Social care setting

Registered care home with nursing for working age people with enduring mental health problems

Overview of the setting

Platform 1 Being an accountable professional criteria can and should be demonstrated in all of the settings:

This type of service aims to provide a long-term home environment for individuals of working age who have enduring mental health problems and who are unable to live on their own or in a family setting.

The philosophy emphasises the fact that it is an individual's home, and all care is delivered in this vein. The approach is holistic, underpinned by the principles of maximising choice, independence and inclusion. Services are tailor-made, person-centred, designed to meet and individual's specific needs.

Registered mental health nurses and care assistants work with multi-disciplinary colleagues to offer assistance with all aspects of life, and they do this in a way that recognises and maximises the abilities of the people they support. The team adopts the applied recovery model in their service and using co production and person-centred approach, and positive risk taking, the team encourages the service users to become more independent and where possible move on with their recovery journey.

Asher nursing home works closely with its sister home, Parkview Care Home, a mental health rehabilitation home, where residents have more opportunity to develop their independent living skills such as cooking, doing laundry and increasing their independence in managing their own mental health recovery by adhering to their co-produced support plans.

You will be able to witness how health and social care interconnect and also how social care services aim to support people towards maximum independence in their lives.



You are likely to work alongside both mental health and adult nurses.

You will understand the importance of relationship-based care and you will have opportunities to learn about the many aspects of community nursing including the provision of nursing services in a home environment. Through the relationships we develop with people who need care and support, we aim to support them in their individual choices. We work with them to make joint decisions about their care plans and in areas such as delivery of personal care.

People who need care and support tend to be younger and still sexually active. Due to their vulnerability, they can be at risk of exploitation and abuse. It's important for the team to equip them with the correct sexual health knowledge.

Hello my name is... Oakley

Welcome to Asher and Parkview. I have lived here over three years and the staff here have embraced my mental health condition and also my gender identity. The home here is very nice, it feels very homely here and the staff here helped me to be independent.

Promoting independence

People who need care and support are encouraged to develop their independent living skills so that they could return to their previous homes in the community or move on to supported living and possibly return to employment. We apply the concept of normalisation, staff do not wear uniform, we encourage residence to interact and integrate with the community. We actively support people with lived in mental health conditions to be part of the team.

Proactively promoting better awareness and better outcomes for our LGBTQI+ residents

We have supported staff and residents to live freely in the way that they choose, by celebrating their protected characteristics.

Support for trans and non-binary people

Student nurses will have the opportunity to support those who identify as trans, including with some of their appointments with other professionals and to support with their day-to-day health and wellbeing.

A student nurse on placement in this setting will have opportunities to:

• experience a very specialist service for working age adults.

People likely to be working during a normal shift

In a normal shift, there is likely to be one registered nurse working plus a team of carers, and recovery workers (activity coordinators), in addition to ancillary staff.



Clinical skills employed in this social care environment

- risk assessments (environmental e.g. falls and medication) for each clinical domain
- complex clinical care including ongoing monitoring (e.g. must/waterlow/News2)
- managing long-term physical and mental conditions
- general frailty
- monitoring deterioration
- undertaking and recording of clinical observations
- rehabilitation
- effective discharge planning from hospital/multi-disciplinary teams sharing of information (use of SBAR) recognising the importance of careful planning to avoid negative impact on coping behaviours.

Multi-disciplinary opportunities to work with registered nurses from different fields, allied health, and other professionals

The nurses and carers work collaboratively with a range of multi-disciplinary community mental health teams including psychiatrists, social workers, community psychiatric nurses as well as occupational therapists.



The assertive outreach team

The assertive outreach team works with service users who are on community treatment orders but who are reluctant to engage with services. They provide a 7 day a week service and will visit people at home to make sure they get their treatment and try to prevent a crisis. They provide support to the nursing home and will provide a very quick response if required.



The community rehabilitation and transition teams

The community rehabilitation and transition teams have a focus on rehabilitation, and they provide the necessary support to enable people to transition into community independent living.



The forensic mental health team

This team has responsibility for working with service users who have been through the court and the prison systems. They also provide rapid response.

What can be achieved here?

This setting can offer the opportunity to experience activity that links to the following NMC proficiencies, click on the proficiency to be taken to the full criteria:

Promoting health and preventing ill health



Assessing needs and planning care

<u>3.1</u> <u>3.3</u> <u>3.4</u> <u>3.5</u> <u>3.6</u> <u>3.7</u> <u>3.8</u> <u>3.9</u> <u>3.10</u> <u>3.11</u> <u>3.12</u> <u>3.13</u> <u>3.14</u> <u>3.15</u> <u>3.16</u>

Providing and evaluating care

<u>4.1</u>	<u>4.2</u>	<u>4.3</u>	<u>4.4</u>	<u>4.6</u>	<u>4.8</u>	<u>4.9</u>	<u>4.10</u>	<u>4.11</u>	<u>4.13</u>	<u>4.14</u>	<u>4.15</u>	<u>4.16</u>	<u>4.17</u>	<u>4.18</u>
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Leading and managing nursing care and working in teams

<u>5.1</u> <u>5.2</u> <u>5.4</u> <u>5.5</u> <u>5.6</u> <u>5.7</u> <u>5.8</u> <u>5.9</u> <u>5.10</u> <u>5.11</u>

Improving safety and quality of care

6.1	6.2	6.3	6.4	6.5	6.6	6.7	6.8	6.9	6.10	6.11	<u>6.12</u>

Coordinating care

<u>7.1</u> <u>7.3</u> <u>7.5</u> <u>7.6</u> <u>7.7</u> <u>7.8</u> <u>7.9</u> <u>7.10</u> <u>7.11</u> <u>7.12</u> <u>7.13</u>

Communication and relationship management skills

<u>1.1</u>	<u>1.2</u>	<u>1.3</u>	<u>1.4</u>	<u>1.5</u>	<u>1.6</u>	<u>1.7</u>	<u>1.8</u>	<u>1.9</u>	<u>1.10</u>	<u>1.11</u>	<u>1.12</u>	<u>2.1</u>	<u>2.2</u>	<u>2.3</u>	<u>2.4</u>	<u>2.5</u>	<u>2.6</u>
<u>2.7</u>	<u>2.8</u>	<u>2.9</u>	<u>3.1</u>	<u>3.2</u>	<u>3.3</u>	<u>3.4</u>	<u>3.5</u>	<u>3.6</u>	<u>3.7</u>	<u>3.8</u>	<u>3.9</u>	<u>4.1.1</u>	<u>4.1.2</u>	<u>4.1.3</u>	<u>4.1.4</u>	<u>4.1.5</u>	<u>4.2.1</u>
4.2.2	<u>4.2.3</u>	4.2.4	<u>4.2.5</u>	<u>4.2.6</u>													

Nursing procedures

<u>1.1.1</u>	<u>1.1.2</u>	<u>1.1.3</u>	<u>1.1.4</u>	<u>1.1.5</u>	<u>1.1.6</u>	<u>1.2.1</u>	<u>1.2.2</u>	<u>1.2.3</u>	<u>2.1</u>	<u>2.6</u>	<u>2.9</u>	<u>2.13</u>	<u>2.14</u>	<u>2.15</u>	<u>2.16</u>	<u>2.17</u>	<u>3.1</u>
<u>3.2</u>	<u>3.3</u>	<u>3.4</u>	<u>3.5</u>	<u>3.6</u>	<u>4.1</u>	<u>4.2</u>	<u>4.3</u>	<u>4.4</u>	<u>4.5</u>	<u>4.8</u>	<u>5.1</u>	<u>5.2</u>	<u>5.3</u>	<u>5.4</u>	<u>5.5</u>	<u>6.1</u>	<u>6.2</u>
<u>6.3</u>	<u>6.4</u>	<u>6.5</u>	<u>7.1</u>	<u>7.2</u>	<u>7.3</u>	<u>7.4</u>	<u>8.1</u>	<u>9.1</u>	<u>9.2</u>	<u>11.1</u>	<u>11.2</u>	<u>11.3</u>	<u>11.4</u>	<u>11.5</u>	<u>11.6</u>	<u>11.7</u>	<u>11.8</u>
<u>11.10</u>	<u>11.11</u>																