

**Sandwell Mind**



For better  
mental health

## **STATEMENT OF PURPOSE**

(as per regulation 4 and schedule 1 of the Care Homes Regulations 2001)

Nicholl Grange  
22 Nicholl Street  
West Bromwich  
West Midlands  
B70 6HW

Tel and fax: 0121 525 3828

### **1. Name and address of registered provider and registered manager**

Sandwell Mind  
3<sup>rd</sup> floor, Bradfield House  
Popes Lane  
Oldbury  
West Midlands  
B69 4PA

Tel: 0121 543 3930  
Fax: 0121 544 3564

Registered manager:

Jeanette Witton  
c/o Nicholl Grange  
22 Nicholl Street  
West Bromwich  
West Midlands  
B70 6HW

Tel and fax: 0121 525 3828

### **2. Qualifications and experience of the registered provider and the registered manager**

Sandwell Mind is a company limited by guarantee no. 4660523 and is a registered charity, charity number 1096473. Sandwell Mind is affiliated to National Mind, the leading mental health charity in England and Wales.

Jeanette Witton took on the management of the home in May 2006. Jeanette has achieved NVQ4 in Care, the Registered Managers Award, the Certificate in Community Mental Health Care and NVQ5 in management.

### **3. Number, qualifications and experience of staff working at the home**

Nicholl Grange is staffed by the manager, three shift leaders, eight residential support workers, a cook and a cleaner.

Sandwell Mind has a training policy and training programme that applies to all care staff. Details can be found on our website. All staff complete a 12 week induction based on GSCC common induction standards and are then expected to undertake an NVQ award to further develop their skills and knowledge base. Sandwell Mind delivers in house training on key health and safety issues such as fire, first aid, food hygiene and manual handling, as well as specific training related to mental health awareness and the specifics of the relevant job description.

#### **4. The organisational structure of the home**

Manager

Shift Leaders x3

Residential Support Workers x8

Ancillary Staff x2

#### **5. Age range and sex of service users**

Nicholl Grange is registered to care for up to 14 adults (over the age of 18) with mental health problems. Persons over the age of 65 can be cared for at the home providing we are satisfied we can meet their needs safely.

#### **6. Range of needs the home is intended to meet**

Nicholl Grange aims to provide basic care and support to service users who have experienced difficulties with their mental health. The home tries to promote recovery and independent living wherever possible. The home does not attempt to provide a service for individuals who have pronounced physical care needs.

#### **7. The provision of nursing care**

No nursing care is provided at the home.

#### **8. Admission criteria and emergency admissions**

The eligibility and exclusion criteria at Nicholl Grange are as follows:

##### **ELIGIBILITY CRITERIA**

*Each prospective service user:*

*Must be clearly within the home's category of registration.*

*Must be willing to live within the 'house rules' as agreed with other residents.*

*Must be prepared to respect any boundaries as agreed in his/her individual support plan.*

*Must have suitable funding arrangements in place with the local authority (or self-funding must be a demonstrably viable option).*

*Must be assessed by the home's manager as being an appropriate placement.*

##### **EXCLUSION CRITERIA**

*An individual may be refused a service if:*

*They have a history of violence, arson, drug or alcohol misuse, and/or there is a perceived risk to the health and safety of care workers or other residents.*

*The manager feels the existing equilibrium/dynamic of the home is likely to be unduly disrupted by the admission.*

*The type or degree of required input is assessed by the manager of the home as being incompatible with the skills/knowledge base/capacity of the service.*

The home does not generally take emergency admissions and will only offer a place at the home following a full and detailed assessment of suitability.

### **9. Arrangements to engage in social activities, hobbies and leisure interests**

Service users are encouraged to pursue and develop social activities, hobbies and leisure interests as part of the recovery model of care. Staff are expected to work with service users to explore their wishes in this area, to agree appropriate goals, to record these goals in the service user's care plan, and to help the service user in working towards meeting these goals. Supporting the residents in this area is an integral part of the staff role at Nicholl Grange - residents are encouraged to choose their own lifestyle and to access the wider community in the same way any other individual would. An annual holiday is also arranged for residents who wish to take advantage of this opportunity.

### **10. Consultation with service users about the operation of the home**

Residents' meetings are held and minuted on a regular basis, and informal consultation about the running of the home goes on regularly. Nicholl Grange uses annual resident/stakeholder feedback questionnaires as a quality control measure.

### **11. Fire precautions and emergency procedures**

Nicholl Grange has a fire alarm system that allows staff to quickly identify the source of the alarm and to contact the fire brigade if required. There are smoke detectors fitted throughout the building. Staffs receive fire training on a six monthly basis and fire drills also take place on a six monthly basis. A different call point is tested every week and the whole alarm system, including emergency lighting, is serviced regularly. There are fire extinguishers fitted at points throughout the building and the action to be taken in the event of fire is on clear display within the home. A fire risk assessment is undertaken and updated on an annual basis.

### **12. Arrangements for attending religious services**

Service users are free to attend religious services of their choice. Attention to spiritual and cultural needs is covered in the initial pre-admission assessment process, and when each resident's support plan is drawn up. If a resident has any particular wishes or sensitivities in this area then staff are expected to make every effort to respect and facilitate them whenever possible, and to ensure that any relevant information is communicated across the staff team.

### **13. Arrangements for service users to have contact with relatives, friends and representatives**

Residents are encouraged to maintain any existing social or family contacts they may wish to, once they have moved into the home. Visitors are therefore welcome between the hours of 8am and 10pm. Visits outside of these hours should be negotiated and agreed with staff beforehand (for health and safety reasons and because of the impact on other residents).

### **14. Arrangements for dealing with complaints**

Sandwell Mind has a complaints procedure which is on display and which is provided to every resident upon admission. The complaints procedure is as follows:

*Sandwell Mind wants to provide good quality care and support to people with mental health problems. We encourage you to let us know if you are not happy about any aspect of any of the services we offer. If you have a concern about something please let a staff member know as soon as you can, and see if they can resolve the issue. Often this can quickly sort the matter out, but if it doesn't, please feel free to make a formal complaint. No one will make your life hard because you have decided that you want to complain.*

*You should put your complaint in writing, or ask someone to do it for you. Let us know what you are upset about and what you would like to see done differently. There are various people you might want to ask to help you make your complaint – for example a friend or relative, your Social Worker, your CPN, Sandwell Advocacy or Voice Advocacy. Give your complaint to the manager of the service, or to any staff member, or post it to Sandwell Mind's head office (address given below).*

*We will arrange for someone to look at your complaint and see if it is upheld. We may need to talk to various people to get a picture of what has been going on, but we will try to finish this process within 28 days at the most. We will let you know the outcome in writing. If we decide that your complaint is upheld or partly upheld then we will tell you what we plan to do to put things right.*

*If you are unhappy with the outcome of the complaint you can go to Sandwell Mind's Care and Support Services Manager, or to the Chief Executive of Sandwell Mind. If you remain dissatisfied you can then go to the Chair of Sandwell Mind's management committee. All these people can be contacted at Sandwell Mind's head office.*

*If you have a complaint we encourage you to come to us in the first instance, but there are other people outside of Sandwell Mind that you can contact if you feel you need to. For Supported Housing or SORT services you can contact the Supporting People Team. If you live in a care home you can go to CQC at any time, and if your care home placement is funded by Sandwell MBC then you can also contact their customer relations team. Addresses are given below.*

<i>Sandwell Mind</i>	<i>CQC</i>	<i>Sandwell MBC</i>	<i>Supporting People</i>
<i>3rd floor, Bradfield House Popes Lane Oldbury West Midlands B69 4PA</i>	<i>Citygate Gallowgate Newcastle NE1 4PA</i>	<i>Customer Relations Council House Freeth Street Oldbury West Midlands B69 3DE</i>	<i>1<sup>st</sup> floor Kingston House 438 High Street West Bromwich B70 9LD</i>
<i>0121 543 3930</i>	<i>03000 616161</i>	<i>0845 359 7510</i>	<i>0121 569 5267</i>

### **15. Dealing with reviews of service user plans**

Residents' support plans are drawn up upon admission. Thereafter they are reviewed and rewritten as and when circumstances or needs change, but at least once every six months. The process is a collaborative one between the resident and the care worker, and residents keep their own copy of the plan once it has been finalised. The process also involves obtaining feedback from other relevant parties (such as CPN or SW) and includes a statement of relapse indicators, a statement of risk management and a statement of any agreed boundaries.

### **16. The number and size of rooms in the home**

Nicholl Grange is a purpose built 14 bedded home. It consists of a 10 bed main unit with 4 self-contained flats situated next door. There is an enclosed garden to the rear and on-road parking to the front of the property.

The 4 self-contained flats each have their own bedroom, kitchen, bathroom and lounge.

Facilities in the main building are spread over two floors, connected by stairs and a shaft lift. On the ground floor there is a lounge, a quiet lounge, a dining area, a main kitchen, a laundry area, a staff office, a toilet, and two en-suite bedrooms. On the first floor there are 8 bedrooms (none of which are en-suite), 2 shower/toilet rooms, 1 bath/toilet room, a staff sleep in room and a small kitchenette.

In relation to national minimum standards 24.2, 24.9, 25.3, 25.5, 27.2, 27.4, and 28.2 the following information applies:

- The main 10-bedded unit exceeds the minimum total average living space of 14.1 sq m per service user. The 4 flats each have in excess of 14 sq m personal space.
- The home does not attempt to care for wheelchair users (although access to all parts of the building is good for residents with unrestricted mobility).
- All bedrooms throughout the home exceed the minimum spatial requirement of 10 sq m per service user.
- All bedrooms are single use.
- Within the main 10-bedded unit there are 2 en-suite toilets and a further 4 toilets for shared use; this exceeds the minimum required ratio of one toilet per 3 service users. The 4 flats all have their own separate individual toilet facilities.
- Within the main 10-bedded unit there are two en-suite shower facilities and a further three shared shower/bathrooms; this exceeds the minimum required ratio of one bathing/showering facility per three service users. The 4 flats all have their own separate individual bathing/showering facilities.
- The rear garden is spacious and is proportionate to the number of service users and staff living in or working at the home.

- In the main 10-bedded unit the laundry is of domestic proportions (7 sq m) and the main kitchen is of large domestic proportions (20sq m). The 4 flats all have separate individual kitchen and laundry facilities.
- In the main 10-bedded unit the dining room is 15.4 sq m, the quiet lounge is 14.0 sq m, and the main lounge is 27.5 sq m. Overall this equates to 56.9 sq m communal space and this is in excess of the required 4.1 sq m communal space per service user. The 4 flats all have their own lounges which are each in excess of 4.1 sq m.
- There is no designated area to receive visitors, or to use for consultation and treatment, other than the office in the main 10 bedded unit or the quiet lounge.
- The home has designated smoking areas.

### **17. Specific therapeutic techniques used at the home and arrangements their supervision**

Nicholl Grange offers basic mental health support and care to the residents who live at the home. The home does not generally offer any specialised therapeutic techniques and the decision to use a specific therapeutic technique - for example, structured counselling sessions - would be normally only be made after a full discussion with statutory key workers and a full exploration of the implications of such a decision. Any such techniques would then have clear written guidelines incorporated into the relevant support plan and would be based on current best practice.

### **18. Arrangements for respecting the privacy and dignity of service users**

Respecting the privacy and dignity of the residents is covered within the induction and foundation training programmes for all staff at the home. Staff do not enter a resident's bedroom without permission, and will always knock and wait before entering the room (except in an emergency). Staff are expected, as a general principle, to recognise the need for tact and discretion when raising or dealing with personal issues with any resident. Residents are asked upon admission how they wish to be addressed. Resident's notes are kept in a lockable facility to ensure confidentiality of information. Residents are free to see any of their notes at any time if they wish to do so, and will also have their own copy of their support plan. All residents' bedrooms are lockable, and each resident has a key to both the front door and the door to their own room. Bathing and toilet areas have lockable doors to ensure dignity is maintained.