Statement of purpose

Health and Social Care Act 2008

Part 1

The provider’s name, legal status, address and other contact details

Including address for service of notices and other documents

Please first read the guidance document *Statement of purpose: Guidance for providers*

Statement of purpose, Part 1

Health and Social Care Act 2008, Regulation 12, schedule 3

The provider's business contact details, including address for service of notices and other documents, in accordance with Sections 93 and 94 of the Health and Social Care Act 2008

1. Provider's name and legal status							
Full name[1]	Salford Care & Support Services Ltd						
CQC provider ID							
Legal status[1]	Individual	☐	Partnership	☐	Organisation	☒	

2. Provider's address, including for service of notices and other documents	
Business address[2]	The Laurels, 8 Priory Grove,
Town/city	Salford
County	Greater Manchester
Post code	M7 2HT
Business telephone	0161 5269778
Electronic mail (email)[3]	rob@salfordcareandsupport.com

By submitting this statement of purpose you are confirming your willingness for CQC to use the **email address** supplied at Section 2 above for service of documents and for sending all other correspondence to you. Email ensures fast and efficient delivery of important information. If you do not want to receive documents by email please check or tick the box below. We will not share this email address with anyone else.

I/we do **NOT** wish to receive notices and other documents from CQC by email	☐

[1] Where the provider is a partnership please fill in the partnership's name at 'Full name' in Section 1 above. Where the partnership does not have a name, please fill in the names of all the partners at Section 3 below

[2] Where you do not agree to service of notices and other documents by email they will be sent by post to the business address shown in Section 2. This includes draft and final inspection reports. This postal business address will be included on the CQC website.

[3] Where you agree to service of notices and other documents by email your copies will be sent to the email address shown in Section 2. This includes draft and final inspection reports.

Please note: CQC can deem notices sent to the email or postal address for service you supply in your statement of purpose as having been served as described in Sections 93 and 94 of the

Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents.

3. The full names of all the partners in a partnership	
Names:	

Statement of purpose

Health and Social Care Act 2008

Part 2

Aims and objectives

Please read the guidance document *Statement of purpose: Guidance for providers*.

Aims and objectives
What are your aims and objectives in providing the regulated activities and locations shown in part 3 of this statement of purpose

Service Overview:

We recognise that people are individuals with a unique perspective and experience of the world around them. These personal experiences make up a large part of our unique ability to connect to one and other. At Salford Care & Support Services Ltd, our employees are not viewed just as the titles of the roles they each undertake, they are people who come from diverse groups with different experiences and qualities. We encourage our staff to bring their abilities and interests to work to inspire, connect and enrich the interactions they have with each other and the people we provide care and support to who we recognise will each have their own unique diverse needs.

We realise that making the decision to enter a Residential Care Service is probably one of the hardest choices any individual or family will make; therefore we endeavour to make the transition into our services as easy as we possibly can.

The Laurels will provide Personal Care within a Residential Care Home Setting.

As a service provider, our purpose is to ensure that all residents are treated as individuals, are provided with high quality care and support in a pleasant, homely and comfortable environments, and that all are each treated with respect and their dignity and privacy are preserved and protected at all times.

We acknowledge that each resident as a unique individual having physical, psychological, social and spiritual needs and rights as defined by the Human Rights Act and that those who may experience or have a diagnosis of Dementia have the same varied needs as any other citizen, and their individual needs will be respected and rights upheld.

We appreciate the vitality of residents and relatives working together in partnership with the staff and management team, along with the individual General Practitioners and other Healthcare Professionals in planning and administering the care and services. Residents will, as far as possible, be involved in their care. We recognise that in some circumstances this is not practical due to the resident's degree of disability and dependence.

We adopt an approach that at the end of their life, the resident should be able to die with dignity and have access to appropriate symptom control. As a team we support each resident, their relatives and loved ones, also having respect for their spiritual and cultural needs and preferences.

Our aims in achieving our Objectives are always that each resident will:

- Be encouraged, supported and assisted to maintain a high quality of life.
- Be encouraged to maintain their independence.
- Have their privacy respected.
- Be treated with dignity
- Have their human, emotional and social needs respected and fulfilled.
- Be encouraged to follow the religion of their choice.

- Be addressed as they wish
- Not be discriminated against on grounds of race, religion, sex, colour or disability.
- Be cared for in a manner similar to that, which would be given by a caring relative in their home. ·
- Be encouraged to handle their personal medicines when competent to do so.
- Be able to retain the doctor of their choice.
- Receive medical and all personal care in private.
- Be entitled to all the common facilities available to other people living elsewhere in the locality.
- Be encouraged to discuss their care and needs with the Registered Manager. .
- Be cared for by adequate and appropriately trained staff.
- Be able to receive visitors at any reasonable time.
- Feel at home.
- Be provided with adequate accommodation.
- Be encouraged to bring personal belongings.
- Be provided with nourishing, appetising and adequate food.
- Be encouraged participate in recreational facilities.
- Have access to a telephone.
- Be able to complain and raise concerns freely about the quality of care received.
- Be provided with value for money services.
- Enjoy a continued relationship with our home.
- Have a contract of residence and a brochure.

Our Overarching Philosophy Is:

The Home aims to create a secure, relaxed,, happy and homely atmosphere for residents to live in and for staff to work in.

At the same time and as a Residential Home, we aim to provide a high standard of individualised support & care as required, whilst treating each resident as an individual.

The staff will always remember the importance of this being the residents home, and that their requests and wishes are listened to and heard.

Residents are treated with dignity and respect, and their family and friends are always made welcome and encouraged to visit, when they may stay for a

meal and generally spend time together.

Independence and activities around the home are encouraged to maintain and support the residents to achieve their fullest potential.

Staff are sympathetic in their approaches and able to recognise, understand and cater for the residents individual needs and wishes.

Residents are in their home.
It must be made to feel like home.

In Our Approach, We Will Always:

1. Respect diversity
2. Practice ethically
3. Challenge inequality
4. Promote wellness and recovery
5. Identify people's needs and strengths
6. Providing person centred care
7. Aim to make a difference
8. Promote safety and positive risk taking
9. Do everything with compassion and caring attitude

Our Services Will Promote Provision of Enabling Environments:

Enabling Environments are places:

- Where positive relationships promote wellbeing
- Where people experience a sense of belonging
- Where people involved contribute to the growth and wellbeing of others, enabling them to develop and flourish
- Where people can learn new ways of relating to self and others
- Where the contributions of all parties in helping relationships is recognised and respected

Enabling Environments core values include:

- Belonging - the nature and quality of relationships are of primary importance.
- Boundaries - there are expectations of behaviour and processes to maintain and review them.
- Communication - it is recognised that people communicate in diverse ways.
- Development - there are opportunities to be spontaneous and try new things.
- Involvement - everyone shares responsibility for the environment.
- Safety - support is available for everyone.
- Structure - engagement and purposeful activity is actively encouraged.
- Empowerment - power and authority are open to discussion.
- Leadership - leadership takes responsibility for the environment being enabling.

- Openness - external relationships are sought and valued.

Our operating culture underpinned by the Care Quality Commission 5 domains with all our services continually reflecting on how we can provide care which is:

- Safe
- Effective
- Caring
- Responsive
- Well Led

To achieve this, we:

- Work in partnership with each service user, placing them at the heart of everything we do.
- Ensure our day-to-day practice is embedded in an overarching framework of support with the whole team around the person constantly taking into account the interaction, communication and flexibility of needs wishes and desires.
- Provide comprehensive individually tailored care / support plans that are proactively delivered by the whole staff team in an integrated, systematic and consistent manner.
- Support ways of working that are fully integrated (not based on hierarchical differences), collaborative (shared responsibility and decision-making) and inclusive of the whole staff team and individuals.
- Maintain a culture of reflective enquiry that involves the whole staff team being able to ask, “Can we safely explore together and/or with the individual what might be happening here and how best we can support”

Person Centered Care

Person-Centred Practice and individual service design is at the heart of everything that we do. We recognise that our residents are a diverse group of people, and the support they require is highly individualised and tailored to their particular needs, strengths and interests.
For each resident, we will set out a detailed care plan and risk assessment according to their assessed needs to ensure care and support is provided which meets these needs.

In doing so, we will always:

- Involve the individual as much as possible in the design, development and evaluation of their own care through our person centred and person inclusive approach which will drive their support and care planning and subsequent delivery of these.
- Place the individual at the heart of their care and support plan, taking a person-centred approach to all aspects of the planning and delivery of quality care
- Present information in a format that is meaningful and accessible to the individual
- Take a life planning approach to ensure that all individuals in our care are supported to develop a positive vision of themselves for their future
- Use tried and tested methods of working with people to ensure they achieve their personal best, including active support, positive behaviour support, and positive risk taking.

Person Centred Plans

All residents will have plans in place which:

- Are specific, simple, clear and understood by all those involved, focusing on what needs to be achieved for individuals in order to live a healthier and as independent life as possible. Address the key areas of the person's life, their health and well-being, family, hopes and dreams which are of most concern and the people who care about them, recognising individual needs, hopes, desires and capacities and dreams now and in their future.
- Are developed in partnership with the person and people around them, family, care coordinators, staff team

Activities & Support

We embrace the values associated with Active Support. People experiencing any illness or trauma are entitled to lives which are as full as anyone else's. Although every one of us differs, there are some core things we all have in common. It is important for most people to:

- be part of a community
- have good relationships with friends and family
- have relationships that last
- have opportunities to develop experience and learn new skills
- have choices and control over life
- be afforded status and respect and be treated as an individual.

These core elements of life define what we mean by leading a socially valued lifestyle. Basic requirements for a full life are the opportunities to participate in the full range of activities that everybody else does, be involved and share interests with other people and develop relationships, skills, and experience. When a person is not able enough to do typical activities independently, he or she will need support to do them.

Our Activities & Support planning is designed to make sure that people who need support to have the chance to be fully involved in their lives and receive the right range and level of support to be successful.

Our Approach to Risk Management:
Risk assessments will be undertaken to cover all aspects of service operation and delivery, these will span across Health & Safety, Care, Support and Regulatory requirements throughout the Service and underpinned by robust organisational policy and procedure.

From an operational and service user perspective, there will be an emphasis on Positive Risk Taking. Our approach to this area is outlined below.

Risk is the management of uncertainty, and risk decisions are made without having all the knowledge available on which an accurate prediction could otherwise be made. Risk is usually seen as the possibility that an event will occur, with harmful outcomes for an individual or for others. Such an event may be more likely because of risks associated with:

- disability, difficulty, or impairment
- health conditions or mental health problems
- activities while out in the community, or in a social care setting

- everyday activities, which may be increased by an illness or disability
- delivery of care and support
- use of medication

Our Principles of working positively with risk
A pure health and safety approach to risk identifies 5 key steps:
- Identify the hazard
- Identify the risk (who may be harmed and how)
- Evaluate the risks and decide on precautions
- Record findings and implement them
- Review the risk assessment and update if necessary.

Risk Assessment and risk management must be seen in the context of residents living their lives and making choices, with potential benefits as well as harms.

"Positive risk-taking is weighing up the potential benefits and harms of exercising one choice of action over another. This means identifying the potential risks involved, and developing plans and actions that reflect the positive potentials and stated priorities of the service user. It involves using available resources and support to achieve desired outcomes, and to minimise potential harmful outcomes" (Morgan, 2004)

The decisions made must therefore consider the desired outcomes of the person, and the agreed outcomes of their assessment, and the steps described above need to be adapted so that good decision making can be supported.

It is essential that risk assessment and risk management is carried out in partnership with each service user, their carers, wider support network and other involved professionals. In almost all circumstances, this is subject to the wishes of the individual. The decision to involve others or not is in itself a decision which may give rise to risk, and the individual may need support to make this decision. In certain circumstances, however it may not be possible to comply with the wishes of the person in this regard, for example where there may be safeguarding risks or concerns.

Admissions:

Every Resident admitted into our services will be carefully and patiently assessed in order to get as much insight as possible of their preferences, personality and needs, in order for us to make sure we provide the best possible and responsive care and support.

Where it is considered possible and appropriate, each individual will always be central in this process.

Individuality & Inclusion:

We respect and accept each residents needs for dignity, privacy, diversity and independence. We will make sure our carers are trained in all these areas in order to be able to deliver it for our users. Surveys and feedback from residents and their family members will be some of our tools deployed for evaluation and audit purposes.

This will not only aid and develop our understanding and inform practice and operating philosophy / policy, but we also intend that it will provide each individual

with a voice.

Culture, religious custom, sexuality and additional individualised personal needs will be addressed and recorded on a personal need, wishes and desires basis to reinforce, endorse and support our approach to Individualised and Person-Centred Care.

General Medical / Healthcare and Support:

This will be provided by local GP services or other community based services such as dentistry, optical or chiropody services.

Healthy eating will be promoted and encouraged always, meals will be prepared in consultation with each service user to ensure their likes and wishes are adequately incorporated. Where necessary / appropriate, referrals will be made to the local diet / nutritional advice services. Hydration will also be a routine feature within this area,

Concerns and Complaints:

We make available and publicly our complaints and concerns policies and procedures. Our aim is always to treat any complaint or concern seriously and always to adhere to our policies in dealing with and our treatment of such.

As part of our being open, honest and approach to candour where appropriate outcomes from any concern or complaint raised will be published on the basis of a You Said – We Did Approach to ensure a ‘good’ lessons learnt approach is embedded as part of the operational culture within the service.

We accept that from time to time any service user or other body may wish to make direct representations to external services, for example CQC, NHS CCGs or other parties. Our commitment in this respect is to make readily available contact details for a range of agencies in easy read accessible formats which is accessible to all.

Safeguarding and Protection:

All staff will receive training in local safeguarding policies and procedures and those of the organisation. The safety and security of every service user in our care is paramount to us both locally and to the Organisation. Robust Safeguarding, Whistleblowing, Anti-Discriminatory Practice, Bullying & Harassment, MCA, DoLS, MHA policies and guidance to inform ‘best’ practice are an integral feature of all our services.

Our Quality & Governance Systems
We operate on the basis that Governance is "A framework through which organisations are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish." Our Framework Approach is set out within our Care Quality Plan which also identifies our approach towards continuous quality improvements and Key Performance Indicators.

These principles of clinical governance underpin and direct clinical, operational and corporate objectives and embrace all the principles and practices as set out within The Care Act (2014)
- Recognisably high standards of care

- Transparent responsibility and accountability for those standards
- A constant dynamic of improvement based on outcomes from our audit processes which are undertaken as per our internal scheduling programme.

We are committed to delivering the highest quality clinical and care / support services to all the people in our care in all our services.

Corporate Governance:

We are committed to robust corporate governance processes.

Our policies and procedures are developed specific to our service and the functions they serve and are implemented consistently to inform best practice and ensure that each of our facilities operate within statutory requirements in both the healthcare and social care arenas.

Points raised in inspections are incorporated into operational and strategic functions to support our on-going commitment to develop best practice. To help support the level of transparency we always intend to achieve, we routinely as required publish all the inspection reports on our facilities.

Our Effectiveness:

Regular benchmarking against guidance and legislation is undertaken.
Nationally recognised measurable outcome tools are in use to ensure we can measure our care and support effectiveness and rather than use tools which measure deficits we can more positively recognise and celebrate individual achievements.

Our operational structures are fully integrated at all levels, allowing us to direct the maximum resource towards individual care and individual development in all our services.

Our Employees:

.
We operate robust and high standards of policy and procedure relating to recruitment and retention and measured staff appraisal, supervision and routine reflective practice / de-briefing systems to ensure each of our employees receives the level of support they each desire and require in ensuring the effectiveness of their practice.

Staff Training and Development:

As staff members initially commence employment they are subject to a 6-month probationary period during which time they will each be required to complete an intensive induction training programme which includes the new Care Certificate.

Following their success throughout this initial period of employment, they will each continue to receive regular support, supervision and appraisals.

Training and development and access to external resources which provides a wide range of mandatory, professional and vocational learning opportunities to our staff is key to our service delivery. The training of individuals of all disciplines is a major element of our services.

We operate on the basis that ‘good’ quality care and support can only be provided by staff who have the skills and knowledge to know what ‘good’ looks like and thus be

enabled to deliver this.

Box will expand if completed using a computer

Statement of purpose

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Part 3

Location(s), and

- the people who use the service there
- their service type(s)
- their regulated activity(ies)

Fill in a separate part 3 for each location

The information below is for location no.:	1	of a total of:	1	locations

Name of location	The Laurels
Address	8 Priory Grove, Salford,
Postcode	M7 2HT
Telephone	**0161 5269778**
Email	rob@salfordcareandsupport.com

Description of the location

(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)

The Laurels is set in mature and pleasant gardens and there is a large car park at the front of the building. The Property occupies an excellent quiet cul de sac location with access to public transport and local shops and facilities close by with ease of access from the A56.

The Home is currently registered with the CQC to accommodate a maximum of 25 residents.

There is a range of suitable and appropriate equipment in place to support those who may require assistance with mobilisation. Adaptations have been made to the building where required to ensure it is responsive to needs of the resident group.

The home is Registered with the CQC to provide Personal Care within a Residential Care Home setting to adults as follows:

- Caring for adults over 65 yrs
- Caring for adults under 65 yrs
- Dementia

Laundry:

Residents' clothing is laundered on site, and therefore we would ask that all clothing supplied be machine washable, we automatically label clothing upon admission. The dry cleaning of any items would need to be taken care of by relatives and if possible, should be avoided.

Meals / Mealtimes:

Residents are encouraged to eat in the Dining Room or in one of the lounges, but if they wish to, they may dine in their own room, while there is a timetable of mealtimes in place this merely acts as a guide -
we will always accommodate special requests outside of these times

Special diets can be catered for, for example; diabetics, gluten free liquidised or soft foods, similarly any likes/dislikes if the resident does not wish to have the alternatives from the varied menu of the day.

Activities are arranged and timetabled to take place both in and out of the home daily.

Staffing levels in place are based on guidance from a dependency assessment in place which is routinely updated to reflect changing needs and changing residents.

The home provides induction training for all its staff and it is a requirement for all staff new to care to complete the Care Certificate. All staff are encouraged to complete further and advanced certified training according to their roles and responsibilities

Thereafter there is a range of mandatory and specialist training available for all staff according to their roles and aligned to Skills for Care guidance associated with this type of service.

No of approved places / overnight beds (not NHS)	25

CQC service user bands The people that will use this location ('The whole population' means everyone).					
Adults aged 18-65	☒	Adults aged 65+		☒	
Mental health	☐	Sensory impairment		☐	
Physical disability	☐	People detained under the Mental Health Act		☐	
Dementia	☒	People who misuse drugs or alcohol		☐	
People with an eating disorder	☐	Learning difficulties or autistic disorder		☐	
Children aged 0 – 3 years	☐	Children aged 4-12	☐ Children aged 13-18	☐	
The whole population	☐	Other (please specify below)		☐	

The CQC service type(s) provided at this location	
Acute services (ACS)	☐
Prison healthcare services (PHS)	☐
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	☐
Hospice services (HPS)	☐
Rehabilitation services (RHS)	☐
Long-term conditions services (LTC)	☐
Residential substance misuse treatment and/or rehabilitation service (RSM)	☐
Hyperbaric chamber (HBC)	☐
Community healthcare service (CHC)	☐
Community-based services for people with mental health needs (MHC)	☐
Community-based services for people with a learning disability (LDC)	☐
Community-based services for people who misuse substances (SMC)	☐
Urgent care services (UCS)	☐
Doctors consultation service (DCS)	☐
Doctors treatment service (DTS)	☐
Mobile doctor service (MBS)	☐
Dental service (DEN)	☐
Diagnostic and or screening service (DSS)	☐
Care home service without nursing (CHS)	☒
Care home service with nursing (CHN)	☐
Specialist college service (SPC)	☐
Domiciliary care service (DCC)	☐
Supported living service (SLS)	☐
Shared Lives (SHL)	☐
Extra Care housing services (EXC)	☐
Ambulance service (AMB)	☐
Remote clinical advice service (RCA)	☐
Blood and Transplant service (BTS)	☐

Regulated activity(ies) carried on at this location	
Personal care	☐
Registered Manager(s) for this regulated activity:	
Accommodation for persons who require nursing or personal care	☒
Registered Manager(s) for this regulated activity: Fiona Nicole Langton	
Accommodation for persons who require treatment for substance abuse	☐
Registered Manager(s) for this regulated activity:	
Accommodation and nursing or personal care in the further education sector	☐
Registered Manager(s) for this regulated activity:	
Treatment of disease, disorder or injury	☐
Registered Manager(s) for this regulated activity:	
Assessment or medical treatment for persons detained under the Mental Health Act	☐
Registered Manager(s) for this regulated activity:	
Surgical procedures	☐
Registered Manager(s) for this regulated activity:	
Diagnostic and screening procedures	☐
Registered Manager(s) for this regulated activity:	
Management of supply of blood and blood derived products etc	☐
Registered Manager(s) for this regulated activity:	
Transport services, triage and medical advice provided remotely	☐
Registered Manager(s) for this regulated activity:	
Maternity and midwifery services	☐
Registered Manager(s) for this regulated activity:	
Termination of pregnancies	☐
Registered Manager(s) for this regulated activity:	
Services in slimming clinics	☐
Registered Manager(s) for this regulated activity:	
Nursing care	☐
Registered Manager(s) for this regulated activity:	
Family planning service	☐
Registered Manager(s) for this regulated activity:	

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Part 4

Registered manager details

Including address for service of notices and other documents

Please first read the guidance document *Statement of purpose: Guidance for providers*

The information below is for manager number:	**1**	of a total of:	1	Managers working for the provider shown in part 1

1. Manager's full name	**Fiona Nicole Langton**

2. Manager's contact details	
Business address	The Laurels, 8, Priory Grove
Town/city	Salford
County	Greater Manchester
Post code	M7 2HT
Business telephone	0161 526 9777
Manager's email address[1]	
fiona@salfordcareandsupport.com	

[1] Where the manager has agreed to service of notices and other documents by email they will be sent to this email address. This includes draft and final inspection reports on all locations where they manage regulated activities.

Where the manager does not agree to service of notices and other documents by email they will be sent by post to the provider postal business address shown in Part 1 of the statement of purpose. This includes draft and final inspection reports on all locations.

Please note: CQC can deem notices sent to manager(s) at the relevant email or postal address for service in this statement of purpose as having been served, as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents to registered managers.

3. Locations managed by the registered manager at 1 above (Please see part 3 of this statement of purpose for full details of the location(s))	
Name(s) of location(s) (list)	Percentage of time spent at this location
The Laurels	100%

4. Regulated activity(ies) managed by this manager		
Personal care	☐	
Accommodation for persons who require nursing or personal care	☒	
Accommodation for persons who require treatment for substance abuse	☐	
Accommodation and nursing or personal care in the further education sector	☐	
Treatment of disease, disorder or injury	☐	
Assessment or medical treatment for persons detained under the Mental Health Act	☐	
Surgical procedures	☐	
Diagnostic and screening procedures	☐	
Management of supply of blood and blood derived products etc	☐	
Transport services, triage and medical advice provided remotely	☐	
Maternity and midwifery services	☐	
Termination of pregnancies	☐	
Services in slimming clinics	☐	
Nursing care	☐	
Family planning service	☐	

5. Locations, regulated activities and job shares
Where this manager does not manage all of the regulated activities ticked / checked at 4 above at all of the locations listed at 3 above, please describe which regulated activities they manage at which locations below. Please also describe below any job share arrangements that include or affect this manager.
N/A