



**Caring Together
Western Bay**
Health and Social Care Programme
**Gofalu Gyda'n Gilydd
Bae'r Gorllewin**
Rhaglen Iechyd a Gofal Cymdeithasol



Western Bay Collaboration

The Regional Quality Framework for Care Homes for Older People

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Introduction and background

In care homes for older people, the quality of life and care of its residents must have priority. All users of care services deserve the best services in supporting them to enjoy the best quality of life they can.

To this end, My Home Life Cymru led by Age Cymru was invited by the Western Bay Collaborative to develop a quality framework for care homes for older people, which would set a clear vision for quality, based on a relationship and person centred approach to providing care which strives to seek positive outcomes for residents, relatives and staff in care homes.

The Western Bay Collaborative covers the local authority areas of Swansea, Neath Port Talbot and Bridgend. Over the past nine months, care home providers, local authority contract and commissioning officers, Care and Social Services Inspectorate Wales (CSSIW), My Home Life and Abertawe Bro Morgannwg University Health Board have been consulted with, to drive the development of this Regional Quality Framework and Toolkit. This process has included several workshops and presentations that have been fully inclusive of those mentioned above. This process was identified as being the best way in which to engage those who would be using the Framework on a day to day basis i.e. care home providers, local authority contract and commissioning officers and local health professionals.

The Framework

This Framework and Toolkit will provide incentive for continuous improvement and striving for excellence in care homes for older people. To understand and recognize different levels of achievement, a ratings system is being introduced. The Gold Silver Bronze (GSB) system will achieve this by providing care homes with indicators and examples of how they can meet the Gold, Silver or Bronze standard.

This document is an integral part of how the Western Bay local authorities assess the quality of care within care homes and a part of the contract between those organisations. That contract will use this Framework to judge quality in the care homes for older people in their area. Also, monitoring officers will refer to the contract appropriately when using the Framework. It will then be used to take local action to improve quality of care, along with a robust network of intelligence and information sharing between professionals and agencies to support those judgements and actions.

Objectives

- To monitor and support providers so that they may achieve the best quality of life in care homes in a way that improves outcomes for individuals and follows the ethos of My Home Life and the principles of person/ relationship centred care.
- In using the Gold Silver Bronze (GSB) grading system, providers will be able to utilise their own quality assurance tools e.g. annual reports, satisfaction surveys etc.

- Incentivise continuous improvement and the adoption of recognised best practice by care homes.
- Monitor quality of service in care homes in a robust and consistent manner.
- Make judgements about the quality of care and outcomes for people living in care homes linked to quality payments (Bridgend only).
- Provide a basis for partnership between care home providers and local authority/ health board commissioners to work together to improve quality.
- Help individuals make informed choices between providers and provide information to professionals and agencies about the quality of care and support being provided.

Specification

The Western Bay Collaboration requested the development of a regional quality framework to cover care homes for older people. The key areas which would need to be taken forward to develop and implement a collaborative vision for care homes are described below:

- Develop the framework based on a relationship and person centred approach to care, and design the actual standards and outcomes, which would set the expectations for care homes.
- Develop a toolkit which would outline the evidence required to achieve the outcomes set out in the vision.
- Drive forward the coproduction and lead and facilitate the engagement with stakeholders and sign up from providers across the region.

My Home Life Cymru

The My Home Life Cymru programme (MHLC) (www.agecymru.org.uk/mhcl) was established in 2008. It is led by Age Cymru and strives to support all care homes for older people in Wales.

MHLC worked very closely with My Home Life in England (MHL) (www.myhomelife.org.uk), who initiated the programme in England in 2005. MHL worked with over 60 academic researchers across the UK and a range of practitioners to explore 'what older people, relatives and staff want from care homes' and 'what practices work in care homes'.

This resulted in an evidenced-based and relationship centred vision for best practice in care homes which offers a framework from which to deliver quality of life¹ (see Appendix 1). The vision is both aspirational and realistic and draws from and shares positive examples of care home practice already in place, rather than dwelling on poor practice and blaming practitioners. It comprises eight evidence-based, relationship centred themes (see Appendix 2). Two of the themes (Transformation) are aimed at care home managers and are drawn

from an evidence-base linked to quality of management. They are concerned with what managers need to do to transform care in the home to better meet the changing needs of residents. The remaining six themes are for everyone. Three of these themes (Personalisation) are about an approach to care that is more personalised for the individuals. These themes are linked to social care and an evidence-base related to quality of life. The other three themes (Navigation) are about supporting people through the journey of care. Often the concern of health professionals, these themes link with quality of care. The vision is helpful for integrating both health and social care.

The Senses Framework

The My Home Life Vision is underpinned by relationship centred care² and the Senses Framework³ (see Appendix 3). Each of the eight MHL themes and each of the six senses are all relevant to residents, relatives and staff.

Using the domains and indicators to measure quality

The domains used in this Framework were identified through consultation with local care home providers, local authority contract and commissioning officers in the Western Bay area, Care and Social Services Inspectorate Wales and Abertawe Bro Morgannwg University Health Board. These domains have been cross referenced with the eight My Home Life themes, the Senses Framework, the Fundamentals of Care and the National Outcomes Framework for Wales (see appendix 4). The indicators are also very closely linked to the My Home Life themes and Senses Framework. They are graduated across three levels of quality /achievement: **Gold**; **Silver**; and **Bronze**.

The essence of the **Gold, Silver, Bronze** (GSB) system is that performance should be measured according to a three point scale or continuum, where:

- **Bronze** is the threshold and represents basic compliance but where much more could be done to move performance in the Silver and Gold direction;
- **Silver** is midway along the continuum, where certain milestones have been achieved but further progress can be made towards a recognised level or model of excellence;
- **Gold** represents achievement of a model of excellence which, once achieved, will need to be sustained over time.

In coming to a decision about where to place the service on the continuum bronze to gold, the monitor will cite examples to justify that decision. These examples will highlight evidence of the indicator in action e.g.

High Level Outcome – A.	Examples of outcome measures to show how gradings are awarded		
<p data-bbox="147 376 512 483">Knowing the resident, living a full life in a enriched environment</p> <p data-bbox="147 596 512 627">Outcome Indicator A1.</p> <p data-bbox="147 671 512 810">New residents and their close relatives are supported with resettlement</p>	<p data-bbox="539 341 1077 411">Bronze • (The threshold – basic compliance)</p> <ul data-bbox="539 491 1288 560" style="list-style-type: none"> • Life story work commences at time of initial assessment of the new resident <p data-bbox="539 600 1288 852">Evidence of the indicator will need to be available. As regards the example above, providers would be required to demonstrate that the life story details are known by staff, used by staff and where possible that evidence of the benefits of this to the resident have been demonstrated.</p>	<p data-bbox="1314 341 1641 483">Silver • (Certain milestones achieved, more progress to be made)</p> <p data-bbox="1314 523 1680 592">All Bronze points and the following:</p>	<p data-bbox="1711 341 2007 443">Gold • (Goal of excellence has been achieved)</p> <p data-bbox="1711 523 2056 592">All Bronze and Silver points and the following:</p> <ul data-bbox="1711 603 1727 627" style="list-style-type: none"> •

Also, the evidence provided to justify a gold, silver or bronze grade will be considered within the context specific to the particular home.

Quality domains and indicators

- The table below lists the six quality domains and the indicators linked to those domains
- Following this table, each indicator will be populated by elements linked to the GSB measurement model

High Level Outcomes	A. The resident is known by the people involved in their care and lives a full life in an enriched environment	B. The physical and mental health and wellbeing of residents is maintained and promoted	C. There is a dynamic leadership style that inspires and motivates a competent staff team	D. End of life care is dignified and supportive	E. The benefits of effective partnership working are recognised and promoted
Outcome Indicators 1	New residents and their close relatives are supported with resettlement	A healthy lifestyle is promoted	The leadership and motivation of staff is effective	A dignified end of life is enabled	Positive relationships with residents, relatives and friends are developed
2	All residents are known to staff	Access to healthcare services is promoted	A values-based culture is promoted and developed	Residents, relatives and staff feel supported throughout the end of life stage	Communication with residents, friends and professionals is effective
3	Meaningful occupation is provided at the Home	Good nutrition, hydration and dining experience is maintained	The workforce is developed and competent	Multi-disciplinary working is effective	The Home works closely with health/social care professionals
4	Residents have voice, choice and control	Medication is managed safely	A person/relationship-centred approach is promoted	End of life planning is effective and timely	Innovation and development is encouraged within the Home
5	There is a real sense of community at the home	Effective infection control is maintained	Continuous improvement is promoted	A positive environment is maintained	Sector support mechanisms are utilised
6	Personal identity is promoted and maintained	Manual handling is respectful and safe			
7	The environment is safe and positive	Measures are taken to prevent falls			
8		Skin integrity is managed effectively			

9		Residents have sufficient rest and sleep			
10		Pain and other symptoms are managed effectively			

High Level Outcome A.

The resident is known by the people involved in their care and lives a full life in an enriched environment

Outcome Indicator A1.

New residents and their close relatives are supported with resettlement

Summary

Moving in to a care home is a big step for new residents and their families. Many experience high levels of anxiety and relationships can be put under pressure. Residents and their families require support and guidance to help them to settle in to this new situation

Cross References

My Home Life themes

- Managing transitions
- Maintaining identity
- Improving health and healthcare
- Promoting a positive culture
- Workforce fit for purpose
- Creating community
- Sharing decision making

Senses framework

- Security
- Purpose
- Belonging
- Continuity
- Significance

Fundamentals of care

- Communication and information
- Respecting people
- Ensuring safety
- Promoting independence
- Relationships

National outcomes framework

- Physical and mental

Examples of outcome measures to show how gradings are awarded

Bronze • (The threshold – basic compliance)

- Prospective residents and their families can visit the home at any reasonable hour
- Short stay visits are available for prospective residents
- Respite is available for older people in the community
- All residents receive a standard welcome pack which states how the care home manger will ensure their needs are met, their rights are upheld and they have the best possible quality of life (with explicit reference to the 12 objectives set out at 1.2 of the OPCfW action plan).
- Ensure the resident is registered with local health services
- Life story work commences at time of initial assessment of

Silver • (Certain milestones achieved, more progress to be made)

All **Bronze** points and the following:

- Families are included in life story work
- Friends and neighbours of the new resident are encouraged to visit regularly
- Established residents and their families are encouraged to start and build relationships with new residents and families
- The home has in place a Transition Plan, to support new residents and their families
- Belongings are in place before the new resident arrives to aid in helping them

Gold • (Goal of excellence has been achieved)

All **Bronze** and **Silver** points and the following:

- A key worker is assigned to each resident. This matching will be based on the new resident’s personality and staff skills
- New residents are supported by their key worker as much as possible during the first week of stay. This will involve spending more time with the resident than would normally be the case

	<p>health and emotional well being</p> <ul style="list-style-type: none"> • Domestic, family and personal relationships • Securing rights and entitlements • Social and economic well being • Suitability of living accommodation <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • If I am anxious or depressed, staff will recognise my mood, listen to me, and my carers, and support me to feel as well as possible • If I have difficulty understanding or expressing myself, this will be recognised, 	<p>the new resident</p> <ul style="list-style-type: none"> • Families can visit the home at any time • Pre-admission visit and transitional care plans ensure that the needs and wishes of the resident are recorded to ensure that they feel in control as much as possible. • Information is made available in a suitable format to prospective residents/ families to enable them to make an informed decision about the suitability of the home for them as an individual • Relatives and friends are fully included in the transition process • All members of staff must read the notes of every new resident as soon as is possible after their move • The first staff meeting after a new resident moves in, should include a full discussion of the new resident • Residents are offered 	<p>feel at home</p> <ul style="list-style-type: none"> • The new resident and their family should be introduced to each resident and member of staff as much as is possible • A dementia friendly environment should be in place e.g. decoration, appropriate signage, appropriate stimuli etc. 	
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	<p>I will be listened to and supported to make choices and decisions by appropriately trained staff</p> <ul style="list-style-type: none">• I will be able to move about easily and safely, or be helped to do this comfortably	<p>independent advocacy whenever a resident moves in directly from hospital, or from another care home as a result of safeguarding issues. For those with fluctuating capacity or communication difficulties this should be non- instructed advocacy. (see 1.6 OPCfW action plan)</p>		
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<p>High Level Outcome A.</p> <p>The resident is known by the people involved in their care and lives a full life in an enriched environment</p> <p>Outcome Indicator A2.</p> <p>All residents are known to staff</p> <p>Summary</p> <p>Achieving the best quality of life possible for residents is attained by developing a relationship centred approach and shaping our support around what we know about them.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Managing transitions • Sharing decision making • Promoting a positive culture • Maintaining identity <p>Senses framework</p> <ul style="list-style-type: none"> • Belonging • Continuity • Significance • Purpose • Security • Achievement <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Ensuring safety • Promoting independence • Relationships • Personal hygiene, appearance and foot care • Eating and drinking 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Life story work commences at the time of the initial assessment of the new resident • All members of staff must read the notes of every new resident as soon as is possible after their move • The first staff meeting after a new resident moves in, should include a full discussion of the new resident • Regular (at least weekly) reminiscence sessions (single or group) are held for residents • An accurate record of information is kept that is key to getting to know the resident e.g. family, childhood, schooling, work, hobbies etc. • Information that is gathered informally and 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • The residents' families are invited to share their loved one's history • Families are included in reminiscence sessions • Activities are devised and made available that are shaped around residents' interests 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Reciprocal relationships in the home are developed i.e. share information about our own lives etc. • Resident-led activities are held e.g. discussions, talks, themed activities etc.

	<p>National outcomes framework</p> <ul style="list-style-type: none"> • Physical and mental health and emotional well-being • Protection from abuse and neglect • Education, training and recreation • Domestic, family and personal relationships <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • If I am anxious or depressed, staff will recognise my mood, listen to me and my carers, and support me to feel as well as possible • If I have difficulty 	<p>not necessarily recorded is communicated e.g. chatting with resident while supporting them, conversations with other members of staff</p> <ul style="list-style-type: none"> • Staff demonstrate an understanding that behaviour is a form of communication and use the skills needed to meet the needs of residents with expressive behaviour. 		
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	<p>understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff</p> <ul style="list-style-type: none">• I will be able to move about easily and safely, or be helped to do this comfortably			
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<p>High Level Outcome A.</p> <p>The resident is known by the people involved in their care and lives a full life in an enriched environment</p> <p>Outcome Indicator A3.</p> <p>Meaningful occupation is provided at the Home</p> <p>Summary</p> <p>Quality of life is informed by how we spend our time. A resident's sense of significance and purpose is enhanced by meaningful occupation.</p> <p>Those people with a dementia need extra support in engaging with others and/ or activities. We need to be flexible and person/ relationship centred in our approach, supporting the resident in the best way for them.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Promoting a positive culture • Sharing decision making • Improving health and healthcare • Creating community <p>Senses framework</p> <ul style="list-style-type: none"> • Continuity • Belonging • Achievement • Significance • Purpose • Security <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Promoting independence • Relationships • Rest and sleep <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Residents are enabled to take part in activities that are important to them inside and outside the home • Life story and reminiscence work is used to inform activities for residents • Appropriate risk assessments are completed to ensure that residents are safe physically and emotionally • Residents are supported to engage in religious/ spiritual activities of their choice • Activities appropriate to the resident are provided e.g. crosswords, rummage boxes, etc. • Staff are supported to be in the moment with residents, engaging with them at their level and responding in a 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Families are encouraged to have a positive view of risk taking • Relatives and friends are included in activities as much as is possible and appropriate • Residents are supported with aids that are suited to them e.g. dolls, toy pets etc. Staff work closely with families in starting these activities 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Residents are enabled to take informed risks that will enable them to take part in chosen activities e.g. cooking, gardening etc. • Resident-led activities take place e.g. discussions, talks, themed activities etc. • Staff work closely with support organisations in this area e.g. NAPA etc.

	<p>health and emotional well-being</p> <ul style="list-style-type: none"> • Education, training and recreation • Domestic, family and personal relationships • Contribution made to society <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • If I am anxious or depressed, staff will recognise my mood, listen to me and my carers and support me to feel as well as possible • If I have difficulty understanding or expressing myself this will be 	<p>supportive way</p> <ul style="list-style-type: none"> • Residents should have access to items and belongings that are important to them • Activities for residents are designed and developed with the individual resident in mind • Residents are supported to access materials they may need for activities e.g. clothing, household items, memorabilia etc. 		
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	<p>recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff</p> <ul style="list-style-type: none">• I will be able to move about easily and safely, or be helped to do this comfortably			
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<p>High Level Outcome A.</p> <p>The resident is known by the people involved in their care and lives a full life in an enriched environment</p> <p>Outcome Indicator A4.</p> <p>Residents have voice, choice and control</p> <p>Summary</p> <p>Independence, choice and control over our lives are inherent in quality of life. Despite needing support and living in a communal environment, we must strive to keep people's lives under their control as much as is possible.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Sharing decision making • Promoting a positive culture • Creating community • Supporting good end of life <p>Senses framework</p> <ul style="list-style-type: none"> • Continuity • Purpose • Belonging • Security • Significance • Achievement <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Ensuring safety • Promoting independence • Relationships • Personal hygiene, appearance and foot care <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Residents are given choice, and control in the following areas: <ul style="list-style-type: none"> - Time to get up and go to bed - Where to spend their time within the home - Choice of food and refreshments - Access to nutritionally balanced meals - Times of meals - Choice of clothing - Activities to engage in within and outside the home • Regular residents meetings/ discussions are held to obtain their views • The home accesses independent advocacy services for residents who require and/ or request them • Resident's daily plans and/ or care plans are 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Residents' daily plans and/ or care plans are shaped by what matter to the resident e.g. see Bronze section details • Residents are given choice over who supports them (within the capabilities of the home) • Home routines are designed around the residents taking part in activities 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Residents take part in the following: <ul style="list-style-type: none"> - Home recruitment processes - Informing staff training

	<p>health and emotional well-being</p> <ul style="list-style-type: none"> • Protection from abuse and neglect • Education, training and recreation • Domestic, family and personal relationships • Contribution made to society • Securing rights and entitlements • Social and economic well-being <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • If I am anxious or depressed staff will recognise my mood, listen to me and my carers and support me to feel as well as possible 	<p>shaped by what matters to the resident</p> <ul style="list-style-type: none"> • Residents take part in the following: <ul style="list-style-type: none"> - Choice of room and home decoration - Choice of menus - Choice of activities in the home • Residents retain the right to control their finances and to access independent financial and legal advice. • Residents are able to conduct telephone calls in private. • There is evidence of appropriate techniques for ensuring residents with dementia are engaged and included. 		
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	<ul style="list-style-type: none">• If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff• I will be able to move about easily and safely, or be helped to do this comfortably			
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<p>High Level Outcome A.</p> <p>The resident is known by the people involved in their care and lives a full life in an enriched environment</p> <p>Outcome Indicator A5.</p> <p>There is a real sense of community at the Home</p> <p>Summary</p> <p>A care home is a small community in its own right. However, it is also part of the wider community outside its walls. Also within the home, communities exist e.g. communities of interest; staff; residents; families</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Creating community • Managing transitions • Sharing decision making • Promoting a positive culture • Maintaining identity <p>Senses framework</p> <ul style="list-style-type: none"> • Belonging • Security • Significance • Purpose <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Relationships • Eating and drinking <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being • Education, training and recreation • Domestic, family and personal relationships 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • New residents are introduced to every member of staff and resident (if able) • Staff find out who the residents might already know in the home (this can found out using life story work, reminiscence and information from initial assessment(s)) • The home has working links with local schools, colleges, businesses • The home engages with residential neighbours • The home encourages communities of interest e.g. gardeners, singers, knitters etc. • Active steps are taken to encourage the use of befriending schemes, including intergenerational projects where such projects are 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Residents are regularly supported to visit local amenities • The home invites relatives and local neighbours to join in home events • The home makes links with local groups e.g. knit and natter, historical societies, rugby clubs etc. 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • The home uses appropriately recruited volunteers within the home e.g. befriending; leading activities; accompanying residents to appointments

	<ul style="list-style-type: none"> • Contribution made to society <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with this if I need it • If I am anxious or depressed staff will recognise my mood, listen to me and my carers and support me to feel as well as possible • If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably 	<p>accessible.(See 3.3 OPCfW Action Plan)</p>		
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<p>High Level Outcome A.</p> <p>The resident is known by the people involved in their care and lives a full life in an enriched environment</p> <p>Outcome Indicator A6.</p> <p>Personal identity is promoted and maintained</p> <p>Summary</p> <p>Maintaining identity is crucial in promoting a good quality of life. Who is the person, in the past and now? What can we do to support them 'in the moment'?</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Sharing decision making • Creating community • Managing transitions <p>Senses framework</p> <ul style="list-style-type: none"> • Continuity • Purpose • Significance • Security • Belonging <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Ensuring safety • Promoting independence • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being • Education, training and recreation • Domestic, family and personal relationships 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Life story work should begin as soon as possible after the residents moves into the home • All staff should be aware of the resident's history and have an input to their life history through their work and developing relationship with them • Resident's personal care plans should identify how best staff may engage with the resident • Activities for residents are designed and developed with the individual resident in mind • Residents are supported to retain existing friendships • Residents are supported to access faith based support and specific cultural 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Dementia friendly tools are used to support residents e.g. Talking mats; RNIB guidance etc. • Residents are supported in smaller groups of up to eight or nine • Support and training is provided to relatives and friends in supporting residents 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Good links are established with organisations that provide support and guidance e.g. My Home Life; Life story network; Dementia Care Matters; Alzheimer's society; Dementia UK etc.

	<ul style="list-style-type: none"> • Contribution made to society <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with this if I need it • If I am anxious or depressed staff will recognise my mood, listen to me and my carers and support me to feel as well as possible • If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably 	<p>communities. See 3.3 of OPCfW Action Plan).</p>		
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<p>High Level Outcome A.</p> <p>The resident is known by the people involved in their care and lives a full life in an enriched environment</p> <p>Outcome Indicator A7.</p> <p>The environment is safe and positive</p> <p>Summary</p> <p>Despite frailty, disability, and illness including dementia, residents can be supported to enjoy their experience in the home. A values-led culture is vital in maintaining a positive environment.</p> <p>Being safe and secure is vital to our wellbeing but feeling safe and secure is as important.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Creating community • Sharing decision making • Promoting a positive culture • Improving health and healthcare • Workforce fit for purpose <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Purpose <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Ensuring safety • Promoting independence • Relationships • Rest and sleep • Ensuring comfort, alleviating pain • Personal hygiene, appearance and foot care • Eating and drinking • Oral health and hygiene 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Environmental risk assessments are carried out for each resident in relation to the areas that they can access in and around the home • Environmental risk assessments are reviewed for each resident regularly and/ or when their situation changes e.g. discharged from hospital; physical and/ or mental condition changes • The environment is homely and is suitable and enjoyable for residents with dementia (is designed with relevant factors in mind such as layout, colour, lighting, storage, labelling and where appropriate assistive technology). 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Staff receive enhanced training on supporting emotional wellbeing • Assistive technologies are deployed as appropriate to ensure residents' safety is maintained, whilst choice of movement is not limited • Residents who have a dementia are integrated into the life of the rest of the home as appropriate 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • The home uses a quality of life risk assessment tool to identify emotional risks and identifies and delivers solutions • Residents are supported to take informed risks e.g. washing up, gardening, cleaning etc.

<p>Our emotional feelings of safety and security need to be guarded as well as our need for physical safety.</p> <p>Residents must be supported in a safe way, using methods and equipment that meets their needs fully.</p>	<ul style="list-style-type: none"> • Toilet needs • Preventing pressure sores <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being • Protection from abuse and neglect • Domestic, family and personal relationships • Contribution made to society • Securing rights and entitlements • Social and economic well-being • Suitability of living accommodation <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with 	<ul style="list-style-type: none"> • Good records are made and information is communicated to the relevant individuals regarding residents' feelings of safety and security • Residents are supported to leave a situation that they feel unsafe and/ or insecure in • Staff comfort residents when needed using recognised techniques and items that are appropriate to the resident • Staff work with families and/ or health professionals in supporting the resident with their concerns • Residents are offered independent advocacy when a POVA referral has been made (for those with fluctuating capacity or communication difficulties, this should be non- instructed advocacy. (See 1.6 OPCfW action plan). 		
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	<p>eating and drinking if I need it</p> <ul style="list-style-type: none"> • If I am anxious or depressed staff will recognise my mood, listen to me, and my carers and support me to feel as well as possible • If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably 	<ul style="list-style-type: none"> • Staff contribute to the resident's wellbeing and sense of security by communicating in a positive manner, showing value to the resident • Bedrooms, communal areas and garden can be accessed and used by residents, visitors and staff. People with disabilities can access all floors that form a part of the accommodation and have easy egress around and from the home. • The home is decorated, furnished and maintained to a good standard. • The home is kept clean and is free from offensive odours. • Facilities and equipment are adequate for the needs of residents and are properly maintained and in a satisfactory state of repair e.g. lifts, adaptations, and rails, 		
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		<p>moving and handling equipment, specialist equipment, bathrooms, showers, private area (residents / visitors), communal areas, and activity areas.</p> <ul style="list-style-type: none"> • The home is kept at an appropriate temperature in all areas. • An accessible and safe garden area and appropriate outdoor furniture is provided. • Regular environmental health and safety audits are carried out, recorded and acted upon • Residents are supported to mix with others as appropriate and as desired • A positive use of language is maintained with residents and their families/ friends • Comfort is provided to those experiencing anxiety to support their feelings of security • A visually stimulating environment is 		
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		<p>provided</p> <ul style="list-style-type: none">• A relaxed environment is promoted with use of calming music as appropriate• Residents' choice is supported in every aspect of life e.g. activities, food, clothing etc.• Families are involved in the everyday life of the resident as appropriate		
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B1.</p> <p>A healthy lifestyle is promoted</p> <p>Summary</p> <p>Despite increasing levels of frailty, illness and disability, promoting health and a healthy lifestyle must be a priority for homes.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Significance • Purpose <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Ensuring safety • Promoting independence • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Physical and mental health and emotional well-being • Education, training and recreation • Contribution made to society <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Residents should be encouraged to be active physically and mentally • Physical activities appropriate to all levels of physical ability should be available for all residents. • Activities that stimulate residents mentally should be encouraged e.g. puzzles; reading; quizzes; reminiscence etc. • Assessments of residents should focus on what they can achieve, not on what they can't • Accurate records should be kept of observed and informed changes in residents' health and activity • Staff are encouraged to support residents as much as possible to keep physically and 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • There is meaningful evidence of residents being active mentally and physically. 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • As able and willing, residents should take part in household activities e.g. cleaning, vacuuming, washing etc. • As able and willing, residents to invite and encourage their peers to participate in group activities.

	<p>compassion and supported to feel safe at all times</p> <ul style="list-style-type: none"> • If I am in pain or discomfort it will be recognised and I will have help to manage it • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it but if I am incontinent I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself, this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably 	<p>mentally active.</p> <ul style="list-style-type: none"> • Residents should be encouraged and supported to have sufficient and good quality sleep and rest • All staff are made aware of rest and sleep issues of residents in relation to how activities may compromise these issues • Residents are supported to rest and sleep whenever they choose to. (This must be balanced with the resident's other needs.) • Staff receive oral hygiene training to ensure residents have a clean, healthy mouth 		
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| | <ul style="list-style-type: none">• I will have the right medicine at the right time• My care will take account of any sight or hearing loss I may have | | | |
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B2.</p> <p>Access to healthcare services is promoted</p> <p>Summary</p> <p>Access to healthcare services is a right for all people. The range of health and social care needs in a care home mirrors that of wider communities. Residents should be supported to access the services they need and request.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Significance • Purpose <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Ensuring safety • Promoting independence • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Physical and mental health and emotional well-being • Education, training and recreation • Contribution made to society <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Residents should be registered with a local GP and dentist • Residents should be supported to attend health appointments and have a clear policy which explains when residents will be accompanied by paid carers and when the home will seek help from family members or volunteers (see 4.2 OPCfW action plan). • Residents should have their wishes for medical treatment/ non treatment, documented appropriately, respected and adhered to • Residents should have their cultural, religious and lifestyle choice, needs and wishes accommodated • Accurate records should be kept of all 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Managers and staff should be proactive in supporting residents to access the needed services e.g. have systems in place to know when regular check-ups are due etc. 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Staff research health conditions with which they are not familiar and provide updates to colleagues in staff meetings on sources of information. i.e. Specialist Foundations and Associations and NHS information • Staff have evidence-based knowledge of health conditions relevant to the people they work with and feed this information back to colleagues in staff meetings

	<p>compassion and supported to feel safe at all times</p> <ul style="list-style-type: none"> • If I am in pain or discomfort, it will be recognised and I will have help to manage it • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it but if I am incontinent I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably 	<p>healthcare information</p> <ul style="list-style-type: none"> • Relatives of a resident should be informed of healthcare appointments and subsequent actions and consequences of the appointment with the resident's permission • All members of staff should be involved in communicating their knowledge of the residents' health e.g. any member of staff may notice a difference in a resident's health/condition, all staff should attend and be involved in handover discussions • A daily record should be kept of oral hygiene and foot care 		
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	<ul style="list-style-type: none">• I will have the right medicine at the right time• My care will take account of any sight or hearing loss I may have			
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B3.</p> <p>Good nutrition, hydration and dining experience is maintained</p> <p>Summary</p> <p>Food and drink not only are physically necessary for residents but they also play a role in the social aspects of care home life</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Sharing decision making • Creating community • Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Respecting people • Promoting independence • Relationships • Eating and drinking <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being • Domestic, family and personal relationships • Contribution made to society <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Residents should have access to food and drink at all times • There should be a variety in choice of food and drink available • Residents have the choice of a hot main meal at the time of day that suits them • Food and drink should be available for residents to access independently if able • Residents should be given options as to where and when they take their meals • Accurate records of food and drink consumption should be kept for medical reference when necessary • Relatives and other visitors should be able to access refreshments independently • Residents' dietary 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Relatives and other visitors should be encouraged and welcomed to share a meal with residents • Residents and their family and friends should be encouraged to celebrate special events/religious festivals/other culturally important events in the home 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Staff take their meals with residents • Residents should take part in meal preparation when able and willing

	<p>dignity, care and compassion and supported to feel safe at all times</p> <ul style="list-style-type: none"> • If I am in pain or discomfort it will be recognised and I will have help to manage it • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it but if I am incontinent I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this 	<p>needs should be accommodated at all times i.e. physical, cultural, religious, lifestyle choice etc.</p> <ul style="list-style-type: none"> • Staff have an awareness that residents with dementia may experience a range of problems with eating and drinking and where this occurs, can demonstrate solutions to overcome these problems. • Residents', relatives' and staff's food and drink allergy or tolerance needs must be accommodated at all times e.g. nut allergy; lactose intolerance 		
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	<p>comfortably</p> <ul style="list-style-type: none">• I will have the right medicine at the right time• My care will take account of any sight or hearing loss I may have			
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B4.</p> <p>Medication is managed safely</p> <p>Summary</p> <p>Most residents are in need of medication interventions. The management of medication and having the necessary recording and communication systems in place is vital.</p> <p>Also, taking and administering medication is a small but important part of a person's day. It should not be a main event,</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Maintaining identity • Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> • Security <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Respecting people • Ensuring safety • Promoting independence • Ensuring comfort • Alleviating pain <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • If I am in pain or discomfort it will be recognised and I will 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • All medication should be stored appropriately i.e. <ul style="list-style-type: none"> - non- prescription medication will be controlled by the resident, where appropriate - prescription and controlled medications should be kept securely • Accurate records should be kept of all medication delivery, administration and return/ disposal • Arrangements should be in place with a local pharmacy for safe delivery and return/ disposal of medications • Appropriate staff should be trained in up to date medication administration methods and requirements • Regular appropriate Medication 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Residents and their relatives should be enabled and supported to engage in their medication regime where the staff have responsibility for medication management. • Where and when appropriate, staff, residents and relatives will work together to maintain accurate medication records • The use of an appropriate Pain Tool should be evident for each resident as appropriate 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Where appropriate and when willing, relatives should be supported to access appropriate training to enable them to assist with specialist medication/ treatment e.g. oxygen therapy • Medication support and administration should at all times be done in a non-institutional way i.e. not a main feature of the day; without medication trolleys etc.

<p>but handled in such a way that promotes dignity.</p>	<p>have help to manage it</p> <ul style="list-style-type: none"> • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it but if I am incontinent, I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself, this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably • I will have the right medicine at the right time • My care will take account of any sight or hearing loss I may have 	<p>Observations are in place and records kept.</p> <ul style="list-style-type: none"> • Medication temperatures to be maintained below 25 degrees centigrade and recorded twice daily • An appropriate recognised pain tool should be used to assess pain and rationalise the use of PRN pain medication 		
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B5.</p> <p>Infection control is effective</p> <p>Summary</p> <p>Strict infection control is required in an environment that is home to residents who have high levels of frailty, illness and disability.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> Security <p>Fundamentals of care</p> <ul style="list-style-type: none"> Personal hygiene appearance and foot care Ensuring safety <p>National outcomes framework</p> <ul style="list-style-type: none"> Well-being Physical and mental health and emotional well-being <p>The Andrews report</p> <ul style="list-style-type: none"> I will be treated with dignity, care and compassion and supported to feel safe at all times If I am in pain or discomfort, it will be recognised and I will have help to manage it 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> All staff must be trained in the up to date methods and requirements around infection control All staff must use the appropriate Personal Protective Equipment (PPE) when necessary i.e. supporting personal care, preparing food, cleaning etc. Where and when possible, residents are supported to use effective hand cleaning techniques Appropriate hand sanitizers and prompt notices are placed appropriately throughout the home to ensure residents/staff and visitors have easy access to these. Effective wound management 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> Champions from within the staff team monitor infection control practices and offer advice on infection control. Bathing/showering is available to all residents at times convenient to them more than once a day The home is proactive in its relationship with health professionals regarding infection control 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> Visitors are given information on infection control and their role within this

	<ul style="list-style-type: none"> • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it but if I am incontinent I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself, this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably • I will have the right medicine at the right time • My care will take account of any sight or hearing loss I may have 	<p>techniques are used and explained to residents to ensure infection control.</p> <ul style="list-style-type: none"> • Daily bathing/showering is available to all residents. • Appropriate waste management equipment is available and used correctly. • When clothing is cleaned and laundered by the home, personal clothing is returned promptly, hygienically cleaned and in the same serviceable condition where possible. • Managers will work closely with internal and external health professionals to ensure the highest standards 		
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B6.</p> <p>Manual handling is respectful and safe</p> <p>Summary</p> <p>Many residents need a helping hand in getting about and taking care of themselves throughout the day (and night). This may involve the use of equipment or maybe just an arm to link with. As well as working in line with training, guidance and legislation, we must also carry out such tasks showing full</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Creating community • Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Respecting people • Ensuring safety • Ensuring comfort, alleviating pain <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • If I am in pain or discomfort, it will be 	<p>Examples of outcome measures to show how gradings are awarded</p>		
<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • All members of staff have fully certificated up to date training in manual handling for their area(s) of work • Staff carry out all manual handling tasks in accordance with their training and latest legislation and guidance • All manual handling tasks are undertaken by the necessary number of staff for that task • Manual handling equipment is clean, maintained and has maintenance schedules 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Full and clear communication is maintained with the resident(s) during manual handling manoeuvres • The home is proactive in its relationship with health professionals regarding manual handling 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • The manual handling of residents is carried out showing full dignity and respect toward the resident(s) • Relatives are involved in manual handling procedures if they wish to be • Relatives receive manual handling training in order to assist staff if they are willing 		

<p>respect and dignity to each resident. This will show an understanding of how a resident may feel when being supported in this way</p>	<p>recognised, and I will have help to manage it</p> <ul style="list-style-type: none"> • I will have choice about what I can eat and drink any time I wish and will be given support with this if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it, but if I am incontinent, I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably • I will have the right medicine at the right time • My care will take account of any sight or hearing loss I may have 			
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B7.</p> <p>Measures are taken to prevent falls</p> <p>Summary</p> <p>The residents we support in care homes are often vulnerable and physically frail. In having a safe place to live and work in, we cannot and should not attempt to get rid of all risks. However, the care home needs to be a place where residents can live without fear of falling. Staff members must also be able to work in a safe environment.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> Security <p>Fundamentals of care</p> <ul style="list-style-type: none"> Personal hygiene, appearance and foot care Ensuring safety Promoting independence <p>National outcomes framework</p> <ul style="list-style-type: none"> Well-being Physical and mental health and emotional well-being <p>The Andrews report</p> <ul style="list-style-type: none"> I will be treated with dignity, care and compassion and supported to feel safe at all times If I am in pain or discomfort it will be recognised and I will have help to manage it 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> All members of staff have fully certified up to date training in falls prevention The home must be kept in good repair to reduce the risks of falls Risk assessments must be carried out to assess the risk of falls for new residents Residents must be re-risk assessed if their mobility needs have increased Residents must be encouraged to wear suitable footwear in the home depending on their needs and activities 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> The home is proactive in its relationship with health professionals regarding falls prevention Falls prevention includes the assessment of how we support residents in tasks and activities e.g. <ul style="list-style-type: none"> taking time in supporting a resident to walk not rushing them to finish a task/ activity The Home has an appropriate setting, staffing level and environment to allow for observations of residents at high risk of falls 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> Residents are supported to identify and highlight trip hazards and circumstances that might lead to falls

	<ul style="list-style-type: none"> • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it but if I am incontinent I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or be helped to do this comfortably • I will have the right medicine at the right time • My care will take account of any sight or hearing loss I may have 			
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B8.</p> <p>Skin integrity is managed effectively</p> <p>Summary</p> <p>The high level of frailty amongst care home residents regularly means that skin integrity is a health priority. If skin integrity is not maintained, this may lead to other serious health conditions.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> Security <p>Fundamentals of care</p> <ul style="list-style-type: none"> Ensuring safety Ensuring comfort, alleviating pain Personal hygiene, appearance and foot care Preventing pressure sores <p>National outcomes framework</p> <ul style="list-style-type: none"> Well-being Physical and mental health and emotional well-being <p>The Andrews report</p> <ul style="list-style-type: none"> I will be treated with dignity, care and compassion and supported to feel safe at all times If I am in pain or 	<p>Examples of outcome measures to show how gradings are awarded</p>		
<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> All members of staff have fully certified up to date training in skin integrity All staff are made aware of skin integrity issues of residents in relation to how activities may compromise these issues Skin integrity assessments are carried out when a residents condition/ health worsens 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> The home is proactive in its relationship with health professionals regarding skin integrity Staff are able to demonstrate knowledge of the risk factors associated with skin integrity 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <p>Residents and their families are supported to identify and highlight skin integrity issues</p>		

	<p>discomfort, it will be recognised, and I will have help to manage it</p> <ul style="list-style-type: none">• I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it• My skin will be looked after and not damaged• I will be able to get to the toilet when I need it but if I am incontinent I can expect to feel clean, comfortable and dry (quickly)• If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff• I will be able to move about easily and safely, or be helped to do this comfortably			
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	<ul style="list-style-type: none">• I will have the right medicine at the right time• My care will take account of any sight or hearing loss I may have			
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B9.</p> <p>Residents have sufficient rest and sleep</p> <p>Summary</p> <p>Sufficient rest and sleep are essential good health and well-being. The amount of time resting and sleeping will differ for each resident. However, we must support each resident to have sufficient rest and sleep for them.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> Improving health and healthcare <p>Senses framework</p> <ul style="list-style-type: none"> Security <p>Fundamentals of care</p> <ul style="list-style-type: none"> Rest and sleep Ensuring comfort, alleviating pain <p>National outcomes framework</p> <ul style="list-style-type: none"> Well-being Physical and mental health and emotional well-being <p>The Andrews report</p> <ul style="list-style-type: none"> I will be treated with dignity, care and compassion and supported to feel safe at all times If I am in pain or discomfort it will be recognised and I will have help to manage it I will have choice about what I can eat 	<p>Examples of outcome measures to show how gradings are awarded</p>		
<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> All staff are made aware of rest and sleep issues of residents in relation to how activities may compromise these issues Residents are supported to rest and sleep whenever they choose to. (This must be balanced with the residents' other needs.) 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> The home's call bell/ alarm system does not compromise a resident's rest and sleep 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> Residents are supported to access rest and sleep that helps them engage fully in their chosen and needed activities 		

	<p>and drink any time I wish and will be given support with eating and drinking if I need it</p> <ul style="list-style-type: none"> • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it but if I am incontinent I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself, this will be recognised. I will be listened to and supported to make choices and decisions by trained staff • I will be able to move about easily and safely, comfortably • I will have the right medicine at the right time • My care will take account of any sight or hearing loss I may have 			
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<p>High Level Outcome B.</p> <p>The physical and mental health and wellbeing of residents is maintained and promoted</p> <p>Outcome Indicator B10.</p> <p>Pain and other symptoms are managed effectively</p> <p>Summary</p> <p>Pain and other uncontrolled symptoms take away from a person's well-being and quality of life. By understanding how each resident reacts to pain and discomfort we can understand how to best support them.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> Improving health and healthcare Keeping the workforce fit for purpose Maintaining identity Sharing decision making <p>Senses framework</p> <ul style="list-style-type: none"> Security Significance Purpose Achievement <p>Fundamentals of care</p> <ul style="list-style-type: none"> Ensuring safety Ensuring comfort, alleviating pain Preventing pressure sores Communication and information Respecting people Personal hygiene, appearance and foot care Oral health and hygiene 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> A pain tool appropriate to the individual resident is used at the Home All members of staff have up to date training in pain and symptom management appropriate to their role All staff are made aware of the pain management issues of residents in relation to how activities may compromise these issues Pain and symptom management assessments are carried out when a resident's condition/ health worsens Pain assessments are carried out when behaviour changes are noticed in those unable to verbally 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> The home is proactive in its relationship with health professionals regarding pain and symptom management All staff are aware of the concept of total pain and how pain manifests itself with each resident 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> Staff understand residents' pain and other symptoms and their manifestations i.e. behaviour due to pain is understood not managed

	<p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being • Protection from abuse and neglect • Securing rights and entitlements <p>The Andrews report</p> <ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • If I am in pain or discomfort it will be recognised and I will have help to manage it • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • My skin will be looked after and not damaged • I will be able to get to the toilet when I need 	<p>report or express pain (Abbey Pain Scale)</p> <ul style="list-style-type: none"> • Appropriate action is taken in a timely manner following the assessments • Assessments are performed regularly and efficacy of interventions reviewed 		
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	<p>it but if I am incontinent, I can expect to feel clean, comfortable and dry (quickly)</p> <ul style="list-style-type: none">• If I have difficulty understanding or expressing myself this will be recognised. I will be listened to and supported to make choices and decisions by appropriately trained staff• I will be able to move about easily and safely, or to be helped to do this comfortably• I will have the right medicine at the right time• My care will take account of any sight or hearing loss I may have• If I am anxious or depressed staff will recognise my mood			
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<p>High Level Outcome C.</p> <p>There is a dynamic leadership style that inspires and motivates a competent staff team</p> <p>Outcome Indicator C1.</p> <p>The leadership and motivation of staff is effective</p> <p>Summary</p> <p>Leading a care home means more than managing the service. Leadership includes:</p> <ul style="list-style-type: none"> • having a clear vision and mission for the home • providing a good example for staff • continually looking to develop your services • stimulating and motivating the staff to develop • Appropriately challenging poor practice and deal with concerns regarding 	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Keeping workforce fit for purpose • Promoting a positive culture <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Promoting independence • Relationships 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Regular staff meetings are held (at least bi-monthly) • Supervision sessions with all staff members are held (every six – eight weeks) • Group supervision sessions are held with all teams (at least bi-monthly) • A stated mission and vision for the care home is in place • The manager and all senior staff spend time on ‘the floor’ every day • The manager meaningfully engages with residents and families every day • The manager ensures staffing arrangements are sufficient to meet needs and are determined according to national guidelines on staffing levels and 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • All members of staff are encouraged to contribute ideas in developing the home • A Development Group is set up to discuss new ideas and suggestions, and then implementation decided. (This group should include: <ul style="list-style-type: none"> - The manager - Residents - Relatives - Two or three members of staff from different teams 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Engagement takes place with other care home managers at provider events to learn of new initiatives and projects e.g. forums; network events; conferences etc. • High professional standards are demonstrated and the desire to promote this within the whole team through regular observations /role-shadowing/ monitoring of practice and audit of record systems – followed by sensitive feedback and proactive encouragement of improvement. • The manager will

standards in a timely and sensitive manner.		skills required to meet the physical and emotional needs of older people (see 5.2 of OPCfW action plan)		attain a recognised qualification in leadership and management
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<p>High Level Outcome C.</p> <p>There is a dynamic leadership style that inspires and motivates a competent staff team</p> <p>Outcome Indicator C2.</p> <p>A values-based culture is promoted and developed</p> <p>Summary</p> <p>A values-based culture means a person and relationship led care home. Putting relationships first and focussing on quality of life and experience for residents, relatives and staff, will lead to a close community.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Keeping workforce fit for purpose • Promoting a positive culture <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Respecting people • Relationships • Promoting independence <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Physical, mental health and emotional well-being • Contribution made to society 	<p>Examples of outcome measures to show how gradings are awarded</p>		
<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • The manager or a member of the management team should be available to staff at all times • Residents are encouraged to get involved in their own care as much as is possible and as appropriate • Relatives are encouraged to get involved in their relative’s care as much as is possible and appropriate • Relatives are encouraged to get involved in all aspects of the Home’s life • Staff reporting must be strengths and not needs led 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Decision making is shared with residents, relatives and staff members e.g. recruitment; training, activities etc. • Activities are resident-led in design and actioned as is possible 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Care plans will be person and relationship centred with quality of life the focus and not care tasks 		

<p>High Level Outcome C.</p> <p>There is a dynamic leadership style that inspires and motivates a competent staff team</p> <p>Outcome Indicator C3.</p> <p>The workforce is developed and competent</p> <p>Summary</p> <p>Well trained and motivated staff who are valued in their role, are one of the key factors in making sure that residents are supported to enjoy the best quality of life possible for them.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Keeping workforce fit for purpose • Promoting a positive culture <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Recruitment processes should not only take into consideration an applicant's experience but also their personality and suitability for the role • All members of staff (after working their probationary period) should hold the relevant qualification for their role, or at least be working towards it • Staff through supervision, should be encouraged to comment on how their training is going and what benefit it is to them and identify other training and learning opportunities relevant to them and their role • All staff receive an 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Induction for new staff to include non- care role e.g. working with the Activities Co-ordinator • Feedback is given to residents on training for staff when it has been completed e.g. who has done what; levels of qualification achieved etc. • Continuous Professional Development (CPD) portfolios are maintained for all staff 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Residents and relatives are involved in identifying, shaping and possibly delivering and evaluating the training required for staff e.g. responding to residents/ relatives' comments that manual handling may be carried out in a better way etc.

		<p>annual appraisal, which includes a skills gap and training needs analysis to inform their personal development</p> <ul style="list-style-type: none"> • All care home employees undertake dementia training (see 3.2 of OPCfW action plan) • A system is in place to assess against, and support staff to attain the mandatory skills and values based competencies developed by the Care Council for Wales (see 5.3 of the OPCfW action plan). • The care home has at least one dementia champion • Systems for supporting staff and developing a competent workforce adequately address dementia care specifically (including systems for induction, supervision, training and appraisal). 		
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<p>High Level Outcome C</p> <p>There is a dynamic leadership style that inspires and motivates a competent staff team</p> <p>Outcome Indicator C4.</p> <p>A person/relationship centred approach is promoted</p> <p>Summary</p> <p>Supporting residents to enjoy the best quality of life that they can is the goal for care homes. This can be achieved by focussing on the resident and those who impact on their quality of life.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Keeping workforce fit for purpose • Promoting a positive culture <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Enable all staff to get to know residents and their families. • Encourage relationships to develop between residents, relatives and staff. • Managers and senior staff should lead by example in being person/ relationship centred • Managers and staff should look for opportunities to ensure that residents are at the heart of the service, and promote voice, choice and control 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Learning opportunities and materials are made available to all staff to support a person/ relationship centred approach. • Appropriate training is available for all staff in person/ relationship centred approaches 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Staff engage with support programmes/ organisations to support the development of a person/ relationship centred approach e.g. NAPA; My Home Life Cymru. • Families are engaged with promoting a person/ relationship centred approach in the home

<p>High Level Outcome C</p> <p>There is a dynamic leadership style that inspires and motivates a competent staff team</p> <p>Outcome Indicator C5.</p> <p>Continuous improvement is promoted</p> <p>Summary</p> <p>The leadership within in the home understands and effectively communicates that the desire to give the best always pushes us on to continually improve and that each person can play their part in this.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Promoting a positive culture <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • There is an overt method of implementing new regulation, guidance, innovative care philosophies and methods. • A critical/analytical approach to appraising possible inclusion of new information into day to day practice is developed. • There is a clear method of collating and implementing improvements. • Rigorous methods are in place to ensure change takes root and that there is not a return to former ways. 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • At any one time leadership in the home has a plan to implement changes derived from regulation, guidance, care philosophies etc. • Each staff member contributes improvement ideas which all are responded to with a clear outcome from the home leadership (even if declined). 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • There is evidence of responding and implementing change to individual staff, residents and or their family’s improvement suggestions. • Leadership can demonstrate adoption or adaption of a change management methodology e.g. PDSA or LEAN 6 Sigma

<p>High Level Outcome D</p> <p>End of life care is dignified and supportive</p> <p>Outcome Indicator D1.</p> <p>A dignified end of life is enabled</p> <p>Summary</p> <p>End of life care is now a very regular part of care home life. Increasing frailty, illness and disability mean that we are now regularly supporting people at the end of their lives and also supporting families and staff members through bereavement and loss</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> Supporting good end of life <p>Senses framework</p> <ul style="list-style-type: none"> Security Belonging Continuity Achievement Purpose Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> Relationships Ensuring comfort, alleviating pain Communication and information Ensuring safety Respecting people Oral health & hygiene <p>National outcomes framework</p> <ul style="list-style-type: none"> Well-being Domestic, family and personal relationships Securing rights and entitlements Protection from neglect and abuse 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> A quiet area is provided for families and staff to ask questions and reflect The resident's and their families' wishes are followed as to their End of Life Care plan and arrangements - as per Advanced Care Planning. The appropriate and approved end of life priorities must be initiated with agreement from all stakeholders at the correct time Staff have knowledge of Specialist health professionals and involve appropriately Staff will attend Foundation level communication training as per NICE guidance 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> Residents, other relatives and staff are made aware of the situation concerning a resident's end of life care with the consent of the resident and their family Other residents and their families are encouraged to offer support to the dying resident and their family as appropriate Family and friends are able to visit without restriction and can remain with the individual after death 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> The Home facilitates the availability of staff members who may be closest to the resident to provide support and comfort Spiritual, Religious and Cultural views/ beliefs are appropriately accommodated Staff will attend Intermediate level communication training

	<p>The Andrews report</p> <ul style="list-style-type: none"> • If I am anxious or depressed, staff will recognise my mood, listen to me, and my carers, and support me to feel as well as possible • If I am at the end of my life my wishes and spiritual beliefs and those of my carers will be assessed and met wherever possible • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have the right medicine at the right time • If I am in pain or discomfort it will be recognised and I will have help to manage it 			
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<p>High Level Outcome D</p> <p>End of life care is dignified and supportive</p> <p>Outcome Indicator D2.</p> <p>Residents, relatives and staff feel supported throughout the end of life stage</p> <p>Summary</p> <p>Everyone reacts differently to the reality of end of life. Some will react very differently to others. Whether resident, relative or staff member, all of these people will need very individual support. For some, this support will be needed well after a funeral has taken place.</p>	<p>Cross References</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Supporting good end of life • Creating community <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Relationships • Ensuring comfort, alleviating pain • Communication and information • Ensuring safety • Respecting people <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Domestic, family and personal relationships • Securing rights and entitlements • Protection from abuse and neglect 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • All Staff will attend Palliative and End of life training • Ensure time is available for residents, relatives and staff to talk to the manager and senior team about the situation • Provide a quiet area for families to ask questions and reflect • Inform other residents and their families appropriately of the situation of their fellow resident with the consent of the individual and their family • Ensure that the resident and their family are aware of the change in their condition 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Ensure clinical supervision is available for all staff members • Support staff members and residents to attend the funeral. If this is not possible, hold an appropriate service at the home (with the families agreement) • Staff are aware of the impact of grief on individuals and are able to offer support appropriate to their role. • Residents who wish to remember another resident are facilitated to do so, as some may prefer a memorial bench or plant in a memorial 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Enable staff to participate in recognised credited courses including those taught in universities and the charitable sector • Provide support to all by appropriate signposting e.g. bereavement counselling • Encourage bereaved relatives and friends with the opportunity to keep up their good relationship with the home by volunteering • Staff are aware of the reactions grief may cause both prior to and after death and are able to offer support appropriate to their role.

	<ul style="list-style-type: none"> • Securing rights and entitlements <p>The Andrews report</p> <ul style="list-style-type: none"> • If I am anxious or depressed staff will recognise my mood, listen to me, and my carers and support me to feel as well as possible • If I am at the end of my life my wishes and spiritual beliefs and those of my carers will be assessed and met wherever possible • I will be treated with dignity and care • If I am in pain or discomfort it will be recognised and I will have help to manage it • If I have difficulty expressing myself this will be recognised 		<p>garden</p> <ul style="list-style-type: none"> • An annual memorial service is held for all those who passed away over the last twelve months 	
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High Level Outcome D	Cross references	Examples of outcome measures to show how gradings are awarded		
<p>End of life care is dignified and supportive</p> <p>Outcome Indicator D3.</p> <p>Multi-disciplinary working is effective</p> <p>Summary</p> <p>Working closely with health professions at this time is vital in ensuring that the best care and support is given to the resident. This is true whether the home offers nursing care or not. Although nursing homes will have qualified staff on the premises, they should utilise other health professionals in the community as appropriate.</p>	<p>My Home Life themes</p> <ul style="list-style-type: none"> Supporting good end of life Improving health care Sharing decision making <p>Senses framework</p> <ul style="list-style-type: none"> Security Belonging Continuity Achievement Purpose Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> Relationships Ensuring comfort, alleviating pain Communication and information Ensuring safety Respecting people <p>National outcomes framework</p> <ul style="list-style-type: none"> Well-being Domestic, family and personal relationships Securing rights and entitlements 	<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> All relevant health professionals must be informed and engaged with as appropriate The appropriate Welsh End of Life Priorities / Care Decisions Guidance must be initiated and followed with agreement from all relevant professionals in a timely manner All staff will attend End of Life training to enable them to recognise that the individual is dying Registered Nurses will be competent in symptom assessment and management All Registered Nurses will be competent in the management of medication via Syringe Driver and will attend annual training. Residents will be 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> Resources from external organisations are used to help support the home e.g. National Council for Palliative Care; Dying Matters, Macmillan Cancer Support Staff are enabled to receive appropriate training from health professionals Medications for common symptoms at the end of life are prescribed and are available for use 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> Staff engage in annual multi-disciplinary training with other professionals Spiritual, religious and cultural views/ beliefs are appropriately accommodated Staff attend Intermediate level communication training Consideration has been given to the residents' choice of preferred place of death Registered nurses are aware of 'just in case boxes' and encourage prescribing for individual residents in a timely manner

	<p>The Andrews report</p> <ul style="list-style-type: none"> • If I am anxious or depressed, staff will recognise my mood, listen to me, and my carers, and support me to feel as well as possible • If I am at the end of my life, my wishes and spiritual beliefs, and those of my carers, will be assessed and met wherever possible • I will have the right medicine at the right time • If I am in pain or discomfort it will be recognised and I will have help to manage it • If I have difficulty understanding or expressing myself this will be recognised and I will be listened to 	<p>discussed with the Primary Health Care Team during Palliative Care meetings as per the Palliative Care register</p>		
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<p>High Level Outcome D</p> <p>End of life care is dignified and supportive</p> <p>Outcome Indicator D4.</p> <p>End of life planning is effective and timely</p> <p>Summary</p> <p>Many residents who now move into the care home are extremely frail and ill. Although we treat the issue of end of life care with compassion, communication with the individual cannot be put off for another day. These issues must be discussed in a timely fashion.</p>	<p>Cross references</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Supporting good end of life • Maintaining identity • Sharing decision making <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Relationships • Ensuring comfort, alleviating pain • Communication and information • Ensuring safety • Respecting people <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Domestic, family and personal relationships • Securing rights and entitlements 	<p>Examples of outcome measures to show how gradings are awarded</p>		
<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • The wishes of an individual at their end of life should be explored, although not necessarily fully discussed at the time of assessment and transition into the home • Residents’ choices must be gathered and clearly recorded to cover their views and wishes on end of life matters, including treatment; place of care; place of death; resuscitation; funeral plans; organ donation etc. • The appropriate and approved end of life priorities guidance must be initiated with agreement from the resident, their family and all relevant professionals at the correct time 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • The home works closely with the resident’s family to ensure that the resident’s wishes are identified, agreed, recorded and shared appropriately with the resident’s permission i.e. Advance Decision to Refuse Treatment 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • The home works closely with health professionals in providing timely support and information to the resident, their family and staff members • Residents and their families may appropriately be put in touch with and discuss this topic with families who have been in this situation in the home 		

	<ul style="list-style-type: none"> • Physical and emotional and mental health <p>The Andrews report</p> <ul style="list-style-type: none"> • If I am anxious or depressed staff will recognise my mood, listen to me and my carers and support me to feel as well as possible • If I am at the end of my life my wishes and spiritual beliefs, and those of my carers, will be assessed and met wherever possible • I will be treated with dignity, care and compassion • If I have difficulty understanding or expressing myself this will be recognised and I will be listened to 	<ul style="list-style-type: none"> • Residents' and their families views and wishes are reviewed at regular intervals and also as the residents' physical health deteriorates 		
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<p>High Level Outcome D</p> <p>End of life care is dignified and supportive</p> <p>Outcome Indicator D5.</p> <p>A positive environment is maintained</p> <p>Summary</p> <p>Despite the delicate nature of end of life care and support, a positive environment must be maintained within the home. This should be done in a respectful and dignified way, showing empathy and consideration to all involved.</p>	<p>Cross references</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> Supporting good end of life Promoting a positive culture Creating community <p>Senses framework</p> <ul style="list-style-type: none"> Security Belonging Continuity Achievement Purpose Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> Relationships Ensuring comfort, alleviating pain Communication and information Ensuring safety Respecting people <p>National outcomes framework</p> <ul style="list-style-type: none"> Well-being Domestic, family and personal relationships Securing rights and 	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> With the consent of the individual and their family, residents, other relatives and staff are made aware of the situation concerning a resident’s end of life care Information is provided to residents and their families to support them and make them aware of what will/ may happen, including the care they will receive Family and friends are able to visit without restriction and remain with the resident after death. Resident/ family preferences are respected and acknowledged in the home at this time e.g. type and level of 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> Relatives and staff are supported to help deal with bereavement and loss Residents and staff are enabled to observe/ take part in the funeral as they and the bereaved family may wish e.g. attend the funeral; start a book of remembrance etc. 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> Resources from external organisations are used to help support the home e.g. CRUSE; National Council for Palliative Care; Dying Matters, MacMillan Cancer Support etc.

	<p>entitlements</p> <p>The Andrews report</p> <ul style="list-style-type: none"> • If I am anxious or depressed staff will recognise my mood, listen to me and my carers and support me to feel as well as possible • If I am at the end of my life my wishes and spiritual beliefs and those of my carers will be assessed and met wherever possible • If I am in pain or discomfort it will be recognised and I will have help to manage it • I will be treated with dignity, care and compassion • If I have difficulty understanding or expressing myself this will be recognised and I will be listened to 	<p>activities in the home; room curtains/ blinds opened/ closed etc</p>		
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<p>High Level Outcome E</p> <p>The benefits of effective partnership working are recognised and promoted</p> <p>Outcome Indicator E1.</p> <p>Positive relationships with residents, relatives and friends are developed</p> <p>Summary</p> <p>The basis of a relationship centred approach is the positive way we work with and support residents, their families and friends and staff members.</p>	<p>Cross references</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Promoting a positive culture • Creating community <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Domestic, family and personal relationships <p>The Andrews report</p> <p>If I have carers their needs will be taken into account and they will be involved in my care and discharge planning with</p>	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Staff know who all their residents are, their family members and regular visitors. • The manager is available to residents, their families and friends when at all possible. • External phone calls are answered within a time frame to meet the needs and engagement of relatives and friends. 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Families and friends are invited to work with the home in forging strong links with the community at large. • Families and friends are encouraged to volunteer within the home • Families and friends are involved fully in care planning (with the consent of the resident), life story and reminiscence work with the resident 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Appropriate training is offered to families and friends e.g. dementia; stroke; Parkinson’s disease etc. • Relatives’ and friends’ skills are used within the home e.g. leading and/ or suggesting activities

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<p>High Level Outcome E</p> <p>The benefits of effective partnership working are recognised and promoted</p> <p>Outcome Indicator E2.</p> <p>Communication with residents, friends and professionals is effective</p> <p>Summary</p> <p>Communication is the lifeblood of a relationship. How can we develop and maintain good relationships with everyone, but especially those who may be difficult to reach due to a dementia or other difficulty? Seeing the person first and valuing them as an individual is key.</p> <p>Our relationships with others including relatives and professionals associated with the</p>	<p>Cross references</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Promoting a positive culture • Creating community <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Domestic, family and personal relationships <p>The Andrews report If I have carers their</p>	<p>Examples of outcome measures to show how gradings are awarded</p> <table border="1"> <tr> <td data-bbox="965 341 1357 1414"> <p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Staff work closely with each other and relatives to get to know the resident as well as possible • Communication is carried out in a positive way, using a positive tone, body language and facial expression (some residents may not communicate in the way that other residents do but are able to hear language and pick up on tone of voice) • Relatives are encouraged to get involved in the care and support of the resident • Staff are encouraged to use every </td> <td data-bbox="1357 341 1731 1414"> <p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Dementia friendly tools are used to support residents e.g. talking mats etc. • Staff are supported to have time to discuss the support needs of residents • Families and friends of residents should be informed of positive aspects relating to the resident as well as concerns </td> <td data-bbox="1731 341 2085 1414"> <p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Support and training is provided to relatives and friends in supporting residents e.g. dementia, specific conditions and approaches • Facilitate good relationships and communication between relatives and professionals where appropriate and possible in supporting their loved one e.g. health professionals </td> </tr> </table>			<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Staff work closely with each other and relatives to get to know the resident as well as possible • Communication is carried out in a positive way, using a positive tone, body language and facial expression (some residents may not communicate in the way that other residents do but are able to hear language and pick up on tone of voice) • Relatives are encouraged to get involved in the care and support of the resident • Staff are encouraged to use every 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Dementia friendly tools are used to support residents e.g. talking mats etc. • Staff are supported to have time to discuss the support needs of residents • Families and friends of residents should be informed of positive aspects relating to the resident as well as concerns 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Support and training is provided to relatives and friends in supporting residents e.g. dementia, specific conditions and approaches • Facilitate good relationships and communication between relatives and professionals where appropriate and possible in supporting their loved one e.g. health professionals
<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Staff work closely with each other and relatives to get to know the resident as well as possible • Communication is carried out in a positive way, using a positive tone, body language and facial expression (some residents may not communicate in the way that other residents do but are able to hear language and pick up on tone of voice) • Relatives are encouraged to get involved in the care and support of the resident • Staff are encouraged to use every 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Dementia friendly tools are used to support residents e.g. talking mats etc. • Staff are supported to have time to discuss the support needs of residents • Families and friends of residents should be informed of positive aspects relating to the resident as well as concerns 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Support and training is provided to relatives and friends in supporting residents e.g. dementia, specific conditions and approaches • Facilitate good relationships and communication between relatives and professionals where appropriate and possible in supporting their loved one e.g. health professionals 					

<p>residents are also crucial. Communication must be clear, accessible, accurate and timely.</p>	<p>needs will be taken into account, and they will be involved in my care and discharge planning with my consent</p>	<p>opportunity for interaction as an opportunity to communicate and engage with residents</p> <ul style="list-style-type: none"> • A resident's family and friends are given timely, clear, accessible and accurate information when needed and requested • Written records must be clear accurate and accessible • Hand-over sessions must include the views of all present, sharing important and vital information • Communication with relevant professionals e.g. GP's and nurses, must be clear and as regular as the resident's needs dictate 		
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<p>High Level Outcome E.</p> <p>The benefits of effective partnership working are recognised and promoted</p> <p>Outcome Indicator E3.</p> <p>The Home works closely with health/social care professionals</p> <p>Summary</p> <p>Good working relationships with other professionals who impact on our services is essential in optimising the potential for quality of life for the people we support and work with.</p>	<p>Cross references</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Promoting a positive culture • Creating community <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Domestic, family and personal relationships <p>The Andrews report If I have carers; their needs will be taken into account, and they will be involved in my care and discharge planning with</p>	<p>Examples of outcome measures to show how gradings are awarded</p> <p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • The home is positive and proactive in its communication with local GP’s and health/social care professionals e.g. community nurses; social workers, nurse specialists; local hospital staff etc. • The home engages positively with commissioners, demonstrates a willingness to share information and participate at relevant meetings and events e.g. local provider fora • The manager spends time with these professionals when in the home (as appropriate) and on other occasions • Clinical governance is in place for qualified nurses <p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Visiting professionals are updated on changes to procedures or activities within the home • Appropriate staff are registered with Care Council for Wales <p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • The manager keeps up to date with health and social care sector developments through relevant channels e.g. Care Forum Wales; newsletters/ journals; conferences/ events. • Good practice is shared with sector peers 		
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<p>High Level Outcome E.</p> <p>The benefits of effective partnership working are recognised and promoted</p> <p>Outcome Indicator E4.</p> <p>Innovation and development is encouraged within the Home</p> <p>Summary</p> <p>Innovation can come from a variety of sources and can affect every aspect of care home life. It can also be developed by working closely with other individuals and organisations.</p>	<p>Cross references</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Promoting a positive culture • Creating community <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Domestic, family and personal relationships <p>The Andrews report If I have carers their needs will be taken into</p>	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • Residents, relatives and staff are encouraged to submit ideas for changes/developments to the manager • Mechanisms are in place that can be used to collect ideas e.g. suggestion box, staff/ resident/ relatives meetings/ discussions • Suggestions that are workable are followed through on • Feedback is provided to those giving suggestions • The care home has systems to ensure the quality of life of older people is understood and to ensure issues raised are acted upon. • The care home produces an annual 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Innovation Champions are appointed and supported to proactively seek views from residents/ staff/visitors on potential improvements/ innovations 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • Residents, relatives and staff members are involved in the development and delivery of innovation • Good practice examples from the sector are shared with residents, relatives and staff e.g. trade journals; My Home Life resources etc

	<p>account and they will be involved in my care and discharge planning with my consent</p>	<p>report for all relevant stakeholders to explain how systems for analysing quality are used to drive continuous improvement.(see 6.2 OPCfW action plan)</p> <ul style="list-style-type: none"> • The care home produces an annual report on the delivery of quality of life and care for older people measured against the Standard Quality Framework and Supporting Specification (to include levels and skills of staff, staff turnover, use of agency staff and investment in training, number of POVA referrals, complaints, improvement notices and full details of improvement action when a home is in escalating concerns (see 6.10 OPCfW action plan). 		
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<p>High Level Outcome E.</p> <p>The benefits of effective partnership working are recognised and promoted</p> <p>Outcome Indicator E5.</p> <p>Sector support mechanisms are utilised</p> <p>Summary</p> <p>All care homes need support. This can come from within e.g. Manager, owner/ proprietor/ organisation. However, there is also support available throughout the care sector and beyond.</p>	<p>Cross references</p> <p>My Home Life themes</p> <ul style="list-style-type: none"> • Promoting a positive culture • Creating community <p>Senses framework</p> <ul style="list-style-type: none"> • Security • Belonging • Continuity • Achievement • Purpose • Significance <p>Fundamentals of care</p> <ul style="list-style-type: none"> • Communication and information • Respecting people • Relationships <p>National outcomes framework</p> <ul style="list-style-type: none"> • Well-being • Domestic, family and personal relationships <p>The Andrews report If I have carers; their needs will be taken into account, and they will be involved in my care and discharge planning with</p>	<p>Examples of outcome measures to show how gradings are awarded</p>		
		<p>Bronze • (The threshold – basic compliance)</p> <ul style="list-style-type: none"> • The manager and/ or senior members of staff attend the local Provider Fora in their area. • The home is actively looking to engage with the local authority and local health board in developing its services e.g. SCWDP/ Training, Contract and Commissioning teams 	<p>Silver • (Certain milestones achieved, more progress to be made)</p> <p>All Bronze points and the following:</p> <ul style="list-style-type: none"> • Engagement takes place with the My Home Life Cymru programme and/ or other support organisations e.g. Dementia Care Matters, MacMillan Cancer Support • Membership of Care Forum Wales or another like organisation is in place • Subscription is made to trade journals e.g. Caring UK 	<p>Gold • (Goal of excellence has been achieved)</p> <p>All Bronze and Silver points and the following:</p> <ul style="list-style-type: none"> • The home makes use of the support offered by sector agencies and beyond e.g. CSSIW; Care Council for Wales; Care Forum Wales; My Home Life Cymru; Local authority (contracting and commissioning/ training/ SCWDP); ABMU Health Board Long Term Care Team; RCN; RNIB Cymru; Action on Hearing Loss Cymru etc.

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References

¹ NCHR&D Forum (2007) *My Home Life: Quality of life in care homes – Literature review*, London: Help the Aged (available at: www.myhomelife.org.uk)

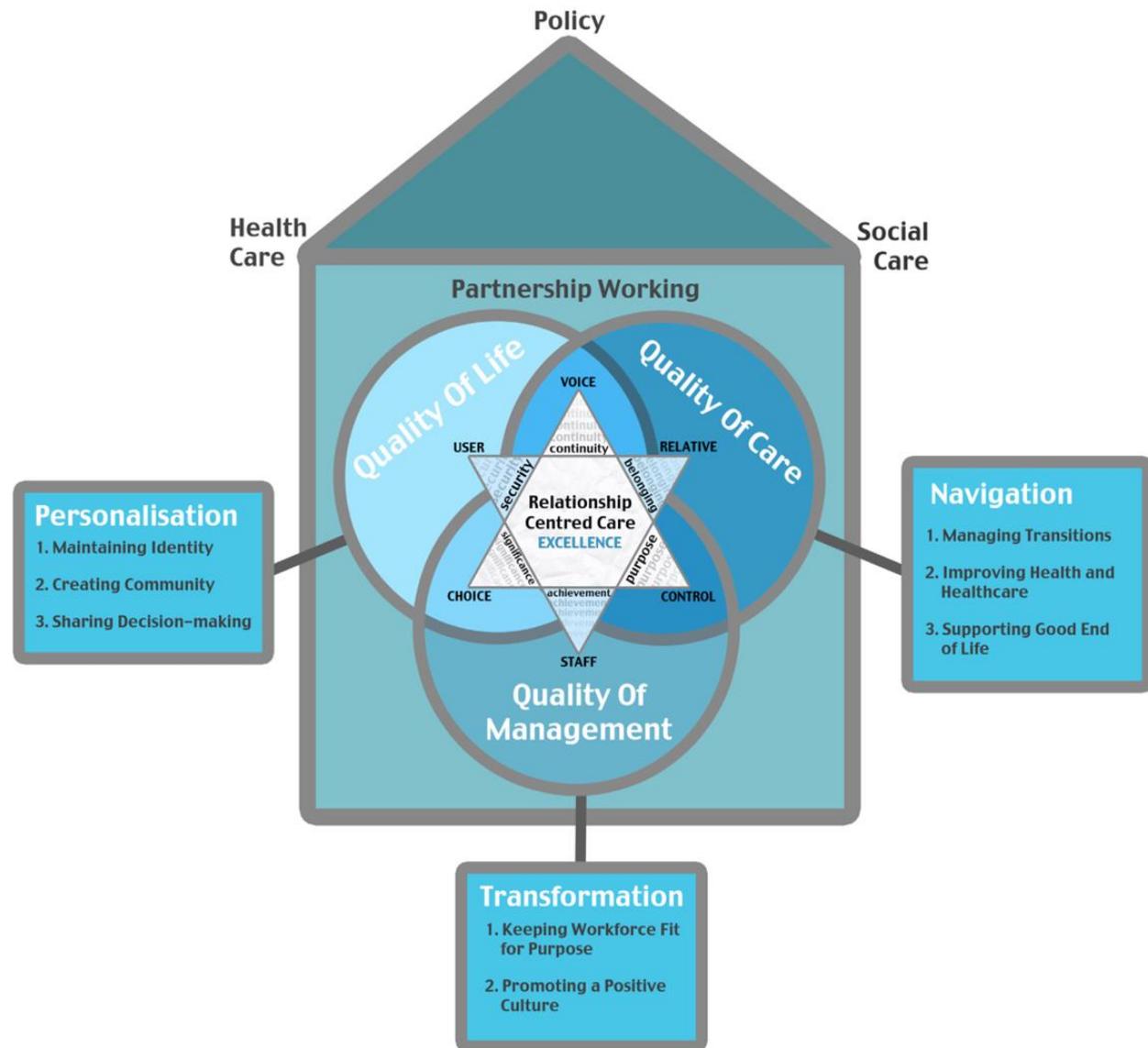
² Tresolini, CP and the Pew-Fetzer Task Force (1994). *Health Professions Education and Relationship-centred Care*. San Francisco, CA: Pew Health Professions Commission

³ Nolan, M., Brown, J., Davies, S., Nolan, J. and J. Keady. (2006). *The Senses Framework: Improving care for older people through a relationship-centred approach*. University of Sheffield. ISBN 1-902411-44-7

Appendix 1 - My Home Life

My Home Life is all about working in partnership with the care home sector, celebrating best practice and supporting whole systems change.

Its vision is that care homes are supported to deliver expert evidence-based practice, are valued and trusted by external professionals and cherished by the wider community for the increasingly vital role that they play.



¹ NCHR&D Forum (2007) *My Home Life: Quality of life in care homes – Literature review*, London: Help the Aged (available at: www.myhomelife.org.uk)

Appendix 2 – The My Home Life themes¹

Personalisation	Navigation	Transformation
<p>1. Maintaining identity</p> <p>Working creatively with residents to maintain their sense of personal identity and engage in meaningful activity.</p>	<p>4. Managing transitions</p> <p>Supporting people both to manage the loss and upheaval associated with moving into a care home and to move forward.</p>	<p>7. Keeping workforce fit for purpose</p> <p>Identifying and meeting ever-changing training needs with the care home workforce.</p>
<p>2. Sharing decision making</p> <p>Facilitating informed risk-taking and the involvement of residents, relatives and staff in shared decision-making in all aspects of home life.</p>	<p>5. Improving health and healthcare</p> <p>Ensuring adequate access to healthcare services and promoting health to optimise resident quality of life.</p>	<p>8. Promoting a positive culture</p> <p>Developing leadership, management and expertise to deliver a culture of care where care homes are seen as a positive option.</p>
<p>3. Creating community</p> <p>Optimising relationships between and across staff, residents, family, friends and the wider local community. Encouraging a sense of security, continuity, belonging, purpose, achievement and significance for all.</p>	<p>6. Supporting good end of life</p> <p>Valuing the ‘living’ and ‘dying’ in care homes and helping residents to prepare for a ‘good death’ with the support of their families.</p>	

¹ NCHR&D Forum (2007) *My Home Life: Quality of life in care homes – Literature review*, London: Help the Aged (available at: www.myhomelife.org.uk)

Appendix 3 – The Senses Framework



³ Nolan, M., Brown, J., Davies, S., Nolan, J. and J. Keady. (2006). *The Senses Framework: Improving care for older people through a relationship-centred approach*. University of Sheffield. ISBN 1-902411-44-7

Appendix 4 - Fundamentals of care: Guidance for Health and Social Care Staff - Improving the quality of fundamental aspects of health and social care for adults

Practice Indicators			
<p>1. Communication and information</p> <p>1.1 Health, personal and social care needs are assessed and set out in a regularly reviewed plan of care. This plan is agreed by the service user and the people caring for them. The plan is only shared with others with the service user's consent. <i>The plan of care is agreed by the service user and made available to them. The assessment, plan of care and its implementation are recorded and monitored. The plan of care is reviewed to ensure services remain appropriate to the service user's needs.</i></p> <p>1.2 Assistance or specialist aids are provided to those with speaking, sight or hearing difficulties, special needs or learning disabilities, enabling them to receive and respond to information.</p> <p>1.3 If necessary, people are provided with access to a</p>	<p>2. Respecting people</p> <p>2.1 People are treated with respect, courtesy and politeness. <i>Staff receive training to support this.</i></p> <p>2.2 People are able to access free and independent advice so that they can make choices about their care and lifestyle. <i>This may be provided through advocacy services or voluntary agencies such as the Citizen's Advice Bureau.</i></p> <p>2.3 Individuals are addressed by their preferred name.</p> <p>2.4 Confidentiality and privacy are respected as far as possible, especially in hospital wards, public spaces and reception areas.</p> <p>2.5 Mail is always given unopened unless otherwise requested. <i>Where a person is unable to open their post, appropriate arrangements are made with</i></p>	<p>3. Ensuring safety</p> <p>3.1 People receive support free from abuse, neglect and inappropriate care.</p> <p>3.2 People are protected against verbal, physical, sexual and financial abuse.</p> <p>3.3 The service user's environment is clean, properly maintained, safe and secure. Their independence and personal choice are respected.</p> <p>3.4 Equipment is clean, properly maintained and stored safely.</p> <p>3.5 People are assessed for risks to their own safety and the safety of others. A plan for managing risk is agreed between the person being cared for and those caring for them.</p> <p>3.6 Staff receive appropriate information, training and supervision to ensure that people and their carers are safe. <i>This relates to moving skills, use of equipment, abusive and challenging behaviour,</i></p>	<p>4. Promoting independence</p> <p>4.1 Time is available to support and encourage people to care for themselves.</p> <p>4.2 Ongoing assessment, involving all those relevant to the person's care, forms the basis of the plan of activities and care. This takes account of the person's requirements, strengths, abilities and potential.</p> <p>4.3 Where possible, people are shown different ways of doing things to help them to be independent. <i>Staff refer to physiotherapists or occupational therapists for specialist advice.</i></p> <p>4.4 If appropriate, people are offered equipment to help them walk, move, eat, hear and see. This equipment is well maintained.</p> <p>4.5 Equipment provided for a specific person is kept for their own use.</p> <p>4.6 To promote people's</p>

<p>translator or a member of staff with appropriate language skills. <i>If a translator is needed, they must be thoroughly briefed on the context of the information they convey and on the requirement for confidentiality.</i></p> <p>1.4 People are consulted about any treatment and care they are to receive. A suitably knowledgeable person explains treatment or care options so that people can make informed choices. Their consent or refusal is clearly and accurately recorded.</p> <p><i>Some people may have a limited capacity to understand e.g. people with learning disabilities or mental illness. In such cases, every effort is made to help them comprehend what is being said and to involve them in the decision making process with their carer or next of kin.</i></p> <p>1.5 People's personal records are regularly updated and available to them. To ensure confidentiality, they are kept secure and comply with the Data Protection Act 1998.</p> <p><i>Where care is delivered by a multi-disciplinary team,</i></p>	<p><i>their carers.</i></p> <p>2.6 People's feelings, needs and problems are actively listened to, acknowledged and respected.</p> <p>2.7 Information and care are always provided with compassion and sensitivity.</p> <p>2.8 Spiritual and cultural needs are acknowledged and respected.</p>	<p><i>medication, first aid, infection control, waste disposal, handling of valuables and general security.</i></p> <p>3.7 People are encouraged to develop or maintain the level of independence they wish, striking a responsible balance between risk and safety.</p> <p>3.8 People are able to summon help easily at all times, using a telephone, bell or other convenient means.</p> <p><i>If unable to do so their needs will be checked regularly.</i></p>	<p>independence and ability to care for themselves, their environment is as accessible, comfortable and safe as possible, in accordance with their wishes.</p> <p>4.7 People are encouraged to be active, through work, taking appropriate exercise and/or recreation as far as their condition allows.</p>
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information needs to be shared amongst team members and records may be accessed and used by all. In some circumstances, information may be shared with other staff involved in the care of the individual, if the caring role of the colleague could not be undertaken effectively without knowledge or information relating to the person receiving care. In certain circumstances there is an additional requirement to share information i.e. when information is required by a court order and when it can be justified as being in the interests of protecting the public.

1.6 Time is taken to listen and actively respond to any questions and concerns that the service user or their relatives may have.

If the person providing care does not have sufficient knowledge to answer questions adequately, they refer them to the appropriate colleague.

1.7 People are given information explaining how to comment on their care or make a complaint. If requested, information is also

<p>given on how to obtain independent advice and support.</p>			
<p>5. Relationships</p> <p>5.1 People are able to receive visitors within reasonable hours, sensitive to the needs of others. <i>Consideration is given to the condition of the person. Where they are unable to make a decision for themselves regarding visitors, those close to that person should be consulted. Equally if a person wishes to restrict visiting at any time, staff support their decision.</i></p> <p>5.2 A comfortable area such as a visitors' room is available for private telephone calls or for people to spend time with relatives and friends.</p> <p>5.3 People are encouraged and enabled to be part of the community.</p> <p>5.4 The person decides how much their family and any informal carers are involved in their care.</p> <p>5.5 If someone becomes critically ill, arrangements are made to ensure that a relative or friend can stay overnight, either</p>	<p>6. Rest and sleep</p> <p>6.1 Noise is minimised and levels of heat, light and ventilation are controlled to help people sleep at night.</p> <p>6.2 Televisions and radios in shared sleeping areas have earphones to enable individual listening.</p> <p>6.3 Waking, sleeping and resting times are as flexible as possible to meet people's needs and preferences.</p> <p>6.4 Where beds and bedding are provided, efforts are made to ensure the person's comfort.</p> <p>6.5 If a person's sleep is disturbed, they are made comfortable and offered the support they need. <i>This could include sleep management and relaxation techniques. Care should be taken to guard against the danger of inappropriate medication.</i></p>	<p>7. Ensuring comfort, alleviating pain</p> <p>7.1 People are encouraged and given the opportunity to express pain, discomfort or emotional distress with support or assistance offered promptly. <i>People's personal environments and abilities to effectively communicate are also considered when discussing interventions that make them feel comfortable.</i></p> <p>7.2 If a person needs special aids or equipment in order to maintain a comfortable position, these are provided and they are helped to use them correctly.</p> <p>7.3 The person's level of discomfort, pain or distress is assessed. A plan for controlling or relieving their pain or distress is agreed, taking into account their preferences. <i>It may be appropriate to use assessment tools to provide effective and appropriate treatment. Results of decisions</i></p>	<p>8. Personal hygiene, appearance and foot care</p> <p>8.1 People's personal hygiene, appearance and foot care are discussed with them and any assistance is based on their needs.</p> <p>8.2 People are helped as necessary to keep their feet comfortable to enable them to be as mobile and independent as possible.</p> <p>8.3 Facilities and equipment for all aspects of personal hygiene and appearance are accessible, clean and well maintained. This includes washing, shaving, bathing, the use of make-up, care of hair and nails, dressing and undressing.</p> <p>8.4 Wash bowls and towels are provided for personal use as necessary. Toiletries are provided to meet any short-term needs. <i>After use, bowls are promptly cleaned, dried and inverted for storage.</i></p> <p>8.5 Care is discreet and</p>

<p>in the same place or in local accommodation.</p> <p>5.6 People are offered support with verbal and written communication, particularly if separated from family and friends in their home culture or country of origin.</p> <p>5.7 People are put in touch with relevant voluntary organisations if they want them to provide a visiting service.</p> <p>5.8 People are able to discuss their sexual health needs and are supported in planning to meet those needs.</p>		<p><i>are recorded for continuity of care.</i></p> <p>7.4 People have access to a range of appropriate pain relieving therapies and drugs in accordance with an assessment of their needs.</p> <p>7.5 Specialist advice is sought if their symptoms or emotional distress are not controlled or relieved.</p>	<p>sensitive, ensuring privacy.</p> <p>8.6 People are referred to a State Registered Podiatrist / Chiropodist for assessment if they have a condition or illness which may require specialist foot care. A plan of care is then agreed with the person and their carer.</p> <p>8.7 People are encouraged and helped to select, purchase and wear their own clothes and shoes.</p> <p>8.8 Arrangements can be made for people's clothes to be laundered and maintained.</p>
<p>9. Eating and drinking</p> <p>9.1 People's nutritional needs and physical ability to eat and drink are regularly assessed. If necessary, they are provided with specialist advice and support.</p> <p>9.2 People are encouraged to eat nutritious, varied, balanced meals, hygienically prepared and served at regular times.</p> <p>9.3 Food and drink are served in an acceptable setting. They are at the right temperature and attractively presented.</p> <p>9.4 If a meal is missed,</p>	<p>10. Oral health and hygiene</p> <p>10.1 Following assessment, a plan of care to keep the person's mouth healthy and comfortable is agreed with them. <i>For guidance on suitable assessment tools, please see the section Assessment tools below.</i></p> <p>10.2 People are encouraged and helped to care for their mouths with all procedures and routines explained in advance and support available when needed.</p> <p>10.3 A toothbrush and</p>	<p>11. Toilet needs</p> <p>11.1 People's need of assistance to get to or use the toilet are assessed and if appropriate they are enabled to use the toilet (or commode) independently.</p> <p>11.2 A person who has difficulty in controlling their bladder or bowel functions is offered an assessment by a professional health worker and a plan of care is agreed.</p> <p>11.3 Toilet facilities are clean and appropriately equipped with toilet paper, soap and fresh</p>	<p>12. Preventing pressure sores</p> <p>12.1 People are assessed for risk of pressure sores and if considered at risk, they receive further assessment by a registered nurse and a plan of care is drawn up.</p> <p>12.2 People are made aware of the risks of pressure sores and shown ways of preventing them. They and those caring for them are encouraged and advised on appropriate care procedures.</p> <p>12.3 Appropriate beds, chairs and other equipment are made</p>

<p>alternative food is offered and/or snacks and drinks can be accessed at any time.</p> <p>9.5 Fresh drinking water is available at all times, except when restrictions are required as part of treatment.</p> <p>9.6 People are provided with special diets in accordance with their medical needs.</p> <p><i>This also includes modified food.</i></p> <p>9.7 If eating and/or drinking cause people difficulties, they receive prompt assistance, encouragement and appropriate aids or support.</p> <p><i>People with swallowing difficulties are assessed by a speech and language therapist and where necessary training in assisting people to swallow food or drink safely is given.</i></p>	<p>toothpaste or denture brush and bowl are provided to meet short term needs.</p> <p>10.4 If appropriate, people are able to have their dentures identified with their name in case they are lost and they are stored safely when not in use.</p> <p>10.5 If someone has no teeth or dentures, they still receive support to ensure their mouth is comfortable and healthy.</p> <p>10.6 If people have any specific problems with their mouth, teeth, dentures or gums arrangements are made for them to see a dentist, if necessary in their own home.</p> <p>10.7 People are offered appropriate check-up appointments with a dentist in accordance with their needs.</p>	<p>hand towels.</p> <p>11.4 Toilet facilities shared by others have clear signs and provide privacy.</p> <p>11.5 If required, people are helped to manage their bladder and bowel functions with privacy and dignity, maintaining their continence and giving them as much independence as possible.</p> <p>11.6 If necessary, people are aware of and have easy access to methods for calling assistance.</p> <p>11.7 Body waste is hygienically disposed of promptly, appropriately and with sensitivity.</p> <p>11.8 People have access to hand washing facilities after using the toilet or equivalent equipment e.g. a commode.</p> <p><i>Particular attention is given to infection control.</i></p>	<p>available to reduce the risks of pressure sores. More specialist preventative equipment such as special mattresses and cushions are also available if necessary. All equipment is clean and properly maintained.</p> <p>12.4 Correct moving techniques are encouraged, including regular turning and appropriate self-care, helping people to avoid pressure sores, increasing their well-being, independence and dignity.</p> <p>12.5 If a person is at risk, their skin is checked at least once daily, preferably when their personal hygiene is attended to.</p> <p>12.6 A person who is at risk or who has a pressure sore has access to advice from a registered nurse. This includes assessment and a plan of care based on recognised best practice.</p>
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Appendix 5 - National Outcomes Framework for (older) people who need care and support and carers who need support, 2014-15

Well-being		Physical and mental health and emotional well-being		Protection from abuse and neglect	
What people expect	What we will measure	What people expect	What we will measure	What people expect	What we will measure
<p>I know and understand what care, support and opportunities are available to me</p> <p>I get the help I need, when I need it, in the way I want it</p>	<ul style="list-style-type: none"> • Percentage of people reporting they have the right information about how to lead a healthy life • Percentage of people who think that good social care services are available in their local area • Percentage of people whose quality of life has improved from the care and support they have received • Percentage of people that received the right information or advice when they needed it • Percentage of people who feel satisfied with the 	<p>I am healthy</p> <p>I am happy</p>	<ul style="list-style-type: none"> • Self reported status of physical and mental health • Healthy life expectancy at 65 • Self reported happiness score • Percentage of adults with high life satisfaction scores 	<p>I am safe and protected from abuse and neglect</p>	<ul style="list-style-type: none"> • Proportion of referrals where the risk has been removed or reduced for the alleged victim • Incidence of domestic abuse • Incidence of sexual crime • Percentage of people reporting that they feel safe

	<p>people that provided their help, care and support</p> <ul style="list-style-type: none"> • Percentage of people who feel satisfied with the care and support they have received 				
Education, training and recreation		Domestic, family and personal relationships		Contribution made to society	
What people expect	What we will measure	What people expect	What we will measure	What people expect	What we will measure
<p>I can learn and develop to my full potential</p> <p>I can do the things that matter to me</p>	<ul style="list-style-type: none"> • Percentage of people reporting that they can learn and develop to their full potential • Percentage of people reporting that they can do the things that matter to them 	<p>I belong</p> <p>I have safe and healthy relationships</p>	<ul style="list-style-type: none"> • Percentage of people who feel that they belong to their local area • Percentage of people who think that their local area is a place where people from different backgrounds get on well together • Percentage of people who think that people in their local area treat each other with respect and consideration 	<p>I can engage and participate</p> <p>I feel valued in society</p>	<ul style="list-style-type: none"> • Things I do in my life are worthwhile • Percentage of people who feel safe walking alone in their area after dark • Percentage of people reporting that they often feel lonely • Percentage of people reporting that they feel valued in society

Securing rights and entitlements		Social and economic well-being		Suitability of living accommodation	
What people expect	What we will measure	What people expect	What we will measure	What people expect	What we will measure
<p>My rights are respected</p> <p>I have voice and control</p> <p>I am involved in making decisions that affect my life</p> <p>My individual circumstances are considered</p> <p>I can speak for myself or have someone who can do it for me</p> <p>I get care through the Welsh language if I need it</p>	<ul style="list-style-type: none"> • Percentage of people who felt involved in decisions about their life • Percentage of people reporting that they are in control of their daily life as much as they can be • Percentage of people who felt that they were treated with respect • Percentage of people who used the Welsh language to communicate with health or social care staff 	<p>I am supported to work</p> <p>I have a social life and can be with the people that I choose</p> <p>I do not live in poverty</p>	<ul style="list-style-type: none"> • Percentage of people satisfied with the amount of time they have to do things they like doing • Percentage of materially deprived households 	<p>I have suitable living accommodation that meets my needs</p>	<ul style="list-style-type: none"> • Percentage of people reporting that their accommodation is suitable for their needs

Appendix 6 – The Andrews report - Standards for care for older people in hospital¹

Draft Standards of care for older people in hospital - September 2014		
<ul style="list-style-type: none"> I will be treated with dignity, care and compassion and supported to feel safe at all times 	<ul style="list-style-type: none"> If I have carers; their needs will be taken into account, and they will be involved in my care and discharge planning with my consent 	<ul style="list-style-type: none"> If I am in pain or discomfort, it will be recognised, and I will have help to manage it
<ul style="list-style-type: none"> I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it 	<ul style="list-style-type: none"> My skin will be looked after and not damaged 	<ul style="list-style-type: none"> If I am anxious or depressed, staff will recognise my mood, listen to me, and my carers, and support me to feel as well as possible
<ul style="list-style-type: none"> I will be able to get to the toilet when I need it, but if I am incontinent, I can expect to feel clean, comfortable and dry (quickly) 	<ul style="list-style-type: none"> If I have difficulty understanding or expressing myself, this will be recognised, I will be listened to and supported to make choices and decisions by appropriately trained staff 	<ul style="list-style-type: none"> I will be able to move about easily and safely, or to be helped to do this comfortably
<ul style="list-style-type: none"> I will have the right medicine at the right time 	<ul style="list-style-type: none"> My care will take account of any sight or hearing loss I may have 	<ul style="list-style-type: none"> If I am at the end of my life, my wishes and spiritual beliefs, and those of my carers, will be assessed and met wherever possible

¹ Andrews.J., Butler.M. (2014) *Trusted to care - An independent Review of the Princess of Wales Hospital and Neath Port Talbot Hospital at Abertawe Bro Morgannwg University Health Board.*

Appendix 7 – The quality domains cross referenced to the My Home Life themes, the Senses Framework, the Fundamentals of Care and the National Outcomes Framework

Domains	A. Knowing the resident, living a full life in an enriched environment	B. Maintaining and promoting health and wellbeing	C. Effective leadership leading	D. End of life care	E. Working in partnership
My Home Life themes	<ul style="list-style-type: none"> • Maintaining identity • Managing transitions • Creating community 	<ul style="list-style-type: none"> • Improving health and healthcare • Maintaining identity 	<ul style="list-style-type: none"> • Promoting a positive culture • Workforce fit for purpose 	<ul style="list-style-type: none"> • Supporting good end of life • Maintaining identity • Creating community 	<ul style="list-style-type: none"> • Creating community • Sharing decision making
Senses Framework	<ul style="list-style-type: none"> • Security • Belonging • Purpose • Continuity 	<ul style="list-style-type: none"> • Security • Significance • Achievement 	<ul style="list-style-type: none"> • Security • Continuity • Belonging • Purpose • Achievement • Significance 	<ul style="list-style-type: none"> • Security • Significance • Purpose 	<ul style="list-style-type: none"> • Security • Continuity • Belonging • Purpose • Achievement • Significance
Fundamentals of care	<ul style="list-style-type: none"> • Communication and information • Respecting people • Ensuring safety • Promoting independence • Relationships • Ensuring comfort, alleviating pain • Toilet needs 	<ul style="list-style-type: none"> • Communication and information • Promoting independence • Relationships • Rest and sleep • Ensuring comfort, alleviating pain • Personal hygiene, appearance and foot care • Eating and drinking • Oral health and hygiene • Toilet needs • Preventing pressure sores 	<ul style="list-style-type: none"> • Communication and information • Respecting people • Promoting independence • Relationships 	<ul style="list-style-type: none"> • Communication and information • Respecting people • Ensuring safety • Promoting independence • Relationships • Rest and sleep • Ensuring comfort, alleviating pain 	<ul style="list-style-type: none"> • Communication and information • Respecting people • Ensuring safety • Promoting independence • Relationships

National Outcomes Framework	<ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being • Protection from abuse and neglect • Education, training and recreation • Domestic, family and personal relationships • Contribution made to society • Securing rights and entitlements • Social and economic well-being • Suitability of living accommodation 	<ul style="list-style-type: none"> • Well-being • Physical and mental health and emotional well-being • Protection from abuse and neglect 	<ul style="list-style-type: none"> • Domestic, family and personal relationships • Securing rights and entitlements • Suitability of living accommodation 	<ul style="list-style-type: none"> • Securing rights and entitlements 	<ul style="list-style-type: none"> • Physical and mental health and emotional well-being • Contribution made to society • Securing rights and entitlements
The Andrews report	<ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it • If I am anxious or depressed, staff will recognise my mood, listen to me, and my carers, and 	<ul style="list-style-type: none"> • I will be treated with dignity, care and compassion and supported to feel safe at all times • If I am in pain or discomfort, it will be recognised, and I will have help to manage it • I will have choice about what I can eat and drink any time I wish and will be given support with eating and drinking if I need it 		<ul style="list-style-type: none"> • If I am anxious or depressed, staff will recognise my mood, listen to me, and my carers, and support me to feel as well as possible • If I am at the end of my life, my wishes and spiritual beliefs, and those of my carers, will be assessed and met wherever possible 	<ul style="list-style-type: none"> • If I have carers; their needs will be taken into account, and they will be involved in my care and discharge planning with my consent

	<p>support me to feel as well as possible</p> <ul style="list-style-type: none"> • If I have difficulty understanding or expressing myself, this will be recognised, I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or to be helped to do this comfortably 	<ul style="list-style-type: none"> • My skin will be looked after and not damaged • I will be able to get to the toilet when I need it, but if I am incontinent, I can expect to feel clean, comfortable and dry (quickly) • If I have difficulty understanding or expressing myself, this will be recognised, I will be listened to and supported to make choices and decisions by appropriately trained staff • I will be able to move about easily and safely, or to be helped to do this comfortably • I will have the right medicine at the right time • My care will take account of any sight or hearing loss I may have 			
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