



Statement of Purpose

Lucy Glyn Residential Home
9 Evesham Place
Stratford-upon-Avon
Warwickshire
CV37 6HT



E Mail:
administrator@lucyglyn.org.uk
www.lucyglyn.org.uk
Telephone: 01789 297353

PHILOSOPHY & MISSION STATEMENT

Lucy Glyn is a residential home dedicated to ensuring the highest caliber of holistic care provision for adults with learning disabilities within the autistic spectrum.

In the belief that possibilities for achievement should be limitless, Lucy Glyn Support Services promotes realistic opportunities for the development and maintenance of the skills required for independent living and for a meaningful and rewarding life.

Lucy Glyn is located a footstep from the heart of the community. This favours integration with the wider community and gives ready access to all services and amenities.



Spring is here

*One spring day the sun was out and blue sky was all around
As I walked across the park I saw blossom trees with colours of pink and white
All the flowers in bloom and it was a bright sunny afternoon and I walked towards
the river as the water flowed and shimmered in the light under the willow trees in the shade
I sat on a bench watching the world go by with a smile and in the relaxing breeze my hair blew
Lightly I laid on the green grass with the sun giving me warmth and rays of sunshine*

Author K. McVeigh

The Service Providers details:

Lucy Glyn Support Services Ltd

Private Limited Company

Company Number: 7848590

Registered Person:

Caroline Snow

01789 297353

9 Evesham Place
Stratford upon Avon
Warwickshire
CV376HT

Caroline.snow@lucyglyn.org.uk

INTRODUCTION

Its inception came from the founders desire to create and deliver an inspirational care provision for individuals with a learning disability and on the autistic continuum.

Lucy Glyn Support Services aims to excel in its provision of care. It has been set-up by people who have witnessed exceptional achievements by individuals with autism through the successful application of specific strategies and approaches.

Lucy Glyn Support Services provides a structured and consistent environment. The value base of the staff team is one that promotes positive engagement, genuine human regard and the belief that the possibilities for achievement are endless. It seeks to be a catalyst for social interaction and development.

Given the characteristic cognitive and behavioural patterns of autism Lucy Glyn Support Services is essentially a training provision that supports individuals with autism to function in the world that surrounds them. Lucy Glyn Support Services has created a skill development programme that is instrumental in teaching the fundamental skills needed to develop as much independence as possible in the areas of:

- Self-care
- Communication
- Vocational skills
- Leisure and recreational interests
- Community living
- Behaviour management

Lucy Glyn Residential is a specialist service whose staff have expertise in the area's of Autism, Asperger's Syndrome; Epilepsy; Communication Difficulties; Obsessive-Compulsive Disorder, Self-harm; Adverse and Challenging Conduct and Complex Needs. The service also has a vast experience of supporting adults who have a mental health diagnosis, such as schizophrenia, personality disorder and depression.

Therapeutic approaches use combined strategies of **PCP** (Person Centered Care), **PBS** (Positive Behaviour support), **TEACCH** (Treatment and Education of Autistic and related Communication Handicapped Children/ Adults) and **SPELL** (Structure, Positive Approaches, Empathy and Low Arousal and Links), ABA (Applied Behaviour Analysis) and integrates the **SAACA** (Single Attention Associated Cognitive Autism), in order to achieve orientation towards independence and promote positive relationships with the individual's family, professionals and friends within the community. Lucy Glyn aims to achieve positive reputations for 'hard to place clients'.

For individuals with an autistic disorder it is essential to incorporate a variety of augmentative communication systems such as MAKATON (a signing system) and PECS (Pictorial exchange communication system). These are used in an

assortment of visual formats; for example, pictorial timetables to support organisation and talking mats to help with decision making.

Lucy Glyn accommodates up to six adults (male and female, aged between 18-75 years) in a substantial Victorian town house spread over three floors. It offers large and spacious individual apartments each with en suite facilities. All apartments are appropriately furnished and exceed the minimum requirements as identified in the regulations. All apartments have provision to lock away personal possessions and there is a television in all bedrooms. There is a communal bathroom located on the first floor.

Although we endeavour to offer equal opportunities to all adults with a learning disability within the autistic spectrum in need of residential care, we are unable to provide placements to persons with physical disabilities. Lucy Glyn is unsuitable for wheelchair access and the physical layout due to the step ups into the premises does not lend itself to provide adequate access for this particular group of people.

Lucy Glyn has a warm and inviting ambiance with a variety of communal spaces; there is an open plan kitchen and dining area and a sizeable lounge. Lucy Glyn has a reception suite that will accommodate meetings, but when vacant can be used by clients to access the computer facilities.

Lucy Glyn is situated in the vibrant and exciting community of STRATFORD UPON AVON. Located close to the town centre its position is ideal for access to a wide range of facilities and amenities. Lucy Glyn is within walking distance of doctors, dentists, pubs, theatres, a swimming pool, shops, supermarkets, a leisure centre, gymnasium, hospital, social clubs and restaurants and Methodist, Catholic and Church of England places of worship. It is further advantaged by being within walking distance of parks, idyllic countryside and the River Avon.

Lucy Glyn has a private rear garden and is located beside a public walkway and cycle path. This route leads directly to Stratford College, which has renowned facilities and provides a range of courses for adults with learning disabilities.

AIMS AND OBJECTIVES OF THE SERVICE & THE THERAPEUTIC APPROACHES IMPLEMENTED

For clients to move towards independence (which necessitates social interaction and reciprocal communication) through appropriately identified skill teaching

- through provision of an environment that promotes a feeling of safety and stability.
- use of the TEACCH programme **to develop social interaction and understanding; increasing communication**; the use of ongoing informal assessment to chart/review progress.

Why we use the TEACCH Training Framework:

- adjusts to the client
- teaches new skills in a one to one
- uses a visually based approach
- provides ample structure
- uses schedules and work systems
- organises tasks visually
- uses individuals strengths and interests
- makes concepts visually concrete
- generalises skills outside the home environment
- systematises change
- use of the SPELL programme to **promote positive social alliances.**

To build each client's self esteem and produce feelings of self worth

- by providing a supportive and tolerant environment giving clients the opportunity to flourish.
- by promoting physical exercise acknowledging it as a valuable element to health and well-being.
- by enabling clients to function and cope in the culture that surrounds them.
- to ensure that opportunities provided are individualised, structured and progressive so that possibilities for achievement are limitless.
- to make effective use of 'Person Centred Planning', based on the principle that the client is central to determining his or her own lifestyle choices. Clients will develop an Essential Lifestyle Plan through a guided process. This is to ensure appreciation of the things that matter to the client, and how the client wishes to be supported in order to keep healthy and safe. It seeks to **achieve positive outcomes / successful outcomes** for an individual.

Lucy Glyn has a staff member who is trained as a **Person Centred Facilitator**.

To manage adverse conduct through positive approaches

- staff are specifically trained to work with adults who exhibit challenging behaviour. Physical intervention should be the last resort. Lucy Glyn's environment is one of cohesion and consistency.
Staff are trained in NAPPI (Non Aggressive Psychological and Physical intervention). NAPPI UK is a leading provider of training solutions to the care sector. NAPPI specialise in BILD Accredited Managing Challenging Behaviour training, with an emphasis on Positive Behaviour Support approaches.
- by recognising that medication as a behavioural tool and form of restraint is not acceptable unless part of a therapeutic package.
- to manage adverse conduct through positive approaches such as: Applied Behaviour Analysis, Positive Behaviour Support, Positive Incentive Programmes, Positive Reinforcement Strategies and Coping and Tolerance Programs.

To work in Partnership with clients' families

- to build positive relationships with families and relevant professionals through honest and open communication

Lucy Glyn Support Services aims to provide a **client-centred service** with dynamic and developing practices. These practices are updated in line with experience, relevant legislation and evidence-based research. Most importantly though staff remain ever mindful that, **for the residents, Lucy Glyn is their home.**

Lucy Glyn Support Services endeavours to give full implementation to the principles Care Act 2014, namely rights, choice, independence, well-being and choice. Lucy Glyn Support Services can ensure that as a Provider of care and as an employer, will meet the obligations and adhere to good practice guidelines stated within the governing legislative requirements and standards, and any associated case law, guidance and codes of practice. Lucy Glyn Support Services assures to keep practices and service delivery up to date and in line with new legislation, as it is introduced or, when existing legislation is amended; in order to achieve improved performance, better outcomes, reduced health and social care inequalities and prevent abuse and neglect.

REFERRALS

All referrals should be made to the Registered Manager Caroline Snow. All potential clients, along with stakeholders, are encouraged to visit Lucy Glyn on a number of occasions and corresponding visits to the client's accommodation are valued. The acquisition of accurate and up-to-date information allows comprehensive assessment to be made, prior to the client moving in, ensuring that appropriate support is available as the client takes up residence.

A PEN PICTURE OF LIFE AT LUCY GLYN

Lucy Glyn's Support Services pivotal principle is *orientation towards independence through appropriately identified skill teaching*. Based on individual assessment, strategies are identified that best prepare and teach the necessary independent living skills to each client.

Supported by an experienced staff team, clients are encouraged to be actively involved in the domestic day-to-day running of their home. Practical outcomes result. For example, by using a pictorial shopping list (*photographs of foodstuffs*) a client who cannot read or write or has no verbal communication gains a degree of independence and becomes empowered to make decisions and express their choice and opinion. The client can organise their shopping and be actively involved rather than just assisting staff.

Being easily distracted can be associated with autism, therefore environment manipulation can be a useful tool to assist concentration and facilitate task completion. For example, when the client is washing-up after their meal, merely to close the curtains may reduce the distraction of external stimuli and help the person focus on the job-in-hand.

Menus reflect each client's personal preference. Staff offer information about healthy eating to promote an informed choice. Particular dietary needs are identified at the initial assessment prior to admission.

Staff provide sensitive and flexible personal care and support to maximize clients' privacy, dignity, independence and control over their lives. Where needed, guidance regarding personal hygiene and intimate care are provided in privacy, in accordance with Lucy Glyn Support Services gender policy.

The use of Individual Plans, Essential Lifestyle Plans and life history/life stories of each client enables staff to be consistent in their approach to care and its delivery.

Staff support service users to take responsible risks, ensuring they have adequate information, on which to base decisions (identified in the Individual Plan) through Lucy Glyn Support Services risk assessments and risk management strategies.

Routines and lifestyles choices are determined by the individual's preference and taste. Each client identifies how they wish to occupy their time and are encouraged to develop and sustain interests and hobbies.

Where identified, by the client or through the admission care plan, clients are assisted to attend religious/spiritual services of their choice.

Lucy Glyn residential have their own vehicles. This facilitates outings, activities and appointments. The train station and bus stop are five minutes walk from Lucy Glyn.

Lucy Glyn Support Services recognises the importance of maintaining (or restarting) contact with family and friends. Staff actively encourage this and assist clients to make telephone calls, writing letters and arranging visits.

Each client is encouraged and assisted throughout their time at Lucy Glyn to identify and set their own personal aspirations and to identify their personal ambitions. Lucy Glyn Support Services achieves this through an essential lifestyle plan. It is a guided process for discovering how someone wants to live now and in the future, then developing a plan to make this happen. This is a process that ensures consideration is given to things that matter to the person. The client identifies the individuals they wish to facilitate their plan.

Prior to admission, each client is allocated to a link person to assist with transition to Lucy Glyn. Once a client has had the opportunity to settle in they are encouraged to choose their own Key Worker. The Key Worker ensures that their race, culture and heritage are embraced and maintained

Focus Meeting / Key working sessions

Clients' opinions regarding the day-to-day running of their home are solicited at forum meetings. This forum provides opportunities to discuss their ideas, possible concerns to do with their care and changes they may wish to make. Certain clients may wish to appoint an advocate or a friend of the house to help with the realisation of their opinions. Lucy Glyn Support Services staff will make sure that communication systems / packages are in place and readily available so that all service users can voice their views. There are weekly Key Work Sessions, talk time and focus meeting.

HEALTH CARE SUPPORT AND PROVISION

All clients will be supported to access the NHS and community facilities, clients health will be regularly reviewed and maintained. Specialised health, nursing and dietary requirements will be set out in the clients Individual Plan and referrals made to external Health practitioners as and when required.

The staff are proactive in ensuring that health care is available and staff will arrange for all clients to be registered at a local doctor's surgery, immediately after admission.

Each client will have a health action plan, which will be maintained and reviewed on a monthly basis or before if required; the client and his / her key worker complete this. Lucy Glyn Support Services works in Partnership with health care professionals and the South Warwickshire Primary Care trust. All clients will have an easy read patient passport and consultation with the Learning Disability Hospital Liaison Nurse will be made, (if in post) or the Community Learning Disability Team.

Staff will facilitate clients to access any other health care professional or resource that is appropriate. This may include dentists, opticians, dieticians, speech and language therapists, chiropody, psychiatrists, psychologists and complementary health support where appropriate.

REGISTERED MANAGER'S QUALIFICATIONS & EXPERIENCE

Caroline Snow - Appointed to the post in June 2018, previously worked as the Deputy Service Manager at LUCY GLYN SUPPORT SERVICES LTD, SINCE 2010.

Ensuring compliance with all statutory and legislative regulations. Maintaining high standards of care, welfare and safety. Comprehensive assessment, care planning and risk assessment ensuring regular reviews and actions. To work closely with multi-disciplinary teams. To manage recruitment, induction and training of all staff, ensuring staffing levels are correct. To supervise senior team, holding appraisals and team meetings. To investigate incidents, accidents and complaints following policy and procedure. Implement disciplinary procedures. Ensure notifications are completed as necessary.

Qualifications

L5 DIPLOMA in LEADERSHIP for health and social care
2006

L3 NVQ FOR TEACHING ASSISTANTS
2003

L2 CACDP BRITISH SIGN LANGUAGE
2002

RSA IBT2

TRAINING

First Aid
Equality, Diversity and Human Rights
Food Hygiene
Health and Safety
Prevention and control of infection
Leading a team assertively
Medication
MCA and DoLs
Mental health matters
End of life care
Safeguarding adults
Challenging behaviour
Autism awareness
Understanding autism
Autism Intervener
CQC registration and compliance workshop
Employment Law
MAPPA training
Epilepsy awareness

COSHH

Non abusive psychological and physical intervention

Care plan review training

Effective supervision

Supervision for managers

Professional boundaries

Mental health first aid

Mental health issues for managers

Recruitment, selection and interviewing

Manual handling

Fire awareness

Deaf awareness

Organisation Structure

Managing Directors

Marion Davies

Clara Edmonds

Registered Manager

Caroline Snow

Deputy Service Manager

Sally Schiller

Location Managers

Team Leaders

Residential workers

Staff Team at Lucy Glyn Support Services

The staff team at Lucy Glyn consists of:

- * Registered Manger (Full time)
- * Deputy Service manager (full time)
- * Location managers (Full time)
- * Health and Safety Operations Lead
- * Team leaders (Full time/Part time)
- * Residential Workers (Full time/Part time)
- * Waking night staff

Lucy Glyn Support Services recognises the importance for all staff, who support our clients, to be approachable, accessible, good listeners, effective communicators, reliable, honest, interested, motivated and competent to carry out the tasks required of them.

Lucy Glyn Support Services invests in a training programme for staff members that is ongoing throughout their employment. Staff are trained to understand client's individual needs, regarding their disability, culture, communication and specialist programmes.

Clients have a right to be supported by staff who respect them and their possessions and their lifestyle choices, as set out in their Individual Plans.

The Registered Homes Manager works variable hours Monday to Thursday. An out of hours on call system is available to staff for advice and assistance.

There is a minimum of one senior or shift leader and three/four residential workers on duty throughout the day. There will be a waking night and one sleep-in staff throughout the night

Staffing levels are regularly reviewed to reflect clients changing needs.

All staff appointed are subject to a minimum three-month probationary period and subject to the successful completion of the Care Certificate.

Clients are informally involved in staff recruitment. Potential employees will be invited to a social function where the staff will observe their interaction with clients and then ask for the client's feedback.

All staff will only be confirmed in post following completion of an enhanced DBS check and other personnel confirmation.

We have a number of expert staff, who will deliver training and ensure that all staff completes their induction training.

They will deliver, coordinate and liaise with external training providers to ensure that all staff receive the appropriate level of training, updates and refreshers as needed.

Our training Matrix gives some indication as to the breadth of training, guidance and additional qualifications that we offer.

The main external providers will include: Redcrier Publications Limited, which is an independent training provider delivering training to the UK Care Sector, The Social Care Development Centre, The Autistic Society, Health Care Specialists and independent trainers, training courses accessed via BILD, WILMA, Skills for Care.

All staff will be trained in NAPPI (Non Aggressive Psychological and Physical Intervention). NAPPI UK is a provider of training solutions to the care sector. NAPPI specialise in BILD Accredited Managing Challenging Behaviour training, with an emphasis on Positive Behaviour Support approaches. The training is tailored to meet the specific needs of our organisation and service.

Staff will be enrolled on to level 2, level 3 and level 5 diplomas, relevant to their role and responsibilities: These qualifications assess a learner's competence within a work situation. The qualification contains a wide range of optional units which will allow opportunity for competence to be demonstrated in a wide range of contexts. The achievement of this qualification will meet the requirements of the workforce for this sector.

Each senior has had a minimum of 2 years management experience relevant to the field of care.

Training and staff development are linked to Lucy Glyn Support Services aims, client needs, and individual plans. Clients will be the key in determining staff training needs now and as the service develops.

All staff will have six weekly, recorded, supervision meetings with their line manager.

There are regular team discussions and team meetings, to ensure that staff can contribute to the day-to-day decisions with full staff involvement.

We develop a team culture whereby issues can be aired openly and proactively. We establish open and honest dialogue with staff acting on suggestions or issues raised.

Staff will be offered debriefings so that all situations and events can be analysed and learnt from. The service will be enhanced and developed in the light of this learning.

Training Matrix

Title of Course

- * **Care Certificate: Includes 18 areas of competency**
- * **Care Act 2014**
- * **Employment Legislation**
- * **Safeguarding**
- * **Health and Safety & Fire Safety & Risk Management**
- * **Diploma in Health and Social Care:**
 - Level 2
 - Level 3
 - Level 5
- * **NAPPI level 1**
- * **Autism**
- * **TEACCH**
- * **SPELL**
- * **Applied Behaviour Analysis**
- * **Positive Behaviour Support**
- * **Positive Approaches to Challenging needs**
- * **Epilepsy**
- * **Mental Health and Learning disabilities**
- * **Obsessive and Compulsive Disorder**
- * **Safe Handling of Medication**
- * **Equality & Diversity**
- * **Advocacy**
- * **Food Hygiene**
- * **First Aid**
- * **Manual Handling**
- * **Communication**
- * **Makaton**
- * **Person Centred Planning / Essential Lifestyle Planning**
- * **Finance Systems**
- * **Report Writing**
- * **Healthy Eating & Nutrition**
- * **Promoting Positive Life Style Choices**
- * **Role of CQC and Fundamental Standards**
- * **Relationships and Health**
- * **Mental Health Capacity Act & DOLS**
- * **Supervision & Appraisal**
- * **Complaints & Positive Representations & Customer Services**
- * **Team working & Team Building**
- * **Self injurious behaviour training**
- * **Personality disorders**
- * **PDA (Pathological Demand Avoidance Syndrome)**
- * **GDPR - General Data Protection Regulation**
- * **End of life**

Quality Audit Systems & Evaluation

Lucy Glyn Support Services is responsive to key legislative changes, ensuring the integration of the Key principles into our working practices and service delivery.

Our current auditing systems encompass the Regulations cited in the Health and Social Care Act 2008 (Amended Regulations 2015) and ensures our support practices meet the fundamental standard to deliver high quality person centred care. Please see appendices for a list of key legislation, which as a provider of care services we must comply.

Our organisation's quality of assurance is bench marked by the Care Quality Commission's fundamental standards of inspection and our audit of quality is based upon the five Key Lines of Enquiry:

Is it well led?
Is it caring?
Is it safe?
Is it effective?
Is it responsive?

Lucy Glyn Support Services believes in providing a transparent and open service. Auditing and evaluation systems should seek to explore beyond the surface and influential in making the service ever more effective.

Lucy Glyn Support Services implements, its own quality assurance policy. This is located in the homes policy and procedures. This system allows all stakeholders to analyse, evaluate and enhance their professional practice. An annual audit is carried out which seeks opinions of all stakeholders.

Other Monitoring Systems in place are:

Procedural and Operational Recording Systems:

record of accidents, critical incidents, notification forms, home and client expenditure records, complaint records, staff records

Client Monitoring Systems:

Admission and discharge records, Individual Plans, Questionnaire on service provision, focus meetings and key working sessions record, care plans and risk assessments, Audit Trails of interactions with other parties e.g. college and health care practitioners.

Health & Safety:

Monitoring forms including fire safety, fire equipment checks, administration of medication, first aid, accidents, house risk assessments, control of hazardous substances and food hygiene, maintenance records, EHD reports and HACCP.

Lucy Glyn Support Services has an appointed Infection Control Lead and a

Health and Safety Control Lead, who ensure compliance under the Health and Social Care Act 2008

Contract Terms: Admission and Termination of Placement

Contracts for clients terms and conditions of occupancy are made with people paying for placement. Contract for direct referrals (say by client's family) which outline the terms and conditions of residence, the responsibilities of the purchasing agency and Lucy Glyn Support Services ('Both Parties'), including termination of contracts by either party can be arranged.

Reviews

As part of our commitment to quality and in accordance with the people who give us our licence it is necessary to review how the client's stay is progressing. This should happen every annum.

Initially, it is expected that dialogue between Lucy Glyn Support Services and the clients' commissioner should take place at 6 weeks, 12 weeks and again at six months.

It is agreed with 'both parties, that the first 3 months of any placement is on a trial basis.

Core Residential Costs

Core Residential costs (inclusive of board, lodging, maintenance, food, transport, insurances) = £614.87 per month.

Staffing costs are charged at £18.02 per hour
Waking night / sleep in charged at £7.83 per hour

Fees are subject to and agreed on an individual needs basis, as identified through pre-placement assessment; these will be clearly stated within the clients' service agreement.

Concerns & Complaints

Lucy Glyn Support Services believes in a culture that facilitates a straight forward, easy-to-follow process, if ever a client or any stakeholders wish to make a complaint or raise a concern

Lucy Glyn Support Services views complaints as constructive criticism. They provide an opportunity to learn, improve, adapt, develop and provide a better service.

The complaints procedure is intended to ensure that complaints or concerns are dealt with properly and that the complaints or concerns of stakeholders are taken seriously and changes made where necessary.

There is a pictorial complaint procedure, situated in a prominent position within the home. The complaints procedure is discussed and provided to the client and stakeholders prior to admission as part of their service user's guide.

Here are the details of where all stakeholders can contact the CQC, Local MP, Warwickshire Council and Local Government Ombudsman.

CQC (Care Quality Commission)

Telephone: 03000 616161

Fax: 03000 616171

Opening hours are Monday to Friday, between 8.30am and 5:30pm.

CQC National Customer Service Centre

Citygate

Gallowgate

Newcastle upon Tyne

NE1 4PA

Constituency Office

Stratford upon Avon

Conservative Associations

3 Trinity Street

Stratford upon Avon

CV37 6BL

01789 292723

Learning Disability Team

Building 2

Saltisford Office Park

Ansell Way

Warwick

CV34 4UL

Local Government Ombudsman

Beverly House

17 Shipton Road

York

YO30 5FZ

01904 380200

COMPLAINTS & WHAT TO DO!



YOU HAVE THE RIGHT TO BE HEARD AND LISTENED TO



IF YOU DO NOT FEEL HAPPY ABOUT SOMETHING TELL US OR A RELATIVE OR A FRIEND OR SOMEONE YOU TRUST



HERE ARE THE DETAILS OF WHO YOU CAN CONTACT

In accordance with the Health and Social Care Act 2008 and the Local Authority Social Services and NHS Complaints regulations 2009, CQC cannot consider individual complaints about the services we regulate. If you would like to make a complaint about your service you should contact your provider Lucy Glyn in the first instance OR the placing authority.

Even though the CQC cannot investigate your individual complaint for you they would like to hear about your experience:

CQC National Correspondence, Citygate, Gallowgate, Newcastle upon Tyne NE1 4PA

Telephone: 03000 616161

**IF YOUR COMPLAINT OR CONCERN IS NOT SATISFIED
PLEASE REFER TO YOUR PLACING AUTHORITY**

**South Learning Disability Services
Warwick and Stratford Areas**

Building 2, Saltisford Office Park, Ansell Way, Warwick CV34 4UL

**Office hours are 9.00am to 5.30pm Mondays to Thursdays and 9.00am to 5.00pm
Fridays. At these times please call the Customer Service Centre on 01926 410410**

Emergency Duty Team: 01926 886922

**South Warwickshire Primary Care Trust
Westgate House, 21 Market Street, Warwick – 01926 493491**

APPENDICES

Fire Safety Procedure

Lucy Glyn Support Services fire safety policy and procedures take account of special fire hazards in specific areas of the workplace and where appropriate have been compiled with the assistance of the local fire service.

The senior management team are responsible for ensuring compliance with fire safety and prevention codes, for reviewing company practices and procedures, inspecting and testing fire fighting, prevention and protection equipment and for advising on safe practices and procedures.

The person(s) with responsibility for the maintenance and testing of fire alarms and fire fighting equipment will do so on a monthly basis.

All workers within the firm have a duty to report immediately any fire, smoke or potential fire hazard to the fire service (dial 999).

All workers have a duty to conduct their operations in such a way as to minimise the risk of fire. This involves taking care when smoking; keeping combustible materials separate from sources of ignition and avoiding unnecessary accumulation of combustible materials.

The Director of safety is responsible for the provision and maintenance of fire prevention and detection equipment.

Homes Managers are responsible for keeping their Home safe from fire, ensuring that their staff are trained in proper fire prevention practices and emergency procedures.

Fire Detection Equipment

Smoke detectors and manually operated fire alarms are located at strategic points throughout the workplace. If a smoke detector sounds, it is the responsibility of any employee present to activate the alarm and evacuate the building.

Fire Fighting Equipment

Fire extinguishers are located at strategic points throughout the workplace. Employees are expected to tackle a fire themselves only if it would pose no threat to their personal safety to do so. If the situation is dangerous or potentially dangerous, the employee should activate the alarm and evacuate the building immediately.

Fire Doors

Fire doors designed to slow the spread of fire and smoke throughout the workplace have been installed at strategic points.

Fire Exits

Fire exits are located at strategic points throughout the workplace. Exit doors and corridors must never be locked, blocked or used as storage space.

Emergency lighting has been installed in exit corridors, above emergency exit doors and throughout the workplace in case of power failure.

Smoking

Smoking is prohibited in all areas of the workplace except those areas which have been specifically designated by the Home Manager as smoking areas. These areas are located outside the building. Smoking areas should at all times be kept fire safe. Combustible materials must never be stored or allowed to accumulate in areas where smoking is permitted.

Fire Safety Risk Assessment

1. Identify fire hazards:

- Sources of ignition
- Sources of fuel; and
- Sources of oxygen.

2. Identify people at risk:

- People in and around the premises; and
- People who are especially at risk.

3. Evaluate, remove or reduce, and protect from risk.

- Evaluate the risk of a fire starting.
- Evaluate the risk to people from fire.
- Remove or reduce fire hazards.
- Remove or reduce the risks to people from fire.
- Protect people by providing fire precautions.

4. Record, plan, inform, instruct, and train.

- Record any major findings and action you have taken.
- Discuss and work with other responsible people.

- Prepare an emergency plan.
- Inform and instruct relevant people.
- Provide training.
- Each client will have a Personal, Emergency, Evacuation Plan (PEEPS), ready for when they arrive in the home.

5. Review

- Review your fire-risk assessment regularly.
- Make changes where necessary.
- All (PEEPS) will be reviewed and updated on a regular basis or as required.

Remember to review your fire-risk assessment regularly.

Fire Safety Risk Assessment.

Step 1; Identify The Hazards Within Your Premises:

- Sources of ignition such as naked flames, heaters or some commercial processes;
- Sources of fuel such as built-up waste, display materials, textiles or overstocked products; and
- Sources of oxygen such as air conditioning or medicinal or commercial oxygen supplies.

Step 2; Identify People At Risk:

You will need to identify those people who may be especially at risk such as:

- People working near to fire danger;
- People working alone or in isolated areas
- (Such as in roof spaces or storerooms)
- Children or parents with babies; and
- The elderly or infirm and people who are disabled.

Step 3; Evaluate, Remove, Reduce And Protect From Risk:

Evaluate the level of risk in your premises. You should remove or reduce any fire hazard where possible and reduce any risks you have identified. For example, you should:

- *Replace highly flammable materials with less flammable ones;*
- *Make sure you separate flammable materials from sources of ignition; and*
- *Have a safe smoking policy.*

When you have reduced the risk as far as possible, you must assess any risk that is left and decide whether there are any further measures you need to take to make sure you provide a reasonable level of fire safety.

Fire Detection and Warning System:

- *You must have suitable fire detection and warning system.*
- *Whatever system you have, it must be able to warn people in all circumstances.*

A Way of Fighting a Small Fire:

- *It may be acceptable to have multi-purpose fire extinguishers with a guaranteed shelf life.*

Safe Routes For People To Leave The Premises:

- *The ideal situation is when there is more than one escape route from all parts of the premises, although this is not always possible.*
- *If only one route is available, you may need to make it fire resisting (protected) or install an automatic fire-detection system.*
- *The distance people need to go to escape (the travel distance) should be as short as possible. The travel distance should be measured from the farthest point in a room to the door to a protected stairway or, if there is no protected stairway, to the final exit from the building.*
- *If there is only one escape route, the travel distance should not normally be more than 18 metres. This distance should be shorter (12 metres or less) in any parts of the premises where there is a high chance of a fire starting or spreading quickly. The distance can be longer (up to about 25 metres) where the chance of a fire starting quickly is very low.*
- *If there is more than one escape route, the travel distance should not normally be more than 45 metres (around 25 metres in areas where the risk of fire is high and about 60 metres in areas where the risk of fire is very low).*
- *Stairways, corridors and areas near the fire exits should be kept clear of obstructions and material, which can catch fire.*
- *The escape route should lead to a final exit and a safe place.*
- *If the stairway is not protected, the travel distance should be in line with those suggested above for single escape routes and the final exit should be easy to see and get to from the stairway at ground-floor level.*

- *High-risk rooms should not generally open directly into a fire-protected stairway.*
- *If your fire-risk assessment shows that people using any floor would not be aware of a fire, you may need other fire-protection measures, for example, an automatic fire-detection and warning system.*

Suitable Fire Exit Doors:

- *You should be able to use fire exit doors and any doors on the escape routes without a key and without any specialist knowledge.*
- *In premises used by the public or large numbers of people, you may need push (panic) bars or push pads.*

Step 4; Record, Plan, Instruct, Inform And Train:

In this step, you should record, plan, instruct, inform and train.

*You will need to record the dangers and people you have identified as especially at risk in **Step 1** and **Step 2**. You should also record what you did about it in **Step 3**. A simple plan can help you achieve this.*

You will also need to make an emergency plan, tailored to your premises.

It should include the action that you need to take in a fire in your premises or any premises nearby. You will need to give staff and others instructions. All employees should receive enough information and training about the risk in the premises. Some, such as fire marshals, will need more thorough training.

Step 5; Review:

You should make sure your fire-risk assessment is up to date.

You will need to re-examine your fire-risk assessment if you suspect it is no longer valid, such as after a near miss and every time there is a significant change to the level of risk in your premises. This could include:

- *If you store more materials which can catch fire easily;*
- *A new night shift starting; or A change in the type or number of people using your premises*

What you do if there is a fire!



=



if you hear a loud bell it means there is a fire



You must leave the building & wait outside



Try not to be scared there will be people to help you



COMPLAINTS & WHAT TO DO!



YOU HAVE THE RIGHT TO BE HEARD AND LISTENED TO



**IF YOU DO NOT FEEL HAPPY ABOUT SOMETHING TELL US
OR A RELATIVE OR A FRIEND OR SOMEONE YOU TRUST**



UPSET



ANGRY



CONFUSED

IF WE KNOW WHAT'S WRONG WE CAN MAKE IT BETTER



SPEAK UP!

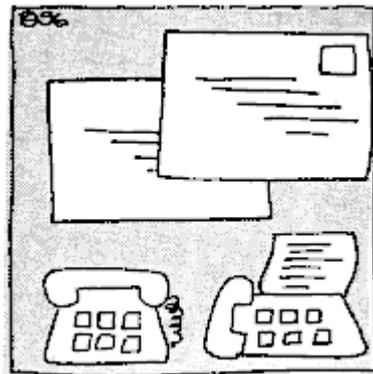


**IT FEELS GOOD TO GET LIFE
HOW YOU WANT IT**

HERE ARE THE DETAILS OF WHERE YOU CAN CONTACT THE INSPECTION OFFICER WHO VISITS THE HOME TO MAKE SURE YOU ARE SAFE.



RECENT REPORTS CAN BE MADE AVAILABLE TO YOU AT ANYTIME AND IN A FORMAT THAT YOU UNDERSTAND



APPENDICES

Room Sizes

Room 1 – 5.5m(length) by 4.51m(width) = 30.12 Metres squared

Room 2 – 6.49m (length) by 3.03m (width) = 19.66 Metres squared

Room 3 – 4.53m(length) by 4.30m (width) = 19.47 Metres squared

Room 4- 4.92m(length) by 3.7m (width) = 18.2 Metres squared

Room 6- 4.30m (length) by 3.57m (width) = 15.35 Metres squared

Room 7- 4.96m (length) by 4.20m (width) = 20.83 Metres squared

Communal Bathroom: 1.90M (length) by 1.80m (width) = 3.42 Metres Squared

Lounge: 5.50m(length) by 4.51m (width) = 24.8 Metres Squared

Dining area/Kitchen: 8.90m(length) by 3.2m =28.48 Metres Squared

Reception Suite: 5.90m(length) by 3.87m (width) = 22.83 Metres Squared

Meeting/ office Suite: 3.73m (width) by 4.92m (length) = 7.87 Metre Squared

Legislation which informs best working practice and Quality Care

Autism Act 2009

The Care Act 2014

Care Quality Commission (Registration) Regulations 2009

Care Quality Commission (Registration) and (Additional Functions) and Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2012 (Amendment to Parts 4 & 5)

Care Quality Commission (Registration and Membership) (Amendment) Regulations 2012

Companies Act 2006

Control of Substances hazardous to Health regulations 2002

The Controlled Drugs (Supervision of Management and Use) Regulations 2013

Data Protection Act 1998

The Electricity at Work regulations 1989

Employment Rights Act 1996

Equality Act 2010

Equality Act 2010: Chapter 1 (protected characteristics) Chapter 2 (prohibited conduct) and Chapter 3 (services and public functions)

Food Safety Act 1990

The Food Safety and Hygiene (England) Regulations 2013

Freedom of Information Act 2000

The Gas Safety (Installation and Use) regulations 1998

The Hazardous Waste (England and Wales) Regulations 2005

The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Health and Social Care Act 2008 (Registration and Regulated Activities (Amendment)) Regulations 2015

The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015

Health Professional Council – legal framework

Health and Safety at Work etc. Act 1974

The Health and Safety (First-Aid) Regulations 1981

The Health and Safety (Miscellaneous Amendments) 2002

The Local Authority Social Services and National Health Service complaints (England) regulations 2009

Management of Health and Safety at Work Regulations 1999

The Manual Handling Operations Regulations 1992

The Health and Safety (Miscellaneous Amendments) 2002

Medical Act 1983

The Medical Devices Regulations 2002

The Medical Devices (Amendment) Regulations 2012

Medicines Act 1968

The Human Medicines Regulations 2012

Mental Capacity Act 2005

Mental Capacity Act code of practice

Mental Health Act 1983

Mental Health Act 2007

Misuse of Drugs Act 1971

The Misuse of Drugs (Safe Custody) Regulations 1973

The Misuse of Drugs and Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007

Nursing and Midwifery Council (NMC) Legislation
Nursing and Midwifery Order 2001
The Pharmacy Order 2010
Protection of Freedoms Act 2012 – links to The Protection of Freedoms Act 2012
(Disclosure and Barring Service Transfer of Functions) Order 2012
Public Interest Disclosure Act 1998
The Regulatory Reform (Fire Safety) Order 2005
RIDDOR
Safeguarding Vulnerable Groups Act 2006
The Workplace (Health, Safety and Welfare) Regulations 1992
The Health and Safety (Miscellaneous Amendments) Regulations 2002

GLOSSARY OF TERMS

ETHOS: Guiding beliefs of a person or institution.

HOLISTIC: Treating the whole person not just the symptoms ...the whole is greater than the sum of the parts.

INCEPTION: The act or instance of beginning a process or undertaking.

INTEGRATION: The bringing together of people or groups who were formally segregated to form a single community.

MISSION: Specific task to which a person or group is dedicated or charged.

PHILOSOPHY: Sum of beliefs and attitudes of a specific individual or group.

CATALYST: Somebody or something whose actions inspires further and usually more important events.