

# **Wardington House Nursing Home**

## **Statement of Purpose**

Wardington House is registered with the Care Quality Commission.

This document is a requirement of:       The Health and Social Care Act 2008  
Health and Social Care Act (Regulated Activities) Regulations 2009  
Care Quality Commission (Registration) Regulations 2009

A version is available on the home's Web site at [www.wardington.com](http://www.wardington.com).

Legal status of Provider - Partnership  
Name of Service Provider - Wardington House Partnership  
CQC Registered Location ID 1-120378228  
CQC Registered Provider ID 1-101649303  
CQC Registered Manager ID 1-139890055  
Registered Manager - Mr George Tuthill

Location Name and Address:   Wardington House Nursing Home  
Wardington  
Banbury  
Oxfordshire  
OX17 1SD  
Tel: 01295 750622  
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### **Registered Activities**

- Accommodation for persons who require nursing or personal care.
- Treatment of disease, disorder or injury.
- Diagnostic and screening procedures.

### **The Aims and Objectives of the Home are:**

- To provide care for Service Users with dementias and other mental disorders, without the use of routine tranquillising medication.
- To provide care for Service Users taking into account of their age, mental disorder, learning disability, physical disability, past or present drug or alcohol dependence, terminal illness, or sensory impairment.
- To provide care for Service Users in such a way that they are:
  - Free to do as they wish in time and space.
  - Free from restrictions to their liberty.
  - Free from the instructions and orders of any person employed or working as a volunteer in the home.
  - Free to be happy and enjoy their lives.
- To communicate with the relatives, friends and family of the Service User so that they are as involved with the Home and the Service User as they and the Service User wish.
- To protect the rights to confidentiality of our Service Users, our employees and our business.
- To encourage, train, and help all the people who work in the Home to enjoy their work and achieve their potential.
- To protect our Service Users, our employees, and our business from abuse, intimidation, or bullying by anyone.
- To endeavour to comply with the Health and Social Care Act 2008, The Care Quality Commission (Registration) Regulations 2009 and the associated Regulations.
- To endeavour to comply with the CQC Essential Standards of Quality and Safety (ESQS)
  - Some ESQS may not be appropriate for our service users.
  - Some ESQS may not be compatible with our philosophy, policies, procedures, or our aims and objectives.
- To endeavour to provide a suitable return on their investment for the stakeholders in the business.

## **Registered Activities**

- **Regulated Activity 1) Accommodation for persons requiring nursing or personal care**

### Accommodation, facilities and services to be provided to Service Users

Service Users may be provided with accommodation, nursing care, personal care, food and accommodation, all the above subject to mutually agreed contractual terms and conditions.

The Home is set in gardens and grounds amounting to approximately 3.5 acres.  
The Home has four sitting rooms with a combined area of 155 sq. metres.  
The Home is registered for 60 Service Users. It has 43 bedrooms.

Service Users individual rooms are not all identical and do not all have the same facilities. Some are single and some are shared and the size range is from approximately 10 sq. metres to 23 sq. metres. The average bedroom area is 11.5 sq. metres. Prices vary according to room size. On some occasions it may be necessary for a Service User to change rooms as their capabilities change. Unless it is an emergency, any such changes are only made after agreement between the Service User, or their representatives, and Matron.

The privacy and dignity of Service Users is protected by staff training and procedures. Service User's accommodation is fitted with specialised door locks that prevent other Service Users from entering the Service User's room. The specialised door locks allow the Service User to leave their own room without hindrance. Curtains and screening are provided in shared accommodation to protect each Service User's privacy and dignity.

The Home may provide the Service User with telephone, fax and e-mail facilities and these services may be used by the Service User in private. The Home is pleased to help Service User's communicate by telephone, fax, e-mail, and letter writing. The Home does not usually make any charges for the use of the home's telephone, fax, or e-mail facilities, however if a Service User wants their own telephone in their room that would be charged at cost, by prior agreement.

Service users may bring their own furniture if they wish.

The Home will arrange for the laundering or dry cleaning of clothes. There may be a charge for the dry cleaning of clothes. The Home will endeavor to keep safe any items of jewellery deposited with the home by special arrangement.

The Home does not keep or manage Service User's money.

Service User's relatives, friends and representatives are welcome to visit the Home at any time subject only to the Service User's convenience.

### Fire precautions

The Home has a fire sprinkler system installed throughout the building. In the event of a fire the system will spray water in the area of the fire to control or extinguish it. Such systems have an exemplary safety record. The Home's fire precautions and associated emergency procedures are attached, **Appendix 2**.

### Insurance for resident's personal effects

The Home has found it impractical to insure Service User's personal belongings and effects. Service User's should make their own arrangements for insurance of their personal property if they wish to do so.

- **Regulated Activity 2) Treatment of disease, disorder and injury**

The aim is to:

- Provide care for Service Users with dementias and other mental disorders, without the use of routine tranquillising medication.
- To provide care for Service Users taking into account of their age, mental disorder, learning disability, physical disability, past or present drug or alcohol dependence, terminal illness, or sensory impairment.
- These include medication, nebulizer infusions, dressings, pressure care, relief equipment and podiatry.

The staff at Wardington House receive training in the following subjects:

- Fire Prevention and evacuation
- Safeguarding of Vulnerable Adults (SOVA)
- Manual Handling
- Infection Prevention and Control
- Food Hygiene
- Health and Safety
- First aid
- Dementia Care
- Prevention of Abuse
- Challenging behaviour
- End of Life Care
- Wound care / tissue viability

The Home is able to offer Qualified Nursing Care for the following specific areas:

- Dementia Care
- Elderly
- Elderly frail
- Elderly mentally infirm
- End of life Care
- Physical disability
- Young disabled
- Learning disabilities

### **Independent Mental Capacity Advocacy Service (IMCA) All-age Dementia Advocacy Project.**

The IMCA service provides independent safeguards for people who are not able to make certain important decisions and who, at the time such decisions need to be made, have no-one to support them. The Oxfordshire Advocacy Development Group provides this service and can be contacted by phone on 01865 767462.

The All-age Dementia Advocacy Project provides an advocacy service for people with dementia in Oxfordshire. Advocacy is a way of helping people, in partnership, to express their views and wishes, so that they can be heard. The advocacy service can be contacted by phone on 01865 742745.

### • **Regulated Activity 3) Diagnostic and screening procedures**

Registered Nurses may monitor the residents by taking baseline, monthly, or 3-monthly weight, blood pressure, pulse, urine and temperature.

Blood samples, urinalysis and neurological observation, wound swabs are taken, as required and requested by the resident's general medical practitioner or other medical professional.

## **Policy of Emergency Admissions**

Every effort should be made to assess the person in his or her own home or in hospital before they are admitted to the Home. If, however the Home is approached in an "Emergency" capacity, from a Care Manager, or NHS provider either on behalf of a relative or NHS hospital, it will be at the Matron or Deputy Matron's discretion whether they receive the patient, following an assessment of the immediate needs of the patient and their family, in communication with the Care Manager.

The policy of the Home will be to fully assess this patient / resident within 24 hours following admission, either by the Matron or Deputy Matron.

The resident's GP Patient summary and Care Plan from the Social Worker should be obtained within three days of their admission to the Home

## **Charges for services**

Fees vary according to the accommodation and care provided.

Fees are currently from £995 to £1065 per week for single rooms dependant on size and facilities, and £940 per week for shared accommodation.

They are payable monthly in advance and are reviewed every year with effect from May 1st.

Fees are inclusive of accommodation at the home and the following facilities and services: use of bedroom, dayrooms, gardens and grounds in which residents can walk securely, (grounds are covered by closed circuit television), minibus excursions if appropriate, activities that are appropriate, telephone calls from a private room, food including breakfast, lunch, tea and supper, drinks and snacks at any time, lighting, heating, laundry and, all necessary personal care, nursing care and, subject to a subsidiary agreement with the National Health Service (NHS), Registered Nursing care as defined by the Health & Social Care Act 2008, or NHS Continuing Care.

The NHS may make a contribution to us for the registered nursing care we provide, under the NHS "Funded Nursing Care" scheme (FNC), or under NHS Continuing Care arrangements. Any payments we receive under the FNC scheme will be refunded in full, every quarter, to the person who is paying our fees.

The Home's fees do not include Service User's personal expenditure on clothes, cigarettes, alcoholic drinks, and any external professional charges, such as medical, dental and chiropodist's charges. If the Home has paid for any of these services then the Home will send the Service User an account for settlement every six months.

Fees and charges are the same for Service User's whether or not their care is funded in part by the NHS or by a Local Authority. Service User's should be aware that fees paid by the NHS or a Local Authority can vary or cease. The liability for the full fee will nevertheless remain with the person who signed the contract. Service Users will be advised of the reasons for any changes in fees.

The Home cannot predict future fee increases as most of the factors for change are outside the home's control. On average fees have increased by 4% per annum for the past few years.

Service users are free to engage in their chosen social activity, hobby, or leisure interest, provided their activities do not cause a nuisance or danger to other Service Users. If any activities involve an unusual cost, not anticipated in our standard form of agreement, then the Service User or their representative will be advised of the cost in advance, and their agreement sought.

## **About the Service Users**

The Home provides care for Service Users of both sexes. The usual age of admission is over 65, though younger people whose needs may also be met by the home are sometimes admitted, at the Manager's discretion, following a full needs assessment. The Care Quality Commission will be informed. There is no upper age limit.

### **Assessment**

- All Service Users are fully assessed prior to admission and Matron's decision about the home's ability to meet the Service User's needs is required prior to the admission of the Service User to the home.
- Service User plans are reviewed by Matron regularly.
- A Service User or their relative or representative can request a review of the Service User plan at any time.
- The Home will safeguard the Service User's right to confidentiality.
- The Home is registered under the Data Protection Act.

### **Feedback**

The Home pays great attention to the Service Users' comments and reactions to the care and facilities they are enjoying at the time the care is being provided. This is particularly important feedback to the Home as Service Users cannot usually remember the nature of any service provided for any significant time after they have received it. Service User's relatives are urged to comment to any member of staff at any time about any aspect of the service. The Home has introduced a satisfaction survey that invites families' comments and suggestions, which the home uses to guide the development of its services and facilities.

### Personal beliefs

The local Vicar and the Priest attend the home regularly. There are no formal arrangements for Service Users to attend religious services. However individual arrangements are sometimes made and the home always tries to accommodate Service Users and their relative's wishes. If any arrangements involve an unusual cost, not anticipated in our standard form of agreement, then the Service User or their representative will be advised of the cost in advance, and their agreement sought.

### **About the Registered Provider**

The Registered Provider is the Wardington House Partnership (WHP), of which Mr George Tuthill is the Managing Partner. Mr George Tuthill has been a Partner in WHP since 1973 and the Managing Partner in day-to-day control of the business since 1989. He has extensive relevant management experience and is the individual responsible for the home.

His address for the purpose of this document is the home's address, as above.

### **About the staff**

The Matron of the home, who is a Registered Nurse, is responsible for the care provided to the Service Users, including Registered Nursing care as defined by the Health and Social Care Act 2008 and the Care Quality Commission (Registration) Regulations 2009.

The Matron is Mrs Maggie Rampley who is a Registered General Nurse (RGN). Mrs Maggie Rampley has worked at the home since 1989 and has been the Matron since 1994. She has extensive relevant experience. Her address for the purpose of this document is the Home's address, as above.

The Home employs an average of about 95 staff. Some are Registered Nurses. **Appendix 1**, attached to this document, gives the number, qualifications, and experience of the staff. It is updated annually.

The organisational structure of the home is as follows:

- The Managing Partner is responsible to his Partners in the WHP.
- The Matron is responsible to the Managing Partner.
- The Facilities Manager is responsible to the Managing Partner.
- The Nursing staff, Occupational Therapist, Care staff, and Housekeeper are responsible to the Matron.
- The Laundry staff and Domestic staff are responsible to the Housekeeper.
- The Cook is responsible to the Matron.
- The Kitchen staff are responsible to the Cook.
- The Administrative staff, Building Maintenance staff, and Gardening staff are responsible to the Facilities Manager.

### **Review of this document**

This document was last reviewed in September 2011 and will be reviewed periodically. It is not practical for us to advise everyone to whom we have sent this Statement of Purpose of any changes that we may make to this document. However we will be pleased to provide the current version to anyone who requests one, and the current version is on the home's Web site at [www.wardington.com](http://www.wardington.com).

*George Tuthill - 22/09/11*

### **Appendices:**

1. Schedule of the number, relevant qualifications and experience of the staff working at the home. It is updated annually.
2. The Fire Precaution Procedures. Updated every year in March and whenever it is appropriate (not available on the Web site).
3. Addresses

## Appendix (1) to Statement of Purpose for Wardington House Nursing Home.

In July 2011 the following staff were employed at the home:

Qualifications:           **RN** stands for Registered General Nurse  
                                  **RMN** stands for Registered Mental Nurse

| <b><u>No. of staff</u></b> | <b><u>Job description</u></b>                                            | <b><u>Relevant Qualification</u></b> | <b><u>Experience</u></b> |
|----------------------------|--------------------------------------------------------------------------|--------------------------------------|--------------------------|
| 1                          | Managing Partner                                                         |                                      | 20 years                 |
| 1                          | Matron                                                                   | <b>RN</b>                            | 20 years                 |
| 1                          | Deputy Matron                                                            | <b>RMN</b>                           | 13 years                 |
| 1                          | Facilities Manager                                                       |                                      |                          |
| 1                          | Nurse                                                                    | <b>RMN</b>                           |                          |
| 1                          | Nurse                                                                    | <b>RN / RMN</b>                      |                          |
| 8                          | Nurses                                                                   | <b>RN</b>                            |                          |
| 6                          | Activities Assistants                                                    |                                      |                          |
| 49                         | Nursing assistants                                                       |                                      |                          |
| 1                          | House Keeper                                                             |                                      |                          |
| 5                          | Laundry staff                                                            |                                      |                          |
| 12                         | Cleaners                                                                 |                                      |                          |
| 2                          | Cooks                                                                    |                                      |                          |
| 3                          | Kitchen assistants                                                       |                                      |                          |
| 1                          | Maintenance staff                                                        |                                      |                          |
| 2                          | Administration staff                                                     |                                      |                          |
| 1                          | Gardner                                                                  |                                      |                          |
| 96                         | Total staff complement. Not all staff are employed on a full time basis. |                                      |                          |

Some gardening work is undertaken by subcontract staff.

**Appendix (2) to Statement of Purpose for Wardington House Nursing Home.**

**Fire Precaution Procedures**

# WARDINGTON HOUSE NURSING HOME

(DETAILED FIRE DRILL PROCEDURE)

## IN CASE OF FIRE:

***In the event of fire, it is the first duty of all concerned to prevent injury or loss of life. For this purpose, you should make certain that you are familiar with this Fire Drill Procedure, and with all means of escape in case of Fire. Remember, in an emergency our residents will rely upon your/our understanding of this procedure.***

### 1. IF YOU DISCOVER A FIRE - Or one is reported to you

***You should:***

#### ***a. RAISE THE ALARM:***

**WHY?** *It is the quickest way to inform everyone that there is a Fire, and to call for help.*

**HOW?** *Break the glass on the nearest Alarm call point.*

**RESULT?** *Once the alarm is raised you know that other staff and persons living in the grounds of Wardington House, and the Fire Services are on their way to help.*

**NOTE:** *The fire alarm sounds in all properties in the grounds of Wardington House and all occupants will respond.*

#### ***b. CLOSE WINDOWS AND DOORS:***

**WHY?** *By closing all windows and doors you reduce the flow of air through the room and reduce the speed and spread of the fire. The fire is then contained to one room.*

- **NOTE:** - *Fire Doors close automatically on sounding the alarm.*

#### ***c. MOVE PEOPLE AWAY:***

Escort the persons in your charge away from the immediate vicinity of the Fire to a room from which they can easily be evacuated from the building (should that become necessary), ensuring that all doors are **closed** after you.

*In the first instance you should move residents "**Horizontally**" - that is, you move them into another room on the **same floor** from which they can easily be evacuated from the building, preferably passing through two doors, (closing them after you).*

*If there is a need to move residents occupying rooms in the Stable Wing they should be moved externally to a place of safety.*

*\*Do not prop open a door because you are going to return to move another resident – **it is now a potential Fire Break so close it!***

Move residents as calmly and quickly as possible, and with as little discomfort as possible according to the circumstances prevailing.

- *For Moving and handling techniques - see separate instructions.*
- *Always know where to find a wheelchair and **Always return a wheelchair to its proper place following normal usage– it may be required in an emergency.***

***d. DEAL WITH THE FIRE:***

*There may be an opportunity, in the event of Fire for you to attack it with the nearest Fire Extinguisher. Do this only if you are competent using it and confident it will have the desired effect. If you are not sure, **DO NOT** attempt to use an extinguisher - your skills may be more usefully employed elsewhere.*

***e. REPORT TO THE FIRE PRINCIPAL/NOMINATED DEPUTY***

As soon as you can safely do so - having discovered the fire you will probably have more knowledge than anyone else about its location and severity. (You may alert the Fire Principal by using the Nurse Call System)

***f. Additional Note – Immediate Action - Persons on Fire.***

***If Your Clothing Catches Fire.***

- ***STOP*** – *Don't run as this will make the fire worse.*
- ***DROP*** – *Get down on the floor.*
- ***ROLL*** – *Roll over to put the flames out.*

***If someone Else's Clothes Catch Fire***

- *Lay them to the ground.*
- *Wrap them in a coat or rug.*
- *Roll them around to extinguish the flames.*
- *If you burn or scald yourself, wash the affected area with copious amounts of water and seek medical help*

## 2. **IF YOU HEAR THE FIRE ALARM**

### **You should:**

#### **a. MAKE YOUR SITUATION SAFE:**

If you are dealing with a resident, make sure they are not at risk of any danger before you leave the situation; e.g. - a resident in the bath may require moving to a safer place. Or, a member of trained staff may need to take a few moments to secure any medication she may be dealing with before doing anything else.

#### **b. ATTEND THE FIRE INDICATOR PANEL:**

*This is situated in the hall near the front door (outside room 10).*

### **From there you may be asked to do any of the following:**

#### **(1). Search & Evacuate**

*The Fire Principal/Nominated Deputy may ask you to help search the area near the cause of the Alarm as indicated on the fire panel.*

*If you are asked to help search, take the fire keys and one radio with you. If necessary, begin evacuation of the fire area. Remember the following safety points; **DO NOT** open any door unless you are sure that there is no fire behind it. **Test** a door by running the back of your hand from the bottom toward the top of the door. Heat rises, so, if there is a fire behind the door, the top is likely to be hotter than the bottom. If you were to touch a door with the palm of your hand you may injure it and render it useless (If you were to touch a hot door with the back of your hand you may still be able to use it).*

***If in doubt, be directed by the search/evacuation team leader – a nominated member of staff***

#### **(2). Evacuate Residents from the fire area:**

*The Fire Principal/Nominated Deputy may ask you to help evacuate residents from the fire area/zone. If you are asked to evacuate residents from the fire area, remember to **Remain Calm** Our residents will be happier to co-operate with you if you take your time, and move at their pace.*

- ***For moving and handling techniques - see separate instructions.***
- ***Always know where to find a wheelchair and Always return a wheelchair to its proper place following normal usage – it may be required in an emergency.***

**(3) *Locate outlying residents and maintain their safety:***

The Fire Principal/Nominated Deputy may ask you to locate any residents who may be in the grounds, or whose specific whereabouts are not known. If you are asked to locate outlying residents, and maintain their safety, remember the following points:

- ***Remain Calm***: see note (2) previous page.
- ***Always know where to find a wheelchair***, see note (2) previous page.

**c. *Stay with an assembled group of residents and maintain their safety:***

The Fire Principal may ask you to stay with an assembled group of residents and maintain their safety, if so, remember the following points;

- (1). **MAKE SURE** no one wanders back into an unsafe area.
- (2). **REMAIN CALM** and communicate 'Calm' to others.  
See note (2) previous page.
- (3). **REASSURE** residents as and when necessary.

**d. *Wait for further instructions:***

*The Fire Principal may ask you to 'wait in reserve', at the Fire indicator panel to deal with any unforeseen circumstance and/or to give support where needed with any of the above.*

### 3. **INSTRUCTIONS TO THE FIRE PRINCIPAL**

*If you discover a Fire, or one is reported to you, you should:*

- a. **Sound the Alarm**
- b. **Call the Fire Service immediately.**
- c. **Direct and assist in adhering to the Fire Drill Procedure.**
- d. **Observe all other responsibilities associated with being "Fire Principal", as detailed in the following paragraphs.**

#### **IF THE FIRE ALARM IS SOUNDING**

*Attend the Fire Indicator Panel (Zones are indicated in the following way)*

|                                |                    |
|--------------------------------|--------------------|
| <i>Zone 1 --- Ground Floor</i> | <i>Rooms 10-19</i> |
| <i>Zone 2 --- Ground Floor</i> | <i>Rooms 20-29</i> |
| <i>Zone 3 --- First Floor</i>  | <i>Rooms 30-39</i> |
| <i>Zone 4 --- First Floor</i>  | <i>Rooms 40-49</i> |
| <i>Zone 5 --- Second Floor</i> | <i>Rooms 50-59</i> |
| <i>Zone 6 --- Library</i>      | <i>Rooms 60-69</i> |
| <i>Zone 7 --- Office Flats</i> | <i>Rooms 70-79</i> |
| <i>Zone 8 --- Stable Flats</i> | <i>Rooms 80-89</i> |
| <i>Zone 9 --- Cellar</i>       |                    |

- **Note: In the absence of the Nominated Fire Principal the most senior member of staff present will automatically become 'Acting Fire Principal'**
- e. *Using the "Guide/reminder", from the fire panel cabinet, nominate a Fire Principal's Assistant to record each deployment of staff, then:*
    - (1). *Direct a team of staff to search/evacuate the Fire Area, nominating one member of staff as 'Team Leader' to communicate with the Fire Principal/Nominated Deputy via the Radio, reminding them of main safety procedures; i.e. door safety, calmness etc. Note down the names of the people you have sent to search/evacuate. The Search/Evacuation team leader must take the 'Fire Keys' and one Radio.*
  - f. **Direct further teams as follows:**
    - (1). *To help the search/evacuation team to evacuate residents from rooms/areas, reminding the team to remain calm and to move as quickly as possible within the residents' capabilities*

(2). *To supervise an assembled group of residents, ensuring they do not wander off, possibly into an unsafe area. Remind them to remain calm and to re-assure and comfort residents as and when necessary.*

(3). *To check the **Nurse Call Indicator Panel** to learn where staff may be in need of assistance.*

(4). *To locate residents in the grounds, or walking around the home and to maintain their safety, (i.e. to ensure they do not wander into an unsafe area). Remind this team to remain calm, and to move at the residents' pace.*

(5). *To wait for further instructions/emerging needs; i.e. to support any of the above teams as and when required.*

(6). *Remember to note down the names and locations of the people you deploy, so that as far as possible you know where **all** people are at **all** times.*

(7). *The Fire Principal/Nominated Deputy will remain at the Fire Indicator Panel to receive all incoming information e.g. the seriousness of the fire, whether anyone is trapped etc., so that maximum information can be handed over to the Fire Service when they arrive.*

(8). *Staff may be re-allocated as tasks are completed; e.g. once outlying residents are secured, those staff may become available to assist with any of the other teams, as and when necessary*

- **REMEMBER:** - *It should be the aim of the Fire Principal/Nominated Deputy to know where people are at all times.*

**g.** *There may be a situation where the Fire Principal deems it necessary to attend the scene of the fire, in which case the following should be observed:*

(1). *Direct a Nominated Deputy to remain at the Fire Indicator Panel, handing over to them relevant information; i.e., who has been sent where, and how much of this procedure has been completed - preparing them to receive the Fire Service.*

### **Notes to the Fire Principal**

#### ***Switching off the Fire Alarm Sounders***

*When the Fire Principal and/or the Fire Officer is satisfied that all parties are aware and that appropriate action is being taken – Press “Silence & Resound” then “Reset”.*

#### ***Switching off the Sprinkler System***

*When the Fire Principal and/or the Fire Officer are satisfied that there is no further danger – Turn off the water supply to the Sprinkler System.*

*Turn off the lever marked with red sign “Sprinkler System Control in Pump Room (Office Flats), then silence the Nurse Call at the call point in Pump Room. Turn on “Sprinkler System Control” after a replacement sprinkler head has been fitted*

***Evacuation Assembly Point***

*Should it become necessary to evacuate the building the primary assembly point will be the **Rear Lawn.***

#### 4. WHAT WILL THE FIRE SERVICE DO?

**They will either:**

- a. Go to the scene of the Fire, or,
- b. Go to the Fire Indicator Panel, where the "Fire Officer in Charge of the Fire", will make themselves known and the Fire Principal/Nominated Deputy will hand-over all relevant information. The Fire Officer may request further assistance from Wardington House Nursing Home staff: - particularly using our knowledge of the building, and of our residents.

If evacuation of a zone, a whole floor, or the whole building is directed:

**DO NOT USE THE LIFT!**

**Why?** The lift is powered by electricity and if the power is cut by the Fire the lift will stop and all inside may be trapped. - **SO - DO NOT USE THE LIFT.**

- a. Take your time - (more haste, less speed).
- b. Use any **SAFE** available escape route (**except the lift - see above**).
- c. All residents and staff should be moved to the assembly point, which is the **Rear Lawn**.
- d. The Fire Principal/Nominated Deputy will nominate one person to "Call the roll" and notify the Fire Principal/Nominated Deputy at once of their result i.e. all persons present or one person missing, their names and likely location.

**NO-ONE should re-enter the premises until told by a Fire Officer that it is safe to do so.**

**In the course of your work, please note the locations of:**

- a. **ALL FIRE EXTINGUISHERS.**
- b. **ALL SMOKE AND HEAT DETECTORS.**
- c. **ALL FIRE ALARM CALL POINTS.**
- d. **ALL ESCAPE ROUTES.**
- e. **STAIRS AND DOORS LEADING FROM FLOOR TO FLOOR AND OUT OF THE BUILDING.**

**(Particularly in the area that you usually work)**

# **Wardington House Nursing Home**

## **Notes:**

### **Fire Protection System**

### **How it works**

#### **1. Fire Indicator Panel**

*Indicates in which zone and by which fire detection device, the fire alarm system activated and indicate status of system.*

### **This is connected by cables to:**

#### **2. Smoke Detectors**

- *To detect smoke and activate system*

#### **3. Heat Detectors**

- *To detect heat and activate system*

#### **4. Fire Alarm Call Points**

- *Break glass to activate system*

#### **5. Alarm Sounders**

- *Sound when system activated to let everyone know that there is a fire alarm*

#### **6. Automatic Fire Doors**

- *Close when system activated to separate and protect different zones of building and most rooms.  
(Zone separation doors are closed by a time clock from 10.30pm to 5.45am)*

#### **7. Alarm Sounders in all Properties in Wardington House Grounds.**

*To let all persons living on site know that there is a fire alarm*

***This system is powered by electricity - if power fails there is battery backup power for 1-2 hours.***

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### **Emergency Lighting System**

- *Provides lighting for safe exit from the building in the event of power failure.*

***Each light is battery operated for 3 hours.***

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### **Sprinkler System**

- *When the temperature at an individual sprinkler head reaches a set limit, the head is activated and sprays water over an area of approximately 25<sup>o</sup>m.  
**90% of fires are extinguished by a single sprinkler head.***

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### **Security System**

- *To provide security/safety of patients and Staff. This system is linked to the fire protection system.*

***This system is powered by electricity - if power fails there is separate battery backup for 1 hour.***

# Wardington House Nursing Home

## Notes:

### Fire Protection System - Detail

#### **Fire Doors**

*1 and 1/2 hour fire protection fitted top and sides with intumescent strips and brushes Security knob sets. May be locked to stop entry into rooms but cannot stop exit from rooms. Note that security knob sets are fitted to some doors at top and bottom of stairs to prevent residents wandering at night and falling down stairs. These door-closing mechanisms are linked to F.P.S. and are unlocked automatically when F.P.S. is activated. **Door stops/rebates may be 1/2" deep so long as they are glued and screwed and the door is fitted top and sides with intumescent strips and smoke seal.***

#### **Fire Fighting Equipment** -

*Fire Extinguishers (water)  
Fire Extinguishers (CO2) in kitchen  
Fire Extinguisher (hal) in offices  
Fire Extinguisher (CO2) in laundry  
Fire Blanket in kitchen  
Red discs on skirting boards indicate extinguisher Location.  
All serviced and inspected annually*

#### **Fire Notices** -

*To indicate exit from building  
To keep exits clear  
To inform all persons of action in case of fire  
To close doors*

#### **Means of Escape** -

*All escape routes (corridors, doorways and stairs) must be kept clear of obstructions at all **times**. Doors should not be propped open.*

#### **Staff - Training** -

*at least 2 x per year for all staff*

- 1. Explanation/discussion of detailed fire drill procedure.*
- 2. Practical drill*
- 3. Constant reminders by supervisory staff (particularly re means of escape, closing cupboard doors).*

# ***Wardington House Nursing Home***

## **Notes:**

### **Means of Escape**

*It is the Registered Proprietor's responsibility to ensure that the following points are complied with:*

- 1. Escape routes must be kept free from obstructions at all times.*
- 2. Floors and floor coverings, particularly on staircases, must be maintained in good order.*
- 3. Fire resisting self-closing doors must be maintained in effective working order and must be kept closed unless held open on an automatic release-mechanism, which is activated by the fire protection system.*
- 4. All doors affording a means of escape from the premises must be easily opened and ready for use at all times.*
- 5. Exit and other signs must be maintained in good order and must be clearly visible.*
- 6. Fire alarm "BREAK GLASS" must be easily accessible.*
- 7. Emergency door fastenings (Panic bolts, glass locks etc), where fitted, should be examined weekly.*

*It is the duty of all employees to report any faults they may find in the fire prevention precautions.*

## **Appendix (3) to Statement of Purpose for Wardington House Nursing Home.**

### **Addresses**

Care Quality Commission  
South East  
Citygate  
Gallow Gate  
Newcastle upon Tyne  
Tyne & Wear  
NE1 4PA  
Telephone: 03000 616161

Oxfordshire Primary Care Trust  
NHS Funded Care Office  
Continuing Care Services  
Abingdon Community Hospital  
Marcham Road  
Abingdon  
OXON  
OX14 1AG  
Telephone: 01235 205484  
Fax: 01235 205781

Oxfordshire County Council  
Social & Community Services  
Information & Services Team  
Telephone: 0845 050 7666

The Local Government Ombudsman  
PO Box 4771  
Coventry  
CV4 0EH  
Telephone: 0300 061 0614 or 0845 602 1983.

## **COMPLAINTS PROCEDURE**

### **FOR RESIDENTS AND RELATIVES**

The Home believes that if a Service User wishes to make a complaint or register a concern or make a suggestion they should find it easy to do so.

We look upon complaints as an opportunity to learn, adapt, improve and provide better services.

The Home's policy is to resolve the complaint to the satisfaction of all parties as quickly and completely as possible.

The complainant may complain in any way they choose to any of our staff.

If they want their complaint brought to the attention of either the Matron or the Managing Partner, they should either ask the staff member to pass the complaint on, or approach either the Matron or the Managing Partner directly.

If a complainant is not satisfied with the Home's response to any complaint, and in any event, the complainant may also contact the Care Quality Commission, or the Local Government Ombudsman, whose addresses are given below (and in Appendix 3).

The Home will inform the complainant of any investigation or action taken within 28 days of the complaint being made.

This Home is registered with the Care Quality Commission (CQC). The address is given below.

Residents and their relatives are encouraged to make suggestions and constructive comments. They should also feel confident to voice their concerns.

Should a resident or their relative have cause to make a complaint about the Home, please follow the procedure below:

1. If the grievance is care related, it should first be brought to the attention of the Matron, Mrs Maggie Rampley. All other grievances should be brought to the attention of the Registered Manager, Mr George Tuthill. They will record the complaint and then proceed to investigate the matter.
2. The Matron or Registered Manager will then discuss the result of the investigation with the complainant and hopefully a mutually acceptable outcome will be reached.
3. A response will be made to the complainant, in writing, within 28 days
4. If the matter is still not resolved to the satisfaction of the complainant within 28 days, the complaint should be referred to:

**Care Quality Commission South East**  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA  
Tel: 03000 616161  
Fax: 03000 616171  
Email: [enquiries.southeast@cqc.org.uk](mailto:enquiries.southeast@cqc.org.uk)

## **Extract taken from - Care Quality Commission Ombudsman Complaints leaflet**

### **Complaints about care homes and social care services**

If you have a complaint about a care home, nursing home or any other social care service, the first thing you should do is tell the home or service.

This applies whether you pay for your care or your local council funds it.

By law, every care home and social care service must have an efficient procedure for dealing with complaints.

Ask for a copy of the service's complaints procedure so that you know what you need to do and how they will deal with your complaint.

### **Care funded by your local council**

If you are not happy with the reply you receive from a care service when you complain, you can take your complaint to your local social services department. You will need to follow their complaints procedure – your social worker, care manager or the department itself will explain what to do.

You can find the address of your local social services department at **[www.direct.gov.uk](http://www.direct.gov.uk)**.

The care service or the social services department should try to sort out your complaint themselves and put things right to prevent the same thing happening again.

### **Care funded by yourself**

From October 2010, you will be able ask the Local Government Ombudsman to take up your case if you are not happy about how a care home or service dealt with your complaint about care that you pay for yourself.

### **If you are not happy with the reply you get**

Complaints that are referred to the Ombudsman are known as "Stage 2" complaints.

If you are not satisfied with the final reply from the care service or your local social services department, you can complain to the Local Government Ombudsman.

There are three local government ombudsmen in England. They each deal with complaints from different parts of the country. However, you should first send your complaint to:

The Local Government Ombudsman  
PO Box 4771  
Coventry  
CV4 0EH

Phone:  
**0300 061 0614** or  
**0845 602 1983**