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New body launched to protect EU staff in wake of Brexit

A coalition of 29 health and social care organisations has been created to help ensure a sustainable workforce supply and thereby maintain standards of care as Britain withdraws from the European Union.

The Cavendish Coalition says it will provide those who are leading Brexit negotiations with the expertise, evidence and knowledge required on issues affecting the health and social care sectors.

Danny Mortimer, chief executive, NHS Employers which is a member of the newly formed group, said the coalition would be a common voice influencing and lobbying on post-EU referendum issues that affect the social care and health workforce.

“It will in particular ensure that there is a robust evidence base to support workforce policy across social care and health,” said Mr Mortimer. “This coalition of health and social care experts will be a shared voice, working together to ensure continuing quality in health and social care post-EU referendum. We will provide a focal point for engagement with relevant government departments and NHS arms-length bodies and regulators on the workforce issues arising from the Brexit vote. We will also work together to ensure we continue to promote opportunities for employment within social care and health, particularly in our local communities and only where necessary, internationally.

“The hard work begins now. First and foremost we need to influence and support the Government in a way which allows it to grant indefinite leave to remain for the 144,000 EU workers in health and social care. EU citizens are a hugely valued and appreciated part of the workforce caring for service users and patients and should be treated as such.”

Cross-party inquiry

The Cavendish Coalition has submitted evidence to a cross-party inquiry chaired by MP Gisela Stuart which will examine options for guaranteeing the status of EU nationals who are currently living in the UK.

In a joint statement Care Providers Alliance chair Frank Ursell and Skills for Care chief executive Sharon Allen said the coalition was a welcome opportunity for the 19,300 employers in adult social care, the 1.43 million care workers and the workforce that supports children’s services who support citizens with a wide range of care and support needs around the nation.

“The coalition brings together representatives from social care and health seeking to ensure that we continue to offer seamless, quality person centred services following the decision to leave the EU,” they said. “With around 80,000 jobs filled by workers with EU nationality who make a valued contribution to adult social care in England, employers and their workers are uncertain of the impact of the decision to leave.

“All the adult social care organisations who have signed up to this coalition can use their knowledge to help British Future inform the post-Brexit decision making process to ensure that millions of people in our communities, and their families and carers, can continue to access quality social care and health provision.”

Low fees see Housing & Care 21 abandon the homecare market

Housing & Care 21, a major UK care and support provider has made the decision to exit the homecare market, saying local authority fees make it unaffordable to provide high-quality care.

The not-for-profit provider, which operates in over 150 local authority areas, intends to sell on its homecare business to another provider.

Speaking on BBC Radio 4’s You and Yours programme in mid-September, the company’s chief executive Bruce Moore said local authorities had been squeezed in their social care budgets for a number of years and were now paying the lowest rates possible as a result.

“That means effectively we can’t provide the staff training, the recruitment, the terms and conditions to get really good quality care workers, which older people require,” said Mr Moore, adding that while he was confident that another provider would take on the business and that there would be no discontinuity of care for staff, providers wanting to take on the business may “have less exacting standards” for the care they delivered.

Housing & Care 21’s exit is the latest example of providers’ diminishing interest in local authority-funded homecare provision. In the first half of this year, homecare providers handed back contracts in 59 council areas in England, while in 48 areas at least one homecare provider ceased trading, according to the Association of Directors of Adult Social Services’ (ADASS) annual budget survey.

“It is coming increasingly pressured,” said Mr Moore. “Some companies are staying, but I think a lot of people won’t be re-tendering for contracts and will move out gradually. We are a very big provider so we took the view the easiest way to move out of this area is to find another provider who can take this on and hopefully maintain the quality standards.”

ADASS vice-president Margaret Wilcox said councils were doing everything they could to minimise the effect of any provider failures on residents, but the complexities of many contracts and care packages made it very difficult.

“We have produced several guides to help councils, and directors have been working within regions to support each other,” said Ms Wilcox. “We’re now at a tipping point where social care is in jeopardy, and unless the Government addresses the chronic underfunding of the sector, there will be worrying consequences for the NHS and, most importantly, older and disabled people, their families and carers.”
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Four Seasons Health Care has been named winner of Overall Best Customer Experience in this year’s UK Customer Experience Awards.

The company was chosen by the judges ahead of more than 750 companies across all sectors of industry for its Quality of Life programme, a technology based customer feedback system which has collected more than 110,000 pieces of feedback from residents and families in the past 12 months. The changes implemented as a result have led to customer satisfaction levels of more than 97% across Four Seasons Care Homes.

The Quality of Life Programme allows residents, their families and health professionals to use iPads that are linked to purpose-designed software systems, to tell the company what they think about any aspect of care. The information is transmitted in real time to the home manager and regional manager.

Four Seasons chief executive Tim Hammond said the award was both a huge endorsement and a credit to the 20,000 people in the company’s care teams who have used the Quality of Life system to listen to the 16,000 residents to understand how they can have a better experience and be happy.

“The feedback we have received has enabled our care teams to find and fix more than 70,000 issues or niggles,” said Mr Hammond.

“Most of these are little things which make a big difference to someone’s daily life. They have included always cutting the rind off someone’s bacon, changing the time someone’s medication is delivered, re-decorating a room to a resident’s taste, giving a choice of two meals for the Sunday roast. When the majority of our residents are of the generation who don’t like to make a fuss, our Quality of Life Programme has helped us to uncover customer needs that they might otherwise not have expressed.

“Since we introduced the programme into all of our homes last year our average customer satisfaction rating has increased from 92% to its current level of just over 97%. The programme has meant less paperwork for care home colleagues, freeing up their time which is better spent with residents.”

Customer Experience Awards host Neil Copping said it was the first time that a company in the care sector has won the award.

“I think it is very significant because, while quality of care is most important, there is more to giving people living in care homes the best customer experience. Four Seasons understands this and is embedding a customer focus and service culture that has resulted in a substantial increase in levels of customer satisfaction.”

Staff at Coppice Lodge residential and dementia care home in Arnold, Nottingham, were stunned when they found out they were to be served a meal by Ideal Care homes’ chief executive Matt Lowe.

The home had arranged a pop-up restaurant called ‘The Ritz’ for their residents and had invited Matt and director Philip Raven to join them for the experience.

Coppice Lodge adopted the pop-up restaurant to ensure that the dining experience is first class.

Matt Lowe moonlights at ‘The Ritz’
Responding to the report ‘Social care for older people: Home truths’ in September by The King’s Fund and the Nuffield Trust, Phil McCarvill, deputy director of policy at the NHS Confederation, said insufficient social care funding was now the most urgent threat to the NHS and the wider health and care system.

“In August we told a Commons Select Committee that too little money is being provided for social care and this is putting increasing pressure on the NHS,” said Mr McCarvill.

“In the run-up to last year’s Spending Review we urged the Government to stop seeing the NHS, social care and public health as three separate funding streams and instead view them as part of a single system. If we are to truly join up health and care then we need to support people to receive the care when and where they need it. Inadequate funding in one part of the system has a profound impact on the ability of the other parts to deliver the right care. Without this, local co-ordination and planning will become increasingly disjointed and the care individuals receive will suffer.

“In partnership with social care organisations, our members are working hard to transform services in their local communities but it’s vital that the Government supports this work by providing the funding social care so desperately needs.”

Care England, in its response to the King’s Fund/Nuffield report, said it had submitted evidence to three Parliamentary Select Committees this summer and that it was clear that the social care precept had not delivered what it was meant to, raising less than two thirds of the costs of the National Living Wage, and that the Better Care Fund hadn’t reached social care provision.

“ADASS has shown that the system needs at least £1bn, each year until the end of this Parliament, simply to maintain the status quo,” said Care England chief executive Professor Martin Green.

“The King’s Fund/Nuffield report reaffirms what care providers have been telling us: that without adequate resources the sector will simply crumble. Providers are willing to work with politicians and commissioners, but this goodwill needs to extend to action.”

A manager at a Glasgow care home has been shortlisted for a nursing leadership award.

Graham Kelly, general manager at Bupa’s Hillview care home in Clydebank won a nomination for the coveted Sue Pembrey Award 2016, which recognises clinical leaders who play a vital role in creating person-centred cultures within which all can flourish.

The Foundation of Nursing Studies (FoNS) – which announces the winners and nominees of the Award - highly commended Graham for his leadership and, in particular, recognised his clear vision for person-centred practice and ways of working where staff, residents and families are all equally important.

“Ultimately, the driving force behind my work is to improve the quality of life of the people in my care and I am absolutely thrilled that all my efforts are being recognised,” said Graham.

“At Bupa, our priority is, of course, caring for our residents. At Hillview, we do this by striving to create innovative and inspiring activities to provide them with the best quality of life possible.”

Graham Kelly

Kelly shortlisted for nursing leadership award

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Focus on dementia

NACC launches training workshop to improve mealtime experience

The National Association of Care Catering (NACC) is to hold two training workshops to support the care sector with the challenges of catering for people living with a dementia, whilst helping to enhance their life quality.

To be delivered by Dr David Sheard, the chief executive and founder of Dementia Care Matters and respected expert in the field, the one-day workshops will teach care caterers and providers how to look beyond the serving of food and turn mealtimes into beneficial, meaningful experiences.

The first workshop takes place on Thursday, 1st December at Aimia Food Ltd in Haydock, Merseyside, and the second is on Friday, 3rd February at Brakes in Covent Garden, London.

NACC national chair Neel Radia said participants would gain valuable understanding, knowledge and tools to help them move away from mechanical, task-driven dining and implement person-centred, quality care during mealtimes for people living with a dementia.

“It is so important that all care providers, whether in a residential care home or in the community, are fully-equipped with the right knowledge and tools to give meaningful, life-quality-enhancing care,” said Mr Radia.

“Mealtimes play a huge role in this. The difference between an experience- and task-driven mealtime is enormous, with the former having an immensely positive impact on an individual with a dementia.

“Training is vital when it comes to meeting the specific challenges of catering for older people who may be vulnerable and the NACC is committed to supporting the sector with relevant, progressive information and guidance.

“The new workshops will challenge the status quo and offer new perspectives and approaches to ensure those people living with a dementia thrive through positive food and mealtime experiences. Dr David Sheard is inspirational and I guarantee the sessions will be enjoyable and emotional, and most importantly beneficial to those living with a dementia entrusted to our care.”

INSPRATIONAL PRESENTER: Dementia Care Matters founder Dr David Sheard will conduct the workshops.

Short films promote positive aspects of care

Bournemouth-based Nourish Care, an IT company focused on health and social care, has commissioned a series of care stories focusing on positive stories from the care sector to counter negative media coverage focused on UK care provision.

The company’s founder Nuno Almeida said he believed Nourish had a duty to help show people the true side of care in the UK, rally against the negative media coverage and do justice to the amazing people involved.

“At Nourish we are privileged to help support the care for thousands of amazing people around the UK,” said Mr Almeida.

“Every day we are treated to stories from the incredible activities of people involved in care. Frankly, these stories are what affirms our commitment to empowring the people who provide care. However, this hard working, empathetic and truer side of care never seems to get featured in mass media.”

Nourish has commissioned five short films in partnership with Bournemouth University aimed at showing the reality of British care. Each film, viewable on Youtube, tells a different ‘care story’ from the perspectives of carers, to home owners and the people who receive care themselves.

“By showing off the best aspects of care we know we can help to counter the negative sentiment the UK care sector receives across the press,” said Mr Almeida.

Friendship theme for next year’s national open day

Next year’s date for Care Home Open Day has been confirmed as Friday, 16th June.

As the event’s emphasis is on the importance of connecting with local communities, developing lasting relationships and encouraging intergenerational rapport, the theme for next year will be ‘Friendship’ and as part of next year’s event, Care Home Open Day will be celebrated in conjunction with The Big Lunch.

Part of the Eden Project in Cornwall and an annual event, The Big Lunch aims to get as many people as possible to share lunch together in an act of friendship that will encourage communities to connect and help to prevent isolation amongst those who may be living alone. It’s the perfect recipe for having fun with your neighbours, feeding community spirit and helping to build stronger neighbourhood connections – so fits in nicely with the Care Home Open Day ethos.

Care homes are encouraged to celebrate friendships that have developed between residents, families, friends and staff, as well as with their neighbours, to reinforce how they should be an integral part of their local community.

NACC says the workshop has been specifically designed to ensure participants are clear on what person-centred dementia care looks, sounds and feels like; enable an emphasis on quality of life at mealtimes and not on tasks; seek to make sense of people’s emotional memories, why feelings matter most in dementia care and their relevance to the meal experience; inspire participants to re-think their current practice and commit to an action-based approach that their teams embrace; and achieve real improvements in the atmosphere, assessment skills, quality of engagement and nutritional value of meals for people living with a dementia.

The one-day training workshop costs £130+VAT for NACC members and £199+VAT for non-members. For more information, contact the NACC office on 08707 480 180 or info@thenacc.co.uk

NUNO ALMEIDA: ‘we have a duty to counter negative media coverage’
Great Expectations or Hard Times – thoughts on the Care Homes market

An assessment of the care market brings to mind the opening of A Tale of Two Cities - “It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness”.

The best of times would include the very impressive initial results emerging from the enhanced health in care homes vanguards. Projects such as the Kingsclear Nursing Home are set to open in summer 2017. The project which incorporates high end fit out and equipment with landscaped gardens is designed by a Chelsea Flower Show gold winning designer and points to a golden age for care. Advisers such as Savills point towards the attractive yields available for well-structured projects and flag some investors’ view that “the quasi-Government backed income [healthcare projects] provide offer[s] an appealing proposition in uncertain times against some of the strongly priced commercial investment markets”. Occupancy rates are up and average fees are finally (albeit slowly) inching upwards.

Yet, those of us in the industry know that for each success story there is a gloomier outlook such as the recent special measures that the CQC imposed on two Lancashire care homes. There is the accelerating rate of nursing home closures (73 closures from January to June 2016 – more than the total number of closures in 2015), as well as the news that a care home in the Midlands is not only due to close, but that its directors have “chosen not to sell the business as a going concern given the state of the sector and believe it is more financially viable to sell up”.

The truth, as always, lies away from the extremities. Home closures lead to decreased capacity, which in turn leads to higher occupancy. Classic supply and demand economics at work. Geographical variations skew national statistics. High-end self-funder homes in affluent areas ski average fees and mask the obstinately low local authority rates.

So, in the absence of being able to move your home to new location, or easy access to capital to fund improvements required to pursue self-funders or to cater for the intermediate care model, what steps should businesses be taking to secure their futures? The answer is unglamorous but essential - concentrate on the basics.

Funding is an obvious point of focus. After the public tragedy of Southern Cross no care home operator can have financing far from their thoughts. Interest rates are historically low and while some lenders have retreated from the sector, specialists such as Santander remain committed to the sector. Refinancing or restructuring debt obligations can make a substantial impact on a business’ viability. Financing then leads to the second key area - contracting and standards. It’s obvious but no less important for being so, that understanding key contracts and ensuring delivery to those terms is essential. It’s not uncommon for finance documents to contain cross default provisions linked to key escalations in commissioning contracts or enforcement action taken by the CQC.

Understanding the black letter obligations of a business and the process that is required for counterparties to trigger remedies can make the difference between staying open or not.

The CQC is a major area of focus. We are seeing increased take-up for CQC inspection preparation, helping many of our clients prepare for CQC inspections, identifying ‘issues’ at a stage when remedial work can be undertaken without significant consequence. Of course, no one operates in this sector without a desire to provide the highest care.

However, as cases such as Castlebeck demonstrate, standards can fall and businesses can turn from thriving to embargoes admissions in a seeming free fall where adequate systems aren’t in place.

With the national living wage set to increase businesses’ cost base (not only by raising direct costs but with indirect pressures such as cost increases to maintain wage differentials) and staff attrition rates remaining steady with the consequent agency costs that care homes have to bear, maintaining focus on high quality care with the requisite systems can seem hard, but it is in fact essential.

Adequate training, good documentation and preparation for inspection are not luxuries. Yes, money is tight and savings must be made, but savings are designed to improve a businesses’ viability. Essential standards and preparation will help to keep the doors open and much needed services provided. When assessing the care market perhaps another Dickens quote is more appropriate “no one is useless in this world, who lightens the burdens of another”. Helping others is at the heart of the industry we work in; let’s just make sure we take care of the details so we can continue to do great things.

By Jamie Cuffe
Jamie is a partner in Capsticks’ commercial team. Email: jamie.cuffe@capsticks.com Tel: 020 8780 4657

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More older people clue-up on fees

A growing number of over-45s believe it would be helpful for local councils to refer people seeking information and advice on how to pay for care to independent financial advisers (IFAs) according to care fees finance specialist Partnership.

Councils are often the first port of call for people needing information and advice about accessing care and how to pay for it. While 44% of people thought it should be standard policy for councils to refer people to financial advisers, 56% thought such referrals would be helpful, up from 51% last year.

Only 16% of people believe the State will pick up their care costs, a proportion that has fallen every year since 2012 (51%). Among over-75s the number is just 5%. In addition, for the first time since 2012, people overestimated the average cost of residential care at £30,830 a year, £334 higher than industry figures suggest.

Despite this knowledge and nearly four in 10 (38%) over-45s saying they had some experience of looking into care for friends and family, this does not appear to have encouraged them to act when it comes to planning for their own potential care needs. Only a small minority (6%) have included the cost of care in their financial planning although that number rises to 18% for the over-75s.

Elaine steps out at Birch Green

Care worker Elaine Philpott decided to try using the pedometer offered by her employers – and found she had walked nearly 90 miles in a week.

Domestic assistant Elaine, who works for Birch Green care home in Skelmersdale, West Lancashire – part of the Springhill Care Group – was surprised to find that she had covered more than 23,000 steps in one day. This was more than double the NHS 10,000 steps-a-day challenge or five miles which is also running nationally.

The group – with two homes in Lancashire and one in Bristol – handed out pedometers to all of its 400-plus staff to encourage them to take an interest in their fitness levels as part of its Caring Heroes initiative.

Sense launches new housing services strategy

National disability charity, Sense, has launched a new strategy for delivering housing services, which it says will enable more people with complex needs to live independently. The charity has also unveiled a “refreshed” brand identity, including a new logo and strapline, to reflect the breadth of the people it now supports. Sense hopes the changes will help it to achieve the ambitious goals set out in its three-year strategy launched earlier in the year.

In the new approach to delivering accommodation services, cost-effective supported living schemes, designed in conjunction with commissioners, families and service users, will be developed in key-priority areas across the country over the next few years. Sense says its expertise in communication will remain at the heart of its service delivery, with staff trained to know the right methods to ensure an individual is able to express their needs, goals and aspirations and to live as independently as possible.

The charity expects that its housing solutions will better meet the local needs of families and local authority commissioners.

For more on these stories, go to CT Extra at: www.careinfo.org – Caring Times’ official website

Another crack at reducing red tape

NHS Providers, NHS Confederation and social care representative body Care England are supporting a new initiative from the Department of Health to reduce the burden of bureaucratic red tape across the health and social care frontline.

The Burden Reduction Challenge Panel, created and chaired by Lord Prior and run in partnership with the three independent membership organisations, will provide evidence of both the burdens and benefits of current regulatory activity and oversight that frontline organisations operate under. It will then challenge their use and necessity. It is said that regulatory activity judged to be unnecessary by the panel and relevant officials will be amended or removed.

NHS Providers, NHS Confederation and Care England will engage health and social care professionals to provide evidence that will feed into the panel. The panel’s first session will focus on data and information requests, at both national and local level. The panel will review the value and burden of activity in this area and make recommendations in early 2017.

Caring Homes receives inaugural training award

Caring Homes Group has been recognised in the first Princess Royal Training Awards for its dementia training programme, ‘My World’.

Launched by the City & Guilds Group in January, the award is a new honour for employers in the UK who have created lasting impact by successfully linking their skills development needs to business performance. Caring Homes shares the accolade with the likes of Bentley Motors, BAE systems, Asda, Unipart Group and IBM.

Caring Homes developed and rolled out its My World dedicated dementia training programme to all colleagues across all its care homes during 2015-16. Accredited by City & Guilds, the programme has received very positive feedback from the wider care industry, colleagues and the families of residents.

New resource supports people with learning disabilities

Voluntary Organisations Disability Group (VODG) and the National Development Team for Inclusion (NDTI) have published the second edition of a guide which explains how the health charter can be used by social care providers. The guide aims to support the well-being of people with learning disabilities and reduce inequalities in healthcare which were highlighted in a recent report.

Whilst organisations sign up to the charter to outline what they will do to boost people’s health, this accompanying self-assessment tool helps organisations measure progress and develop action plans for improvements.

The second edition of the Health Charter in Practice is available at www.vodg.org.uk
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Provider challenges to CQC inspections - a further right of redress?

By PETER GROSE, solicitor
Lester Aldridge
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Not the same as an order. Whilst it would be unwise of CQC to ignore the declaration, this simply clarifies the rights of obligations of the parties; the court has not ordered CQC to review all similar decisions. It is unclear whether reviews should take place in other scenarios.

The judge also considered that there should be a swift, fair and effective process to allow a provider to challenge any refusal by CQC to change demonstrably inaccurate or misleading findings. She criticised the role of the lead inspector in solely determining whether a draft report should be amended and did not think it fair that providers should be disproportionately burdened with having to seek judicial review of a refusal to review ratings, in the absence of an alternative right of redress.

On that basis, the judge stated that an independent person within CQC would be better placed to determine whether a provider has a legitimate grievance and recommended use of a pre-publication internal review process to deal with challenges by providers.

Whilst it is not yet clear how CQC will respond to this case, it is hoped that more ratings can now be altered before publication. A CQC spokesperson has commented that “CQC had started reviewing this as part of ongoing improvements that had been underway for some months” and “when providers ask for amendments in draft reports, a member of staff who was not present during the inspection will review the response.” They have also stated that “CQC welcomes the judgment as a further endorsement of its inspection, rating and quality assurance methodologies.”

In any event, the provider’s claim for judicial review of CQC’s refusal to review the rating failed, because the provider had not alleged any failure by CQC to follow process. It was stated that judicial review would have succeeded if the provider had requested a review of CQC’s failure to amend the draft inspection report. Specialist legal advice should therefore be obtained by providers who wish to challenge an inspection report and the actions of CQC.

Care workers encouraged to call helpline

Raising concerns at work, often known as whistleblowing, is the act of reporting a concern about a risk, wrongdoing or illegality at work, in the public interest. Whistleblowing is an early warning system providing an opportunity to put things right before anything catastrophic happens. It is a big step for many people and staff who speak up can often feel isolated and stressed.

Staff who witness or suspect serious wrongdoing and are unsure what to do, can contact the Whistleblowing Helpline.

Funded by the Department of Health and run by Mencap who won the tender to carry out this work. It has been operating since January 2012.

The helpline’s policy manager Christine Brown said about 200 calls a month were currently being received and each year there had been a rise in the number of calls. “The Whistleblowing Helpline offers free, confidential and independent advice about whistleblowing processes to people working in the NHS and adult social care,” said Ms Brown. “It can also advise on training for managers and for staff and can help organisations to raise awareness with a range of free materials.”

The Helpline can be reached by telephoning 08000 724725, emailing enquiries@wbhelpline.org.uk or visiting www.wbhelpline.org.uk.
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creating better environments
Safeguarding responsibilities – how far do they reach?

A recent employment case has highlighted the potentially far reaching safeguarding responsibilities of those working with vulnerable people.

The case concerns a head teacher (A) who was dismissed on the basis of gross misconduct for not informing her school of her relatively close non-romantic relationship with a convicted sex offender. The relationship had started in 1996 and by the time of her dismissal in 2011 they had bought a house together as an investment which the friend lived in and A sometimes stayed at and they also holidayed together among other things. It was accepted that A had no knowledge of the activities until the person’s arrest in 2009 and subsequent conviction in 2010. As a result of the conviction the friend was subject to a Sexual Offences Prevention Order which included a provision forbidding him to have unsupervised access to children under 18.

The employer stated that A’s failure to disclose the information conflicted with her safeguarding duties and had put children at risk. A appealed the decision on the basis that the dismissal was unfair. It was argued that following the conviction she had taken advice from various quarters (including the police, senior officers within the probation service, various local authorities, the CRB (as was) and other school’s governors) and made a judgement that she was under no obligation to disclose this information.

The employers contended there were two bases on which the dismissal was justified:

1. There was a genuine belief on reasonable grounds, and following a fair procedure, that A had failed in her duty to disclose the nature of her relationship with someone accused of these serious offences against children; and
2. There was in any event a breakdown of trust and confidence between A and the governors which justified A’s dismissal for “some other substantial reason” (this being one of the reasons provided by law for justifying a fair dismissal).

The Court of Appeal held that the decision to dismiss A was fair, and the employer was not liable for unfair dismissal, as the decision was within the range of reasonable responses to the situation.

The majority view of the Court was that it was not for A to allocate herself the decision as to whether her relationship with the friend gave rise to a risk of harm. A’s relationship did pose a potential risk to the children at the school and A had a duty to inform the school of it so that they could take any necessary steps to protect them. In light of A’s position as head teacher and the associated safeguarding responsibilities, A should have realised this herself. In addition, it was noted that A had maintained her position (that she did not consider the information disclosable) throughout the disciplinary process.

It was made clear by the Court that dismissal in these circumstances is not inevitable and its decision took into account both A’s initial failure to disclose the information and her subsequent failure to admit she had made an error of judgment in not disclosing. It appears that the key to the Court’s decision was A’s reaction to the situation. Lady Justice Black reiterated that the decision in no way suggests that someone in A’s position could no longer go on working in a school and it by no means follows inevitably that misconduct of this type justifies dismissal. However, it is easy to foresee that difficulties may arise for both employers and employees as a result of the Court’s decision.

Implications for the care sector

It was not clear from the judgment what information would require disclosure or alternatively, what would justify nondisclosure. Whilst this is not a definitive case and the case specifically concerns the safeguarding of children, there could be overarching implications for other industries where safeguarding responsibilities are apparent, including the care sector.

Under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, registered care providers have a duty to safeguard services users from abuse and improper treatment. In practice this includes mitigating potential identifiable risks. Therefore, employees’ associations with certain types of persons could potentially pose a risk (although this would be wholly dependent on the individual circumstances).

However, where does one draw the line? In this case the friend had been convicted but what is the situation where a person is charged but not yet prosecuted, or even more ambiguous, arrested but not charged?

This may lead teachers, and other individuals with safeguarding responsibilities such as care workers, to disclose information in circumstances where they were previously perhaps not obliged to. This further opens up potential difficulties for care providers as employers in determining whether the information is relevant to their safeguarding obligations and their reputation as an employer and care provider and, where information is not forthcoming but later known, the ramifications of this discovery including employment obligations.

Both employers and employees should consider the potential concerns that may arise from similar situations to that described in the case. It would be prudent to make a considered assessment of any potential risks that could be reasonably foreseen. If such information should come to light, the situation should be considered to determine if any potential risk may be presented and what appropriate steps may be taken in response. CQC and safeguarding will want to see that a known potential risk has been considered and this will involve detailed written risk assessments, amongst other things, to demonstrate the care provider has fulfilled its regulatory and safeguarding duties.
Official website for Caring Times

- Read Caring Times online
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- Buy books

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www.careinfo.org
Workshop performances bring out the brightness

Bright Shadow formed in 2009 when the two directors Katy Hirst and Rhiannon Lane found themselves on placement in a care home for people with dementia as part of their Applied Performance Masters Degrees.

Neither had ever met a person with dementia before and, together with two other students, they began their journey of using creativity and performance with people with dementia.

Observing that the most common ‘activity’ in the care home was sitting silently around the outside edges of a large living room whilst day-time TV blared out, it became apparent that what was needed was an injection of life, laughter, conversation and fun. After what they describe as “a fruitless foray into the world of reminiscence”, Katy and Rhiannon realised that using performance practices in a participatory, person-centered way that focused on the present moment was a relatively undокументed and un-researched approach that needed to be explored.

So, running workshops in the dining room over eight weeks, they began experimenting.

“With riotous results,” said Katy. “Soon, the group of women we were working with were transformed from a passive group of people sat in the living room, to a dining room full of a collection of individuals who laughed, communicated, recited poetry, made jokes, had relationships with one another and had great imaginations.

“Through using song, movement, story making and sensory activities, people interacted on a human level, were building relationships, expressing themselves and enjoying the environment in which they lived.”

Katy and Rhiannon are passionate in their belief that this way of being should not be an ‘out of the ordinary’ experience for people with dementia, but rather as ordinary and as accessible a way of life as it is for any human being.

“We wanted to transform the experience of every person with dementia from that of the living room to the dining room,” said Katy.

“We had a vision for using creativity and performance to enable people with dementia to have fun, have meaningful relationships with other people, to laugh, to express themselves and to thrive. We decided to set up a company together and, in March 2009, Bright Shadow was born.

“At Bright Shadow, we believe that every moment of our lives can and should be lived to its fullest and that we should have opportunities to thrive every day. We are passionate about valuing both the present and futures of people with dementia and believe that, like everyone else, people with dementia should be enabled to take part in energising and stimulating activity, to feel productive and purposeful, to be part of a loving and sociable community and to feel happy.”

Today, Bright Shadow’s trademark practice is Zest workshops. These are themed, participatory and multi sensory activity workshops which aim to bring life, energy and fun to individuals and environments. Each workshop includes a variety of activities including song, movement, story making, puppetry and games, all with the aim of taking participants on a journey to a different place or space.

Themes include Desert Island, Dance Hall, Wimbledon, Chinese New Year and, for this year, the Rio Olympics. The purpose of Zest workshops is to enable self expression, build relationships, have fun and enable maximum engagement from each individual.

Katy said an independent evaluation of their workshop approach was made in 2012 and found that:

- Participating in the offered activity was the most common form of activity in each workshop;
- Participants interacted increasingly with one another and staff;
- Positive emotional responses were most common.

One of Bright Shadow’s favourite outcomes from a series of Zest workshops in a care home is that a group of residents who staff had previously found difficult to get to interact with one another on an evening, independently started to congregate together in one of the living rooms as a result of the Zest workshops.

“To be in a place where you enjoy community with the other people that live there is such a vital aspect of wellbeing,” said Katy.

“Bright Shadow has a mission: to enable people with dementia and those that care for them to live well and to thrive through brighter quality care.”

For more information, visit www.brightshadow.org.uk or email: katy@brightshadow.org.uk or call: 0300 102 8855

Caring Times November 2016

Using song, movement, story making and sensory activities, people interact on a human level, build relationships, express themselves and enjoy the environment in which they live.
Gala Dinner
25 November 2016
Come and help us celebrate 18 years of the National Care Awards

BOOK YOUR TABLES AT THE GALA DINNER NOW
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“Christie & Co have been delighted to be involved in the National Care Awards since its inception. It remains one of the sector’s premier events, attended by the whole industry, whilst retaining its ethos of highlighting the work done by individuals on a day-to-day basis, providing quality care. It is crucial to showcase all that is good in the sector and remind everyone of the commitment and sheer hard work by many people across the UK.”

- Richard Lunn, Director & Head of Care, Christie & Co

“Caring Times is delighted that Christie & Co are continuing with their much appreciated main sponsorship of the National Care Awards. Christie & Co have been our partners in building the National Care Awards over 18 years into the largest and most respected Awards in the sector. We encourage all care providers to enter this summer and be part of an event which culminates in the superb Gala Night on 25 November – an event which everyone taking part values, celebrating as it does the very best people in the sector.”

– Dr Richard Hawkins, Editor-in-Chief, Caring Times

For sponsorship opportunities contact caroline@hawkerpublications.com

MORE ONLINE @ WWW.CAREINFO.ORG/CARE-AWARDS-2016
A partnership between Blackburn College and EachStep Blackburn will see students supporting people living with dementia.

Students from a range of courses at the college will support various areas, including care support, catering, and health and beauty at the £5m dementia care home, a 64-bed facility opened in May this year and run by national social care charity, Community Integrated Care.

The organisations have signed a Memorandum Of Understanding (MOU) outlining the promises each organisation will fulfil. Signed by Blackburn College Principal, Dr Thomas Moore, and EachStep Blackburn’s Service Manager, Phil Benson, the MOU includes a specifically tailored apprenticeship programme and leaders from the charity providing training to students. Students from health and social care will enjoy placements within the care home, catering students will support in the kitchens and tea room, and hair and beauty students will help in the on-site salon.

In the near future, placements will be available for business and administration students and media and art students.

The partnership will offer students a greater knowledge of the care sector, with opportunities to access industry and employability skills, as well as providing a talent pool for the care home.

The programme is designed to help students play a more influential and caring role in society and promote social cohesion. As part of the agreement, guest speakers from EachStep Blackburn will be invited to deliver lectures to Blackburn College students.

Health and social care student Hajra Aya, 17, who started her three-month placement on the day of the signing, said the service offered valuable work experience for students.

“It’s absolutely awesome,” said Hajra. “It’s a really wonderful place and the whole organisation is really positive and welcoming. It’s lovely to talk to the residents and help to make them happy and comfortable.”

Speaking at the signing of the Memorandum Of Understanding, Dr Thomas Moore described EachStep Blackburn as a fantastic facility.

“We have a change in our demographic with a more senior population,” said Dr Moore. “EachStep Blackburn isn’t a hospital environment; it is a home for people living with dementia. It’s big, but small enough to retain that personal feel.

“I’m sure our students will learn a lot during their placements, and therefore invest a lot in their local community.”

EachStep Blackburn’s service manager Phil Benson described the partnership with Blackburn College as being really exciting.

“We want EachStep Blackburn to be a real hub for the community, so the people we support can lead full and happy lives - welcoming students for a range of placements will help us to achieve this,” said Mr Benson.

“It has been a privilege to meet the compassionate and passionate students from Blackburn College. We are committed to offering them great placements and experiences that will make a difference to people’s lives.”

Phil Benson and Dr Thomas Moore sign the Memorandum of Understanding between Blackburn College and EachStep Blackburn.
The Journal of Dementia Care presents
7th National Dementia Care Awards
Gala Awards Dinner
3rd November 2016
The Brighton Centre

CONGRATULATIONS TO ALL OUR FINALISTS

Entries for the National Dementia Care Awards 2016 are now closed and the finalists applications are with the judges, but the winners will only be announced at the Gala Awards Dinner. The standard of nominations this year has been genuinely exceptional and we would like to thank everyone who has entered and put forward their truly deserving colleagues.

We look forward to celebrating with everyone on the 3rd November!

OUR PHENOMENAL HOST: RUSSELL GRANT

We are delighted that this year’s host will be the fantastic British astrologer and media personality, Russell Grant. Having written several books on astrology, held an acclaimed, lifelong acting career since the age of ten, jived his way out of a canon and into a ‘BAFTA TV Highlight of the Year’ on the popular Strictly Come Dancing and provided countless syndicated newspaper horoscopes, Russell has become one of the most recognised and well-loved faces in popular entertainment. We cannot wait to welcome Russell to the National Dementia Care Awards stage in November!

PREVIOUS WINNERS SHARE THEIR THOUGHTS...

"After the initial shock of winning the award, I feel absolutely honoured and privileged to have achieved recognition for my biggest passion. Words cannot describe how much it means to me”

Jodie Smiles, Fremantle Trust
Winner of Best Dignity in Care Campion

“Being the person chosen to receive the Lifetime Achievement Award was just a wonderful moment, and a real honour. It was an instant to feel valued and respected by others for all the hours I have put in as a nurse over the years in many different environments, and the feeling continued as colleagues and friends have recognised this since as well”

Dave Bell, Dementia UK
Winner of Lifetime Achievement in Dementia Care

SPONSORS: 2016

MORE ONLINE @ WWW.CAREINFO.ORG/DEMENTIA-AWARDS-2016
A care home in Falkirk, in the central lowlands of Scotland has opened a ‘village’ for its residents.

Bupa’s Newcarron Court is using the project to create a flourishing social hub that aims to benefit its residents living with dementia.

The village concept is made up of a working post office, greengrocer’s, ladies’ boudoir, wildlife area, library and children’s area, developed within the home’s garden space, all of which are specifically designed to help those living with dementia to connect with past memories.

Newcarron Court has strived to make the village as authentic as possible. The shops have real money that dates back to the 1900s and the staff encourage residents to go to the post office to collect their newspapers or to enjoy time relaxing in the library.

The home has built up the village one shop at a time and it took just over a year to fully complete in time for the official opening in August. Newcarron Court home manager Angela Burns said the village had already made a big difference for the residents.

“We are so excited by the residents’ positive reaction to the new ‘village’ features in the garden as they are such clever and simple yet effective ideas,” said Angela.

“The creation of the village is so important to help people living with dementia. It allows them to re-connect with past memories or recognisable social surroundings in a safe and familiar environment; features like the grocers and post office have been proven to provide cognitive stimulation which relieves any feelings of anxiety and confusion.”

Residents are encouraged to collect their newspapers from the post office.

Residents can simply relax in the library.

Newcarron Court celebrated the opening of its new village in August.

Additional features have also been added to the garden for the residents’ entertainment, including cricket, checkers, football and a miniature railway station.

“We wanted to create a village that was as real as we could for the residents so that they are able to reminisce and to encourage conversations,” said Angela.

“Now, the ladies have a great time trying on hats, shoes and jewellery in the boudoir and the greengrocer’s has some authentic packaging, and some that we were able to recreate. We always aim to provide the highest level of care and we believe the ‘village life’ setting is a fresh and innovative way in which to do this.

“We encourage anyone interested to come along and see for themselves as I’m sure other care homes and the local community will want to view what we have done.”

The project is one the first of its kind among Bupa Care Homes across the UK, with a similar village having opened at Balcarres Care Home in Dundee last year.
Four Seasons pioneers use of technology in front line care

Technology is supporting the managers within each of Four Seasons Health Care’s 300 homes across the UK to listen hard to know what their residents think of their care and their life in the home; what they like about it and how they think it could improve. The company is pioneering the use of information technology to support its front line teams in a radical new approach to care.

Its Quality of Life programme uses an IT system to give customers an easy and convenient way of commenting, which has collected over 110,000 pieces of feedback from residents and families in the past 12 months. The changes implemented in response to this have led to customer satisfaction levels averaging over 97% across Four Seasons Care Homes. This is an increase from around 92% when the system was rolled out.

This performance was recognised when Four Seasons became overall winner of the UK Customer Experience Awards for 2016, chosen ahead of more than 750 other companies from all sectors of industry and commerce. It is the first time that a care company has won the award.

The Quality of Life Programme uses technology that is exclusive to Four Seasons. Residents, their families and health professionals can use iPads with a touch-screen questionnaire, linked to purpose-designed software systems, to tell the company what they think about any aspect of care. The information is transmitted in real time to the Home Manager and Regional Manager.

Tim Hammond, CEO of Four Seasons Health Care, said: “In the restaurant and catering world, where I worked previously, they are constantly doing customer experience monitoring, but it seems largely to have passed the care sector by except for paper based surveys once or twice a year. With our technology we can get meaningful feedback on a day to day basis and in a way that we can act on fast. The feedback we have received has enabled our care teams to find and fix over 70,000 issues or niggles. Most of these are little things, like how they want their morning tea, which make a big difference to someone’s daily life.

Four Seasons’ use of information technology goes way beyond collecting customer feedback. A further element of its Quality of Life Programme is electronic documentation with a Thematic Resident Care Audit (“TRaCA”) that shows the totality of the care experience for each individual resident, using 185 measures.

While carrying out the audit the care teams are able to stop and fix anything that isn’t right for that resident there and then, compared to the old approach of log it, report it and wait for instructions. In that sense, technology is driving a change to a culture of empowerment to take “ownership” of resident care.

Four Seasons has further developed its leading-edge technology for a next generation of dementia care with a radically different approach – the Dementia Care Framework. Information technology supports care teams to monitor and audit each resident’s physical, psychological and emotional condition, mood and their day to day experience, so that care can be adjusted to their changing needs. Thought to be the first of its type worldwide, the programme is based on 320 recognised standards, including NICE Guidelines and Alzheimer’s Society best practice guidance.

New support and training for all colleagues includes a simulated experience of what it is like to live with dementia, to increase their understanding of the condition.

After two years in design, development and testing the Dementia Care Framework is being rolled out to Four Seasons’ homes as each completes the training and an accreditation process.
The etiquette of relationship building

Relationships can be difficult. Trust me, I'm an expert. There are no more obvious candidates for couples therapy than local authorities and the NHS, the ties that bind frayed by cultural contradictions. NHS care is free, social care is means-tested; NHS trusts run deficits, councils must balance their books. Even established commitments can be destabilised by conflicting priorities – witness the standoff between some London councils and their CCGs over hospital closure plans.

Undaunted by these tensions, Whitehall has identified health and social care integration as the panacea for the challenges facing the NHS. Recognising the opportunities this presents, the care home sector’s biggest beasts are itching to get a share of the action, pressing their case to deliver health from its interminable bed-blocking nightmare by offering the likes of intermediate and post-operative care to keep/move people out of hospital.

Given these ambitions, the industry’s hostility to their health counterparts is puzzling. If you want an invitation to the party it’s best not to insult the host. Yet headbangers in the care home lobby have chosen to talk up their claims for greater participation by talking down the NHS.

Could it be treat ‘em mean, keep ‘em keen? Whatever, it’s an approach with all the logic of a circular firing squad.

Although health service contracts can provide some protection against costly vacancies, only inhabitants of Planet Pollyanna will expect them to be a promised land. The NHS too is in intensive care and no better placed to meet providers’ demands than local authorities. CCGs, for their part, will expect quality services to be delivered from a stable business base – an inconvenient stipulation for homes that are constantly giving out distress signals. Time, surely, for doom-sayers to recognise that relentless proclamations of imminent apoclypse are no substitute for discriminating analysis.

The greater the likelihood of NHS dependency on care homes, the keener Whitehall’s interest will be in the sustainability of their business models. Allegations about public money being poured into the “leaky buckets” of an industry that is mired in a “cesspool of toxic debt” will hardly have boosted Government confidence.

Maybe it has already reflected on how “fit and proper” should be understood in the context of economic activity. Could that explain why, despite unrelenting pressure on hospital beds, NHS England has yet to embrace the idea of wholesale involvement with the sector?

According to MPs, remedial action on delayed discharges has been paralysed by a “striking poverty of ambition”. Even if the NHS sleepwalks into “the perpetual winter of Narnia”, elementary due diligence would still demand assurances about the stability of prospective partners. To which end, CQC market monitors might be asked to expand their early-warning brief – provided they could penetrate the “opaque business practices” in some large groups.

Should serious impediments be disclosed, ministers would have no option but to cold-shoulder their ideological soulmates, with relevant arrangements probably being entrusted – “trust” is the operative part of the word – to local authorities. Yes, they are wired differently from NHS bodies, but their common antecedents make them a couple that is meant to be together. Trust me, I’m an expert.
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What better way to deliver this valuable training to your employees than with e-learning? The Skills for Care Pilot Scheme Evaluation found that “Staff across the site were positive about the e-learning approach” and “...did not criticise any aspect of the e-learning approach.” One line manager and assessor was quoted as saying that “It’s changed the way I manage people. I can see when they might be having issues and can support them.”

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To find out more about Care Certificate by Laser Learning, visit www.lasercarecertificate.co.uk, or contact info@laserlearning.co.uk for a free demo login. @Laser_Sys, 01753 584 112

EVENTS FOR CARE HOME OWNERS, MANAGERS & CARE PROFESSIONALS

London 15 Nov 2016
Epsom Downs Racecourse

- Discover innovative products & services
- Attend educational seminars & interactive workshops
- Enjoy care industry networking

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CQC is killing care homes by slow strangulation

It was heartbreaking to read Elizabeth Laycock’s account of having to give up the struggle against senseless bureaucracy and close her brilliant care home (CT Oct. 2016). Recently I’ve been involved in a similar tragedy at a small home for five men with learning disabilities in the North East. Five people are having their home taken away from them. Human rights come a distant second to CQC’s inhuman rules.

I’ve worked in social care for more than half a century and I’ve done most jobs with most client groups. I’m still fortunate enough to be fully engaged as a consultant, writer and commentator, but I refuse to have anything to do with the long-standing obsession with making homes compliant with regulators’ demands – I simply concentrate on good care in homely places and that’s what Elizabeth Laycock evidently committed herself to.

The whole of the social care world revolves around CQC (in England) and anyone who dares to question this is a heretic. Copernicus had to wait until he was on his deathbed to publish his theory that the Earth was just another planet revolving around the Sun rather than the other way round. CQC is killing care homes by slow strangulation. Dozens of good small homes are being forced to close for the very reasons that Elizabeth sets out.

Wherever we look – conferences, advertisements, articles, websites – CQC is dominant. People hang on their every word and whim. When they say jump everyone jumps. Politically and culturally we are moving into a period of revolt against a dominant establishment. People are sick and tired of being told what to do and being forced to comply with what they know in their hearts is wrong. It’s time to take a stand… together.

– John Burton
Independent Social Care Consultant

Elizabeth Laycock piece strikes a chord

I am the home manager of two care homes in East Sussex and the article by Elizabeth Laycock ‘Saying goodbye to the burden of bureaucracy’ (CT October 2016) really struck a chord with me and is absolutely correct.

As a manager I find I have to fight every day for our residents. We recently had our CQC inspection and we are currently in the process of challenging the report. We asked the CQC inspector specific questions about how we can improve our service in a particular area and she could not give me an answer.

There is no back-up for managers who want to improve – CQC should be there to help, support and guide care homes to improve, not criticise. I would like to congratulate your magazine for publishing the article and please pass on my thanks and appreciation for sharing her experience.

– Barbara Clark

Taking account of the realities

I have just read an article in the October issue of Caring Times entitled ‘Saying goodbye to the burden of bureaucracy’. I cannot believe that this article hasn’t been written by my daughter!

Thirty-two years ago my husband and I set up a small care home for just 6 learning disabled people. Eleven years ago we ‘retired’ and my daughter and her husband bought our home from us. I am appalled at the changes that have taken place over the past decade under the guise of ‘improving lives’ and heartily wish we had not sold out to a family member as we now feel full of guilt for burdening her (she too is now divorced) with regulations and a regulatory body that strives for idealism without taking into account realism.

What a fantastic article you published by Elizabeth Laycock, an article which mirrors exactly my daughter’s position and probably many, many others too.

– a former care home owner

Hawker Events

NOVEMBER

■ 11th UK Dementia Congress
DATE: November 13
VENUE: The Brighton Centre, Brighton

■ National Dementia Awards
DATE: November 3
VENUE: The Brighton Centre, Brighton

■ Knight Frank Conference
DATE: November 16
VENUE: Leicester Tigers Stadium

■ National Care Awards
DATE: November 25
VENUE: Hilton London Metropole

DECEMBER

■ Caring Times Christmas Lunch
DATE: December 15
VENUE: Dorchester Hotel, London

For further information on all these events, or to book a conference place, telephone Jessica Harman on 020 7720 2108 Ext. 202. Alternatively, email jessica@hawkerpublications.com or visit www.careinfo.org/conferences to download a booking form.

Seminars Conferences and Exhibitions

<table>
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<th>NOVEMBER</th>
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| Court of Protection Masterclass
DATE: November 2
VENUE: The Training Suite, Peter Edwards Law, Hoylake, Wirral, Merseyside
ORGANISER: Peter Edwards Law
Tel: 0151 632 6699
E: peter@peteredwardslaw.com |

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| Independent Care Group (York & Yorkshire) Annual Conference
DATE: November 9
VENUE: Pavilions of Harrogate
ORGANISER: Independent Care Group (York & Yorkshire)
Tel: 01723 502414
W: www.mcculloughmoore.co.uk/icg |

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| Introduction - Care Act for those working with MHA or MCA
DATE: November 10
VENUE: The Training Suite, Peter Edwards Law, Hoylake, Wirral, Merseyside
ORGANISER: Peter Edwards Law
Tel: 0151 632 6699
E: peter@peteredwardslaw.com |

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| Care Roadshow London
DATE: November 15
VENUE: Epsom Downs Racecourse
ORGANISER: Broadway Events
Tel: 01425 838393
W: www.careroadshows.co.uk |

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<th>November 25</th>
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| Mind Matters: Care England 2016 Conference & Exhibition
DATE: November 16
VENUE: Church House Conference Centre, Westminster, London
ORGANISER: Care England
W: www.careengland.org.uk |
1-3 November 2016 • The Brighton Centre

Open Debate

The motion: Should we welcome a future of robots, avatars and digital technology in dementia care?
Presentation by Dr Chris Pickford, Research Assistant in Digital and Robotic Technologies for Dementia, University of Salford.
Followed by panel and audience contributions. A vote will be taken before the session and at the end.
Chair: Professor Graham Stokes, Global Director of Dementia Care, Bupa
Panel to include: Joy Watson, Arlene Astell
We warmly welcome your contributions to this debate.

David Mowat MP
The UK Dementia Congress is pleased to extend a warm welcome to recently appointed David Mowat MP, Parliamentary Under Secretary of State at the Department of Health, who has confirmed he will be speaking at this year’s conference.
As the new minister responsible for dementia care, David Mowat has said that the government will continue its policy of faster diagnoses and more dementia aware communities.

• We are delighted to announce that this year the 11th UK Dementia Congress Exhibition will also be open to general public

Keynote and plenary speakers appearing this year:

• David Mowat MP, Parliamentary Under-Secretary of State for Community Health and Care

• Professor Carol Brayne, Professor of Public Health Medicine in the Department of Public Health and Primary Care at the University of Cambridge and Director of the Cambridge Institute of Public Health

• Professor Alistair Burns, Professor of Old Age Psychiatry and Vice Dean for the Faculty of Medical and Human Sciences at The University of Manchester

• Professor Arlene Astell, Ontario Shores Research Chair in Dementia, University of Toronto, Canada and Professor of Health Services Research in the Centre for Assistive Technology and Connected Healthcare (CATCH) at the University of Sheffield, UK

• Professor Sube Banerjee, Professor of Dementia and Associate Dean at Brighton and Sussex Medical School

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Gainsborough launches new ultra-compact hi-lo baths

Gainsborough Specialist Bathing, the UK leader in hi-lo powered baths, has introduced ultra-compact versions of its latest range and unveiled a new streamlined bather transfer seat for the Gentona and Talano.

Part of the multi-national Care in Bathing group, Gainsborough manufactures the widest range of assistive baths that deliver assured safety, dignity and comfort in acute and long term care sectors. Features such as powered height adjustability, bather transfer seats and therapeutic systems ensure carers can minimize risk to themselves and maximize pleasure and safety for disabled and elderly users. Gainsborough recently re-engineered its complete range of specialists baths so these trusted solutions would remain at the forefront of accessible bathing. To further strengthen its product portfolio, Gainsborough has now introduced new ultra-compact versions of its latest range so pioneering levels of care can be provided in space restricted environments.

The new compact Gainsborough baths are 1500mm in length and are specifically designed to provide spacious bathing with the smallest external footprint. These baths are ideally suited to retro-fit situations or refurbishment projects within existing properties that may not be able to facilitate spacious bathrooms. If space is at a premium, it is essential that floor area is maximized so that wheelchair and mobile hoist access is not compromised. The new ultra-compact baths encompass a vast range of cutting-edge design elements focused on supporting sustainability and lowering operational costs. Methods to potentially engage and stimulate dementia patients have also been carefully considered with sensory chromotherapy, hydrotherapy and sound systems available as options.

Pioneering features such as keyhole design, depth indicators and optional Autofill all assist with reducing water consumption. Bathing cycle times have been improved so a greater number of patients and residents can be bathed in a shorter period – ensuring high quality care is maintained whilst maximizing carer efficiency. Thermostatically controlled water protects against potential scalding and the re-designed bather transfer seats have an impressive loading capacity of up to 140kg.

Both the standard and ultra-compact Gentona and Talano baths are available with the new style bather transfer system. This system consists of a detachable streamlined bather transfer seat that attaches to a wheeled stainless steel trolley for onward transfers. Together these provide a seamless transit solution that can negate the need for ceiling track or mobile hoists when moving bathers between toileting, bathing and sleeping areas. When wheeled and locked into position, the powered transfer seat will lift off the trolley frame, rotate and lower the bather into the bath in a controlled and smooth manner. Several new design features ensure safety and efficiency are further enhanced during this process such as the positive seat locking mechanism, folding nursing arms, adjustable footrest and safety strap. Lockable wheelchairs provide stability when the trolley is stationary and a generous seat aperture allows toileting and hygiene procedures to be completed more effectively.

Gordon Farmilo, Gainsborough Managing Director comments: “These latest editions to our proven bath range once again reaffirm Gainsborough’s position as market leader. The new ultra-compact baths offer another dimension to our diverse portfolio which is supported by a holistic package of design, installation and servicing. By choosing Gainsborough, acute and long-term care providers can rest assured that their assisted bathing solutions will deliver outstanding results even in the most challenging situations.”

The new 1500mm long, ultra-compact hi-lo baths from Gainsborough combine spacious bathing with space saving footprints

The new 1500mm long, ultra-compact hi-lo baths from Gainsborough combine spacious bathing with space saving footprints.
Balancing dignity and safety with dementia-friendly bathrooms

Statistics show the UK is home to some 850,000 people with dementia. That figure is rising dramatically and 225,000 people are expected to develop the condition this year alone—equating to one person every three minutes. Longer term, experts predict the number of people with dementia will soar to one million by 2025 before climbing to two million by 2051. However, less than half of the people living with dementia have a diagnosis, meaning these numbers seriously underestimate the true prevalence of the brain disorder.

For care homes this is a worrying detail and it makes it difficult to form an accurate prediction of the future picture. Approximately 80 per cent of people currently in nursing and residential facilities already have dementia or some type of severe memory problem, but this figure looks certain to increase significantly in the coming years as many people with dementia move into a care home once their condition progresses to the stage where it makes it difficult for them to remain at home.

The best thing care home operators can do is be prepared for a surge in the number of residents with dementia and ensure they can meet the varying requirements of people with this kind of brain disorder. As well as making sure the workforce receives appropriate training to be able to fully understand and care for dementia sufferers, it is vital that homes look carefully at their buildings as the surrounding environment can have a tremendous impact on the lives of people with the condition.

Creating spaces that ensure independence and support an excellent quality of life for as long as possible are the ultimate goals here. Nevertheless, care homes must strike a balance between safeguarding against harm from accidents, such as falls, and freedom for residents. This is particularly important in the bathroom, where privacy and dignity are essential to allow people to continue to perform daily personal tasks on their own but also while remaining safe in an environment that can be characteristically risky, with trip hazards, slippery floors and hot water.

While this may sound tricky, leading adapted living solutions supplier AKW has been working alongside healthcare professionals, including occupational therapists, to devise a series of clear guidelines that summarise the best practice advice for creating dementia-friendly bathrooms in care homes. The recommendations look at the key challenges people with dementia face in the bathroom and offer practical steps to take to overcome them through either the implementation of special equipment or the adoption of proven design principles.

For example, protection against falls is critical in the bathroom, particularly as dementia sufferers are twice as likely to fall as others in their age group. As a result, it is advisable to avoid sharp edges in the room to limit the injuries if a fall does occur and remove any objects that could cause trips, such as radiator pipes. Shower cubicles with a raised lip on the entrance can also be risky; therefore a level access wet room is a far safer alternative.

Cognitive impairments also create significant challenges in the bathroom for those with dementia. For instance, short-term memory loss can lead to a risk of flooding if a resident forgets to turn off the water when washing. This can be overcome with a shower that automatically turns off after 30 minutes of use, such as AKW’s iCare, and the use of flood-proof plugs. Retro memory is also something to consider as people with dementia typically have good long-term memory and generally feel more comfortable and secure with familiar fixtures and fittings that may seem dated today, including traditional cross head tap handles and toilet flush handles rather than push-button mechanisms.

Similarly, dementia can diminish a person’s safety awareness, making them highly susceptible to scalding with hot water or burns in the bathroom. The use of thermostatic taps and showers is ideal to prevent this kind of injury, as are low surface temperature radiators and pipework that do not get extremely hot like conventional products.

In addition, visual confusion can make it difficult for dementia sufferers to differentiate between separate sections of the bathroom, such as washing and toilet areas. This can make the space particularly bewildering and tough to navigate, but the inclusion of contrasting colours for grab rails, toilet seats, equipment and flooring can help to make the different zones easier to identify and locate.

Above all, it is vital to seek tailored advice from experts, such as AKW, to ensure the most suited space is made for total inclusivity. With careful thought, simple design alterations and the installation of innovative equipment, care homes can create effective bathrooms that promote independence, comfort and well-being, while, ultimately, guaranteeing the safety of their residents with dementia for total peace of mind.

www.akw-ltd.co.uk
Miele Professional dealer First Choice Marshalls sponsors Care Management Group Athletics Day

Miele Professional dealer, First Choice Marshalls (FCM) was announced as the lead sponsor of the Care Management Group’s (CMG) annual Athletics Day 2016.

FCM supplies washing machines, tumble dryers and dishwashers to CMG, which provides residential care and supported living services for people with learning disabilities and additional complex needs. The Athletics Day formed part of its commitment to promoting healthy lifestyles and wellbeing amongst service users and staff.

The Athletics Day took place on Tuesday 30th August in Carshalton. CMG service users from across the country competed in a range of challenging sports in front of Brighton Women’s FC, who handed out medals, also provided by lead sponsor FCM.

Activities at the CMG Athletics Day included a variety of sports such as discus, high and long jump, and a wheelchair obstacle race, along with a number of fun non-competitive activities such as cycling and surfing on a surf simulator.

Mark Whiteacre, Sales Director at First Choice Marshalls, said: “Having supplied laundry and dishwasher facilities to the Care Management Group for many years, it’s great to be involved in a fantastic initiative to promote the health and wellbeing of CMG’s residents. The Athletics Day is a wonderful celebration of the sporting prowess of people with learning disabilities.”

Miele Professional is the global leader of commercial laundry equipment, dishwashers, washer disinfectors and sterilisation equipment designed for use in a wide range of industries including the cleaning, care home, hospitality, health, leisure, veterinary, laboratory and hospital sectors.

Miele Professional provides the highest quality products designed to deliver exceptional results every day. Renowned for their outstanding build quality, innovative technology and energy efficient performance, Miele pride themselves on their attention to detail. In 2012, over 87,000 machines were sold world-wide allowing more businesses to enjoy the Miele tried-and-tested process technology and the simple and safe machine operation.
Modern care homes have to consider many factors – such as space, hygiene, energy efficiency and cost – when deciding to install new equipment. Cleanliness is also the most important factor that people look for when choosing a care home for their loved ones.

To help address these challenges, Miele Professional offers a wide range of machines that are designed specifically for the care sector. This includes washing machines with load capacities of between 5.5kg and 32kg, which meet required legislation and provide flexible solutions to care homes of different sizes.

For establishments where there is limited space and less laundry, the Little Giants models are an excellent choice. This is due to their small size, ability to manage loads of between 5.5kg and 6.5kg and are available with dump valve drainage systems, which allow contaminated water and suspended matter to easily pass out of the machine and into the drain.

Where care homes have mid-range laundry requirements, Miele Professional has models such as the PW 5105, PW 6080 and PW 6107 which can process loads of between 8kg and 10kg, in cycle times as short as 53 minutes.

Whatever size of care home, controlling hygiene is hugely important: particularly as superbugs, resistant to antibiotics, can be spread if infection control protocols are not properly observed.

Safe thermal disinfection depends on meeting precise criteria when it comes to temperatures and holding times as reflected by Department of Health HTM 01-04 guidelines. Laundry should be processed at temperatures of 65˚c for 10mins, 71˚c for 3 mins or 85˚c for 1 min. Miele Professional products have thermal disinfection cycles which meet these guidelines, preventing the spread of infection.

The machines are also tested and approved to WRAS (Water Regulatory Advisory Scheme) category 5. This ensures that the washing machines are able to prevent backfilling of soiled or contaminated water from the washer into the water mains supply, a regulatory requirement that all care homes have to comply with.

Another benefit of investing in Miele Professional, is that the products lead the way in energy and water efficiency. This helps to reduce running costs for the care home owner, minimise downtime and it also reduces the impact on the environment. This reflects the ethos at the heart of Miele Professional product design of delivering sustainable, cost-effective performance that achieves optimum results. The machines are built to last and need to be replaced less often than competitor models.

For more information on Miele Professional’s products, please phone 0844 8936907, visit www.miele.co.uk/professional or follow the company on Twitter @MieleProf
Seymour House is a family-run, 40-bed care home in Rickmansworth, Hertfordshire, that provides 24-hour residential and dementia care.

Owner Salim Rhenultla's parents set up the business in October 1986 and have now handed the company over to Salim and his sister. Salim looks after the business side of things, while his sister focuses on maintaining the quality of care. The care home is dedicated to creating a warm, welcoming environment and providing the highest standard of care, comfort and support. It helps its residents have the maximum control over their lives, while delivering the necessary care and attention.

Salim recently made the decision to expand Seymour House by another 10 rooms. With the development in mind, Salim decided he needed to futureproof the laundry in order to cope with the expansion, without compromising on the standard of care.

Seymour House experienced many issues with its previous laundry equipment and the team were left without machines for days at a time. In a busy care home, maintaining an effective, working laundry is of high importance, so Salim and his sister researched the most reliable products that would last year on year. It was Miele Professional's reputation of quality and reliability that led them to invest in the brand.

Speaking with their dealers, First Choice Marshalls, they were reassured that the cost savings for the care home over the life of the machines made the upfront investment well worthwhile. They decided to invest in Miele Professional's PW 6207 20kg washer and PT 8403G 16/20kg gas dryer. Salim has been impressed by the responsiveness of the dealers who come out to service calls as quickly as possible.

Salim also feels that the Miele Professional machines live up to their reputation, commenting: “We've found the Miele Professional machines to be efficient and effective. It's great that we can finish our laundry much earlier in the day, which leaves us time to do other things in the home. The quality of the finish is fantastic too! Being able to wash very delicate items and having the confidence that they will be cared for with the honeycomb drum is vital.

“Ensuring the best quality of care is so important to us and it’s great that when the residents' sons and daughters come to visit they can see and smell the lovely clean clothes in their parents’ wardrobes. Through this our care service and reputation remains strong and our rooms are always in demand.”

For more information on Miele Professional’s products, please phone 0844 8936907, visit www.miele.co.uk/professional or follow the company on Twitter @MieleProf
The laundry revolution:
Why outsourcing your laundry could be the best option for your care home

It has long been the practice for care homes in the UK to operate an in-house laundry service for both linen and residents’ personal clothing. However, there has been a notable shift in recent years to outsourcing laundry, with many care home providers choosing to realise the genuine economic and efficiency benefits of using an experienced and specialist external provider.

Berendsen offers a fully comprehensive one-stop laundry service that not only takes care of towels, sheets and other linen including certain specialist items such as incontinence and infection control products, but uniquely includes the laundering of residents personal clothing.

In a time of increasing cost pressures in the care home industry, there is certainly the potential to reduce laundry costs through outsourcing. Laundry operations impact many areas including capital investment or leasing costs, servicing and maintenance, detergents and a significant amount of energy in addition to labour. Outsourcing replaces all of these with a single, predictable cost that is a great benefit when budgeting.

However, the potential benefits of working with an external laundry company are not only economic – as demand grows, many care homes are delighted to reclaim the laundry space for other purposes, the overall quality of the service can improve and the resulting time saving is also significant, meaning staff members can be redeployed to meet a need elsewhere in the home. Outsourcing can also mean improved reliability as the providers typically have backup capacity either in extra machines or even additional sites, meaning they are able to cope even when something goes wrong.

In a recent survey, over 60% of surveyed care homes reported that costly and disruptive machine breakdowns are a major cause for concern. By outsourcing your laundry, expensive machine repairs and the associated downtime are no longer worries. Using a flexible external provider like Berendsen means that they can respond quickly and efficiently to a sudden, unexpected increase in demand, should it occur.

In addition, Berendsen offers a full rental service for towels, cloths and bedding, and can also provide a specialist care home package which can help boost infection control.

Individual drivers collect all laundry and take it to be washed, dried, ironed and repacked, to be delivered back at a time agreed with you. In addition to this, your residents’ personal items are all carefully tracked and packaged individually using the latest track and trace technology, meaning missing items become a thing of the past.

When renting bed linen and towelling, the process is simple – each home is assessed and the amount and type of linen required by the home is agreed, based on its size, usage, bed changing policies, residents’ needs and personal preferences. This is then used to decide on an appropriate level of linen stock required by that particular home. By using the rental service offered by Berendsen, care homes can save capital and residents can benefit from hotel-quality, ironed bed linen.

There really has never been a better time to explore the idea of outsourced laundry.

Find out more today by visiting www.berendsen.co.uk/care
Fowler UK is a company specialising in the supply, installation and maintenance of commercial laundry and kitchens, the origins of which date back to 1966.

Offering nationwide cover including Northern Ireland with a team of Engineers. Our service department can tailor make a package to suit your business requirements, from reactive call outs to fully inclusive contracts covering all parts/labour/annual gas service and certification.

Finance options available from outright purchase, lease and rental.

Tom Sanders of Runwood Homes

“Our association with Fowler UK started over 10 years ago. Over this period we are pleased to have developed a sound professional relationship with them. Their expertise and knowledge in all laundry and catering areas has proved a valuable asset to our company. Their considered advice has been much appreciated. A very busy company that none the less has shown a willingness to offer support or guidance, in a friendly and efficient manner.

We have come to rely on their services for all our needs within the laundry and catering umbrella, from a timely efficient call-out service, to full detailed planning or layout and suitable equipment recommendations for refurbishment projects or new build situations.

In conclusion, the team at Fowler UK are always reliable, offering our business an excellent service.

We would not hesitate to recommend them to other organisations.”

Mike Longworth, Associate of One Call Hospitality Limited

“One Call Hospitality are a management company, we have recently taken over the running of the Bredbury Hall in Stockport.

There are always issues in taking over any business and Laundry was high on the list of things to sort.

Having no success with the companies established supplier I searched the internet for laundry equipment it was a Sunday morning. At five minutes past nine on Monday morning I received a call from the National Sales Manager at FowlerUK.

• The follow up to my enquiry was commendable in its speed.
• The product was explained well.
• The fitters worked well and removed our old machine.
• The dryer is a real quality piece of equipment.
• The after sales call I received was genuine and demonstrated a real care for the customer.

I would recommend them to anyone looking for a quality product and customer care.”

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www.careinfo.org
Abby Grange Nursing Home in the Firvale area of Sheffield, owned and operated by Country Court Care, provides residential, nursing and dementia care and has an excellent reputation in the area for the high quality of its care. A large converted and extended character building, Abby Grange has 74 single rooms, most of which have en suite facilities.

Recently the laundry, which consisted of three washers and two dryers installed by Goodman Sparks on a rental deal in 2002, needed to be re-equipped. Having been very happy with the equipment and the service from Goodman Sparks, the management had no hesitation in asking them to carry out the re-equipment. They installed three new Amazon RX105 11kg washers, a Huebsch Loadstar 16kg dryer and a Huebsch stacked dryer providing 2 x 13.6kg drying capacity in the same footprint as a single dryer. The job required some re-designing of the laundry to accommodate the double dryer and took about a week in total. During this time Goodman Sparks collected all the laundry and returned it the next day. Once again the service from Goodman Sparks, the management had no hesitation in asking them to carry out the re-equipment. 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Hamberley unveils latest care home for Gracewell

Luxury care home developer Hamberley has unveiled the latest of a group of 10 new care homes it is building for Gracewell Healthcare.

The £10m facility in Newbury, completed in early September, marks the next stage in the rapid completion of new buildings for the developer.

The team behind Hamberley founded Gracewell in 2011 and these new care homes are the first turnkey developments that Hamberley has built exclusively for the provider since it was sold to Sunrise Senior Living and US healthcare REIT Welltower in August 2014, for £153m.

The new care home in Newbury, on the site of a former guest house, will provide 66 ensuite premium rooms designed to create an exceptional care environment at the heart of the Newbury community.

This home will be swiftly followed by new openings in Adderbury, Bath, Bournville, Lane End, Little Bookham, Sutton, Sutton Coldfield and Woking, Hamberley is now in talks with extracare operators, major social care providers and healthcare providers to provide turnkey developments – from land acquisition and planning to build and full luxury fit out.

Hamberley director Tim Street said the design of the Newbury home was proof the business was always innovating.

“Newbury is one of our most ambitious projects to date with a construction and fit-out to the very highest standard,” said Mr Street.

“With this project complete we are now looking forward to delivering the remainder we have in the pipeline for Gracewell and working with other leading providers and real estate investors to build the highest quality healthcare facilities.”

The new Newbury home will combine boutique hotel interior design with leading-edge dementia and specialist care facilities and services.

Bijou comfort: designers have focused on boutique homelessness and intimacy.

Just like boutique hotels, which have become very popular in recent years, the home will be defined by its style, warmth, homely experience and intimacy.

Amongst many features the new home will include a luxurious hair and beauty spa, a nail bar, a chic cafe, a library and will have WiFi access throughout the home.

Bramley boosts female provision at Balmoral

Increased demand for specialist care and a dedicated care pathway has led specialist care provider Bramley Health to further enhance its provision with the opening of a new all-female rehabilitation ward at The Langford Centre in Bexhill-on-Sea.

Balmoral, an 11-bed facility providing specialist in-patient care for women with complex mental health needs, opened in early October.

“With this project complete we are now looking forward to delivering the remainder we have in the pipeline for Gracewell and working with other leading providers and real estate investors to build the highest quality healthcare facilities.”

The facility is designed for women with long-term psychiatric conditions that are affecting their ability to function. The new service will give people more choice and independence, enabling them to progress along their care pathway, living their lives as they would wish to.

Balmoral has engaged a team of highly skilled clinicians who specialise in rehabilitation and complex needs with each patient having their own bespoke individual therapy programme.

The Langford Centre is a rehabilitation facility which is home to a number of adults suffering from a mental health disorders, catering to their individual needs.

Bramley Health commercial director Bradley Phillips said an increased demand for female services had led to the expansion.

“Bramley Health prides itself in providing high quality specialist care to all the individuals at our facilities,” said Mr Phillips.

“We continue to invest in new services, such as Balmoral, to meet the evolving requirements of our service users and their individual needs.

“Our team of highly-skilled clinicians will work to maximise the service user’s progress by dynamically adapting interventions that work for the individual needs of each woman.”

Bramley provides specialist services in London and the South East, focusing on three core service lines; neurocognitive disorder service, female complex service and learning disabilities.

Residents have their say in Hollyhurst upgrade

aHollyhurst residential care service in Darlington, part of the Danshell Group, has undergone a significant investment to refurbish the home, with service users playing a full part in the plans.

The service supports adults who are living with a learning disability and complex needs and whose behaviours may be perceived as challenging. The service can also support people who may have an associated mental or physical health need.

A number of bedrooms have been re-configured to provide modern ensuite bathrooms with walk-in showers.

The décor across the service has been updated, with service users being encouraged to help choose colour schemes, wallpaper and furnishings. A number of rooms have been re-named to reflect the history of the town and the building, which was formerly a private residence called Bellerose.

Individual service users have contributed ideas, which include a pillar box red front door with a majestic lion door knocker.

The gardens have also been reworked with the creation of allotments and a greenhouse.

Hollyhurst manager Jo Crook said the improvements at Hollyhurst had really made a difference.

“Our service users have been brimming with ideas and excitement and gave us lots of thoughts about how the home should look,” said Jo. “It is so important that this is a homely, safe environment. All the bedrooms are personalised to suit the individual and the creation of ensuite bathrooms has enhanced the facilities. We are all absolutely delighted with the results.”

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November 2016 CaringTimes 33
With the end of 2016 approaching, Care Roadshows are gearing up for their final event at Epsom Downs Racecourse on Tuesday 15th November. Care professionals from far and wide have access to free CPD seminars, workshops conducted by the engaging Oomph! Wellness along with a host of varied suppliers and experts launching new products and services dedicated to the care industry.

This event is an established platform for all those working within the sector and has been sold out for exhibitors’ months in advance. Industry experts including Ablyss Care Management Systems, Boots and Citation will be on hand to answer questions and to offer advice throughout the day, which is free for visitors to attend.

Headline sponsors, Quality Compliance Systems will be present for care home owners and managers to have their questions answered. Ed Watkinson, Director of Care Quality, returns to the stage with his seminar ‘The Outstanding Journey’ that has seen no empty chairs over the year. The accredited Sheila Scott will also be in attendance to host her seminar ‘Learning the Lessons’. Sheila will discuss the changes made over the last two years including the new CQC arrangements and the National Living Wage.

A must-attend at Care Roadshow London is the seminar hosted by Segun Oladokun, Head of Inspection at CQC. Segun will explain how CQC is changing from 2016 to 2020 and also cover the findings from the 2016 State of Care report. This session is perfectly timed to hear the latest findings on care quality in adult social care and to debate the future.

All visitors who attend the seminars will receive an electronic CPD certificate after the event to boost their personal development. If care practitioners are looking to get active, Oomph! Wellness will be hosting not one, but two workshops to inspire a unique activity programme along with how to create a party atmosphere within a range of care settings.

To plan your visit to Care Roadshow London and to book your free ticket, visit www.careroadshows.co.uk so that you don’t miss the opportunity to network and gain insights.

Care Roadshow London: 15 November 2016, Epsom Downs Racecourse
Show is open from 9.30am – 3pm.
Entry, seminars, workshops and parking are all free.
For more information and to register for free visit: www.careroadshows.co.uk
Care about cost? - care about energy

Changing market conditions and volatility in the energy sector are currently affecting the operational costs of all organisations, both private and public. For those that use a consistently high level of energy, including care facility providers, the pain can be even more acute.

For care homes and supported living providers, simply reducing the amount of energy used is not an option. The need for 24/7 lighting and heating, large kitchens, and refrigerators for medicine are essential for patients’ wellbeing, but weigh heavily on overall running costs. Caught between this and fluctuating energy prices, care homes are increasingly looking to energy efficiency measures to reduce their overheads.

By reviewing buildings’ energy performance and usage across an estate, care estate managers can see the areas most prone to incurring costs and tailor energy solutions accordingly. Working with a contractor to do this can help to identify the best technologies to incorporate and where to install them. For example, implementing something as simple as a more efficient lighting or heating system could save a care home a vast amount of money in the long term that could ultimately be reinvested into improving patient care.

Care homes are also well suited to on-site generation technologies, from biomass and combined heat and power (CHP) systems to solar PV panels, as ways to make high-energy use cheaper and reduce CO₂ emissions. Deciding which to use where requires a lifecycle analysis of what could generate the best return on investment.

All of these options can be retrofitted to support existing care homes, but looking to future care stock, it would be wise for organisations to make energy efficiency a priority when planning the development of new accommodation.

**New building standards**

In April 2018, a new requirement will come into play for all commercial buildings to have an Energy Performance Certificate (EPC) rating of D or higher before sale or letting can happen.

While the care home sector operates outside of this it should be considered best practice and taken into account when considering the future of a building. It would not be hard to imagine that this rating could be extended to include all new-build developments in the future.

Those interested in solar know that government cuts to subsidies last year were a cause for concern. However, the continuing decline in solar panel prices means that installation subsidy cuts are having less of an effect. For high-energy users the savings achievable by using solar power means return on investment still stacks up. Furthermore, making energy efficiency a key part of a care provider’s business agenda not only saves money on future bills, but also helps meet government initiatives such as the Energy Savings Opportunity Scheme – a mandatory energy use assessment for all large organisations in the UK.

By making energy management cheaper and more sustainable, a care home can provide for its future operations – not only by meeting government requirements, but also by passing savings onto residents and improving care provisions. A care home’s energy usage will always remain high, but short-term investment into efficient solutions can provide long-term benefits for the future.

**Bolton Council bolts-on solar panels to care and leisure facilities**

Bolton Council has appointed contractor Forrest to install solar panels across four community buildings, including three care homes, in a move to both reduce energy costs and carbon emissions.

The photovoltaic (PV) systems have been installed by the Bolton-based contractor at Winifred Kettle Community Care Centre in Westhoughton, Wilfred Geere House in Farnworth, Laburnum Lodge care home and Leverhulme sports centre. The buildings, all energy intensive facilities with high levels of electricity consumption, were selected following an energy review of Bolton Council corporate properties by Forrest.

The panels aim to deliver nearly £200,000 in savings on energy spend over the next 20 years across the sites. By providing 2,150,000 KWh of energy generation, the systems will also cut CO₂ emissions by 950,000kg over the same period.

As part of the works Forrest will also monitor the panels for free in the first year, allowing Bolton Council to closely review consumption on a daily basis.

Paul McCarren, energy services director at Forrest, said his company was working with Bolton Council to identify the next batch of suitable properties in order to assist the authority in reducing energy expenditure and lowering carbon emissions.

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**Dr DANIEL STROSNIDER,** business development manager for the energy division at contractor Forrest, says renewable energy solutions can save money for the care sector.
Protection priorities - nursing beds or newts?

As anyone involved in the planning, design and construction world will tell you, the supposedly streamlined planning system remains something of a myth to us practitioners actually trying to get things built. The National Planning Policy Framework (NPPF) introduced in 2012 ushered in a new dawn of a ‘presumption in favour of sustainable development, which should be seen as a golden thread running through both plan-making and decision-taking’. Whilst uncharacteristically poetic for Government language, the new wording was roundly condemned by the Green lobby as the death knell for countryside protection.

Of course, anyone who worked in planning and development knew that the NPPF supposed ‘policy shift’ was unlikely to have any major change on the way things worked. The change of emphasis was actually fairly minor. Pragmatists everywhere knew that a change of some sort was needed; we had to cut red tape and get building, to house our growing population. Even the Guardian at the time noted “Britain is going to have to build if our growing, ageing population is going to have a roof over its head”.

The reality is that very little has changed in domestic planning policy. Some developers have managed to benefit from a lack of up-to-date Local Plans in certain areas, exploiting this gap with proposals that then fall to be considered under the new presumption in favour of sustainable development.

No – in my opinion the main barrier to getting things built in this country is not policy driven. It is largely down to the huge delays inherent in the system. This is caused by short-staffed, disillusioned planning officers on the one hand, and, increasingly, the bureaucratic minefield imposed by EU legislation and protectionist policies on the other.

Take the following real-world example as a case in point - a local community which has an ageing population and a thriving medical practice, but a chronic shortage of elderly care home beds and a soon-to-be closed down district hospital. This will necessitate day surgery and respite care being taken out of the area and moved to another hospital which will involve a full day’s travel to make the round trip on public transport for visitors and families. They have managed to mobilise themselves as a community and find a plot of land via a local charitable trust which they have managed to make available for a new care home and extracare development. The development will, in return, provide the lost respite nursing beds and a valuable community resource for local GPs, visiting physiotherapists, community nurses, etc.

So far, so good. A switched-on, motivated local community and, in this case at least, a local authority planning department which appears willing to help drive the project through. The plan then is to draw up the designs, engage with the local community and other stakeholders to bring forward a planning application which is wanted, needed and welcomed – that in itself makes this project practically unique.

The application will be prepared during August to October. The huge level of support has given the developer the confidence to carry on with the detailed design work and technical construction detailing so that, when the planning application is determined around Christmas time, he will be in a strong position to get out to tender at the beginning of the year and make a start on site early in early March. Or at least, that was the plan.

Planning constraints around wildlife conservation are putting much-needed social care developments at risk, says NorthStar director DANNY SHARPE.

‘Who has decided that the fate of a newt which might, or might not be present, is of greater importance than building new accommodation so that our elderly parents aren’t forced to reside in hospital beds for longer than is necessary?’

Because the development is to take place on former playing fields with hedgerow boundaries, we are obliged under EU Law (conservation and protection of habitats and species) to undertake ecology surveys to check for amphibians (including great crested newts); reptiles; roosting and foraging/commuting bats, etc.

But here’s the crux – we can’t do these surveys now. We have to wait for spring. The surveys will run from March through to early June and then the report will have to be written. If all is well and no impact on species or habitat is likely, we can start construction three months after our target start date. If an impact is deemed likely, then from mid-June we need to allow 20 working days for Natural England to issue any licence that may be needed for any action which may have an impact on these protected species or their habitats. In reality, I am told that the 20 working days is actually more like 40 working days given the delays in Natural England’s issuing of licences at present. So, that brings us to the end of August. If, newts are found to be present in a pond within 500m of our development, ecologists will have to attend site to erect tiny plastic fences to make sure the creatures don’t stray onto the construction site, or they may ‘translocate’ them to a new, safer environment. There is now way to pre-empt this by getting the necessary licences in place ahead of time. The whole, slow process must take its course and there is no alternative.

My question is this: who is protecting the elderly humans who have no habitat? Who has decided that the fate of a newt which might, or might not be present, is of greater importance than building new accommodation so that our elderly parents aren’t forced to reside in hospital beds for longer than is necessary? Who has deemed it an acceptable price to pay, that strangers may have to share care home bedrooms or bathrooms in out-of-date, not fit-for-purpose care homes because a bat might like to forage in a tree which is quite near to where a new care home is to be built?

You may say that a six month delay is not unreasonable given the circumstances. I would wager that anyone who says that, has not visited a sick parent in an out-of-date, no longer fit-for-purpose nursing home every day for six months. I doubt whether that person has had to endure an additional six months of making day-long public transport trips to visit loved ones in a district hospital because the local place has closed down.

Ghandi said “action expresses priorities”. Isn’t it about time we assessed our priorities and took action to ensure that building the nursing and elderly care beds our society needs now, and will need in ever greater numbers, takes precedence over newts? 

www.careinfo.org - Caring Times official website
OSJCT agrees lease deal with Castleoak

In an £8.8m development deal with Castleoak, The Orders of St John Care Trust (OSJCT) has agreed to lease a newly-built care home in Thornbury, South Gloucestershire.

Castleoak’s development team undertook demographic and care gap analysis to identify the need for a high quality care home in Thornbury. The team then identified and acquired a development site, then gained planning permission. The Orders of St John Care Trust was then secured as the care home operator.

The new 70-bed care home is also designed and built by Castleoak. Construction work began in June this year and the home is scheduled to open in early 2018.

“The opening of the new building will be a wonderful addition to the already strong community we have developed and will feature some impressive facilities - I’m particularly looking forward to welcoming people to our traditional pub.

“We want to help our residents continue to live their life as they choose; seeing possibilities and new opportunities rather than limitations.”

Joining Mark in the new leadership team are; Amanda Harlow (deputy manager), Sam Bentley (community engagement co-ordinator), Florian Ehbrecht (hospitality manager) and Hayley Baker (head of care).

Mark added that he was looking forward to introducing himself to the local community in the coming weeks and months.

“I am determined to put Blenheim House at the heart of the local community so our residents can continue to enjoy the highest quality of life while they stay with us,” he said.

“Blenheim House is above all a home first, a place where people come to create new memories with their loved ones and their friends in the local community.”

Blenheim House care centre, on Bath Road, is part of the Majesticare Group of luxury care homes. Amongst many features the existing home has 53 individually styled ensuite bedrooms, an art deco cinema, hair salon, brasserie with restaurant style menu, beauty salon, library and Wi-Fi services throughout the building.

New senior team appointed as Blenheim House adds 32 beds

A luxury care home in Melksham, Wiltshire, has unveiled its new senior leadership team as the home prepares to almost double in size.

Home manager Mark Barnes and his team welcomed residents to the new look Blenheim House Care Centre in October with the opening of a 32-bed extension which includes a traditional pub, an indoor potting shed, pet shop and landscaped sensory gardens.

Mark, who has held leadership roles in the care sector for more than 12 years, said he was delighted to be joining Blenheim House at such an exciting time.

“I’m thrilled to be working with such an inspiring group of people, all focused on delivering truly personalised care for our residents here at Blenheim House,” said Mark.

“The opening of the new building will be a wonderful addition to the already strong community we have developed and will feature some impressive facilities - I’m particularly looking forward to welcoming people to our traditional pub.

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Avery looks beyond the immediate challenges to meeting future consumer expectations

At a time when there appear to be more questions than answers in the care sector, major provider AVERY HEALTHCARE has taken a long term approach, building to meet a growing demand for choice, with two new homes about to open and six more facilities planned in the next two years.

JOHN STROWBRIDGE: ‘The sector is changing with consumer expectation driving change. Avery’s strategy is to build retirement environments where people want to live.’

Avery’s new build programme shows no signs of stalling with the recent opening of the £20m Kingsmere retirement and care home in Wimbledon, with two more homes in Bracknell and Bristol opening in 2017; with plans to build at least a further six homes in the next two years Avery is taking a confident approach to growth in the sector. “We continue to have one of the most dynamic development strategies in the sector,” said Mr Doyle. “We build to very high specifications and our homes significantly exceed the regulatory living space requirements, with our new home, Avonmere in Bristol, having a gross internal area of 68 square metres per resident and Astbury Manor, our new Bracknell home with 64 square metres per resident – currently the regulatory standard is 39 square metres.

“We will create environments that offer that choice, along with the option of care service add-ons.”

Avery’s healthcare’s director of property and developments Adrian Doyle said the company’s vision for future builds embraced more independent living, as this moved from a traditional needs-led decision to more an elective choice. “People’s expectations are developing and demand for choice is growing,” said Mr Doyle. “We will create environments that offer that choice, along with the option of care service add-ons.”

As many care operators are struggling to balance revenue against costs, Avery is looking beyond the immediate challenges: “Whilst there are immediate issues to be addressed and resolved, Avery is taking a longer view at what care will look like in the future, and independent retirement homes in our view, represent the way forward for our business,” said Mr Strowbridge.

“Increasing wealth, pensions and disposable income mean a new type of care home lifestyle will be demanded by the consumer in the future. The sector is changing with consumer expectation driving change. Avery’s strategy is to build retirement environments where people want to live.”

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Are independent care homes properly valued?

A glance through the pages of the current commercial property press will show that demand for sites for new care home developments continues unabated. Full page adverts vie for attention alongside those of discount retailers and chain restaurants. The care sector is clearly an industry on the up, with an apparently limitless appetite for new development land.

Yet this is also the sector which sees daily reports of care home closures. At the time of writing, another has just come through on the news feed, along with the distress that inevitably brings. A relative of a resident describes it as a “horrendous situation”, and the care home owner says that there is no longer any choice, the funding levels being so low that they “will soon get into a situation where we can’t give the care required by law.”

What, then, are we to make of this Jekyll and Hyde business when it comes to valuing? We know that much of the new development is still following the private-pay market, abandoning the publicly funded sector on the basis that it lacks the ability to generate returns required by commercial investors. In turn, these brand new assets, delivering high profits, are valued at the very top of the market range, as we might expect. It is what is happening in other parts of the food-chain that raises questions.

New development still represents a relatively small percentage of total care home provision, so the values ascribed to such properties provide little in the way of comparable evidence to the valuer, other than in valuing similar assets in a rarefied area of the market. On the other hand, the pressure that we are seeing on some more aged property assets has created a trend amongst corporate operators for disposing of these. Many of these care homes are being sold off at heavily discounted levels, enabling some fortunate operators to pick up earlier-generation, purpose built care homes for values representing exceptionally low profit-multiples or prices “per bed”. Add the availability of this stock to the continued availability of over-leveraged businesses being sold off by administrators, and it is clear that there exists something of a discount market at present. That may not last forever, however it is a real feature of the current care sector.

The question is whether these sales function as valid comparables for the remainder of the market, any more than do the brand new, private-pay care homes.

Valuers are increasingly scratching their heads when comparing apples and pears in a Jekyll and Hyde marketplace, says HPC director IAN WILKIE.

Should a successful, well-run and profitable care home, owned by an independent operator, be assessed by the same parameters as under-performing assets being sold-off by corporate operators in order bolster their balance sheets? It would seem unreasonable for that to be the case. These corporate disposals might almost be viewed as quasi-distressed sales.

Somewhere between the highest values of the shiny new assets, and the rock-bottom prices paid in the great care home sell-off, there should be a third tier. Independent care operators, who maintain good quality care homes, deserve that recognition for their efforts.

Jeremy Huband heads-up NatWest healthcare team

NatWest has promoted Jeremy Huband as their new head of healthcare. In this latest role he will be responsible for more than 3,000 customers.

Having joined the bank in 1986 Jeremy, who runs his own care home, was most recently its director of healthcare – a role spanning the UK and Western Europe looking after care homes, domiciliary care, dental, pharmacy, vets and pharmacy.

“I have been focused on healthcare for the past 20 years and look forward to using this experience to support our customers in growing their ambitions,” said Jeremy.
Key Capital invests in homecare provider

Growing homecare business Routes Healthcare, which provides NHS-funded intensive homecare, has received a substantial investment from private equity firm Key Capital Partners (KCP).

Routes Healthcare was established in 2005 by current managing director Andrew Healing. Over the last 11 years, the business has grown to encompass nine offices, serving public sector bodies, blue chip organisations, SMEs and private individuals. The business acts as a fully integrated, high acuity homecare provider and is CQC registered. Routes says that at the core of its success is a focus on quality of care, with the management team committed to delivering the best care possible.

The branch network, covering many parts of the North of England, is extensive and located within: Blackpool, Macclesfield, Cheadle, Liverpool, Preston, Rochdale, Salford, Stockport, Bradford, York, Settle, Newcastle and Tameside.

KCP says it has a strong track record adding value to businesses in this sector, including experience with Nurse Plus and Hallam Medical. The investment is the first to be made following the launch of KCP’s new £80m growth fund last November.

The KCP team which executed the deal was led by investment partners Mike Fell and Philip Duquenoy, assisted by investment manager James Excell. Mike will join the board of Routes Healthcare to provide strategic advice to the business.

Routes Healthcare managing director Andrew Healing said that, with its proven experience in the healthcare industry, KCP was the ideal investment partner to assist with his company’s continued growth.

“Excellence in all we do is the company’s philosophy and the expertise of KCP’s senior advisers and the invaluable strategic advice they can bring to management teams were crucial factors in our decision,” said Mr Healing.

“Maintaining excellence in the clinical care we deliver is imperative and we are already enjoying working closely with KCP to ensure this is managed safely as the business grows.”

Mike Fell, investment partner at KCP’s London office, said the deal with Routes was a great opportunity to support what is already a very successful business, to reach the next stage of its development.

“Andrew has built a strong reputation for Routes Healthcare; it is trusted by Clinical Commissioning Groups for providing quality, personal service and value for money,” said Mr Fell.

“Our investment will provide development capital to support the continued expansion of the network of branches both organically and through acquisition while ensuring that the business’ ethos of ‘always putting the patient first’ remains central to all services.”
Newcastle-based care and leisure company the Malhotra Group has appointed one of the country’s most experienced chefs to head its catering operation.

In a first for the company, Malhotra has created the role of executive chef and recruited Master Chef of Great Britain, Norman MacKenzie, to the position.

In a career spanning almost 30 years, Norman, who is also a Craft Guild of Chefs Master Craftsman and former Hospitality Guild Mentor of the Year, has worked at hotels across the UK.

In his new role, Norman will be tasked with designing and reviewing menus for all food outlets within the group’s care and leisure operations, including its 11 care home facilities along with its Tyneside bars and restaurants.

In association with

Debbie Sharples-Kirkbride has been appointed as Hallmark Care Homes’ group lifestyle manager. Debbie, who has more than 12 years’ experience working for a renowned care home provider and an in-home care service, hopes to lift the profile of activity provision in the care sector.

She plans to do so by supporting Hallmark Care Homes’ 15 lifestyle leaders with their activity planners, working alongside them to create events that resonate with residents and creating partnerships with local and national organisations.

Debbie brings with her more than 10 years healthcare experience working for Anchor, where she was awarded an MBE for her services to older people.

Established in 1997 Hallmark Care Homes operates 15 care homes across England and Wales. The company says its registered nurses and trained carers are highly qualified and take pride in delivering excellent standards of relationship-centred care.

Danshell Healthcare Group has appointed Helen Davidson as manager at its Thor’s Park hospital which provides support for 14 men living with a learning disability in Thorrington, Essex.

A qualified learning disability nurse and experienced manager, Helen has worked in service development and operations across the adult social care sector for many years.

Helen joins Danshell from another care provider having spent five years in a service development role, gaining experience assessing new admissions across the company and facilitating care pathways for service users.

Complex care provider Badby Park Group has appointed Diana Nash as its new human resources director.

Diana, formerly of Caring Homes Group and Consensus Support Services, will have a significant input into shaping the overall strategy for the business, its focus and direction and is responsible for ensuring that the group has the people and the talent to support an exciting period of growth for the company.

At present the Badby Park Group has two complex care facilities but more are in the pipeline for the coming years.

The neurological centres provide rehabilitation, long-term care, respite and palliative care for people with neurological illnesses, acquired brain injuries and spinal injuries.

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Scope for growth - Ridout’s rationale for corporate reconfiguration

Since setting up in 2007 as a specialist legal practice, Ridouts Solicitors (now Ridouts Professional Services) has established a formidable reputation in the health and social care sectors.

Principal Paul Ridout was starting from a position of strength, having gained many years’ experience as a lawyer working in the health and social care sectors, acting for both care providers and, on occasion for health authorities and the then local authority-based regulators.

“When the move was made to national regulation I made the business decision that there were going to be hopeless conflicts and I was really an operator/providers’ lawyer, so I went that way,” said Paul.

Since its inception Ridouts has represented and acted for a broad range of organisations across the health and social care spectrum – NHS hospital and foundation trusts, all the way down to the smallest sole practitioners; GP’s, small care homes and small homecare agencies. In social care, Ridouts encompasses the whole of provision in its client base – elderly and specialist care operators, mental health, learning disability, children special schools and secure services.

I asked about the rationale for the company’s recent change in legal identity, from a Limited Liability Partnership (LLP) to a Public Limited Company (PLC) and change of name from Ridouts Solicitors to Ridouts Professional Services.

“At the practice has become more successful, we have been concerned about the need and the ability to finance it,” said Paul.

“The appetite of the high street clearing banks to provide traditional finance has lessened, and the limited liability partnership is a really very bad model for a successful business that’s making significant profits, because it means that any form of partner investment that is introduced has to be paid for out of partner profits at the top rate of tax and is charged against the partner earnings.”

“Some, while an LLP achieves the purpose of limiting liability, it doesn’t create a strong financial structure which enables the introduction of capital borrowed by the company. That’s what we’re doing now. The finance we inject through borrowing will appear on our balance sheet, but it won’t appear as a personal liability of the partners out of their earnings and drawings.

“Also, the combination of corporation tax and dividends tax for a successful PLC is more effective as a tax management system. At the next stage we will look at a private equity/venture capital type injection of money because I’m sure that, at the rate at which we are growing, we will need finance partners.”

Paul said another reason his company had become a PLC is that, while there were added strictures, a public market listing was now an option which could be contemplated sometime in the future.

“You have to have £50,000-worth of shares, of which £12,500 is paid-up, which of course you don’t have to have in an LLP. In fact, we have £350,000 in paid-up share capital and this gives us a sense of strength on the balance sheet and gives us a solid base to move forward.’

‘While there are more strictures, being a PLC means a public market listing could be contemplated sometime in the future.’

And how does the change of name and broadening of service provision tie-in? I asked.

“The broadening of the services we provide to our clients has come coincidentally with the change in corporate identity,” said Paul.

“We have dovetailed it in so that we now have a team of specialist health and social care consultants who are available to us on a non-exclusive basis. We hire them in and sell their services on to our clients. The consultants benefit from our own marketing, and through our website and we cover their professional indemnity when they are working for us - we promote them and we find them work.

“In due course, I expect some of them will become more closely integrated with us, making us a multidisciplinary partnership, that would need authorisation by the Solicitors Regulatory Authority. Any firm can hire-in a specialist consultant - we have just formalised it and are promoting it as part of our service because so many clients have said to me ‘why do we have to so many different places, why can’t we come to just the one place’.

“We may develop other related legal services. We might very well think about corporate and real estate but we’d need to have a really good business plan to do that - at the moment we give consultancy advice in these areas, but if we were to be handling large amounts of other people’s money in corporate and real estate transactions, that would have a dramatic impact on increasing our professional indemnity insurance and we would need to invest in a much, much more sophisticated accounting system, but I wouldn’t exclude it, I wouldn’t exclude anything’

An emboldened regulator

I asked Paul what, from the work he and his team are doing with social care providers, he saw as major concerns in the social care arena.

“I think one major concern is the emboldening of the Care Quality Commission, turning itself from a pretty ineffective regulator four or five years ago, into a regulator which is now attacking and hammering people, sometimes without justification and without good rationale, almost for sake of being seen in the media to be powerful and strong.

“It’s becoming a real problem for a whole range of providers. They feel they cannot run their business without budgeting for this different level of intervention. I think also the level of criminal fines which are now in the pipeline, for all businesses from a health and safety point of view, will be crippling. People will be fined significant sums relevant to their turnover, rather than necessarily their culpability - that’s going to be a big problem.

“There is also the failure of the Government to properly fund the standards expected by the public, the CQC and Health and Safety. Where is the money going to come from? People might say ‘well, if you behave yourself and you are run properly you won’t get a large fine’ but that’s not the real answer because, in order to avoid that fine, you need to invest significantly in regulatory operational health and safety management. That’s going to be an added cost – to prevent the fine and of course, very importantly, to make sure people don’t get hurt or receive a lack of care, or even die.”

I asked Paul if he thought the greater regulatory burden meant there was greater legal safety in size, if larger providers were...

Continued on next page
Care home managers earn 30% more than their homecare counterparts, says Croner

Managers in domiciliary care earn up to 30% less than their care home counterparts according to new research by human resources and health & safety consultancy Croner. The findings come from Croner’s latest salary survey report on pay and benefits within the care sector that highlights that, unlike managers, pay at care worker level is higher for those working within domiciliary care.

Carol Smith, care sector employment specialist, at Croner said a contributing factor for the difference in wage rates at manager level may be down to the requirement in care homes for nursing/clinical care, where the home manager is often required to hold clinical responsibility. “This is almost certainly the case in SME-sized care homes where the manager is more likely to be clinically qualified,” said Ms Smith.

“Another surprise in our research is that there is not a pattern of management pay increasing proportionately with the number of beds or employees, which is generally the case at director/head of operation level. This again suggests that remuneration is commensurate to level of education or experience.”

The survey also found that staff turnover continues to be a problem across the sector at 17.5%. “The industry tends to have a higher proportion of female worker and lower wage levels,” said Ms Smith. “Turnover may be affected by non-returners from maternity leave, demanding environments and unsocial hours due to the need for 24-hour care cover and balancing this with family responsibilities.”

### Care Homes Sold

#### CHESHIRE
Name: Intercare Home Care Services
Buyer: Mrs J A Jouni
Seller: Mr & Mrs M Doherty
Agent: DC Care Tel: 01937 849 268

#### CORNWALL
Name: St Mary’s Haven, Penzance
Registration: 32 elderly
Buyer: Anson
Seller: Diocese of Plymouth
Asking price: £725,000
Agent: Christie & Co Tel: 01392 285600

#### DEVON
Name: Southlands Court, Holsworthy
Registration: 24 elderly
Buyer: Farquhar
Seller: Goaman
Asking price: £1.195m
Agent: Christie & Co Tel: 01392 285600

#### EAST MIDLANDS
Name: Ryderhouse NH, Burton on Trent
Registration: 40 elderly
Buyer: Your Health Ltd
Agent: Christie & Co Tel: 0115 948 3100

#### EAST SUSSEX
Name: Roselands, Rye
Registration: 35 elderly
Buyer: Mrs R Patel
Seller: Mr M & Mrs F Tibbles
Agent: DC Care Tel: 01937 849 268

#### ESSEX
Name: Dovercourt House, Harwich
Registration: 27 elderly
Buyer: Mr J Patel
Seller: Mr M & Mrs F Tibbles
Agent: DC Care Tel: 01937 849 268

#### LONDON
Name: Florence Avenue, Morden
Registration: 8 residential
Buyer: Mr R Patel
Asking price: £1.1m
Agent: Christie & Co Tel: 0203 846 0621

#### NOTTINGHAMSHIRE
Name: Red Firs, Newark
Registration: 45 EMI
Buyer: Reason Care
Seller: Cherish Care Homes
Agent: Christie & Co Tel: 0115 948 3100

#### SOMERSET
Name: Hendford NH, Yeovil
Registration: 41 elderly
Buyer: Capital Care Homes Ltd
Seller: Aurora Care Ltd & Caspia Care Ltd
Asking price: £1.95m
Agent: Christie & Co Tel: 01794 468 500

#### SOUTH WALES
Name: Ael Y Bryn NH, Swansea
Registration: 34 elderly
Buyer: Capital Care Homes Ltd
Seller: Cherish Care Homes (Wales) Ltd
Asking price: £645,000
Agent: Christie & Co Tel: 01392 285600

#### SURREY
Name: Chatsworth Care, Sutton, Banstead & Carshalton
Registration: Total 35 learning disability
Buyer: Healthcotes Group
Seller: Mr & Mrs G Smith
Agent: DC Care Tel: 01937 849 268

Information appearing in “Care Homes Sold” is published in good faith that the information is accurate and cleared for publication. The onus for accuracy is on the property agent. Caring Times will not publish, in a subsequent issue, corrections or alterations to information supplied. Agents, please note that items cannot be withdrawn once the copy deadline has passed. We advise readers to confirm any details with the property agent concerned.
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Agenda:
1.00 - 2.00pm Registration
2.00 - 2.10pm Launch of The Luxury Care Home Guide 2017 (UK Edition)
2.10 - 3.00pm Knight Frank 2016 Annual Care Care Homes Review
3.00 - 3.10pm Break
3.10 - 3.40pm Shakespeare Martineau
3.40 - 4.20pm Panel discussion and Q&A
4.20pm Drinks reception & canapés
5.00pm Optional tour of Leicester Tigers
5.30pm Close

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