Bronté



Lower Lane, Ebford, Exeter. Devon. EX3 0QT www.brontecarehomes.co.uk

TELEPHONE NUMBERS:-

 Management:
 (01392)
 875670
 Fax:
 (01392)
 875173

 Mobile:
 07811
 279066
 E-Mail:
 enquiries@brontecarehomes.co.uk

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Bronté

Residential Care Home

Bronté Resident's Guide

&

Statement of Purpose

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"It's your Home and our Care"

Bronté is a family owned and run Residential Care Home for older people.

At Bronte Residential Care Home we aim to provide a homely and personalized environment whereby residents will be assisted to maintain their skills and to function as independently as possible. Our accommodation consists of spacious single bedrooms, many recently refurbished and twenty rooms with en-suite. Our sun lounge provides a further place of privacy or socializing for residents. The expansive windows and roof of the sun lounge have been fitted with reflective material to reduce glare and heat during the summer, while central heating provides winter warmth and comfort.

We actively promote anti-discriminatory, anti-oppressive work practices within the Home. We strongly uphold the ethos of equal opportunity for all, regardless of their ability, cultural needs, gender, sexual orientation, religion and age.

We recognize the rights of older people.

We value, promote and encourage each individual to exercise choice, independence and control over their lives.

We are committed to consumer care; we will ensure that comments, positive or negative, are responded to in an enabling, sympathetic and professional manner.

We are proud of our reputation for care – 90% of our business being by word of mouth- and feel confident that a random telephone call to Social Services or a local Doctors' Surgery would result in a good reference. We are also very proud of our Testimonials File, containing many complimentary letters and cards from families, relatives and friends of residents past and present.

Introduction to Bronte

Residents living at Bronte Residential Care Home describe it as the nearest resemblance to home living. You feel it when you first step inside. There is warmth, a feeling of vitality, also a feeling of companionship. It is part of the dedication to quality we insist upon, from spacious attractive residential bedrooms (all with en-suite WC and washbasin) to cheerful lounges, recreational

garden areas and Koi Carp fishponds. All rooms are on the ground floor level with adequate handrails and wide opening doors.

Our purpose at Bronte Residential Care Home is to provide consistently high standards of care in order that those we care for can live as normally as possible where their individuality, independence and dignity are respected and upheld.

With a trained attentive staff for skilled care, Bronte is more than an alternative; it is an experience in caring for you, and those you love.

All our staff have undertaken extensive Induction training. Our staff work in three shifts, covering both day and night. At each change of shift, incoming staff are updated during a short hand-over session.

"Bronte must be seen to be appreciated, lived in to be loved."

Bronte is a privately owned family business, managed and maintained by the Murphy Family.

Bronte implements all current Fire Regulations with Notices and Fire Extinguishers located throughout the building. Fire Exits are clearly marked, but if in doubt, please ask. We have always taken Fire Training very seriously and this has been favourably commented upon in Inspection Reports. All staff are given Fire Training at regular intervals.

Bronte Residential Care Home is Accredited by Devon County Council and Registered with The Care Quality Commission (CQC).

Services Provided

Dear families and friends, the Murphy Family and all the staff welcome you and your family to our home. We hope you will find the accommodation and services provided, to your satisfaction.

In order to facilitate your orientation of "Bronte Residential Care Home" we have listed some of our Policies and Procedures. At Bronte, the individual, physical, social and emotional needs of our residents are catered for by appropriately trained staffs, who are on duty at all times, providing twenty-four hour care. We are confident that our staff team both individually and collectively have the skills and necessary experience to meet the needs of our residents.

Accommodation:

Bronte comprises of twenty bed rooms:-

- a) Seventeen are private single rooms with en-suite WC and wash hand basin.
- b) One private single room has en-suite bath, WC and wash hand basin
- c) Two private bed-sitting rooms with en-suite WC and wash hand basin.

All rooms are furnished with:-

- Single bed,
- Wardrobe,
- Chest of drawers/ dressing table,
- Armchair(s),
- Dining table and chair,
- Bedside cabinet and lamp.
- Lockable storage facility (Medication etc.).
- A selection of pictures.

All rooms are equipped with electrical, digital T.V. and private telephone line sockets. A nurse call system with an accessible alarm facility is sited both in the room and in each en-suite facility.

Residents are encouraged to furnish the room with their own furniture if they so wish. All personal electrical equipment must be checked before use.

Room assignments and transfers from one room to another will be arranged by the Registered Manager. Every effort will be made to assign residents to rooms best suited to their needs. Residents may bring items of their own furniture for use in their bedroom to supplement or replace the furniture provided. Married couples requiring the same, or different levels of care, are welcome.

If it is deemed by the Management that a resident's stay is inappropriate, the Management reserves the right to give thirty days notification in writing to the responsible person to arrange alternative accommodation. The national minimum standards required by the The Care Quality Commission (CQC) specify that all rooms must have 10 square metres usable floor space.

Private Single Rooms: Excluding en-suite facilities.

Room 1. Area 11.3 square metres Room 2. Area 12.9 square metres Room 3. Area 12.9 square metres Room 4. Area 12.9 square metres Room 5. Area 12.9 square metres Room 6a. Area 10.7 square metres Room 7. Area 11.2 square metres Room 8. Area 12.9 square metres Room 9. Area 12.9 square metres Room 10. Area 12.9 square metres Room 11. Area 12.9 square metres Room 12. Area 12.9 square metres Room 14. Area 10.5square metres Room 15. Area 11.6 square metres Room 16. Area 10.5 square metres Room 17. Area 10.15square metres Room 18. Area 12.7 square metres Room 19. Area 11.2 square metres

Private Bed-sitting Rooms: Excluding en-suite facilities.

Room 6. Area 14.0 square metres Room 12a. Area 14.0 square metres

Fees:

Schedule of rates. (Includes basic care, meals and personal laundry)

PRIVATE SINGLE ROOMS

- a) Room Numbers :- 1, 6A, and 17 Per Week£ 555.00
- b) Room Numbers :- 2, 3, 4, 5, 7, 8, 9, 10, 11, 12 14 16, 18 & 19.
 Per Week £ 590.00

PRIVATE BED-SITTING ROOMS Single Occupancy. Room Number :- 6 &12A Per Week£ 625.00

Part day rates are charged as per day. Four weeks = weekly rate x 4. All fees are paid four weeks in advance.

Note: There is an annual increase in fee which takes place in April. Any increase in the fee will be for example, as a result of inflation, for the provision of extra care and service, or as a result of statutory provision coming into force.

Day Care: (includes basic care and meals).

Morning Session (9.30 am - 2.30 pm)Fee: £50.00 (£40.00 basic care and £10.00 meals) Afternoon Session (2.00 pm - 6.00 pm) Fee: £40.00 (£32.00 basic care and £8.00 meals) Full Day session (10:00 am - 6.00 pm) Fee: £ 80.00 (£64.00 basic care and £16.00 meals)

Other charges:

Papers and magazines- may be ordered from and delivered by Bendalls newsagents in Topsham.

Private telephones- each room is equipped with a telephone socket and may be connected to BT.

Hairdressing- our hairdresser visits weekly on Thursday.

Dentistry- A dentist visits Bronte when requested.

Toiletries- may be purchased locally or from any of the superstores.

Optician- A domiciliary optician visits Bronte twice a year or when requested.

Chiropody- A private chiropodist visits every six weeks or on request. A NHS chiropodist treats our diabetic residents.

Physiotherapy- This is arranged through GP referral.

Occupational therapy- This is arranged through GP referral.

Incontinence Services- Referral to the Incontinence Officer via Community Nursing Service.

Visitors:

Visiting hours at Bronte are unrestricted, although there are times more practical i.e. from 10.00am until 8.30pm daily.

Visitors will find coffee and tea making facility in the serving area off the dining room and are encouraged to use same, with the compliments of the Management. If not available please ask a staff member who will be happy to serve you

Meals:

A varied menu of nutritious meals is offered for residents to choose from and special dietary arrangements can be catered for to the same standard. Residents who are capable of taking meals in the dining room will be encouraged to do so.

Snacks are provided for residents by staff, on request.

Residents meal times are as follows:-

Early Morning drink: 6.45am - served in bedrooms				
Breakfast -	8.15am - served in bedrooms			
Morning drink -	10.30am - served with biscuits in lounges/rooms			
Lunch (main meal)-	12.15pm - served in dining room			
Afternoon tea -	3.15pm - served in lounges/ rooms			
High tea -	5.15pm - served in dining room			
Evening drink -	8.30pm - served with biscuits in lounges/rooms.			

Our kitchen has recently been re-decorated, in accordance with current Environmental Health Standards. Unannounced Inspections by the local Environmental Health Authority are always very complimentary.

Clothing:

Residents should have an ample supply of every day clothing as they are encouraged to dress daily. Each article should be identifiable.

Personal belongings:

The Management of Bronte does not accept responsible for the personal possessions of residents. We suggest that valuables and money be placed with Mr. or Mrs. Murphy who will then issue a receipt and place in the office safe. Each resident may open and maintain a "Residents Fund Account" for personal use.

Smoking:

In the interest of Health & Safety, we actively discourage smoking. Smoking is not permitted within Bronte Residential Care Home on its grounds.

Contract:

Resident will be presented with a statement of terms and conditions on moving into Bronte. After a transitional period of four to six weeks a contract will be issued, as required by the Care Standards Act 2000 regulated by Commission for Quality Care (CQC). This is to protect the rights of both parties.

Individual Care Plans are provided. The Care Plans are drafted by Mr. Tim Murphy B.Ed.(Hons), Cert. Ed., D.M.S., RMA., Cert. CCETSW., The Care Plans are formulated by a thorough needs assessment, the Bronte Social History Questionnaire, and in consultation with relevant care professionals.

Recreation:

By far the best recreation for our residents is a visit from relatives and friends, the occasional outing, visit to the family or to visit an old friend. We look to all of you for this very important support. In addition we arrange a variety of recreational activities: videos, musical sessions, card games, bingo, board games, health & beauty and co-ordination exercises.

Theatre or shopping trips can be arranged. The mobile library visits Bronte fortnightly. A greenhouse is available for the use of residents, garden borders are a real challenge, gardening equipment is available for those who are interested.



The N.E.L.E. Programme

The Necessary Enhancement of Life for the Elderly (N.E.L.E.). Takes place twice weekly in the lounge. It is a seated programme of musical exercise and movement. The activities programme at Bronte aims to provide both mental and physical stimulation for our residents to ensure they remain active and interact with fellow residents.

Other outside activities are encouraged. Our cultivated Rose gardens, with Koi Carp fish ponds, patio areas, flower beds and troughs, summer house and shelter, are all available to our residents.



Koi Carp Pond



Easter bonnet parade at Bronte



Residents and Staff by the sea at Exmouth

Religious Services:

The spiritual life of our residents is actively encouraged and catered for. In our interdenominational atmosphere people of all faiths may find peace and contentment. Priests and Ministers of all faiths visit Bronte.

The local Vicar of the Church of England celebrates Holy Communion in the front lounge on the second Friday of each month. Other services are held in local Churches and Chapels for those wishing to attend.

Doctors:

Residents are encouraged to consult a General Practitioner of their choice. Management will make every effort to facilitate this. Three group practices are located in the nearby towns of Topsham and Woodbury.

Medication:

Medicines are administered in accordance with CQC standards although residents can self-medicate if appropriate. Residents are allowed alcohol in their rooms on the approval of their doctor.

Pets:

Unfortunately, at Bronte we are unable to accommodate your pet.

We can recommend the Cinnamon Trust who specialize in providing a rehoming service for the pets of those coming into care or who are already in care and need their pet re-homing due to a change in circumstances.

Their details are:

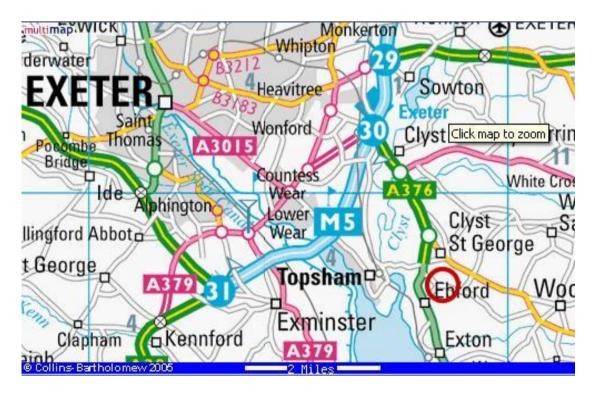
Cinnamon Trust, Foundry House, Foundry Square. Hayle. Cornwall. TR27 2HE. Telephone: 01 736 757 900

Location:

Ebford is a hamlet set in rural surroundings south east of Exeter. Topsham, Clyst St. Mary, Clyst St. George, Woodbury, Woodbury Salterton, Exton, Lympstone, Exmouth, Woodbury Common, Aylsbeare Common and Haldon Hills are all in close proximity to Ebford, making it a very desirable location for a Residential Care Home in the quiet Devonshire countryside.

Directions:

Take the A 376 Exeter to Exmouth Road until you reach the Ebford Sign. Turn left at the Ebford House Hotel into Old Ebford Lane, 250 metres sharp left turn at horse chestnut (conker) trees into Lower Lane, pass up The Ridings, you will find Bronte Residential Care Home 600 metres along, on the left.





Bronté Residential Care Home

Aims and Objectives.

- To be encouraged and assisted in maintaining a high quality of life, with respect for the resident's individuality.
- To be encouraged to maintain independence, choosing wherever possible, their own level of freedom, habits and lifestyle.
- To have their privacy respected.
- To be encouraged to follow the religion of their choice and fulfil their spiritual needs.
- To be addressed as they wish.
- All personal records are accessible to the person concerned; residents are encouraged to access their individual record.
- To be safeguarded from discrimination on grounds of race, gender, age, religion and language.
- To be encouraged to self medicate when it is appropriate to do so.
- To be able to retain the Doctor of their choice whenever possible.
- To receive medical and nursing care in a private place.
- To bathe, wash and use toilet facilities in private, or with assistance if the resident chooses.
- To be encouraged to use the facilities available to other people living in the community and assisted in making this possible.
- To have their care evaluated and discussed at regular intervals with the management of the home and to be given genuine and informed choices of the options available for their future care.

- Be freely given personal information on their condition and prospects and to be informed of the person ultimately responsible for their care.
- To be cared for by appropriately trained staff, who are on
- duty at all times, providing 24 hours care.
- To be able to receive visitors at a reasonable time.
- To have the right to privately consult a Solicitor, Advisor or Advocate and have the right to be represented when necessary, to put forward his or her own point of view.
- To be provided with a homely, safe and clean accommodation of a high standard and to be encouraged to bring personal possessions into the home.
- To have access to a telephone that is placed in a private place.
- To be provided with a choice of high quality appetizing and nourishing food appropriate to the resident's needs and personal wishes.
- To be encouraged to participate in recreational activities if the individual so desire, and to be given the opportunity to develop new hobbies and pastimes.
- To be encouraged to maintain old friendships and form new ones.
- To be able to freely comment on or complain about any aspect of the service provided by the home through formal and informal channels, knowing that their views will be listened to and wherever possible accommodated.
- To be given a quality of service, of a consistent standard that is appropriate and responsive to the individual's needs.
- To have a Contract of Residency, prior to admission.

Residents' Rights

We promote and encourage those in our care to exercise their rights, which allows them to live as normal and full a life as possible.

Such rights include, for example:

- confidentiality
- dignity
- privacy
- independence
- choice
- self esteem
- fulfilment
- respect
- access to services

- access to information
- consultation
- involvement
- professional advice
- safety
- right to take risks
- to complain
- emotional needs
- physical needs
- spiritual needs

All rooms can be locked from the inside for privacy but may be overridden in case of emergency.

Staff will never enter a room without first knocking and being invited in except under certain circumstances. The emphasis placed upon rights is an integral part of the quality of care we provide at Bronte. Those in our care are people, which offer them significant rights morally, ethically, socially, politically and legally. We have a responsibility to ensure those rights are never infringed and that those in our care utilize their rights fully.

From time to time there may be tension between a person's rights and our responsibilities to them.

This will involve consultation between ourselves and the Resident with appropriate others such as their family, relatives, health and social advisers etc. Any subsequent actions will be recorded in the care plan.

Admission Procedure

Prior to arrival the most senior staff member on duty will ensure a nominated member of staff has checked the following:

- 1. The term of addressing the person is to be known by all staff on duty.
- 2. Pre-admission requirements as per our policy are met
- 3. Any requests during pre-admission have been Addressed

- 4. The room is clean and tidy
- 5. The room is aired
- 6. Towels and soap etc. are put out
- 7. The room is at a reasonable temperature
- 8. The television works
- 9. The call system works
- 10. Lights fittings work, have bulbs in, are shaded etc.
- 11.Plug points work
- 12. Furniture is in good condition
- 13. Coat hangers in wardrobe etc.
- 14. Our brochure is in the room
- 15. Any personal items already sent to us are in the room
- 16. Electrical equipment is tested and safe for use

On Arrival

There are a lot of matters to attend to when someone comes into Bronte for the first time and everyone coming to us is different.

On arrival, the most senior person on duty will greet the new person and anyone who has come with them. They will be shown to their new room and offered refreshments.

The new resident and anyone with them are given time alone to look around their new room without feeling over welcomed.

On returning, having given them time alone, the most senior person on duty will discuss the following:

- Information gleaned during pre-admission
- Summoning help
- Valuables
- Insurance
- Meal arrangements
- Complaints
- Fire Regulations

A tour of the facilities can then be undertaken, if desired.

On returning to their new room pre-admission details will be confirmed and the call system explained.

Check whether the resident wants to unpack now or later and whether they would like some help.

Explain that any electrical equipment will need checking before it can be used.

Find out if they would like more refreshments.

Let them see there is already a copy of our Bronte Residents Guide in their room.

Reassure them that there is no rush, which will naturally lead to the time when those with the person start to feel they are ready to leave.

Emergency Admission Procedure

At the discretion of Mr. & Mrs. Murphy, where appropriate and reasonable, we accept emergency admissions be they intended short, medium or long stays.

Our primary concern immediately upon admission is to settle the Resident into their new surroundings

Within 24 hours, we will develop an initial care plan which is finalized at absolute latest within 7 days of emergency admission.

It is a pre-requisite of any emergency admission that formal arrangements are already in place for full and formal medical assessment of the Resident within 24 hours of their admission.

Upon emergency admission, our standard non-emergency admission procedures apply.

Consumer Care Policy

Bronte is a Residential Care Home for older people, providing as homely an atmosphere as possible for all the residents at our home. We aim to develop an environment where Residents and Staff are offered Equality of Opportunity regardless of race, sex, sexual orientation, age, colour, creed, nationality or ethnic origin.

We value your comments or suggestions for improvement. If you have any suggestions, comments or complaints you wish to make, you may:

- Talk to a member of staff.
- Talk to your Key Worker.
- Talk to the Chairperson of Bronte Residents' Association.
- Talk to the Proprietors- Mrs. Cordelia Murphy or Mr. Tim Murphy.

If you are not happy with the services we provided or if you are worried or concerned about any practices at Bronte, you should first discuss this with your key worker. If you tell him/her what is worrying you, then he/she will try to find a solution for you. You can ask another person to present your complaint for you if you prefer. Your care worker is responsible for acknowledging your complaint within **24** hours and responding to it within **7** days.

If you are not satisfied with the solution offered by your Key Care Worker, then please contact the proprietors, Mr. Tim Murphy or Mrs. Cordelia Murphy. Every effort will then be made to resolve your worry or concern.

Please contact: Mr. T. & Mrs. C. Murphy The Bungalow, Bronte Lower Lane Ebford. Devon. EX3 0QT Telephone: 01392-875670, Fax number: 01392-875173 or Mobile 07947 453929

Mr. & Mrs. Murphy are responsible for acknowledging your complaint within 24 hours and responding to it within 7 days.

You may contact The Care Quality Commission (CQC) at any time during this process.

If your concern remains unresolved to your satisfaction, please contact:

The Care Quality Commission, South West Region, Citygate, Gallowgate, Newcastle upon Tyne. NE1 4PA1 4UA.

Telephone number: 03000616161. Fax: 03000616172 E-mail: enquiries.southwest@cqc.org.uk

Or ultimately to:

The Parliamentary Ombudsmen, Queen Anne's Gate, London. SW14 9BA. Telephone number: 020 791 53210

Bronte Residential Care Home

STATEMENT OF PURPOSE

Care Standards Act 2000

1. The name and address of the registered provider and of any Registered manager.

Mrs. Cordelia Murphy	Mr. Timothy Murphy	
The Bungalow Bronte	The Bungalow Bronte	
Lower Lane	Lower Lane	
Ebford.	Ebford.	
Exeter.	Exeter	
Devon. EX3 0QT	Devon. EX3 0QT	

2. The relevant qualifications and experience of the registered provider and registered manager.

Mr. Timothy Murphy

Bachelor of Education (Honours) Teacher's Certificate in Education Diploma in Management Studies Certificate in Residential Social Work (CCETSW) Registered Manager's Award (NVQ level 1V)

Mrs. Cordelia Murphy

State Enrolled Nurse Diploma in Management Studies Advanced Management in Care In-service Programme in Social Work Registered Manager's Award (NVQ level 1V) NVQ Level 1V in Health and Social Care

3. The number, relevant qualifications and experience of the staff working at Bronte Residential Care Home

Presently, there are three, Senior Care Assistants (@ NVQ level 3.), six care assistants (3 working towards NVQ level 3), two working towards Dip. in Social Care, (one working towards NVQ level 2), two cooks (NVQ level 3 and HND) one caretaker and one grounds man.

4. The age-range and sex of the service users for whom it is intended that accommodation should be provided.

Bronté is a Residential Care Home, registered with the CQC under the category "Old age, not falling within any other category" for twenty Residents both male and female.

5. The range of needs that the care home is intended to meet. May we invite you to read the Bronte Residents guide.

6. Nursing Care

Bronte is a Residential Care Home and does not provide Nursing Care. For criteria used for admission to Bronte Residential Care Home. Please read the Bronte Residents' Guide on 'Admission Procedure' and 'Emergency Admission Procedure'.

7. Arrangements for Residents to engage in social activities, hobbies and leisure interests.

Details of social activities, hobbies and leisure interests are to be found in the Bronte Residents' Guide.

8. The arrangements made for consultation with Residents concerning the operation of the care home.

Meetings of the Residents Committee take place bi-monthly. A Residents committee meeting may be convened by the chair person at any time. One of the proprietors is invited to the meeting to aid with translation.

9. The fire precautions and associated emergency procedures at Bronte.

Please observe fire precautions and associated emergency procedures displayed in each room and throughout the building.

10. Arrangements made for residents to attend religious services of their choice.

May we invite you to read the Bronte Residents' Guide?

11 Arrangements made for contact between Residents and their relatives, friends and representatives.

Please read the Bronte Residents' Guide.

12. Arrangements made for dealing with complaints.

The complaints procedure is detailed in the Bronte Residents' Guide.

13. Review of the Residents' Care Plan.

Planning is essential to ensure that those we care for benefit from the best possible care available. Managing a Resident's care involves working with the person to balance the extent to which we assist them without reducing their independence whilst not exposing them to unnecessary difficulty.

Achieving this, means we develop care plans, in a suitable and appropriate manner according to each circumstance, with the Resident and other relevant parties such as relatives, friends, representatives, health care professionals etc. Naturally, circumstances change, which means we review all care plans to an agreed regular programme and when circumstances change between those regular reviews. Again, the Resident, relatives, friends, representatives, health care professionals etc are actively included in the development of the care plan to achieve the best possible outcome.

14. The number and size of rooms at Bronte.

Details are available in the Bronte Residents' Guide.

15. Specific therapeutic techniques used at Bronte.

May we invite you to read the Bronte Residents Guide.

16. Respect for the privacy and dignity of our Residents at Bronte.

Our purpose at Bronte Residential Care Home is to provide consistently high standards of care in order that those we care for can live as normally as possible where their individuality, independence and dignity are respected and upheld.

We recognize the importance of maintaining the uniqueness and character of each resident in our care. Therefore, we are careful to avoid situations for those in our care that may lead to impairment of their self-esteem and sense of worth. Where such situations might occur we seek to diffuse them gently and sensitively.

- * All rooms are single occupancy with en-suite facilities.
- * All staff are required to knock on residents' doors before entry.
- * All care plans are carried out in the privacy of the Resident's room.
- * All appointments i.e. Doctor, District Nurse, Dentist, Chiropodist etc. are carried out in the privacy of the Resident's room.

Bronte Residential Care Home

RESIDENT'S SOCIAL HISTORY

Please attach photograph

Health and Social Care Act 2008.

We have found through experience that the more we know
about our residents when they come into our Home the
better care we can provide. Often details of a person's past
life which we never thought of asking about turn out to
be important factors in his/her happiness at Bronte.
Your replies are completely confidential and will be used
only for professional purposes. Sending the completed
form in advance will save you time on admission. If you
are uncertain about any questions, you can discuss them
with one of us.

Resident's Name:	Date of Birth :
National Insurance Number:	

Name by which resident prefers to be called: _____

1. CURRENT SITUATION

A. Care of self (check). It will be helpful to know about the resident's normal day.

	Alone	Assisted
1. Dressing		
2. Washing hands and face		
3. Bathing and skin care		
4. Get in and out of bed		
5. Get in and out of chair		
6. Care of hair		
7. Care of fingernails		
8. Care of toenails		
9. Shave		
10. Brush own teeth and/or dentures		
11. Use toilet		
12. Bowel control Normal Occ	asional loss of control	
Any aids used		
13. Bladder control Normal Oc	ccasional loss of control	

B.	Walking (please check	all that apply)			
	Normal		Cane(s)		
	Slow but steady		Crutch(es)		
	Unsteady		Walker/Zimmer		
	Not walking				
	Up in chair only				
De	scribe falls or injuries res	ident has had:-			
C.		allergies:			
	Poor	Normal		Overeats	
	5. Eating (check one)	Feeds self		Needs help	
	6. Does resident smok	e: Yes	No		
D.	Sleeping (check all tha Usual bedtime at Restless			A.M. If t	ake nap, time
E.	Describe any Impair	—			
	2. Writing Right handed	Left handed	Ambide	extrous	
	3. Vision Glasses	Reading a	ability		
	Hearing aid? Where buy batteries	Type	e Where r	Battery No epaired	

Cheerful Prefers to be alone Very forgetful Independent Prefers groups Depresse Too independent Silent Depresse Mentally alert Co-operative Often and Temper \ Often and Worrier outbursts Aggressive Easily Confused Reserved Fears De Excessive Has talked of suicide Dizzines laughing Has attempted suicide Fainting	ther physical condition	s requiring care	
Present condition. Present condition. foccur only occasionally, indicate with a Star (*) items developed in recent r Sociable Hears things that aren't Slightly forgetful Prefers to be alone Very Independent Prefers groups Too independent Silent Depresse Often an Often an Temper \ Onfused Reserved Fasily Confused Has talked of suicide Has talked of suicide Has talked of suicide Has talked of suicide Fainting	oblems getting residen	to take medicine or trea	tments
Check all of the following which describe present condition. if occur only occasionally, indicate with a Star (*) items developed in recent	edicines or treatments	resident has reacted unfa	wourably to or is allergic to
Sociable Hears things that aren't Slightly forgetful Cheerful Prefers to be alone Very Independent Prefers groups Depresse Too independent Silent Often and Mentally alert Co-operative Often and Temper \ Aggressive Easily Confused Has talked of suicide Dizzines Has attempted suicide Fainting	heck all of the following		
well Convuls Noisy Chronic complainer	Sociable Cheerful Independent Too independent Mentally alert Mentally alert Temper \ outbursts Confused Cries easily Excessive laughing Wants to get	Hears things that aren't there Prefers to be alone Prefers groups Silent Co-operative Aggressive Reserved Has talked of suicide Has attempted suicide Withdrawn Chronic complainer	Slightly forgetful Very forgetful Depressed Often angry Worrier Korrier Fears Death Dizziness Fainting Convulsion

- 2. Are there any problems we can expect? Suggestions for handling?
- 3. What satisfactions does client/resident have in present life?
- 4. What frustrations?
- 5. Any patent medicine uses regularly?
- G. **Describe in your own words why resident is coming into Bronte.** (Include details that you consider significant.)

Who was most influential in making the final decision and how did this come about?

H.. Present living arrangements

- a) Resident is presently located at______ How long? ______ Where lived most of adult life ______
- b) Are there any financial problems the resident is worried about? ______ Can resident manage own pocket money? _____ How much? £_____

I. Miscellaneous current information

- a) What has resident been told about his/her condition and the outlook for the future?
- b) What was his/her reaction?
- c) Special goals, ambitions or hopes?
- b) What has resident been told about coming into Bronte?

e) What	was	his/her	reaction?
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f) Where would he/she prefer to live?

11. PAST LIFE

A. Early family life.

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. Where born and raised	
2. Nationality	
b. Father's name	Birth place
	Birth place others and sisters of resident and present contacts and
relationships with resident.	siners and sisters of resident and present contacts and
•	
Decupation	
Fravels	
Retirement	
. Planning in advance	
2 Date of retirement	Voluntary or involuntary
. Work subsequent to retirement	
Marriage	
÷	
2. Date of marriage	
 Reaction to death of spouse 	
. Describe the important characteristi	cs of the marriage as you know them
Children	
. Name	Spouse's name
Address and Telephone Number:	
Grandchildren	resident
Descent contacts and velotion shine with	resident

2. Name	Spouse's name	
Address and Telephone number:		
-		
Grandchildren		
Present contacts and relationships with re-	esident	
3. Name	Spouse's name	
Address and Telephone number:		
•		
Grandchildren		
Present contacts and relationships with re-		
1		

If there is any further information you think we should know to assist us in caring for him/her. Please do not hesitate to contact us on 07947453929 or write on a separate sheet and attach.

111. AFTER LIFE

Please specify any afterlife arrangements, to include last offices:

CONCLUSION:
Admission Date and Time:
Relationship to Resident:
The information held on this document is classified as 'sensitive' under the provisions of the Data Protection Act 1998. The act requires us to request your signed consent that the information provided many be kept for the purposes described above.
Please print name:

Signature: _____ Date: _____