Care Standards for Nursing Homes

Resident’s Guide

April 2015
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Minimum Standards for Nursing Homes set the criteria that providers have to meet in order to be registered with the Regulation and Quality Improvement Authority. In this guide we call the Authority by its short name – the RQIA.

The RQIA also has a duty to inspect these facilities to make sure they are complying with the standards and providing a good minimum standard of care for the residents living in the homes. The minimum standard is not the highest quality of care, but the benchmark that all providers have to meet. We know that some providers deliver much higher levels of care than the minimum set out in these standards. But through these standards, we are trying to make sure that everyone living in a nursing home has a level of care that they can be assured of.

As well as these minimum standards, there are many other laws and sets of guidance that nursing homes have to comply with. These cover laws for employment and recruitment and health and safety or could be best practice guidance issued by the Department of Health, Social Services and Public Safety or professional bodies such as NICE or a Royal College.

It is up to the providers, managers and staff of nursing homes to understand and comply with all the laws and guidance that relate to their business.

This is a short guide to each of the standards. You can get the full version from https://www.dhsspsni.gov.uk/publications/care-standards-documents

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**Standards Before Admission**

**Before Admission**

- Before you decide on a home, you should be given an information pack which sets out all the important details about the home and what it’s like to live there.
- You should be able to visit the home to help you decide if you’d like to live there.
- Before you move in, a nurse from the home should visit you to carry out an assessment to make sure the home can meet your needs.
- Before you move in, the home should have your medical history and should have spoken to you and your family to find out about your life story and past experiences.
- Any equipment you need should be in place in the home before you move in.
- If you are admitted to a nursing home from hospital (sometimes called “step down care”, an “emergency” or an “unplanned” admission), the home should make a decision within two days as to whether or not it can meet your needs in the long term.

**Individual Agreement**

- When you move into the home, you should get an individual agreement. This sets out all the terms and conditions of living in the home. This must be available within five days of moving in, although you could have it before you move in.
- You must sign the agreement to show you agree to keep it. If you are unable to sign, then a relative or carer can sign on your behalf.
- If the home wants to increase any top up fees, you must receive four weeks’ notice.
# Informed Consent

- Consent is your permission to be looked after and treated in the home. In order to get your consent, the home must make sure you understand what is involved in your treatment and care.
- There are special arrangements for people who don’t have the mental capacity to give consent and the home must explain these to your relatives, carers or representatives.
- Residents and their families should be directed to local independent advocacy services which can assist in resolving issues concerned with consent.

# Individualised Care and Support

- Within five working days of moving into the home, staff will draw up a care plan for you based on a full assessment of your abilities and needs. This plan sets out all your needs and how they will be met by the home. The plan will include information from all the people who look after you – such as your GP and other health and social care staff.
- You will have a named nurse. The named nurse will explain to you and your family how the care plan will work and what treatment you will receive.
- The care plan will be reviewed regularly to make sure all your needs are being met. You and your family should be able to participate in these reviews.

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# Standards for Residents’ Quality of Life

## Human and Individual Rights

- Your legal and civic rights will be protected and upheld whilst you’re living in the home.
- Staff should understand the range of rights that apply to you and work to make sure these aren’t being ignored.
- If you want to vote, the home should make this possible.
- Where groups of people live together, the rights of one person cannot override the rights of another. The home has to make sure that everyone’s rights are considered equally and fairly.

## Privacy, Dignity and Personal care

- Your rights to privacy and dignity should be respected at all times.
- Your preferences about your personal and intimate care should be known by the home and accommodated wherever possible.
- You are able to spend time with whomever you choose. You have the choice over who comes into your own room.
- If you need help with continence management, this is given discreetly and your human rights are upheld.
- You are able to make and receive telephone calls in private and receive your mail unopened.
- You should always be dressed appropriately in your own clothes (that you have chosen), be well-groomed and have any aids or assistance you need such as your glasses or hearing aids.
Engagement, Participation and Involvement

- You should be involved in making decisions about your own care and also about how the home is run. The people important to you should also be involved in decisions about your care.
- The home should have ways to make sure all residents' views are taken into account – for example where they need help with communication.
- You or your relatives should be supported if you make a complaint about the home.

Memory, Life Story Work and Reminiscence

- Staff should work with you to learn about your experiences and stories about your life.
- Your experiences and stories about your life should be used by the home in planning and delivering your care.

Activities and Events

- There should be a programme of activities and events that takes into account your preferences, life experiences and choices. You should know what the programme is and have some say in what you would like to have happen in the home.
- The range of activities and events should suit your needs and choices and there should be a mix of things to do.
- If you prefer not to take part, there should be other things for you to do or to spend time alone if you prefer.

Meals and Mealtimes

- Your meals in the home should be nutritious and tasty and meet all your nutritional needs as well as any cultural or religious requirements.
- The daily menu will be on display so you know what the choices are for meals.
- You are able to have something to eat or drink whenever you want. There may be a snack kitchen where you can prepare snacks or drinks for visitors.
- You should preferably have a choice of meals, but if there is no choice and you don’t want what is offered, you should be given an equal alternative.
- You will be given any help you need to eat and drink – including special equipment like adapted cutlery or crockery.

Contact with Family, Friends & the Community

- You should be able to maintain contact with your friends and family through visits, telephone calls or using technology such as the internet.
- You can choose who you see and don’t see. You should be able to have visitors in private if you like.
- The home should have links with the wider community and work with groups to make sure you are seen and valued as part of that wider community.
- Where you have been involved with church, community or social groups before moving into the home, you should be helped to keep up your involvement.

Daily Life

- You should feel like you live in your home and the routines of the home should be flexible enough to accommodate your needs and preferences.
- You should have some choices in your own routines such as when you prefer to get up and go to bed, whether you prefer a bath or a shower, and the friends you make in the home.
- As long as it’s not dangerous, you should have access to all areas of the home and its gardens as you would in your own home.
Safeguarding

- You will be safe and protected from abuse in the home.
- Staff will be trained in keeping residents safe and recognising signs of abuse. Staff will know what to do if they discover or suspect someone is being abused in the home.
- You and your family should know how to make a complaint about any aspect of your care in the home.

Your Money and Valuables

- You have the right to look after your own money and valuables if you choose. The home will explain what you need to do to make sure you have appropriate insurance for your valuables.
- If the home looks after your money on your behalf, there must be accurate and detailed records about all transactions. You will get receipts for anything bought on your behalf.
- Any staff that deal with the Social Security Agency on your behalf will understand their role and responsibilities and act in line with these rules.

Transport

- Any vehicles used by the home will be well-maintained, taxed and insured.
- You will be given accurate information about the costs of any journeys including the costs for any staff that accompany you.

Complaints

- You should know how to make a complaint and how agencies like the Patient and Client Council can help.
- If you want the support of an advocate, the home should direct you to such services.
- Any complaint will be investigated and responded to within 28 days.
- If you’re not happy with the outcome of a complaint, you will be given information on how to take it further.

Responding to Residents’ Behaviour

- Residents that need it will have a plan that sets out how the home will respond to behaviour that challenges. Residents and their families should be involved in designing this plan.
- The home’s response to behaviour that challenges must be in line with residents’ human rights.
- Staff must be trained in responding to behaviour that challenges.

Communicating Effectively

- Staff must understand your needs and communicate in a way best suited to you.
- If you get bad news during your time in the home, it must be dealt with sensitively and not shared with anyone unless you allow it.

Death & Dying

- Residents and families must be treated sensitively and with dignity, privacy and respect.
- Family and other residents will be given the opportunity to pay their respects when a friend or loved one has passed away.
Standards for the Quality of Care for Residents

Healthcare

✓ All your general healthcare needs (like seeing the dentist or optician) as well as any specific needs linked to health conditions you might have will be taken care of in the home.

✓ You should have access to expert healthcare from specialists outside the home if you need it.

✓ You should get information on important healthcare issues including your physical, emotional and mental health.

✓ Staff will be trained to deal with common healthcare issues and will use the most up to date guidance to make sure you get the most effective treatment and care.

✓ You will get the equipment you need to make sure your health is taken care of in the home.

Falls Prevention

✓ When you move into the home, you will be assessed to see if you are at risk of falling. If so, staff will develop and share a plan to minimise this risk during your time in the home.

✓ If you do have a fall in the home, staff must look at what happened to prevent it happening again.

✓ The home must be designed so that it is safe for you to move around without fear of falling. You will have whatever equipment or aids you need to allow you to move safely.

Prevention of Pressure Damage

✓ You should be assessed before you move into the home to check if you might be at risk of pressure damage. If so, a plan will be put in place for you.

✓ Staff will know the most up to date practice in treating and preventing pressure damage.

Recognising the Signs of Dementia and Responding to Need

✓ Staff will know and recognise the signs and symptoms of dementia and will know how to get help for any resident who displays them.

✓ If you are diagnosed with dementia during your time in the home, staff will support you and your family in putting together a plan to care for you.

Approach to Care for Residents with Dementia

✓ If you have dementia, you will be supported to make choices about your life in the home and these choices will be respected by the staff.

✓ Staff will work with you and your family to make sure you are looked after as your needs change.

✓ Any other healthcare needs will be taken care of as well as dementia.

Understanding and Responding to Distressed Behaviour in Residents with Dementia

✓ If dementia causes distressed behaviour such as walking or pacing; refusing help and assistance, being withdrawn, repetition, difficulties with continence, or sexual expression, staff will understand how to best respond.

✓ Staff will try and find the reasons for this behaviour and find ways to accommodate it rather than control it.

✓ Staff will check that pain is not the underlying cause of behaviour and will ensure effective pain relief is available.
Intermediate Care and Step Up or Step Down Care

☑️ If you are in the home for a short period of care (sometimes called step up or step down care), your care plan will show how your recovery will be managed in order for you to return home.

☑️ You will receive all the help you need to return home, including, where appropriate, occupational therapy, physiotherapy, speech and language therapy and help from other health and social care professionals.

Standards for Medicines

☑️ All your medicines will be managed, administered and stored safely and effectively.

☑️ Staff will keep accurate and up to date records about all your medicines.

Palliative and End of Life Care

☑️ Where necessary, staff will discuss your needs, preferences and choices for palliative and end of life care. A plan will be drawn up to meet these needs.

☑️ Staff will be trained in up to date methods of palliative and end of life care and will make sure you and your family are supported.

☑️ You will be monitored to make sure you are not in pain and have effective pain relief when you need it.

☑️ Your cultural, religious and spiritual needs will be met during palliative and end of life care.

Resuscitation

☑️ Your wishes regarding resuscitation will be recorded and adhered to by staff in the home.

☑️ There will always be staff on duty who are trained in resuscitation and the equipment will be checked regularly to make sure it works properly.

Standards for the Quality of Management in the Home

Ethos and Statement of Purpose

☑️ The home must have a document called a Statement of Purpose. This must set out all the services and facilities it offers and how it meets residents’ needs.

☑️ You will get a copy of this in a format that you can easily understand.

Governance

☑️ The home must have systems in place to make sure it is well-run and managed. The manager of the home must make sure it is run in line with the various laws and the minimum standards for nursing homes.

☑️ There must be a system in place to review the quality of care for residents at least every three months and any necessary action taken to improve. You can get copies of these reports if you want them.

☑️ There must be a policy to show how the home will deal with emergencies.

Policies and Procedures

☑️ The home must have all the policies and procedures required by these standards and the various laws for nursing homes.

☑️ Staff must be trained to carry out the policies and procedures and know where to find them when they need them.

Management of Records

☑️ The home must keep all the records required under the various laws for nursing homes and these standards. Records must be accurate and kept up to date.
### Recruitment of Staff
- Staff must be recruited in line with the law on employment.
- Before they are employed, potential staff must be vetted to make sure they have no criminal convictions, have their references checked, show their full employment history and prove their qualifications to make sure they are suitable to work in a nursing home.

### Staff Training and Development
- Staff must be properly trained in order to do their jobs well.
- New staff must complete an induction so that they know basic information about the home before starting work there.
- The manager must check to make sure training is worthwhile and that staff are using it to do their jobs well.

### Staff Supervision and Appraisal
- Staff should be supervised to make sure they are doing their jobs well. They should have regular meetings with their supervisor to discuss how well they are working and any areas for improvement.

### Staffing
- There will be enough staff on duty at the different times of the day to make sure all residents are well cared for and their needs can be met. At least 35% of the care staff on duty must be registered nurses.
- There must be a nurse manager in charge at all times.

### Volunteers
- If volunteers work in the home, everyone must be clear on their roles and responsibilities.
- As with paid staff, volunteers must be checked beforehand to make sure it is safe and appropriate for them to work in a nursing home.

### Environment
- All the indoor and outdoor areas of the home must be designed to suit residents’ needs.
- Your bedroom should be decorated according to your preferences and needs.
- The home is well-lit with natural light. Noise and light levels are adjusted to suit residents’ needs.
- You should have opportunities to go outside and enjoy the outdoor space of the home. Gardens should be safe and welcoming, with shelter and areas for you to sit comfortably when you want to.

### Premises
- The premises and grounds must be safe, clean and well-maintained.
- There must be a system to make sure no unauthorised visitors can have access to the home.
- If you smoke, there must be somewhere for you to do so that complies with the law on smoking.
### Medical Devices and Equipment

- A medical device is a piece of equipment that is used to diagnose, treat or prevent a medical condition but is not a medicine or drug. The home must make sure these are used, stored and looked after properly so they are safe and effective.
- Staff must be trained to use medical devices and equipment.

### Infection Prevention and Control

- The home must comply with the policies and guidance in place to control the development and spread of infections in the home.
- All staff must be trained to make sure they understand what to do to prevent and control infection. There must also be information for residents, families and other visitors about infection and how they can help prevent it.

### Safe and Healthy Working Practices

- The manager must make sure the home is run safely for residents and staff.
- Staff must be trained to make sure they can do their jobs safely.

### Fire Safety

- There must be a plan to ensure the safety of residents and staff in the event of a fire. All staff must know what to do if there is a fire in the home.
- There must be fire drills for staff at least once every year.

### Requirements for Registration

- This section sets out what the provider and manager of a nursing home must do in order to be registered with RQIA.
- There are requirements for the provider, the manager and the building.