# **Social care setting**

# Registered care home with nursing, neurological disabilities and rehabilitation

# Overview of the setting

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

<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>1.13</u>	<u>1.14</u>	<u>1.15</u>	<u>1.16</u>	<u>1.17</u>	<u>1.18</u>
1.19	1.20																

Chaseley is a charity owned nursing home providing complex care and rehabilitation support to 55 adult residents who have a wide range of ages, needs and physical abilities. Chaseley support residents who have a neurological related disability, including multiple sclerosis (MS), stroke, acquired brain injuries, cerebral palsy, locked-in syndrome and motor neurone disease (MND) disease.

We have a large compliment of 150 staff who work over a 24 hour period, 7 days a week.

This environment will give you the opportunity to experience a complex level of **nursing led** care delivery.



You will also see extensive moving and handling deployed to assist residents who have a complex mobility needs and specialist equipment including standing frames to transfer, specialist slings and overhead hoists.

Clinically you will see first-hand the complex care being delivered to support low care and high care needs including those who require 24 hour, 1-1 care support to remain safe and well. This care setting is in between a care home and a hospital. Care planning is always individualised and care plans will include advanced care wishes and plans.

Chaseley has a rehabilitation focus, so you will also see a variety of different programmes from physiotherapy, occupational therapy, speech and language therapist (SALT), dietician inputs and the use of the disabled adapted gym working together as part of a multi-disciplinary team. As well as sexual health, an area of need that can be overlooked, enabling relationships to continue.

Residents are supported to regain their lost skills for daily living, or mobility on their journey towards greater independence; this is crucial particularly as some people may have had a life changing injury. Psychological wellbeing and supporting the family who may be grieving the loss of the person they knew is an important part of the work that we do.

## Hello my name is... Mark

I am a resident here at Chaseley. It would be lovely to have you work here, this is my home and I love living at Chaseley. You will be able to see the brilliant care team, supporting the different range of complex care residents and how care is delivered to meet our needs. Most importantly you will see how I am supported to enjoy an active and independent life, participating in a range of stimulating activities and enjoying exercise classes, relaxation and physiotherapy to help support my continued rehabilitation following my brain injury.

# Clinical skills employed in this social care environment

- complex clinical care
- rehabilitation
- application of infection prevention and control, practices and environment
- risk assessments (environmental, moving and handling, medication)
- multi-disciplinary team sharing information
- venepuncture
- catheterisation
- vaccination and immunisation
- tracheostomy care
- percutaneous gastrostomy tube care
- undertaking and recording of clinical observations
- use of SBAR or News2 to monitor and relay clinical information
- continuous clinical and risk assessments for each clinical domain
- managing deterioration
- knock on effects of poor discharge
- understanding frailty
- understanding falls risk intensive support interaction
- effective discharge planning from hospital/sharing information MDT include home care agencies to reduce re admissions
- Introduction to concept of telecare
- Ongoing monitoring e.g. must/waterlow/weight loss
- GP oversight.

## People likely to be working during a normal shift

#### Clinical team

- clinical and quality nurse manager
- nurse unit manager
- registered nurse
- retained GP (Monday to Friday)

## Care team 1:3 resident to staff ratio day shift

- senior support worker
- team of support worker colleagues

## Therapy team

- physiotherapists
- occupational therapists
- therapy assistants
- management team
- administrative teams
- housekeeping teams
- maintenance
- activities team
- catering team



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



## Positive behaviour support (PBS)

Staff are continuously monitoring and identifying potential behaviour triggers, reducing triggers if observed through re-direction and calming strategies that defuse the situation and avoid escalation or injury to themselves or others.



## Occupational therapist

To help residents overcome the effects of disability caused by illness, ageing or accident so that they can carry out everyday tasks or occupations. The occupational therapist considers all of the resident's needs - physical, psychological, social and environmental.



## **Medical practitioner**

Proactively reviewing resident changing care needs or responding and directing to signs of deterioration. Offering residents, a wide range of diagnostic and therapeutic services in primary care and access via referrals to acute and specialist hospital-based physical and mental health services.



## Speech and language therapist

Speech and language therapists provide life-changing treatment for adults who have difficulties with communication, eating, drinking and swallowing or ability to speak has been impaired by illness or injury. The support may include treatment for those who have difficulty with eating or swallowing and refer to dieticians for specialist diets.



#### **Physiotherapy**

Assessment and treatment of residents with a condition impacting on the central nervous system that affect the brain, spinal cord and nerves. Residents often have complex mobility issues.

## 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

<u>2.1</u> <u>2.3</u> <u>2.4</u> <u>2.7</u> <u>2.8</u> <u>2.9</u> <u>2.10</u> <u>2.11</u> <u>2.12</u>

#### Assessing needs and planning care

<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>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

#### 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 6.8 6.9 6.10 6.11 6.12

#### **Coordinating care**

7.1 7.3 7.5 7.6 7.7 7.8 7.9 7.10 7.11 7.12

#### Communication and relationship management skills

1.5 1.6 2.5 1.1 1.2 1.3 1.4 1.7 1.8 1.9 1.10 1.11 1.12 2.8 3.1 3.2 3.3 3.4 3.5 3.6 3.7 3.8 3.9 4.1.2 4.1.3 4.2.3 4.2.4 4.2.5 4.2.6

## Nursing procedures

1.1.2 1.1.3 1.1.4 1.1.6 1.2.1 1.2.2 1.1.1 <u>1.1.5</u> 1.2.3 2.1 2.2 2.5 2.6 2.8 2.9 2.10 2.11 2.7 2.17 2.12 2.13 2.14 2.15 2.16 3.1 3.2 3.3 3.4 3.5 3.6 4.1 4.2 4.3 4.4 4.5 4.6 <u>5.1</u> <u>5.2</u> <u>5.3</u> 5.5 5.9 4.7 <u>4.8</u> <u>5.4</u> 5.7 6.1 6.2 6.3 6.4 6.5 <u>6.6</u> <u>7.1</u> 7.2 <u>7.3</u> 7.4 8.1 8.2 8.3 8.4 8.5 9.1 9.2 9.3 9.4 9.5 9.6 9.7 9.8 9.9 10.1 10.2 10.3 10.4 10.5 10.6 11.1 11.2 11.3 11.4 11.5 11.6 11.7 11.8 11.9 11.10 11.11