

Guidance for Provision of Community Equipment in Care Homes across Essex

	CONTENTS	PAGE
1	Purpose of this document	2
2	Background	2-3
3	Overview	4
4	Assessment	4-5
5	Working in Partnership	5
6	Principles of Equipment in Care Homes	6-7
7	Care Quality Commission Regulation 15	7-8
8	Responsibilities of equipment provision in care homes	9-14
9	Conditions of equipment loaned to a care home by the Community Equipment Service and/or the Community Wheelchair Services	15-17
10	Replacement of equipment by Care Homes	17
11	Specialist (Bespoke) Equipment	17
12	Plus Size Equipment	18
13	Case Study Examples from RCOT Care Homes and Equipment <i>Guiding Principles of assessment and provision</i> (2019)	19
	 <u>Appendix 1</u>	
	Definition of wheelchair provision	20
	 <u>Appendix 2</u>	
	Equipment provision quick reference guide	21-26

1.0 Purpose of this document

1.1 The purpose of this document is to:

- Offer clarity in the relationship between Community Equipment Services (CES), Wheelchair services and registered care homes across the county of Essex
- Be used as best practice guidance for local protocols and contracts
- Enable lead commissioners of Community Equipment Services and wheelchair services to identify their obligations in relation to care homes for adults and older people (i.e. this document excludes equipment for children and 18 or 19 years old in full time education)
- Help care home owners understand their equipment obligations to residents and clarify who is responsible for funding the equipment
- Clarify the assessment process, in particular distinguishing between assessment for equipment and assessment for funded nursing care and NHS Continuing Health Care.

1.2 An equipment matrix has been developed which takes into account local variations (see section 8 and appendix 2)

2.0 Background

2.1 This document has been developed in connection with the Strategic Review Board (SRB) and Commissioning Review Board (CRB) and in accordance with the Health and Social Care Act 2008 (regulated Activities) Regulations 2014 (part 3) and the Care Quality Commission (Registration) Regulations 2009 (part 4), Department of Health Guidance: *Community Equipment and Care Homes* (2004); Care Homes Regulations 2001; Health & Safety at Work Act 1974; Management of Health & Safety at Work Regulations 1992, Provision and Use of Work Equipment Regulations (PUWER) 1998, the Eastern Regional Guidance for Provision of Community Equipment in Care Homes (updated 2015) and the Royal College of Occupational Therapists 'Care Homes and Equipment - *Guiding Principles for Assessment and Provision*' (2019).

2.2 The SRB and CRB represents Partners of the Integrated Community Equipment Service, Section 75 Agreement with Essex County Council. This document has been developed with the oversight of the Partners:

- Essex County Council (ECC - Host)
- East Suffolk North Essex NHS Foundation Trust (ESNEFT) (and hosts ACE)
- Mid Essex CCG (ME CCG)
- Mid Essex Hospital Trust (MEHT)

- Thurrock Council
- Essex Partnership University NHS Foundation Trust - EPUT (commissioned on behalf of Castle Point and Rochford CCG)
- Thurrock CCG
- Brentwood & Basildon CCG
- West Essex CCG is not part of the Section 75 partnership agreement and a separate pathway for provision of NHS funded community equipment exists in West Essex, however the guidance in this document applies in West Essex unless otherwise stated

The Community Equipment Service is commissioned by ECC from Essex Cares Ltd (Essex Equipment Service). In addition, the Partners have commissioning responsibility for:

- Provide
- Anglian Community Enterprise (ACE)

- 2.3 Community Equipment Services: These services are contracted by Partner Organisations to provide community equipment on loan to adults and children following assessment by health and/or social care practitioners within a Section 75 Agreement. Equipment is provided to assist people to perform essential activities of daily living and to maintain their health, independence and wellbeing in the community. Whilst the Community Equipment Service Provider may change in the future, the underlying principles of the guidance will stand.
- 2.4 The aim of this document is to promote understanding between managers/owners of care homes, health and social care commissioners and Community Equipment Services commissioned by health and social care. It forms the basis of local policies, agreements and contracts.
- 2.5 Staff with nursing and care management responsibilities play an important part in identifying equipment needs when a person commences living in a care home and when their care needs change. People living in care homes have the same rights to services, including the provision of some equipment, as those living in their own homes. Care homes may provide a range of care including intermediate care, palliative care, respite care and continuing health care.
- 2.6 It is expected that care homes will provide a range of equipment to meet a variety of care needs, including variations in height, weight and size. They should relate to the care for which the home is registered and fulfil their health and safety obligations to their own care staff. This responsibility is detailed in Section 8 and Appendix 2.

3.0 Overview

- 3.1 Equipment provision should be focused on the residents' needs and should be provided by the care home if it is the type of equipment required by its residents as part of its statement of purpose and registration. Very specialised or particular needs, which sits outside of the care home's stated purpose, should be assessed and met with specific equipment from the most appropriate service provider (see section 8 and appendix 2 for further clarification of provider responsibilities).
- 3.2 Equipment should be based on the assessed needs of the resident(s). There is no 'standard' resident or 'one size fits all' response.
- 3.3 The equipment provided must be issued as part of a risk management process and staff competently trained.
- 3.4 Community Equipment Services can assist in providing equipment on loan for use by an individual resident when the need falls outside of the home's general provision. Loaned equipment should be properly maintained, returned promptly and is provided for a designated, individual resident as part of a care plan. It must **not** be used by any other resident (see section 8 and appendix 2 for further clarification of provider responsibilities).
- 3.5 The term 'equipment' in the context of this document does not include domestic furniture e.g. a range of beds and chairs as these will be provided by the care home.

4.0 Assessment

4.1 General Points:

The assessment, care plan and review process (by care homes and commissioners/clinical practitioners) are important for successfully meeting equipment needs. The resident's requirement for equipment to meet their daily care needs should have been identified prior to the user moving into the care home. Deterioration of the resident's condition and increased needs should also be anticipated. Many disputes about equipment provision can be avoided by good practice in assessment. Care should be given to early planning for hospital admissions and discharges.

- 4.2 Equipment will only be supplied following an assessment by Health or Social Care staff in accordance with each service's eligibility criteria.

4.3 Moving & Handling Assessments:

Care home staff will need to complete a moving and handling risk assessment as soon as a resident moves into the home. This must be reviewed each time there is any change in health or functional ability. Key members of care home staff will need to be competent and confident to recommend which moving and handling equipment is appropriate for the range of needs within the home. The range of standard equipment provided by the care home should include equipment such as slide sheets, non-powered transfer aids (e.g. rotundas, returns and patient turners) as well as hoists and slings, in a range of styles and sizes. Referrals for additional professional expertise from moving and handling advisors, or Occupational Therapists, may be required when none of the equipment in the care home meets a resident's needs and alternative or bespoke solutions need to be considered.

5.0 Working in partnership

5.1 There are areas where care homes and Community Equipment Services can productively collaborate:

Community Equipment Services should support care homes wherever possible, subject to local agreements, with the following:

- advice on equipment loaned by the local equipment service
- demonstration for equipment use and management
- equipment loans for individual named residents
- maintenance of equipment loaned for use by individual named residents

Care homes should support Community Equipment Services by:

- checking ownership and arrangements for equipment when residents are first admitted to the home
- identifying when loan equipment is no longer required and arranging for its prompt collection
- ensuring that equipment prescribed for an identified individual resident is not used by other residents
- informing clinical practitioners of changes in residents' circumstances e.g. change in pressure care risk, change of functional ability, change of address, or death of the resident.
- informing the Community Equipment Service promptly in the event of loan equipment breakdown

6.0 Principles of Equipment in Care Homes

- 6.1 The purpose of providing equipment is to increase or maintain functional independence and well-being of residents and carers as part of a risk management process. It is important to find practical ways of supporting residents, facilitating hospital discharges and avoiding unnecessary admissions, using equipment.
- 6.2 Consideration must be given to the most cost-effective method of meeting the assessed need. A careful balance must be achieved between the independence and dignity of the resident and the health, safety and welfare of the resident and care home staff.
- 6.3 Residents in care homes with nursing will have their equipment provided and funded by the care home unless the item is bespoke or very specific to that resident and that resident is not CHC funded (see point 6.4 for bespoke definition). Equipment will include pressure care overlays and replacement mattresses to maintain tissue viability and other relevant needs including specialist bathing, postural support and postural management systems, specialist seating (which is not bespoke) and nursing equipment.
- 6.4 Residents in care homes with nursing funded by continuing healthcare may have bespoke equipment needs. Assessment and provision/funding of these items may also be undertaken by the local NHS CHC Team. This assessment will need to occur before admission to the care home and further assessment may also be required if clinical needs change. There may also be times when an assessment is required for an existing resident.

Definition of bespoke or highly specialised equipment. 'Equipment uniquely modified/tailored to accommodate highly specialist needs' for example, an item of equipment specifically made to measure or tailored to meet the needs of an individual resident and is not suitable for use by other care home residents.

- 6.5 Care homes should not accept people whose assessed needs they are unable to meet. A detailed assessment of need should have been completed at the outset. However, where the absence of a piece of equipment in a care home is **temporary** and the provision of equipment would facilitate a discharge from an acute hospital bed, the care home can make arrangements for a short term, six-week loan, of equipment from either the Community Equipment Service (by contacting the most appropriate partner i.e. Social Care or NHS) or they may prefer to approach an independent commercial equipment provider. At the end of the 6-week temporary period the loan equipment must be returned to the local Community Equipment Service.

- 6.6 Specific items of equipment may also be provided by the Community Equipment Service on a short-term loan basis to assist with respite placements. Care homes should not accept people for respite care, whose assessed needs they are unable to meet, unless able to identify and provide item(s) needed to meet the need. A detailed assessment of need must be completed at the outset

The Community Equipment Service Provider will be determined by the type of respite: -

- Social Care funded placement – Social Care provision
- Interim respite placement as part of planned hospital discharge for extended period of rehabilitation – NHS provision
- Reablement – Social Care provision
- Self-funded respite – Care Home / resident provision

- 6.7 If a resident has their own tenancy within a supported living environment, then this is considered as living within the community and therefore equipment provision will be funded via the Community Equipment Service following an assessment by an appropriate professional.

- 6.8 General equipment in extra care schemes which is available for many different residents to use must be funded by the Extra Care Housing Provider, or in consultation with the relevant Local Authority.

7.0 Care Quality Commission (CQC) Guidance for Providers on Meeting the Regulations (March 2015) - Regulation 15: Premises and Equipment

- 7.1 The CQC has issued guidance for providers (which in the context of this document means the Care Home) on meeting two groups of regulations:

- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3)
- Care Quality Commission (Registration) Regulations 2009 (Part 4)

- 7.2 Guidance for providers applies from 1 April 2015 and will replace in its entirety CQC's Guidance about Compliance: Essential standards of quality and safety and the 28 outcomes.

- 7.3 Section 2 of the guidance: Fundamental Standards includes a section on Regulation 15: Premises and Equipment (page 55). The intention of this regulation is to make sure that the premises where care and treatment are delivered are clean, suitable for the intended purpose, maintained and where required, appropriately located, and that the equipment that is used to deliver

care and treatment is clean, suitable for the intended purpose, maintained, stored securely and used properly. Regulation 15 states that all premises and equipment used by the service provider must be:

- a) Clean
- b) Secure
- c) Suitable for the purpose for which they are being used
- d) Properly used
- e) Properly maintained
- f) Appropriately located for the purpose for which they are being used

7.4 The registered person must, in relation to such premises and equipment, maintain standards of hygiene appropriate for the purposes for which they are being used.

7.5 Providers retain legal responsibility under these regulations when they delegate responsibility through contracts or legal agreements to a third party, independent suppliers, professionals, supply chains or contractors. They must therefore make sure that they meet the regulation, as responsibility for any shortfall rests with the provider.

7.6 Where the person using the service owns the equipment needed to deliver their care and treatment, or the provider does not provide it, the provider should make every effort to make sure that it is clean, safe and suitable for use.

7.7 CQC will refuse registration if providers cannot satisfy that they can and will continue to comply with this regulation.

Reference: Care Quality Commission: Guidance for providers on meeting the regulations (March 2015) <http://www.cqc.org.uk>

8.0 Responsibilities of equipment provision in care homes

8.1 The purpose of this section is to clarify the responsibilities of provision of equipment in care homes.

- Where 'care homes' are detailed as providing the equipment this includes both Residential and Nursing Care homes unless otherwise specified.
- Where Social Care is detailed as providing the equipment this includes the following routes of provision;
 - Adult Social Care
 - Reablement
- Where the NHS is detailed as providing the equipment this includes the following routes of provision;
 - Continuing healthcare (CHC/CCG's)
 - GP prescription
 - Community therapists
 - Hospital discharges

8.2 Residential & Nursing Care Homes are required to have adequate stocks of standard equipment (detailed below) which would be widely available to the residents in their homes. Standard equipment may be the type that will:

- Be used by more than one person
- Be frequently/regularly used by the end user
- Support care given by informal or funded carers
- Support general purpose or nursing care
- Assist activities of daily living and enable independence
- Be issued without the requirement for an advanced assessment
- Be for short-term or long-term need; and
- Support a safe environment for users

The range of standard equipment should meet variations in height, weight, size, and support needs.

8.3 Bathing equipment provided by care homes

- Standard bath seats
- Standard bath boards

- Bath step
- Powered bath lift
- Swivel bather
- Standard shower chairs (wheeled and static)
- Standard shower stools

8.4 Bathing equipment provided by Social Care or NHS

- Bespoke shower chairs

8.5 Toileting equipment to be provided by care homes

- Bed pans and urine bottles
- Commodes (static, wheeled and extra wide)
- Raised toilet seats
- Toilet frames
- Continence pads*
- Special sheets*

(*these may be provided by the NHS Continence service subject to assessment and eligibility criteria – it is the homes responsibility to make a referral to this service if required)

8.6 Seating to be provided by care homes

- Range of standard chairs in a variation of sizes and heights (e.g. high back armchairs, standard armchairs and riser recliners)
- Chair raisers

8.7 Seating to be provided by Social Care or NHS

- Bespoke seating which is made to measure or specifically tailored to meet the needs of one resident (e.g. hydro flex, hydro tilt, symmetrikit, and customised seating)
- Accessories for bespoke seating

(*provision of seating by Social Care/NHS is subject to assessment and eligibility criteria and provision is for the named, assessed resident only and must not be utilised by any other resident)

8.8 Pressure relieving equipment provided by care homes

- low risk / comfort foam overlays and cushions that are not part of a treatment plan

8.9 Pressure relieving equipment provided by nursing care homes and by NHS for residential homes

- Visco elastic/memory foam mattress/cushions – for medium to high risk
- Alternating dynamic (and pump) overlays/mattresses/cushions – for medium to high risk

8.10 Beds and bed accessories provided by care homes

- Bed raisers and bed blocks
- Back rests
- Bed stick/handle
- Blanket cradle
- Powered mattress variator
- Overbed trolley/table
- Lifting pole
- Bed rails*
- Powered variable height profiling bed (standard and plus size)

(*Community Equipment Service will only provide bed rails when used in-conjunction with a bed they have provided. Powered variable height profiling beds are only provided for individual use in exceptional circumstances such as facilitation of an emergency discharge or for a short-term respite placement – as defined in 6.6.)

8.11 Bed equipment provided by NHS

- Bespoke beds for people (CHC funded) with complex treatment and care needs

8.12 Wheelchairs provided by care homes

- Manual wheelchairs for transit around the home and outdoors, including accessing community*
- Basic wheelchair cushions
- Pressure relieving cushions for wheelchairs – for low to moderate risk

(*these can be for communal use, but care homes must ensure maintenance and repairs are carried out regularly and they are compliant with MHRA and manufacturers guidelines)

8.13 Wheelchairs provided by community wheelchair services (see appendix 1 for eligibility criteria of community wheelchair services)

- Manual or powered wheelchairs for independent use by the resident to mobilise/socialise/attend to their daily needs
- Bespoke wheelchairs/ accessories for clients who have a daily need for substantial mobility

8.14 Mobility equipment provided by NHS or Social Care

All mobility equipment needs to be assessed for by a therapist. This would require the home to make a referral to NHS community therapy services via the resident's GP. Social Care will only provide mobility equipment where the resident is engaged with Reablement therapists and provision forms part of their reablement care plan.

8.15 Moving and handling equipment provided by care homes

- Mobile hoist
- Ceiling track hoist
- Standard slings
- Plus size hoist*
- Standing hoist
- Patient transfer aid (non-powered) e.g. rota stand, return, rotunda, arjo stedy, molift, cricket etc
- Transfer board
- Handling belt
- Slide sheets (including in situ slide sheet system such as Wendylett)

(*this can be provided by Social Care where only one resident requires a plus size hoist. If more than one resident requires this the care home will need to provide)

8.16 Moving and handling equipment provided by Social Care

- Plus size slings
- In chair slings
- Bespoke slings

8.17 Sensory equipment provided by care homes

- Range of standard equipment such as flashing fire alarms/flashing door bells etc.

For any more specialist sensory equipment care home will need to make a referral to adult social care sensory impairment team for an assessment of the individual need

8.18 Telecare equipment provided by care homes

- Range of telecare items – call systems, monitors, falls detectors, sensor mats, PIR's etc.

8.19 Medication administration equipment and catheterisation provided by nursing homes

- For administration of medication by injection*
- Standard syringe drivers*
- Catheterisation bag stand and packs etc*

(*residential homes would be supported by District nurses who will provide the above equipment)

8.20 Medication administration equipment provided by NHS

- Specialist syringe drivers (including those needed for epidurals)
- Prescription of catheters and bags

8.21 Nursing equipment provided by care homes

- Syringes and needles*
- Range of feeding equipment (e.g. specialist plate or adapted cutlery)

(*residential homes would be supported by District Nurses who will provide this equipment)

8.22 Nursing equipment provided by NHS

- Vacutaine bottles for blood tests
- Equipment for procedures related to aseptic and clean dressings
- PEG feeding equipment and consumables
- Equipment for intravenous feeding and transfusion

8.23 Respiratory equipment to be provided by nursing homes

- Equipment for maintenance of respiration e.g. suction units/machines*
- Simple nebulisers*
- Pulse oximeters*

(*NHS will provide any of the above equipment to residential homes)

Please note: All care homes are responsible for provision of consumables needed to ensure safe use of medical devices and comply to MHRA guidance on use of medical devices

8.24 Respiratory equipment provided by NHS*

- Oxygen cylinders
- Oxygen administration consumables

(*NHS will provide any of the above equipment to residential homes)

8.25 Plus-sized (refer to 12.0 for definition of plus-size term) versions of standard equipment

Care homes will be expected to have a range of standard plus-sized equipment (e.g. bathing equipment, beds, seating and toileting equipment) available within the home. Social Care and/or the NHS will only provide in exceptional circumstances and use would need to be for an individual resident only.

9.0 Conditions of equipment Loaned to a Care home by the Community Equipment Service and/or Community Wheelchair Services

- 9.1 Where equipment is loaned by Community Equipment Service it will be for the **exclusive** use of the person for whom it was prescribed, following assessment by a health or social care professional. The Community Equipment Service would not normally be responsible for the general provision of equipment unless there is an emergency and a temporary item was supplied for a short period. For example, to facilitate an urgent hospital discharge or where there is a safeguarding concern. If the equipment provided for a specific resident is subsequently used with another resident and an incident or accident occurs, the care home will be held liable. (Refer to points 9.6 and 9.11).
- 9.2 Where an item has been provided by Community Equipment Service this will include instruction on its use and maintenance. Care staff must use the equipment within the manufacturer's guidance and maintain the item in good condition.
- 9.3 Care staff must be trained in the use of the equipment. This is a mandatory requirement under the Health & Safety at Work Act (1974), the Provision and Use of Work Equipment Regulations (PUWER) (1998) and MDA DB 2006 (05) and is the Care Homes responsibility to organise and fund.
- 9.4 Day-to-day operational cleaning/disinfection of loan equipment is the responsibility of the care home which must follow manufacturers' instructions and instructions provided by the contracted suppliers, sometimes detailed on the equipment provided, for example mattresses and cushions. If not available contact the Community Equipment Service for assistance.
- 9.5 The care home will need to meet the cost of all repairs arising from negligence, damage or inappropriate use of loan equipment (this includes defacing the equipment or permanent marking with a resident's name), or the full cost of replacement if damage is beyond repair. Care homes will be charged the full replacement cost for all equipment not returned/or deemed 'lost' (See also 9.11).
- 9.6 All repair and maintenance of the Community Equipment Service's loaned equipment will be carried out by the Community Equipment Service, or authorised sub-contractor where appropriate. The Community Equipment Service will be responsible for maintaining a list of all loan equipment requiring on-going and regular maintenance.

- 9.7 Equipment provided on loan through the Community Equipment Service will need to be made accessible for appropriate checks, repairs and maintenance when requested by the Community Equipment Service.
- 9.8 The care home is responsible for arranging for maintenance and servicing of its own equipment.
- 9.9 Care home staff must be responsible for notifying the Community Equipment Service, funding provider of the equipment (e.g. Social Care, NHS or wheelchair services) and managed contract providers such as rental pressure relieving equipment, in the following circumstances:
- resident no longer requires a loaned item of equipment
 - resident has died or moved to another location (the care home must inform the Community Equipment Service of the resident's new address)
 - resident's needs have changed, and the loaned item of equipment may need to be replaced with an alternative item
 - equipment breakdown or repair
- 9.10 A charge will be made to care homes who fail to arrange for the collection of Community Equipment Service rental equipment (usually beds and specialist mattresses), when they are no longer required by the resident(s) for whom they were prescribed, e.g. in the event of a resident's death. This charge will be equal to the rental costs incurred by the Community Equipment Service budget from the time the equipment should have been returned by the care home, to the date the item(s) were collected and removed from hire by the Community Equipment Service. The Community Equipment Service may also include minimal administration costs. Not all equipment services rent equipment and care homes should check their local arrangements.
- 9.11 Equipment that is no longer needed by the resident for whom it was prescribed must **never** be transferred for use by another resident. Care homes will be closely monitored in this regard.
- 9.12 In care homes with nursing or non-nursing residents who are transferred from non-nursing to nursing placements, should have their equipment needs provided by the registered nursing establishment with the exception of bespoke equipment and equipment as detailed in section 8 and appendix 2. Any standard Community Equipment Service equipment they have at the point of transfer must be returned to Community Equipment Service unless there is specialist, non-standard items of equipment prescribed for that individual resident's specific and specialist needs, and only after agreement with the relevant Community Equipment Service Provider.
- 9.13 The Community Equipment Service should produce reports for monitoring the loans to all care homes and reviewed at least annually. The review should

ensure that the respective responsibilities for the provision of equipment by care homes and Community Equipment Service is appropriate and this guidance is updated accordingly.

10 Replacement of equipment by Care Homes

10.1 Care Homes should consider the following recommendations when new equipment purchases need to be made. Consideration must be given to replacing with a variety of models to meet different needs.

- Electric or manual profiling beds can meet resident and care worker needs
- Chairs and commodes should be offered in a variety of heights and widths
- Chairs with wooden ended arms, are easier for pushing up from sitting to standing and are more durable than upholstered arms
- Riser recliner chairs can meet resident and care worker needs for those with limited ability to sit to stand. Completion of risk assessment recommended in accordance with MHRA Guidelines.
- Commodes with removable arms allow for sideways transfers, they may be wheeled or static, and weight limits should be considered
- Height adjustable commodes allow resident needs to be met
- Consider integral weighing scales when replacing hoists

11 Specialist bespoke equipment – previously defined in point 6.4 (page 6)

11.1 It is expected that a residential care home will have a variety of equipment to meet most needs, however there could be a very small number of residents who may need a piece of equipment to be made or purchased to meet their specific needs. In these circumstances it would be possible to have an assessment by a trained prescriber to ensure that equipment was suitable.

This equipment may be provided by the Community Equipment Service for the resident's assessed bespoke needs, and if provided must not be used for any other resident and returned to the Community Equipment Service when no longer needed. There is no time limit on how long this special bespoke equipment can be used by the resident to meet their needs, but there must be clear accountability to review and assess the resident's needs if they change. The care home must be responsible for keeping the equipment clean and in good working order. Any unreasonable damage, wear and tear may incur cost.

12 Plus size Equipment

- 12.1 A plus size individual will be defined as anyone regardless of age, who has limitations in health and social care due to their weight, physical size and shape.

Typically, a plus size individual would have a Body Mass Index (BMI) > 40 kg/m² and or are 40kg above ideal weight for height (NICE 2004).

They exceed the working load limit (WLL) and dimensions of the support surface of standard equipment such as a hoist, bed, chair, wheelchair, commode, mattress.

Individuals may present with different body shapes with a hip width of more than 400mm for short stature.

It is important to consider the weight of an individual resident in relation to the upper weight limits on equipment. Manufacturer's specifications vary and safe working loads should be checked against manufacturer's specifications. It is important that Care Homes establish their own processes for accessing basic plus size equipment to meet the needs of the individual resident and care worker needs (for example plus size bed, commode, seating, wheelchairs)

13. Case Studies from RCOT Care Homes and Equipment - *Guiding Principles for Assessment and Provision*' (2019)

13.1 Maintenance of equipment – examples from practice

Hoists and Slings:

A new resident brought her own sling with her to a care home. This was not inspected when she was admitted. The male resident in the neighbouring room was regularly hoisted. When his sling was taken away for laundering a member of staff borrowed the sling of the new resident, not realising that it was the wrong size and not thinking to check its safety, creating significant potential risk of harm.

Desired outcome: The care home has a range of slings; care staff are trained, and procedures are in place to ensure that the most appropriate sling is selected to meet the needs of the resident.

Wheelchairs:

A resident was unable to walk from her room to the communal sitting room. She was transferred to a very large attendant-controlled wheelchair, offering her little trunk support. The wheelchair had only one footplate and no cushion.

Desired outcome: The resident is transferred safely and comfortably, sitting in an optimum position.

Specialist Seating:

A resident wished to sit in a chair as opposed to remaining in bed. The care home did not have a static chair to support the resident safely in a good position. She therefore remained in bed, so limiting her occupational engagement.

Desired outcome: The provision of a specialist chair allows the resident to sit in the communal area, enjoy companionship, be part of the life of the home and to feed herself. This benefits her mood, health and wellbeing; her ability to communicate and socialise; and overall independence.

Appendix 1 – Definition of wheelchair provision

‘Manual wheelchairs for transit around the home and outdoors (for communal use)’

A transit chair is defined as a standard type wheelchair being used to move the resident from room to room or for them to access the community in. This would not be provided by wheelchair services. However, if the person was provided a transit chair prior to moving into residential care they can continue to have the chair on loan. It will continue to be maintained by wheelchair services but at the time of it becoming either unsafe for use or unsuitable for the individual it will not be replaced. Unless they have deteriorated, and they fall into one of the other criteria for provision.

‘Manual or powered Wheelchair for independent use by client to mobilise/socialise/ attend to their daily needs’

Wheelchair services will provide self-propelling wheelchairs where it enables the individual to mobilise around the home independently. Powered wheelchairs will also be provided to enable independence but only if safe and suitable for the individual.

Note – if the individual is using a self-propelling wheelchair (which has been provided by wheelchair services) but deteriorates and then requires an attendant propelled as they are unable to mobilise in the wheelchair independently the wheelchair service will not provide this. However, if a powered wheelchair is suitable for them and enables them to mobilise independently the wheelchair services will provide this.

‘Bespoke wheelchairs/ accessories for clients who have a daily need for substantial mobility’

If an individual’s posture makes it unsafe for them to be moved around the home in a standard transit wheelchair then an assessment may be requested from the Wheelchair Service. If the Wheelchair Therapist decides an individual needs a wheelchair which requires specialist adjustment and is made to measure for one individual, then this will be provided by wheelchair services.

Note – if someone has no suitable seating and is always in bed but they wish to spend time out of bed, wheelchair services will only assess if suitable seating has been explored and it is evident that the individual has appropriate sitting tolerance and strength to use a wheelchair. Wheelchairs will not be provided as a seating option.

Note – if someone has no suitable seating and is in bed at all times but they wish to spend time out of bed, wheelchair services will only assess if suitable alternative seating has been explored and it is evident that the individual’s needs can only be met by provision of a wheelchair. Wheelchairs will not be provided as a static seating option where no or very minimal mobility requirement exists.

Appendix 2 – Equipment provision quick reference guide

This details who is responsible for the provision of the equipment in care homes. Where 'care homes' are detailed as providing the equipment this includes both Residential and Nursing Care homes unless otherwise specified. It is a 'quick reference' guide only and the body of the guidance should be used for full clarification of provision. Users of this document are reminded that it is a guide and as such should remember that there may be exceptions to the criteria below but decisions on these exceptions would be made following a thorough individual, case by case assessment.

Please note:

- items marked with an * may have alternative provision routes. Please consult the main body of this document for clarification on this
- plus-sized equipment is becoming more mainstream, so care homes will be expected to have a range of standard items available within the home. Social Care and/or the NHS will only provide in exceptional circumstances (further information can be found in 8.15, 8.16, 8.25)

Bathing

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
Standard bath seats	✓	X	X
Standard bath boards	✓	X	X
Bath step	✓	X	X
Powered bath lift	✓	X	X
Swivel bather	✓	X	X
Standard shower chairs (wheeled and static)	✓	X	X
Standard shower stools	✓	X	X
Bespoke shower chairs	X	✓	✓

Toileting

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
Bed pans and urine bottles	✓	X	X
Commodes (static, wheeled and extra wide)	✓	X	X
Raised toilet seats	✓	X	X

Toilet frames	✓	X	X
Continence pads*	✓	X	X
Special sheets*	✓	X	X

Seating

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
Range of standard chairs (high back armchairs, standard armchairs and riser recliners) in a variety of heights and sizes	✓	X	X
Chair raisers	✓	X	X
Bespoke seating which is made to measure or specifically tailored to meet the needs of one resident (e.g. hydro flex, hydro tilt, symmetrikit and customised seating)	X	✓	✓
Accessories for bespoke seating	X	✓	✓

Pressure relieving equipment

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
low risk / comfort foam overlays and cushions that are not part of a treatment plan	✓	X	X
Visco elastic/memory foam mattress/cushions – for medium to high risk	✓ nursing only	X	✓ for residential only
Alternating dynamic (and pump) overlays/mattresses/cushions – for medium to high risk	✓ nursing only	X	✓ for residential only

Beds and accessories

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
Bed raisers and bed blocks	✓	X	X
Back rests	✓	X	X
Bed stick/handle	✓	X	X
Blanket cradle	✓	X	X
Powered mattress variator	✓	X	X
Overbed trolley/table	✓	X	X
Lifting pole	✓	X	X
Bed rails*	✓	X	X
Powered variable height profiling bed (standard and plus size)	✓	X	X
Bespoke beds for people (CHC funded) with complex treatment and care needs	X	X	✓

Wheelchairs

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
Manual wheelchairs for transit around the home and outdoors, including accessing community*	✓	X	X
Basic wheelchair cushions	✓	X	X
Pressure relieving cushions for wheelchairs – for low to moderate risk	✓	X	X
Manual or powered wheelchairs for independent use by the resident to mobilise/socialise/attend to their daily needs	X	X	✓

Bespoke wheelchairs/ accessories for clients who have a daily need for substantial mobility	X	X	✓
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Moving and handling equipment

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
Mobile hoist	✓	X	X
Ceiling track hoist	✓	X	X
Standard slings	✓	X	X
Plus size hoist*	✓	X	X
Standing hoist	✓	X	X
Patient transfer aid (non- powered) e.g. rota stand, re-turn, rotunda, arjo steady etc	✓	X	X
Transfer board	✓	X	X
Handling belt	✓	X	X
Slide sheets (including in situ slide sheet system such as Wendylett)	✓	X	X
Plus size slings	X	✓	X
In chair slings	X	✓	X
Bespoke slings	X	✓	X

Sensory, telecare and nursing equipment

Equipment item	Provided by care home	Provided by Social Care	Provided by NHS
Range of standard equipment such as flashing fire alarms/flashing door bells etc.	✓	X	X
Range of standard equipment such as flashing fire alarms/flashing door bells etc	✓	X	X

Range of feeding equipment (e.g. specialist plate or adapted cutlery)	✓	X	X
Vacutaine bottles for blood tests	X	X	✓
Equipment for procedures related to aseptic and clean dressings	X	X	✓
PEG feeding equipment and consumables	X	X	✓
Equipment for intravenous feeding and transfusion	X	X	✓

Medication administration and respiratory equipment

Equipment item	Provided by <u>nursing</u> care home	Provided by Social Care	Provided by NHS
For administration of medication by injection	✓	X	X
Standard syringe drivers	✓	X	X
Catheterisation bag stand and packs etc	✓	X	X
Specialist syringe drivers (including those needed for epidurals)	X	X	✓
Prescription of catheters and bags	X	X	✓
Equipment for maintenance of respiration e.g. suction units*	✓	X	X

Simple nebulisers	✓	X	X
Pulse oximeters	✓	X	X
Oxygen cylinders	X	X	✓
Oxygen administration consumables	X	X	✓