide protection to people who need it, including a safe and caring environment.

Care homes are expected to offer meaningful choice and control to Service Users, with daily routines suiting the individual rather than the institution, including preferences for consistency and familiarity of staff support, and being able to choose and/or make a preference who is their key worker and who provides care.

Family members, friends and, where applicable, advocates, must be respected as expert partners in a person's care, and to have the opportunity to be involved in planning, decision-making, and sharing in the provision of care. When there is apparent conflict of interest between a person and family members, or perceived risks to safety and well-being, these must be managed within the legal framework and local policy regarding safeguarding, mental capacity, and decision-making.

The National Dementia Strategy emphasises the priority of living well with dementia in care homes, with a workforce who are aware of the condition, trained and skilled in working with people with dementia. Care home staff must work in partnership with specialist dementia services to offer the best quality of care.

Service Providers are expected to work in a collaborative and effective way with the full range of existing local services including Care Homes Support Team, Specialist support, Integrated Community Teams, to participate in local training and care home information events and to work as appropriate with developing schemes such as the pilot GP led Care Homes Enhanced Service pilot.

This specification requires care home staff to have awareness of and competence with care needs at the end of life, and to work effectively with specialist palliative care services to achieve the best outcomes with and for the person. This includes reducing the risk of avoidable admissions to hospital or further moves of accommodation, so reducing the risk of Service Users experience of death in a place not of their choosing and without familiar people. Service Providers are required to use of the Gloucestershire End of Life Care Planning Tool and other relevant processes (which would be likely to include the Gloucestershire Best Interests Tool when development has been completed).

The service must be provided at all times in accordance with the values stated in this specification. The service shall be delivered with the aim of promoting personalisation and enhancing quality of life for Service Users. The Service Provider will ensure Service Users retain and enjoy maximum independence compatible with such limitations by reason of any physical, learning and/or sensory impairment. In particular, Service Users shall receive skilled and sensitive support whilst at the same time maintaining and developing abilities, skills and motivation. The support will be delivered with respect and dignity and their individuality respected to ensure a positive experience of care and support. Service Users will be enabled to lead as independent a life as possible so that their ability to exercise choice and achieve personal fulfilment is maximised.

Services will be provided in a way that is not based on the Service Provider's assumption but which acknowledges, involves and listens to Service Users. Such an approach will enable the Service Provider to fully understand the situation and make the maximum use of Service Users' knowledge, expertise and preferences. An enabling approach to delivering care and support will be adopted to help prevent deterioration, delay dependency and support recovery. Staff will be accountable for the delivery of good quality services and set clear standards for all aspects of service delivery.

Older people with mental health needs, including dementia, will have access to all appropriate activities and support outlined in this service specification. Early detection and identification of the onset of mental health needs, including dementia, will be an intrinsic part of the role of the service provider. Staff will be trained to communicate with people with dementia and signage and the environment appropriate to people with dementia.

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1.5. Service Description

The service provided in care home accommodation will comprise a single room (unless service users wish to share), personal toilet facilities, full board, personal care and nursing care where appropriate, supervision on a 24-hour basis, and daytime activities. Exceptions can be made where agreed on the service user's care plan as prepared or agreed by the service user's care manager/budget holder, the service user, and other relevant staff e.g. CCG manager or service user's GP.

The care home should offer older people and adults with physical disabilities the opportunity to enhance their quality of life by providing a safe, manageable and comfortable environment, plus care, support and stimulation.

The tasks and support to be undertaken with and for service users are likely to include the following, however this list is not exhaustive, nor needed in all cases.

- To help the service user with self-care when this is difficult because of his/her frailty or disability.
- To help the service user retain his/her self-respect and dignity when he/she meets, sees, or is seen by others within the home (this includes the staff of the home).
- As part of an agreed programme of rehabilitation designed to assist service users to re-establish lost skills or develop new skills in personal care, this may include enabling service users to assist with tasks around the home. And to return home or to Extra Care Housing whenever possible if in best interests of the service user
- As well as specific personal care tasks, Service Providers should make it a clear and acceptable aspect of the work of their staff that part of the personal care task is for staff to spend time talking to, relating with, and understanding the lives of service users.
- Each service user should be assisted in such a way so that any distress or discomfort is avoided or minimised, paying due regard to his/her health, safety and dignity and encouraging the development of personal skills and the exercise of choice and control., using a strengths-based approach

In addition, and in the context of a person-centred approach, the care home will assist with social/spiritual/emotional needs such as:

- orientation within the home and outside
- companionship
- games/intellectual stimulation
- socialising with friends/family
- arrangements for worship
- Fitness activities.

The way in which the service is offered should be appropriate to the ethnic and cultural background of the service user.

For each individual service user, the determining factor will be the outcomes to be achieved. The service user, and where appropriate their relative/friend, should always be central to discussions as to how those outcomes should be achieved.

1.6. Service User Group

Gloucestershire County Council has a statutory responsibility to ensure the provision of appropriate accommodation for people who are no longer able to live independently in the community due to the effects of age, disability or infirmity.

Service Users will be assessed through the care management process as requiring care in a Service User setting.

Service Users will have an assessed need for assistance and attention during the day and at night.

1.7. Service Principles

The Service Provider is required to meet the needs of Service Users and enhance their quality of life. In order to achieve this care should be provided that supports the following principles:

Involvement and Information

Service Users understand the care and choices available to them; they are encouraged to participate fully in their community; their contribution is valued equally with other people; and taken into account when designing, providing and delivering services.

Personalised Care

Service Users receive effective, safe and appropriate care that meets their individual needs in a way which respects their privacy, dignity, independence and End of Life.

Safeguarding and Safety

Service Users have equal access to services without hindrance from discrimination or prejudice; they feel safe and are safeguarded from harm; and can be confident that risks are managed and their human rights will be maintained. The Service Provider will maintain the home and grounds in a way which will ensure Service Users and their property is safe and secure.

Staffing

Service Users are confident that the right Members of Staff with the right skills, qualifications, experience and knowledge are employed to care for and support them. To achieve this, the Service Provider shall ensure that:

- Its recruitment practices meet all legislative and good practice requirements including recruitment checks.
- All Members of Staff know the requirements of their job and services to be provided.
- All Members of Staff know and adhere the policies and procedures under which the services operate and are provided.
- Training is provided to the national standard, as a minimum to specifically include the administration of medication for appropriate Members of Staff.
- All Member of Staff are supported to carry out their job role.
- All services provide a confidential, secure setting which respects the individual, helping to preserve people's dignity.

Quality and Performance

Service Users are confident that the services provided by the Service Provider meet essential standards of quality and safety.

Management

Service Users are confident that the care home is run by people who are competent to do so; who comply with legal requirements; who operate safe working practices and who recruit and employ staff competent to do their job. The Service Provider is properly insured and financially grounded.

Life Stories

Service Providers are required to make sure that all Service Users will have a life story in place within 6 weeks of admission (or provide evidence to show that every effort has been made to establish one if this is not possible).

Working with Families

Service Providers will work with families, respecting the needs of family carers.

End of Life

Service Providers will have to give consideration to end of life planning with all partners.

Care Home Champion

Service Providers will have in place care home champions who operate special interest groups and encourage participation.

Activity Co-ordinators

Service Providers will ensure that Service Users are encouraged to participate in meaningful activities. All Activity Co-ordinators can demonstrate they are working towards the Gloucestershire Activity Champion award and gain a National qualification.

Dementia Link Workers

Providers must ensure that every home manager has achieved or is actively involved in gaining the Dementia Leadership Management award and that their home has a minimum of one appropriate dementia link worker.

Clinical Leads

Providers must ensure that a suitably qualified clinical lead is employed in every care home.

RMN

Providers must ensure that there is always at least one RMN on duty in the care homes at all times (Dementia specific requirement).

Medication

Providers must ensure that an appropriately qualified staff member is on site to administer medication. All homes have "The Handling of Medicines in Social Care" document as issued by the Royal Pharmaceutical Society of Great Britain.

Assistive Technology

Providers will remain cognisant of developments in the use of assistive technology and where appropriate will use them to create a safe environment for Service Users.

Nutrition

Providers will operate a flexible approach to nutrition and health needs that recognises and acknowledges individual Service User requirements. All homes must use the MUST tool – recognised industry standard and the preferred one to use in County **Care Homes Enhanced Service**

Care Homes and their staff have a critical role in ensuring the success of the pilot GP led Enhanced Service for Care Homes; it is vital effective working relationships are fostered between the GP Practice Team and Care Home staff and effective working practices must be adopted:

- So that all parties involved in the Service Users care can make fully informed decisions, the Care Home should seek consent of Service users /relatives for copy of the relevant GP Clinical System notes summary to be available in secure folder in the Care Home. This will need to be regularly updated
- To make best use of everyone's time, the Care Home should ensure any relevant paperwork is ready prior to the GP attending the Care Home and that
- the GP is greeted promptly on arrival to the Care Home (particularly where GP is arriving at a pre-arranged time);
- As a key way of ensuring continuity of the Service Users care and maximising excellent communications, the nurse/person-in-charge must attend the regular Planned GP Visits, the admission assessments, six-monthly reviews, and be an active partner in the care planning process, the medication reviews, and admission episode reviews

Assessment Tools

A key approach to improving the care of Service Users is through the use of assessment tools, which helps to ensure equity of care:

Pain Management

Completion of an Abbey Pain Tool for all Service Users (or equivalent recognised Tool), particularly those with dementia, for use with the GP during the assessment processes/Planned GP Visits. This will need to be reviewed periodically, depending on the needs of the Service Users

Nutritional Assessment

Undertake Malnutrition Universal Screening Tool (MUST) with each Service User , and take action as appropriate

Patient Dependency

Undertake assessment of patient dependency using Barthel Index (or equivalent recognised Tool), at least every six months;

Nursing Homes Only

Undertake an Early Warning Score Tool

Accessing Unscheduled Care

Before a call is made to the GP Practice/OOH service (including a request for the GP to visit the Care Home), the nurse/person-in-charge should approve the need for the call.

Before a call is made to the ambulance service (unless it is clearly a medical emergency), an attempt should be made to discuss the request with the GP Practice/OOH service. The nurse/person-in-charge should make both calls.

Health Needs

Providers must ensure that all Service Users will be supported to access appropriate health visits, for example, dentist, podiatry etc. and are able to utilise appropriate services such as patient transport.

1.8. Service Outcomes

Gloucestershire County Council considers that the outcomes set out for adult social care services in various documents such as “Our Health, Our Care, Our Say” & the Health & Well Being Strategy” are essential to all of the services Gloucestershire County Council provides or arranges:

Improved Health and Emotional Well-being

Services promote and facilitate the health and emotional wellbeing of people who use the services.

Improved Quality of Life

Services promote independence, and support people to live a fulfilled life making the most of their capacity and potential.

Making a Positive Contribution

People who use services are encouraged to participate fully in their community and their contribution is valued equally with other people.

Exercising Choice and Control

People have access to choice and control of good quality services, which are responsive to individual needs and preferences.

Freedom from Discrimination and Harassment

People who need social care have equal access to services without hindrance from discrimination or prejudice; they feel safe and are safeguarded from harm.

Economic Wellbeing

People are not disadvantaged financially and have access to economic opportunity and appropriate resources to achieve this.

Personal Dignity and Respect

Services provide a confidential, secure setting in which the individual is respected and treated with dignity.

1.9. Service Standards

The commissioners require the Service Provider to meet those regulations and standards set out in care homes for older people national minimum standards.

Section Two – Access to Services

2.1. Accessing the Service

The Gloucestershire County Council, the Service Provider, the Service User and carer (where appropriate) must be satisfied that the Service user could have their needs met, and achieve the agreed outcomes, by living within the home concerned.

The Service Provider will enable the Service User and carer (this includes relative, friend, advocate) to visit the care home prior to admission and to talk to existing Service Users to ensure the service user is satisfied with their choice.

The GCC Care Manager and service user/carer will together draw up and agree a community care plan (where funding is by Gloucestershire County Council), and this must be forwarded to the Service Provider. This care plan will identify the outcomes intended to be achieved by the care home service.

Service users will be referred to the care home and the admission process commenced with minimum time delay (target hours tbc). All admissions will be completed within (tbc) working days from the point at which the Service Providers has informed Gloucestershire County Council of the vacancy occurring (unless service user circumstances require a variance).

A full care plan will be drawn up by the Service Provider not more than (tbc) weeks after admission. This will be drawn up with the service user. This care plan will include the outcomes from the community care plan and will describe in detail the way they are to be met for that service user. Attention will be given by the Service Provider to ascertaining the special needs and interests of the service user. This care plan should also include a risk assessment.

This care plan will be agreed by the service provider, Gloucestershire County Council and service user. An outline care plan will be in place from the time of placement and will be agreed by the Service Provider, Gloucestershire County Council and service user. Care plans will be reviewed annually as a minimum by the commissioner.

Where the service user has a cognitive impairment, every effort should be made to engage with them in the best way to discover their views and preferences in accordance with the Mental Capacity Act Code of Practice.

Service Users should be made aware of the availability of advocacy services.

2.2. Re-Assessment of type of care

If following a Review of Need Meeting it is agreed that the Service User shall remain in the Home but will receive a Service within a different Care Category, a new ISC will be issued and the Price shall be that for the new Care Category, as agreed in accordance with Clause 8.1 and shall be effective from the date of request for review or request for assessment, whichever is the sooner.

Where it is agreed following an assessment of the Service User's needs and as part of the ISC that a Service User requires additional care ("Additional Care") which is over and above the Service provided in Schedule 1 Personal Care or Schedule 2 Nursing Care, as appropriate, and which requires a financial contribution, then the Purchaser shall pay that contribution. The amount agreed for this Additional Care will take account of any increased costs to the Service Provider and will be recorded in the ISC as Additional Care

Except in an emergency, the Service Provider shall give 28 days' notice, in writing, to the Service User and Gloucestershire County Council's Care Co-ordinator responsible for the original placement, or alternatively to the Community Team of the Service Users former address. 6.14.2

The Service Provider and the Council will assist the Service User or their Carer in finding other suitable accommodation, taking into account the Service User's choice of Home.

2.3. Process for Funded Nursing Care Contribution (FNC)

Assessment of Existing Service Users

- The relevant CCG is required to arrange for an assessment of the Service Users to be undertaken by a Registered Nurse as delegated by the CCG on notification of change and completion of a consent form.
- The Service Provider is required to use reasonable endeavours to co-operate with the CCG in facilitating the assessment by:
 - Allowing the CCG's agents or representatives access to the Care Home.
 - Ensuring that the relevant CCG has access to up-to-date and complete care notes in respect of each of its Service Users.
- Upon completion of the assessment of each Service User, the CCG is required to provide to Gloucestershire County Council, the Service Provider and the Service User the following information:
 - The current national rate for Funded Nursing Care contribution.
 - The date upon which those payments will commence.

Assessment of New Service Users

- By not later than the day on which a new Service User is admitted to the Care Home:
 - The local authority is required to inform the Service User or his/her representative of their potential eligibility for FNC this may be via the provision of leaflets to Service Providers.
 - Upon receipt of a consent form the CCG is required to arrange for an assessment of the Service User to be undertaken by a Registered Nurse as delegated by the CCG;
 - The CCG is required to provide the Service Provider and the Service User with a written statement setting out the amount of the FNC contribution which the CCG is required to pay the Service Provider for the provision of nursing care

Short Term Admissions

- The CCG may be required to pay FNC contribution to the Service Provider in respect of short-term Service Users (less than 6 weeks) who require nursing care as it judges to be appropriate/on completion of assessment of that Service User's needs, for the duration of the Service User's stay at the Care Home.

Reassessment

- The CCG is required to re-assess each Eligible Service User at least 3 months after their admission to the Care Home, and every 12 months thereafter.
- Where the need for a change in the level of nursing care arises in respect of a Service User, the Service Provider is required to inform the CCG immediately. The CCG is required to arrange for a re-assessment of the Service User's needs to be made as soon as possible after the date of referral.
- Upon request being made by a Service User or his representative for a re-assessment, the CCG is required to arrange for a re-assessment to be made if it is satisfied that there has been a change in the Service User's nursing care needs. The CCG is required to advise the Service User or his representative of the outcome of the re-assessment within 28 days.

Provision of Care

- The Service Provider is required to provide nursing care in accordance with the terms of the Care Plan for each Service User.

2.4. Care & support

Care Plan

The Service Provider is required to ensure effective, safe and appropriate, personalised care, treatment and support through coordinated assessment, planning and delivery under Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. The Service Provider will implement a care plan for each Service User which will be flexible, regularly reviewed and updated to recognise the changing needs of the Service User. It may be necessary for Commissioning Officers of Gloucestershire County Council to be allowed access to care plans to assist the monitoring of the contract.

The Service Provider shall allocate a Member of Staff (key worker) to each Service User. Continuity of Staff must be a priority.

The Service Provider will:

- Support Service Users with self-care when this is difficult because of his/her frailty or disability.
- Support Service Users to retain their self-respect and dignity when they meet, see, or are seen by others, including Care Home staff, within the Care Home.
- Where identified, provide an agreed programme of rehabilitation & reablement designed to assist the Service User to regain skills or develop new skills in personal care.

The Service Provider shall make it clear and acceptable, that as well as undertaking personal care tasks, Staff should spend time talking to, relating with, and understanding the lives of Service Users as part of their work role.

Each Service User should be assisted in such a way so that any distress or discomfort is avoided or minimised, paying due regard to his/her health, safety and dignity.

The Service Provider shall ensure that assistance is available to help Service Users meet their social, spiritual, emotional and healthcare needs such as:

- Access to and attendance at doctors, dentists, outpatient appointments, etc including providing an escort at no additional cost to Gloucestershire County Council.

2.5. Monitoring & Review of Service for Individual Service Users

Care management reviews may be requested by the service user, the commissioner and by any persons involved and will be held within a reasonable time with consideration of the time commitments of the participants, the date of the last formal review, and the urgency of the need.

A formal review will be held as often as the service commissioner feels is necessary, but at least annually.

The review will involve the service user, the service provider or designated representative and the service commissioner's representative.

Such other people that appear necessary and are wanted by the service user may be invited by agreement. Consideration will be given to ensure convenience and adequate notice for all participants wherever possible.

The review will address the extent to which the initial outcomes required of the placement are being met. The service user's care plan will be amended as appropriate following the review.

The commissioners will review all inspection reports for the home. The provider should supply to the commissioner a copy of its annual self-assessment produced for the care regulator.

Where any issues are raised that cause concern, these will be discussed with the Service Provider .

Any compliance issues will be dealt with as set out in the contract terms.

The commissioner's representatives may wish to visit the home from time to time. Reasonable notice will be given except where there may be any reason for concern about the welfare of service users.

2.6. Advocacy

The Service Provider will ensure that Service Users have access to an appropriate advocacy service and that advocates shall be granted reasonable access to Service Users , and shall do so at no cost to Gloucestershire County Council.

2.7. Information for Service Users

The Service Provider shall comply with the Contract, deliver the Services, give the Service Users and their Carers information about the individual Services to be provided to them and have policies in place to ensure Service Users, their Carers and Gloucestershire County Council informed of any significant changes in services.

The Service Provider shall have written information in the form of a statement of purpose available. The Service Providers should know how to access interpreting and translation services for as well as Braille and signing services for Service Users with sensory impairment. The Service Provider should be sensitive to Service Users' needs and be willing to facilitate access to these services or other services which help to maintain the Service User.

Section 3 Medication

The Service Provider will ensure medication is administered in accordance with current best practice, including *The Care Homes Use of Medicines Study, Qual Saf Health Care 2009;18:341-346*, NICE guidance (to include Managing Medicines in Care Homes due March 2014) and other relevant National and Local guidance.

The Service Provider will ensure a well-developed culture of safety that is required to protect Service Users from harm that can be caused by medicines. To include the following:

- Ensuring the appropriate health care professional has reviewed the medication for each Service User on a 6-monthly basis
- Ensuring well-established links with the GP, supplying Community Pharmacy, and where relevant Care Homes Support Team, for appropriate advice and support
- Establishing what medicines a Service User has been prescribed and is to be taking on admission to the Care Home
- Checking the medication against the medication administration chart prior to administration, ensuring the right medications are given to the right patient at the right time via the right route and recording accurately
- Implementing infection control measures during the administration of medicines
- Undertaking monthly audits of medication administration charts
- Using alerts, reminders, posters and facilities which aid staff and Service Users to follow the correct procedures for managing medicines
- Ensuring sufficient staff and procedures that allow the administration of medicines within a short period of time and with minimal distraction
- Using a well-established procedure for reporting, analysing and learning from incidents ie errors and near-misses relating to medicines
- Ensuring sufficient personalisation of care is recorded in a care plan, in particular around the administration of 'when required' medication
- Promoting a reflective learning culture to enable staff to address previous medicines incidents including near misses and errors
- The registered person ensures that there is a policy and staff adhere to procedures for the receipt, recording, storage, handling, administration and disposal of medicines, and service users are able to take responsibility for their own medication if they wish, within a risk management framework

- The Service User, following assessment as able to self-administer medication, has a lockable space in which to store medication, to which suitably trained, designated care staff may have access with the Service User's permission
- Staff monitor the condition of the Service User on medication and call the GP if staff are concerned about any change in condition that may be a result of medication, and prompt the review of medication on a regular basis
- In Service User Care Homes, all medicines, including Controlled Drugs (except those for self-administration) are administered by designated and appropriately trained staff. The administration of Controlled Drugs is witnessed by another designated, appropriately trained member of staff.

The training for care staff must be accredited and must include:

- Basic knowledge of how medicines are used and how to recognise and deal with problems in use.
- The principles behind all aspects of the Care Home's policy on medicines handling and records.

Section 4 Safeguarding

4.1. Minimum Safeguarding Adults Standards for Providers

All providers of services commissioned by Gloucestershire County Council are required to meet the following minimum standards in relation to safeguarding adults. These standards are not comprehensive and may be in addition to those standards required by legislation, national guidance or other stakeholders, including regulators and professional bodies.

4.2. Minimum standards: Policy and Procedures

- The provider will ensure that it has up to date organisational safeguarding adults policies and procedures which reflect and adhere to the Gloucestershire Safeguarding Adults Board policies.
- The provider will ensure that organisational safeguarding policies and procedures give clear guidance on how to recognise and refer adult safeguarding concerns and ensure that all staff have access to the guidance and know how to use it.
- The provider will ensure that all policies and procedures are consistent with and referenced to safeguarding legislation, national policy / guidance and local multiagency safeguarding procedures.
- The provider will ensure that all policies and procedures are consistent with legislation / guidance in relation to mental capacity and consent, and that staff practice in accordance with these policies.
- Providers of care homes will maintain an up to date policy and procedure covering the Deprivation of Liberty Safeguards, and will ensure that staff practice in accordance with the legislation.

4.3. Minimum Standards: Governance

- The provider will identify a person(s) with lead responsibility for safeguarding adults.
- The provider will cooperate with any request from Gloucestershire Safeguarding Adults Board to contribute to multi-agency audits, evaluations, investigations and Serious Case Reviews, including where required, the production of a management report.
- The provider must ensure that there is a system for identifying, analysing and referring any complaints which raise safeguarding concerns, including potential neglect.
- Providers of care homes will ensure that there are effective systems for recording and monitoring Deprivation of Liberty applications

4.4. Minimum Standards: Multiagency working and responding to concerns

- The provider will ensure that any allegation, complaint or concern about abuse from any source is managed effectively and referred according to the local multiagency safeguarding procedures.
- The provider will ensure that all allegations against members of staff (Including staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees) are referred according to local multiagency safeguarding procedures.
- The provider will ensure effective contribution to safeguarding Strategy / protection meetings through attendance by appropriate and informed representatives / practitioners.

4.5. Minimum Standards: Recruitment & Employment Practice

- The provider must ensure safe recruitment policies and practices which meet the Employment Check Standards, including enhanced Criminal Record Bureau (CRB) checks for all eligible Staff and takes into account the Safeguarding Recruitment Guidance. This includes staff on fixed-term contracts, temporary staff, locums, agency staff, volunteers, students and trainees.
- The provider will ensure that Criminal Records Bureau checks are repeated for eligible staff in line with national guidance / requirements
- The provider must ensure that their employment practices meet the requirements of the Disclosure and Barring scheme (DBS) and that referrals are made to the DBS, where indicated, for their consideration in relation to inclusion on the adults barred list.
- The provider should ensure that all contracts of employment (Including volunteers, agency staff and contractors) include an explicit responsibility for safeguarding adults.
- The provider will ensure that all safeguarding concerns relating to a member of staff are effectively investigated, that any disciplinary processes are concluded irrespective of a person's resignation, and that 'compromise agreements' are not be allowed in safeguarding cases.

4.6. Minimum Standards: Training

- The provider will ensure that all staff and volunteers undertake safeguarding awareness training on induction, including information about how to report concerns within the service or directly into the multiagency procedures and safeguarding training appropriate to their role and level of responsibility and that this will be identified in an organisational training plan; and that all staff receive update training at least every 3 years.
- The provider will ensure that all Staff and volunteers who provide care or treatment understand the principles of the mental capacity act / consent legislation at the point of induction and undertake mental Capacity Act / Consent training, including the Deprivation of Liberty Safeguards appropriate to their role and level of responsibility and that this will be identified in an organisational training plan.

4.7. Allegations of abuse against staff

- All allegations of abuse against staff, including where there is clear evidence that they are false or malicious, will be recorded and monitored.
- All allegations of abuse against staff must be managed according to local multiagency safeguarding adult's procedures.

In line with Gloucestershire's Safeguarding Multi-agency Safeguarding Adults Procedures, if there is clear and immediate evidence that an allegation is false, the reasons for not undertaking any further investigation must be stated along with any other measures taken to manage risks

- A history of making allegations does not constitute evidence that this allegation is false.
- Managers must also consider the need for temporary exclusion or redeployment under the disciplinary policy based on potential risk to the alleged victim(s) if the allegation is found to be true.
- The provider must ensure that all other concerns relating to the conduct or capability of staff are monitored and that any safeguarding related concerns are managed in accordance with the local multiagency procedures.
- Providers must also ensure that any safeguarding concerns arising from disclosures made during the course of an investigation or other Human Resources process are managed in accordance with the local multiagency procedures.

4.8. Sharing Information

- All providers of services commissioned by Gloucestershire County Council are required to share information with other agencies, in a safe and timely manner, where this is necessary for the purposes of safeguarding adults in accordance with the law and local multiagency procedures. This may include personal and sensitive information about the person(s) at risk of or experiencing abuse

4.9. Suspension of Placements

- The Council will consider suspension of placements where there are grounds of concern which prejudice the effective operation of the provider and/or the provider's future viability as a contractor.
- During the period of suspension It will be Gloucestershire County Council's intention to work with the provider via an agreed action plan to improve the service to a level where the suspension can be lifted

4.10. Partnership Working

Gloucestershire County Council and Health & Social Care Commissioners will:

- Work in partnership with providers to improve service quality and reduce risk.
- Support providers with common challenges e.g. understanding the Deprivation of Liberty Safeguards
- Actively promote contact with small providers and those providing for self-funders. Where there is resistance to partnership working, commissioner's work jointly with CQC to encourage it.
- Maintain regular communication and a feedback loop with out of area providers
- Ensure small scale and user-led providers are offered support with safeguarding training

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5. The Mental Capacity Act and deprivation of liberty

- The Service Provider will ensure that the service provided to all Service Users ([with regard to safeguarding, MCA and DoLs this refers to all Service Users including self-funders](#)),, complies with the provisions of the Mental Capacity Act 2005, and within the guidelines set out in the Mental Capacity Act 2005 Code of Practice and the Deprivation of Liberty Safeguards Code of Practice which is a supplement to the MCA Code of Practice.
- The Service Provider will ensure that where restrictions are believed to amount to a deprivation of liberty the deprivation of liberty safeguards must be followed.
- The Service Provider will ensure that no Service User is unlawfully deprived of liberty and ensure that all members of staff know about any Service User who is subject to a deprivation of liberty authorisation, and that they understand any necessary and proportionate restrictions being applied to the Service User as stated in their care plan.
- The Service Provider will ensure that all members of staff:
 - Receive induction and training which includes learning how the Mental Capacity Act and the deprivation of liberty safeguards apply to Service Users.
 - Have regard for the MCA Code of Practice when working with people who may lack capacity to make decisions for themselves in a number of areas of decision making.
- The Service Provider will ensure that:
 - Policies and procedures relating to the MCA that align with the Gloucestershire Multi Agency MCA policy 2011 (amended 2013) and the deprivation of liberty safeguards are in place & [adhered to and](#) that copies of the Mental Capacity Act 2005 Code of Practice and the deprivation of liberty safeguards Code of Practice are available to all members of staff.
 - The Care Homes admission process includes:
 - a) asking about and recording whether the Service User has made an advance decision refusing any medical treatments;
 - b) recording if the Service User has a Lasting Power of Attorney (LPA), Court Appointed Deputy, Independent Mental Capacity Advocate (IMCA) or Relevant Persons Representative (RPR).

Restraint

Restraint is defined in the Mental Capacity Act as where a person:

- Uses, or threatens to use, force to secure the doing of an act which a person resists, or restricts a person's liberty of movement, whether or not a person resists.
- The Service Provider is responsible for compiling a risk assessment in respect of the Service User.
- Any inappropriate use of restraint (including the use of drugs) to a Service User is unacceptable.
- Where restraint/restrictions of movement are considered necessary and proportionate to the degree of harm to a Service User these should be documented within a care plan which includes the assessment of the Service User's capacity in relation to safety issues and the Best Interest rationale/consultation for the use of the restraint/restrictions of movement.
- The Person in Charge of the Home, i.e. Care Home Manager or Senior Person on duty is responsible for authorising the use of immediate protective measures involving restraint; and any restraint used will be carefully noted in the Service User's record and care planned.
- The Service Provider will ensure that all members of staff who are involved in the use of immediate protective measures involving restraint which consists of applying physical interventions have received full appropriate training.
- Any restraint which consists of applying physical interventions employed must not be prolonged after the immediate need has been met and the GCC Care Manager must be informed of any protective measures employed as soon as possible and within one working day.
- Other types of restraint for example environmental/mechanical restraints must be care planned.
- Care Homes registered for people with learning difficulties should follow the Department of Health Guidance for Restrictive Physical Interventions (July 2002) or any successive guidance.
- For further guidance on restraint and the MCA please see the Gloucestershire Multi Agency policy 2011 (revised 2013) Section

Section 6 Staffing

6.1. Staff Recruitment & Selection

- The Service Provider shall ensure that it takes due precautions and has due regard to the vulnerabilities of the Service User when employing, engaging, retaining, recruiting, selecting and appointing Members of Staff.
- The Service Provider shall obtain two written references prior to employment Engagement of a Member of Staff, one of which must be from the potential Member of Staff's last permanent employer. The Service Provider shall also ensure that any gaps in the employment record of a potential Member of Staff are explored.
- The Service Provider shall require current and future Members of Staff to disclose details of any convictions regardless of the date of the conviction or level of the penalty.
- The Service Provider shall ensure that all potential Members of Staff are registered with the Disclosure and Barring Service (formerly the Safeguarding Authority Vetting and Barring Scheme).
- The Service Provider shall ensure that they obtain the Enhanced level of 'Disclosure' from the Disclosure and Barring Service (formerly the Criminal Records Bureau) in respect of Members of Staff and Members of Staff disclosures shall be reviewed in line with national guidance.
- The Service Provider shall adhere to the Disclosure and Barring Service (formerly the Criminal Records Bureau) 'Code of Practice' and will ensure that any potential Member of Staff is only employed / engaged for the purpose of service delivery under this Contract if no criminal records are shown or it is assessed that any criminal records shown on the 'Disclosure' are not relevant to the post. Gloucestershire County Council will not be responsible for the payment of Disclosure and Barring Service (formerly Criminal Records Bureau) checks.
- The Service Provider shall ensure that a check to ensure registration with the Disclosure and Barring Service (formerly the Independent Safeguarding Authority Vetting and Barring Scheme) or any successor scheme and a Disclosure and Barring Service (formerly Criminal Record Bureau) check are completed prior to the employment / engagement of any Member of Staff at the Home.
- The Service Provider shall ensure that any recruitment or employment agency they use for the provision of any Member of Staff also undertakes the required checks on those Members of Staff to comply with the requirements of this Contract.
- The Service Provider shall ensure that any Member of Staff who poses any risk of harm to children and/or vulnerable adults is referred to the Disclosure and Barring Service (formerly the Independent Safeguarding Authority) for consideration regarding inclusion onto the Disclosure and Barring Service barred list (formerly the Children's Barred List and/or Adults Barred List).
- When using staffing agencies, the Service Provider must have a written contract / terms of reference with no more the two staffing agencies to ensure continuity of staff, training and induction process.

6.2. Staff Training & Development

- The Service Provider shall ensure that:
 - a) Members of staff have the necessary qualifications, knowledge, skills, experience, personal qualities, and caring attitudes to enable them to relate well to Service Users and carry out their role; and
 - b) There are sufficient appropriately trained and qualified members of staff in the areas required in order to meet the specific needs of Service Users and will disclose to Gloucestershire County Council, on request, staffing levels applied within the Care Home.
 - c) Members of staff are competent and can evidence training received and staff competency.
- The Service Provider shall establish and maintain an induction and learning and development programme for members of staff, which meets the requirements of the Health and Social Care Act 2008 (Registration Requirements) Regulations 2009 and takes account of recognised standards e.g. Skills for Care training targets and standards, National Occupational Standards (NOS), knowledge sets, Common Induction Standards (CIS), Management Induction Standards (MIS) (www.skillsforcare.org.uk), Common Core Principles and ensures that members of staff fulfil the aims of the Home and meets the changing needs of Service Users. The Service Provider shall ensure that this is supported by individual training records for each member of staff.
- The Service Provider shall ensure that members of staff have their qualifications, knowledge and skills updated on a regular basis and that refresher and updating training is identified at least annually through a staff performance review process (appraisal) and incorporated into the staff learning and development programme.
- Gloucestershire County Council do not wish to constrain the Service Provider by prescribing specific approaches or methods of training, staff records or performance review processors however there is an online assessment tool linked to the Common Induction Standards which is free and available for Gloucestershire County Council providers to use and is available at www.cis-assessment.co.uk
- The Service Provider must demonstrate a continual commitment to workforce development over and above minimum standards.
- The Service Provider must demonstrate their commitment to delivering their service to meet the outcomes of the national Dementia Strategy and the Gloucestershire model for Dementia Care.
- The Service Provider will provide all required documentation in order for the Care Homes Support Team to complete an annual skills audit for all qualified staff to ensure that Nurses are fit to practice in basic nursing skills.

6.3. Staff Supervision

- The Service Provider shall ensure that they have regular individual or group staff supervision sessions in respect of Members of Staff. Supervision sessions will take place a minimum of four times per year. The Service Provider shall ensure that there is documentation to support this.
- In accordance with regulations The Service Provider shall implement structured staff/team meetings as a forum for discussing the running of the Home, communicating important and relevant information about the Service Users' needs and ways in which the care of Service Users in general can be improved.
- The Service Provider shall ensure that effective and appropriate staff 'Hand-over' arrangements are in place between staff shifts.

6.4. Code of Conduct

- 2.4.1 The Service Provider shall have policies and procedures in place, which ensure that all Members of Staff at the Home treat all Service Users with dignity and respect and act in a courteous, caring and professional manner at all times.

Section 7 Quality Systems

7.1. Quality Assurance

- The Service Provider will have and maintain a properly documented system of quality assurance, including standard setting, monitoring management and review processes, to ensure that the required standards of the Care Services provided to Service Users are being delivered and the needs of Service Users are being met. Gloucestershire County Council shall have the right to inspect any records relating to the quality assurance system and the Service Provider shall make full details of the quality assurance system and any analysis available to Gloucestershire County Council on request.
- The Service Provider will share all information relating to quality reviews, including but not limited to CQC Inspections, Gloucestershire County Council / NHS Gloucestershire Clinical Commissioning Group inspections. Information will include all evaluations, follow up activity, action plans, timescales and completion sign off notifications.
- The Service Provider will notify Gloucestershire County Council immediately of any notifications issued that result in actions being taken by the Regulators.
- Gloucestershire County Council do not wish to constrain the Service Provider by prescribing specific approaches or methods of quality assurance, however, it is recommended that the following is taken into account:
 - Regularly seeking the views of Service Users, their Carers, and other stakeholders in the community (e.g. G.P.s, District Nurses, Podiatrist etc.)
 - Policies, procedures and practices are regularly reviewed in line with changing legislation and good practice guidance.
 - Analysis of safeguarding referrals, compliments, concerns, complaints, accidents and incidents / near misses including action taken or changes made to care provided to reflect the analysis.
 - Assessment and monitoring of the quality of the care services provided.
 - Method of ensuring members of staff understand the overall philosophy of the service and are suitable for the work required, including any qualifications, competencies, or experience.
 - Methods of assessing staff performance and continuing development of competencies of members of staff.
- The Service Provider must demonstrate an awareness and adoption of all relevant national guidance and local protocols e.g. the Francis Report recommendations, Dilnot recommendations.

7.2. Views of Service Users & Carers

- The Service Provider shall ensure that the views of Service Users and their carers' are sought and acted upon by implementing procedures for obtaining the views of Service Users and their carers about the service they are receiving and taking action, where reasonable, to meet their views.
- The Service Provider will collate the information gathered from Service Users and their Carers on a continual basis to identify any issues or trends which may impact on services and improve service delivery, and, if requested, share results with Gloucestershire County Council.
- The Service Provider will support Gloucestershire HealthWatch, through a partnering approach to fulfil its responsibilities in seeking the views of Service Users about the services they receive.

7.3. Complaints & Compliments

- The Service Provider shall have a written complaint and compliment procedure(s) and shall ensure that Service Users are fully aware of the existence and nature of the complaint and compliment procedure(s). The Service Provider shall record the nature of each compliment and complaint, the investigation and the outcome.
- The Service Provider shall ensure that the complaint and compliment procedure is in a format accessible to all Service Users to enable an individual, or someone acting on their behalf to make a compliment, complaint or suggestion in relation to services they are receiving.
- The Service Provider shall ensure that the complaint procedure specifies and makes each Service User with whom the Service Provider is working aware of:
 - The stages of the complaint procedure including how to make a complaint, who they make the complaint to, the appeals process and how it works;
 - Target time limits for processing complaints and reporting progress to complainants;
 - The Service Users right to seek advocacy and how the Service Provider would assist them in this process;
- The Service Users right to contact Gloucestershire County Council in relation to any matter concerning or connected with the Services provided by making appropriate reference to Gloucestershire County Council's statutory complaint procedure.
- The Service Provider should attempt to resolve complaints by informal discussions with the Service User and/or their Carers. If discussion fails to provide a solution satisfactory to both Service Provider and the Service User, the Service Provider will fully investigate and formally respond to the complaint. Where such a response is not to the satisfaction of the Service User or their Carer, the Service Provider should inform the Service User/Carer of their appeals process and right to access Gloucestershire County Council's Complaints Procedure. Gloucestershire County Council will investigate a complaint in accordance with the Social Care complaint policy and procedure, where appropriate. However, it will usually be appropriate for the Service Provider to undertake the initial investigation.

- The Service Provider should ensure they collate the information from complaints to identify any issues and trends which may impact on services and improve service and share all appropriate information with Gloucestershire County Council on a quarterly basis. Delivery, and, if requested, share results with Gloucestershire County Council.
- All compliments should be recorded, passed on and responded to appropriately

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8 FIRE PRECAUTIONS

The Service Provider shall comply with the Regulatory Reform (Fire Safety) Order 2005 or any replacement provisions enforced and follow the recommendations and guidance given in the HM Government Guide - Fire Safety Risk Assessment – Service User Care Premises with a copy of this guide on site.

The Service Provider shall also comply with local arrangements as published by Gloucestershire Fire & Rescue Service in regards to Fire Safety Orders see link attached - http://www.glosfire.gov.uk/csafety_fsra_fsorder.html

The Service Provider shall ensure that the premises has a fire risk assessment which has been carried out by a competent person and is updated annually or when there is any significant change in risk.

The Service Provider shall ensure that the 'responsible person' (as defined in the Regulatory Reform (Fire Safety Order 2005) undertakes a fire risk assessment which focuses on the safety in case of fire of all 'relevant persons' (as defined in the Regulatory Reform (Fire Safety) Order 2005).

Where relevant a personal emergency evacuation plan (PEEP) should be developed and incorporated into the Service Users care plan. The Service Provider shall ensure adequate staffing levels which take into account all persons on the premises including those who may need assistance to escape.

The Service Provider will provide in accordance with the HM Government Guide – Fire Safety Risk Assessment – Service User Care Premises (ISBN: 978 1 85112 8181) (Web page link Fire Safety Risk Assessment - Service User Care Premises - Fire and resilience - Communities and Local Government www.communities.gov.uk/publications/fire/firesafetyrisk5) the appropriate firefighting equipment and fire detection and warning system for the Home and will also ensure the maintenance of the equipment provided. The Service Provider will also carry out and record periodic checks of the equipment as advised to ensure that it is working properly.

The Service Provider will have a written fire safety/prevention procedure and will ensure that all members of staff are trained (including refresher training) in the use of the Homes fire detection and firefighting equipment. The Service Provider shall ensure that the training includes:

- Action to be taken on discovering a fire/hearing the fire alarm (respond in an emergency)
- Raising the alarm, the location/use of equipment
- Calling the fire and rescue service
- The method of evacuation/escape routes

The Service Provider will maintain training records which will include the date training has been provided, the content of the training, the name/employer of the trainer, the name of the member of staff who has received training, including the member of staff's signature.

The Service Provider will document the outcome of all discussions with the Fire and Rescue Authority or other expert including details of action undertaken and action planned.

Gloucestershire County Council does not accept any liability in respect of deficiencies within the risk assessments, personal emergency evacuation plan, policies and procedures adopted by the Service Provider in respect of Fire Safety