



Cinnamon Care Collection

OPERATIONAL PLAN 2020

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1. BACKGROUND

- 1.1 Cinnamon Care Collection (CCC) have been providing high quality care within a high quality built environment since 2014. Their aim is to provide increasing availability of high quality care provision to meet an increasing demand for bed spaces in the care sector.

This Management Plan is submitted as a supporting document in relation to the planning application for the proposals (London Borough of Richmond reference 19/2822/FUL).

2. PROPOSAL

2.1 The development will seek:

To provide accommodation for older people, potentially suffering disability or other health problems in the area, who are in need of care and support, and for whom the choices available are limited.

To create a purpose built facility, designed to complement the local style of architecture where, residents can access first-rate personal and nursing care and a range of support services together with the use of communal facilities and activities designed to promote individual health, wellbeing, and a better quality of life.

To ensure residents retain some degree of independence and to allow them to make their own choices. As such, to provide the following range of accommodation to suit the varying needs of residents supported by a comprehensive range of care and support services.

- 66 Care bedrooms
- 22 Care Suites .

2.2 The client group will comprise of elderly and frail people requiring care and support.

2.3 As people age often health deteriorates, which historically has meant that many people have had to move away from family and friends to get the assistance needed. CCC allows residents the flexibility to transfer within the different types of accommodation i.e. from the care suite to care bed, or receive care and support within their care suite thus maintaining continuity of relationships within the “local community”.

2.4 All nursing and personal care services will be registered and regulated by the Care Quality Commission (CQC), the independent regulator of Health and Social Care.

Provision of elderly care is regulated by the Care Standards Act 2000 and further by the Care Act 2014, which sets out minimum standards that a care provider/operator must comply with. Cinnamon Care Collection (CCC) exceed these minimum standards both in terms of the built environment and the level of care service provided.

On completion of the building works CQC arrange an inspection of the premises with a view to formal registration of the facility, including approving and registering the facility’s Senior Manager.

CCC’s high standards of care are continually monitored to ensure that they always receive a positive outcome to CQC’s announced and unannounced inspections. The CQC report issued following each inspection is a matter of public record.

3. ACCOMMODATION

There will be two principle types of accommodation, care beds and care suites combined with general facilities.

3.1 Care Bedrooms

Care bedrooms are provided with 24/7 nursing care and support

Each care bedroom has a single bed and an en-suite shower room. In addition, dedicated services include a nurse call alarm system, small power outlets, TV/media and optional telephone facility. The call system links directly to the care staff via a dect handset and when activated direct staff to the correct location within the facility.

The care bedrooms will be fitted out and furnished by CCC. Residents may also provide some of their own furniture.

3.2 Care Suites

Care Suites are available to occupy on a short stay, rental or lease basis offering flexibility and security of tenure to residents dependent upon individual circumstances . They offer a greater degree of privacy and independence than a care bedroom and are a real alternative to the type of accommodation normally available in residential care homes.

Irrespective of the nature, term or tenure of occupation all principle residents will at all times be required to subscribe to a minimum care package.

Each Care Suite comprises a bedroom with en-suite shower room, lounge and kitchenette.

Each Care Suite has a 24 hour emergency call facility. Personal neck/wrist alarms are also available so should a resident not be able to reach the alarm button they can still activate a call. There are also additions to the system which can provide additional reassurance to the resident and assist the staff e.g. fall monitors, light sensors, and wander monitors.

Services are provided as set out in the resident's lease agreement, and all residents benefit from the core care and support services and facilities. Additional care services are available on a needs basis. The services are set out in section 5.

3.3 General Facilities

3.3.1 Reception: the single shared primary point of access is located at the main entrance with staff welcoming visitors and directing them to their destination. Bookings for transport, meals or activities can be taken and general information about for example, forthcoming activities will be displayed.

3.3.2 Café Bar: available for morning coffee, brunch, afternoon tea or snacks, etc. an area for all to use.

3.3.3 Hairdressing and Beauty Salon: open daily offering a range of services.

- 3.3.4 Library: fitted out with a collection of books, daily newspapers, magazines and journals.
- 3.3.5 Lounges: spread throughout the facility allowing residents to meet with family and friends. Social events and activities may also take place.
- 3.3.6 Facility Manager's Office: CCC adopt "the door is always open" policy. The manager is responsible for ensuring the facility runs smoothly and makes sure all the residents' needs are catered for and standards maintained.
- 3.3.7 Laundry: A commercial laundry is located within the facility. This enables all laundry requirements to be undertaken on site. Residents personal laundry is catered for.
- 3.3.8 Kitchen: A commercial kitchen is located within the facility, delivering freshly prepared meals and snacks for all residents by highly qualified staff. The kitchen is inspected by the Local Authority's Environmental Health Officers.
- 3.3.9 Housekeeping Stores: cleaners stores are located throughout the facility.
- 3.3.10 Specialist Equipment Stores: to meet the resident needs storage areas are provided throughout accommodating specialist hoist, mattresses etc.
- 3.3.11 Dining Room: residents' meals are provided and served to all dining areas on a daily basis. In addition, within the main dining room there is the opportunity for the residents and their family or friends to enjoy a meal together.
CCC recognize that a nutritious diet is essential for health and well-being and all chefs are trained to prepare and deliver meals which may be required for specific medical conditions.
- 3.3.12 Private Dining Room: this dining area can be booked for small parties or family meals.
- 3.3.13 Nurses' Office: Nurses' offices are provided at the core of the facility. Staff meet here to update residents' care notes, review policies, procedures and risk assessments and when required conduct confidential discussions with a resident and/or family member.
- 3.3.15 Assisted Bathrooms: bathrooms are located throughout the facility. The bathroom has a specialist bath fitted with integral hoist to assist with handling of the resident when bathing.
- 3.3.16 Passenger Lifts: 8 and 13 person passenger lifts are provided.
- 3.3.17 CCTV: security of the resident group is a primary concern to CCC. Consequently, a CCTV camera system is fitted throughout the facility, monitored both at reception and the nurses' station.
- 3.3.18 Access Control: common and private areas are secured by locking systems and/or entry phone or similar measure. All visitors to the facility are required to report in at reception and sign the visitors register. 'Out of Hours' access is managed by the care staff.

4. OCCUPANCY

4.1 Occupancy of the facility will be restricted to those who meet the following criteria.

The principle resident shall be of pensionable age and;

- a. in need of care and support or,
- b. registered disabled person or,
- c. in the case of couples, a spouse or partner of the principle resident,

4.2 Admission Criteria:

Each principle resident who would like to move into the facility must meet the above occupancy criteria. All potential residents are assessed prior to moving into the facility. This ensures that the accommodation is suitable for their needs, that they require care and/or support and that their needs can be met by the care and support services available.

4.3 All prospective principle residents will be subject to a Pre-Admission Assessment.

Prior to moving into the facility and periodically thereafter, all prospective residents have a health assessment. This ensures that CCC can meet their needs and formulate an appropriate plan specific to these needs. The initial health assessment, and any further ongoing health assessment, will be undertaken by an appropriately experienced and qualified person to establish the principle residents care needs and to determine the level and type of care and support services provided are appropriate to those needs

A copy of the Pre-Admission Health Assessment is attached as Appendix 1.

5. SERVICES

- 5.1 All residents of the care beds and care suites have full access to the communal facilities including restaurant and private dining facilities, residents day room, library room, crafts room, café, reception area, hair and beauty salon, communal gardens and terraces.
- 5.2 All care bed residents pay a weekly fee which includes all accommodation, care, meals, laundry, cleaning and maintenance costs.
- 5.3 All care suite residents are contractually entitled under the terms of their lease or rental agreement to use of all of the communal facilities and a comprehensive package of services including the care and support services, which they are obliged to pay for via a service charge.

Some care and support services are included within the fees, the other services are available on a needs basis.

- 5.4 The following range of services is provided to all residents' as part of the service offer:

5.4.1 General

- (a) cleaning, maintaining, decorating, repairing and replacing as necessary
- (b) providing heating and hot water to the Facility and cleaning, maintaining, repairing and replacing the heating machinery and equipment;
- (c) lighting the communal areas and facilities including cleaning, maintaining, repairing and replacing lighting, machinery and equipment;
- (d) cleaning, maintaining, repairing and replacing the furniture, fittings and equipment in the communal areas of the facility;
- (e) cleaning, maintaining, repairing and replacing the lifts and lift machinery and equipment within the communal areas;
- (f) cleaning, maintaining, repairing, operating and replacing security machinery and equipment (including closed circuit television) within the communal areas and facilities of the Facility;
- (g) cleaning, maintaining, repairing, operating and replacing fire prevention, detection and fighting machinery and equipment and fire alarms;
- (h) cleaning, maintaining, repairing and replacing refuse bins;
- (i) cleaning the outside of the windows;
- (j) cleaning, maintaining, repairing and replacing signage within the communal areas and facilities;
- (k) maintaining any landscaped and grassed areas;
- (l) cleaning, maintaining, repairing and replacing the floor coverings on the internal areas of the communal areas and facilities;
- (m) providing reception, cleaning, maintenance staff, gardeners, drivers, entertainers and other activity providers for the Facility;

- (n) insurance of the Facility;
- (o) any other service or amenity that the Services Provider may in its reasonable discretion (acting in accordance with the principles of good estate management) provide for the benefit of the tenants and occupiers of the Building and/or the Development.

5.4.2 Care and Support Services (included within the Service Charge):

- (a) administering and obtaining disclosure and barring service and safeguarding of vulnerable adults and or successor agencies checks on all staff engaged in providing services;
- (b) 24 hour/7 day per week emergency call monitoring and response;
- (c) Periodic health assessment and review;
- (d) A minimum of 1 hour of personalised care and support a week for each principle resident
- (e) Liaising with GPs and other appropriate healthcare professionals;
- (f) Supporting the general wellbeing of residents and facilitating access to healthcare services through provision of transport to local GP, local dental and local NHS outpatient appointments where possible but subject to constraints of the facility transport service;
- (g) Collection and delivery of prescribed medication during periods of ill- health or incapacity:
- (h) Facilitating seasonal flu vaccinations in collaboration with local GPs;
- (i) Health promotional activities (to promote good physical health and mobility);
- (j) Social wellbeing activities (regular and varied activities events and outings to facilitate social interaction and quality of life);
- (k) Scheduled transport to the local area and shopping centres.

5.4.3 Personalised Care and Support Services (provided in addition to the Service Charge and paid for based on use):

- (a) Assistance with personal hygiene including washing, bathing, shaving, toileting;
- (b) Assistance with dressing and undressing;
- (c) Assistance with getting in or out of bed;
- (d) Assistance with the planning or preparation of meals;
- (e) Assistance with eating or drinking
- (f) Assistance with the ordering or collection of medication or with the taking of prescribed medication;
- (g) Assistance with technology to facilitate on-line ordering of shopping for residents with impaired mobility and or sight, the payment of bills,

maintaining contact with family members and the pursuit of hobbies and interests;

- (h) Assistance with organising appointments and accessing local hospital, primary and dental care services including accompanying residents to such appointments and the provision of emotional and psychological support and physical care following hospital discharge;
- (i) Assistance with accessing all facilities within the Facility and any social activities either organised within the Facility or off-site including accompanying any resident who has impaired mobility to such facilities / activities and or providing support to any resident who due to age or medical needs requires assistance to use or participate in such facilities /activities;
- (j) Assistance with arranging visitor access in order to maintain contact with family and friends and to encourage social interaction to maintain mental wellbeing of residents and facilitate independent living; and
- (k) Assistance for residents with impaired mobility or medical needs or who may otherwise require such assistance due to age or ability with household chores and errands including assistance with cleaning and laundry and assistance with the delivery and collection of post/parcels to maintain contact with family members and or to pay bills and to facilitate independent living,

the foregoing services being delivered by CCC or the Care Agency (care agency registered with CQC), or a combination of CCC and the Care Agency.

5.4.4 Providing access to the following miscellaneous services (paid for based on use):

- (a) Food, beverage and hospitality services
- (b) Hair care, beauty and therapy treatments
- (c) Exercise classes and personal trainers other than those provided within the care and support services
- (d) Handyman type services.

6. STAFFING

- 6.1 The facility employs a range of staff to cover each of the service areas. The facility will employ approximately 75 (full time equivalent) full and part time staff, to enable the facility to be staffed 24 hours a day. The nursing and care staff work a two shift pattern daily, with ancillary staff working one or two shifts daily dependent upon requirements.
- 6.2 All staff working within the facility must have a Criminal Records Bureau (CRB) check, and be checked against the register for the Protection of Vulnerable Adults (POVA) prior to commencing work within the village.
- 6.3 There will be 24 hour staffing in the facility by Registered Nurses and Care team. The registered nurses will be based within the Nursing unit and are governed by the CQC regulations and the Nursing and Midwifery Council, each nurse will have extra checks to make sure that their registration is current and that they have kept updated with the latest research within their specialised field. Each staff member will have an appraisal annually and be expected to attend mandatory training sessions, which CCC provide. A full induction and training programme is in place for all staff groups. Each facility will have its staff records and training programme inspected by the Management Team and CQC.

Appendix 1 - Pre-Admission Assessment

THE <i>Cinnamon</i> CARE COLLECTION	
PRE-ADMISSION ASSESSMENT	
NAME OF PERSON:	TITLE:
LIKES TO BE CALLED:	
NAME OF PERSON COMPLETING THE ASSESSMENT:	
DATE OF ASSESSMENT:	TIME OF ASSESSMENT:
PLACE OF ASSESSMENT:	
PEOPLE PRESENT:	
NHS NUMBER:	NI NUMBER:
DATE OF BIRTH:	MARITAL STATUS:
RELIGION:	
HOME ADDRESS:	
PLACE FROM WHERE ADMISSION WILL TAKE PLACE:	
NEXT OF KIN (1) – EMERGENCY CONTACT:	RELATIONSHIP:
ADDRESS:	POSTCODE:
EMAIL:	TELEPHONE NUMBER:
MOBILE TELEPHONE NUMBER:	
NEXT OF KIN (2):	RELATIONSHIP:
ADDRESS:	POSTCODE:
EMAIL:	TELEPHONE NUMBER:
MOBILE TELEPHONE NUMBER:	

NEXT OF KIN (3):	RELATIONSHIP:
ADDRESS:	POSTCODE:
EMAIL:	TELEPHONE NUMBER:
MOBILE TELEPHONE NUMBER:	
NEXT OF KIN (4):	RELATIONSHIP:
ADDRESS:	POSTCODE:
EMAIL:	TELEPHONE NUMBER:
MOBILE TELEPHONE NUMBER:	
GRANDCHILDREN & GREAT GRANDCHILDREN	
GRANDCHILDREN	GREAT GRANDCHILDREN
REASON FOR ADMISSION TO A CARE HOME:	
MEDICAL HISTORY INCLUDING SURGERY, INFECTIONS, MRSA, C-DIFF, SCABIES, OTHER:	
MEDICAL, HEALTH/SPECIALIST DIAGNOSIS WHICH WILL REQUIRE A HEALTH PROMOTION PLAN:	
MEDICAL ALLERGIES:	

MENTAL HEALTH HISTORY, COGNITIVE DIFFICULTIES & DIAGNOSIS:	
GENERAL PRACTITIONER	
NAME OF GP:	SURGERY
ADDRESS:	
TELEPHONE NUMBER:	FAX NUMBER:
WILL THE PERSON RETAIN THIS GP?	IF NOT, WHO WILL THEY BE REGISTERED WITH:
DOES THE PERSON HAVE A DNAR?	
ADVOCACY ARRANGEMENTS	
ABILITY TO STATE ONES PREFERENCES – (TICK)	ABILITY TO RETAIN INFORMED DECISIONS – (TICK)
VERBAL COMMUNICATION	GOOD MEMORY
WRITTEN COMMUNICATION	SHORT TERM MEMORY IMPAIRED
NON-VERBAL COMMUNICATION	LONG TERM MEMORY IMPAIRED
COHERENT	VARIABLE
DESCRIPTION:	
IS THIS PERSON GIVING PERMISSION FOR INFORMATION COLLATED DURING THIS ASSESSMENT TO BE SHARED WITH OTHERS: YES/NO	
WHO CAN THIS INFORMATION BE SHARED WITH:	
WHAT SUPPORT DOES THE PERSON REQUIRE TO MAKE THEIR OWN DECISIONS AROUND THERE MEDICAL/HEALTHCARE NEEDS	ARE ANY OF THE FOLLOWING IN PLACE TO GUIDE DECISION MAKING
	LASTING POWER OF ATTORNEY: FINANCE HEALTH & WELFARE
	ENDURING POWER OF ATTORNEY: COURT OF PROTECTION APPOINTED DEPUTY:

ENTIRELY INCAPABLE MAKING A DECISION BECAUSE OF IMPAIRMENT OR DISTURBANCE OF MIND OR BRAIN FUNCTION:	LIVING WILL:
	ADVANCE CARE PLAN:
ANY CURRENT CARE PRACTICES RESTRICTING THIS PERSON'S FREEDOM:	IS A DOLS AUTHORISATION REQUIRED:
GIVE DATE OF ANY EXISTING DOLS IN PLACE:	ARE THERE ANY CONDITIONS ATTACHED TO CURRENT DOLS:
IS THIS PERSON CONSENTING TO BE ASSESSED FOR CARE? YES NO	IS A BEST INTEREST DECISION MEETING REQUIRED PRIOR TO ADMISSION? YES NO
FUNCTION: SPEECH – FIRST LANGUAGE/DYSPHASIA. HEARING. SIGHT – DISEASE/DEGENERATION. WAYS OF COMMUNICATING	
HEARING AIDS:	SPECTACLES:
DATE OF LAST HEARING TEST: AUDIOLOGIST:	DATE OF LAST EYE TEST: OPTICIAN:
BREATHING: RESPIRATORY PROBLEMS. SPECIAL REQUIREMENTS: O2/NEBULISERS	
EATING, DRINKING & NUTRITION: ORAL HEALTH/FREQUENCY OF DENTAL VISITS. APETITE/FLUID INTAKE. SENSE OF SMELL. DIETARY PREFERENCES/REQUIREMENTS.	

NUTRITIONAL NEEDS/SUPPORT. ADAPTED UTENSILS. ALLERGIES. SWALLOWING ISSUES. SALT ASSESSMENT. WEIGHT LOSS	
ALLERGIES:	
ORAL HEALTH: DATE OF LAST DENTAL CHECK: DENTIST:	DENTURES: UPPER LOWER
HEIGHT IF KNOWN:	DATE OF LAST RECORDED WEIGHT:
MUST SCORE:	
ELIMINATION: CONTINENCE NEEDS & PRODUCTS. PAIN. NIGHT ROUTINE FOR ELIMINATION. HISTORY – UTI's, CONSTIPATION. EQUIPMENT. SKIN CONDITION. MEDICATIONS. CATHETER.ACCESS TO WC & FREQUENCY	
PERSONAL HYGIENE: PREFERENCE FEMALE/MALE CARER. BATH. SHOWER. HAIR WASHING. DRESSING. FOOT CARE. FINGER NAILS. ORAL HYGIENE. ASSISTANCE OR SUPERVISION. AIDS USED. PROSTHESIS.	
MOBILISING: PAST INJURIES. CONTRACTURES/DEFORMITIES. FALLS HISTORY & RISK. STANDING – AIDS USED. TRANSFERRING – AIDS USED. WALKING AIDS. USE OF WHEELCHAIR. STEPS & STAIRS. BALANCE. FOOTWEAR. SEATING	
MAINTAINING A SAFE ENVIRONMENT:	

CONTROLLING BODY TEMPERATURE. HISTORY OF FALLS. WANDERING. ABSCONDING. PERSONAL SAFETY & RISKS. EQUIPMENT, AIDS & ALTERATIONS

SKIN INTEGRITY:

CONDITION OF SKIN – INTACT OR BROKEN AREAS. DRY OR PAPER THIN, DISEASED, TEARS, RASJES, BLISTERS. PRESSURE SORES – GRADE & CARE INSTRUCTIONS INC DRESSINGS USED. BRUISES & SWELLING. TVN INVOLVEMENT, TYPE OF MATTRESS. POSITIONAL CHANGES.

WATERLOW SCORE – IF KNOWN:

MENTAL HEALTH:

PSYCHIATRIC HISTORY – DEPRESSION, SUICIDAL, COGNITION, CONFUSION, ORIENTATION, PHYSICAL/VERBAL AGRESSION. MOTIVATION. SUNDOWNING. MEMORY/CONFUSION. BEHAVIOUR/S. DELUSIONS. HALLUCINATIONS. CLINICAL ANXIETY. ANTISOCIAL BEHAVIOURS/MOOD. HAS THE PERSON BEEN UNDER THE CARE OF THE MENTAL HEALTH ACT. HAS THE PERSON EVER BEEN REFUSED ADMISSION TO A SERVICE OR A NOTICE SERVED

WORKING & LEISURE:

SOCIAL CARE. SOCIAL OR INTROVERT. PAST & PRESENT EMPLOYMENT. COMMUNITY INVOLVEMENT. DAY CENTERES. HOBBIES. FAMILY. SPIRITUAL NEEDS. RELIGIOUS BELIEFS. CULTURAL NEEDS. RELIGIOUS AND/OR SPIRITUAL NEEDS. PREFERENCES. FAMILY INVOLVEMENT IN PERSONS CARE

SLEEPING:

POSITIONAL CHANGE. NIGHT TIME ROUTINE. MEDICATION. PREFERENCES. NOCTURAL RISING. EQUIPMENT/ADAPTATIONS
NIGHT TIME CHECKS

SEXUALITY & SEXUAL ORIENTATION

SEXUAL ORIENTATION. INTEREST IN APPEARANCE. DRESSING. MAKE UP. PERSONAL RELATIONSHIPS. WHAT MAKES THE PERSON FEEL LOVED?

FOOTCARE:

ARE THERE ANY HIGHLIGHTED PROBLEMS WITH FEET?
DIABETIC. PERIPHERAL CIRCULATION. INDEPENDENT
CHIROPODY TREATMENT

ONGOING SCREENING OR HEALTH CHECKS/HEALTH PROMOTION:

BLOOD PRESSURE, BLOOD TESTS. PACEMAKER. GLAUCOMA. VISION. HEARING. THYROID. RENAL. DIABETES. CVA. DEPRESSION.
DEMENTIA. PAIN. MOBILITY. PROGRESSIVE ILLNESS. OUTSTANDING APPOINTMENTS. OTHER

EMERGENCY REQUIREMENTS:

ILL HEALTH. MINOR INJURY. MAJOR INJURY/ILLNESS – PREFERENCES: HOSPITALISATION - A&E. WHO WILL ATTEND/ESCORT. KEY PEOPLE & CONTACT. ESCORT TO SCHEDULED APPOINTMENTS. SPECIALIST ASSISTANCE & SUPPORT NEEDED.

CURRENT MEDICATION

NAME OF MEDICATION	STRENGTH	AMOUNT TO BE TAKEN	FREQUENCY

MEDICATION COMMENTS:

MEDICATION ADMINISTRATION
 IS THE PERSON INDEPENDENT WITH MEDICATION ADMINISTRATION.

ADMINISTRATION METHOD:
 SELF. ASSISTED. COVERT

IN THE EVENT OF DEATH ARE THERE ANY SPECIFIC ARRANGEMENTS IN PLACE:



