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✓	✓	✓	✓	✓	✓	✓

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Context

The DOH document, Community Equipment & Care Homes, updated 12 October 2004 sets out responsibilities and partnership arrangements for the provision of equipment in care homes. The document is designed to promote understanding between managers of care homes, Integrated Community Equipment Service (ICES) and other parties interested in the provision of equipment in care homes. It can be used as a starting point in the development of local policies and agreements. Staff with care management responsibilities play an important part in identifying equipment needs when a person commences with a care home and when their needs change. People in local authority and private care homes have the same rights to services, including the provision of equipment, as those living in their own homes.

User needs

Equipment provision should be focused on end user need and should be provided by the care home if it is the type of equipment often required by its users as part of its statement of purpose. The equipment provided must be issued as part of a risk management process and staff competently trained. ICES should assist in providing equipment on loan for use by an individual when the need falls outside of the home's general provision. Loaned equipment should be properly maintained and returned promptly. Where equipment is for a designated user as part of a care plan, others must not use it.

Risk Management

Care homes have responsibilities to service users and staff and some equipment carries particular risks of which homes need to be aware. Equipment risks need to be managed in the context of advice from the Medical Health products Regulatory Agency (MHRA), information from suppliers, and the requirements of Health and Safety at Work legislation. Commissioners of care home placements also have responsibilities. This includes a duty to ensure the needs of placed residents are met. There is also a health and safety responsibility (Section 2 Health and Safety at Work Act 1974 that would cover the responsibilities to independent sector care home staff as non-employees). Risk management in care homes providing nursing care is likely to be more complex. Particular care should be taken in residential care homes where users develop more complex needs and staff may not have the skills and competencies to support the use of equipment – e.g. where it is detrimental to move a user into a registered Nursing Home or

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where intermediate care and rehabilitation is being provided within a residential care home setting.

Working in Partnership

Within Cumbria there are arrangements in place for the provision of some community equipment via the ICES. ICES has a responsibility to care homes to give advice on equipment; equipment loans for individual users subject to assessment and FACs requirements; maintenance, testing & decontamination using specialist equipment.

Care homes have a responsibility to help ICES by:

- Checking ownership and arrangements for equipment when users are first admitted to the home
- Identifying when equipment is no longer required and releasing it promptly for collection
- Informing care managers of changes in service users' needs
- Informing the service promptly in the event of equipment breakdown
- Notifying changes in service user arrangements for whom equipment has been loaned (e.g. hospitalisation, movement to another care home)

Under the Care Home Standards equipment is divided into 'standard' and non-standard groups.

Standard (community) equipment: Standard equipment is widely available to end users in their own homes. In care homes it may be suitable in design for a range of end user care plans. It would be adaptable and flexible. It would be used to meet general health and safety requirements, personal care etc.

Non-standard (community) equipment: Equipment available to individual end users.

Non-standard equipment may:

- be specifically tailored in respect of design, size, weight, or would not be capable of being utilised by other care home residents, or
- be frequently or infrequently used by the end user, or
- support a specific solution for a particular long term disability or medical/nursing problem, or
- be prescribed by an individual who has received enhanced training, or
- require enhanced training to operate and clinically use, or to teach others to operate it, or

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- be supplied by ICES under local authorisation rules or may not be part of the standard equipment service

Non-standard equipment can be divided into one of the following three categories:

- *Category 1:* Equipment purchased 'off the shelf' for an individual. It could be used without further adaptation by others but is subject to special authorisation rules
- *Category 2:* Bespoke equipment. Designed or adapted or bio-engineered and manufactured for a specific individual
- *Category 3:* Specialist equipment for which there is specific Department of Health provision under EL(95)5 regulation, etc. These are usually provided on prescription by medical staff e.g. PEG nutritional feeding, continuous ambulatory peritoneal dialysis (CAPD), intravenous chemotherapy for cancer treatment. Note: in many areas Category 3 equipment is not provided by the community equipment service

Note: HSC 2003/006, LAC 2003(7)

“30 ...Where the NHS has determined that an individual requires a particular piece of equipment, it should ensure either that the care home provides it; or provide it on a temporary basis until the care home is able to provide it; or provide it to the individual for as long as they need it. It would be unreasonable to expect care homes to provide items of equipment that, by the nature of the design, size, and weight requirements, need to be specifically tailored to meet the individual’s needs and would not be capable of being utilised by other care home residents.”

Local Policy

LP1. Local policy assumes that all care homes comply with the relevant standards within CSCI National Minimum Standards for Care Homes. Care homes are registered as fit for purpose for particular client groups. Equipment will not be provided if it is considered standard equipment for the registered client group.

LP2. Any item of personal equipment is provided for a named individual

LP3. Equipment will not be provided where it is to be used in communal facilities, or where suitable communal facilities are available within the care home.

LP4. It is considered reasonable that any care home should provide one standard hoist and at least one small, medium and large sling on each floor/unit as part of a risk management strategy. OT/DN services will access and advise but will not necessarily provide that equipment via ICES

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LP5. Expectation standard tilt and space chair available in all nursing care placements. Bespoke accessories will be provided via ICES. Consideration will be given to provide tilt and space chairs in Residential Care Homes where this supports the service user to remain in Residential Home environment.
LP6. Profiling beds can not be provided purely for moving and handling subject to full assessment by district nurse.

Any equipment will be provided according to Cumbria ICES eligibility criteria.

The table below sets out the proposed respective responsibilities for the provision of equipment for care homes and Cumbria PCT/Adult Social Care.

In the following

- CH = Care Home,
- ICES =Integrated Community equipment service,
- PCT = not normally part of the equipment service.
- 2= Health professional will provide own
- 3 = To be provided by the wheelchair provider

Items of Equipment	Nursing Home	Residential Home	Comments
For administration of medicine			
For administration of oral medicine e.g. measures, medication boxes	CH	CH	Medication via prescription/chemist packs
For administration of rectal medication e.g. gloves	CH	CH2	
For administration of medication by injection	CH	NHS	
Syringe Drivers	CH	NHS	
Bathing Equipment See LP1, LP2 and LP3			* Subject to OT assessment and local policies
#Range of bath seats	CH	*ICES	
#Range of bath boards	CH	*ICES	

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#Electric /manual bath lift	CH	*ICES	
#Range of shower chairs	CH	*ICES	
Beds			*Subject to assessment and local policy
General beds under risk management	CH	CH	
Standard hospital beds-variable height, profiling	CH	*ICES	
Non-standard beds e.g. for people with complex treatment and care needs	*ICES	*ICES	
Bed attachments for risk management			*Subject to OT assessment and local policies
Range of back rests	CH	*ICES	
#Rope ladders see LP2	CH	*ICES	
#Range of bed raisers see LP1	CH	*ICES	
#Mattress variaters see LP2	CH	*ICES	
Lifting pole	CH	*ICES	
Cot sides hospital bed / bumpers	CH	ICES	Subject to a full risk assessment. PCT for specific health need and only on beds provided by Health.
Chair raising equipment			
#Range of standard chairs	CH	CH	
#Chair blocks and raisers See LP1 LP2 LP3	CH	*ICES	
Dressing equipment/Environmental support			
Stocking aid	CH	*ICES	

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Tights aid	CH	*ICES	
Long handled shoe horn	CH	*ICES	
Helping hand	CH	*ICES	
#Perching stool see LP3	CH	*ICES	
Help with feeding			
Feeding equipment	CH	*ICES	* Subject to OT assessment and local policies

Note: There is a separate contract in place for enteral intravenous feeding

Mobility Equipment Walking equipment – provided on basis of assessment			*All subject to assessment
Wooden walking sticks	CH	CH	
Fischer walking sticks	NHS	NHS	
Walking frames	NHS	NHS	
Walking frames gutter	NHS	NHS	
Crutches axilla wooden	NHS	NHS	
Crutches metal elbow	NHS	NHS	
Walking frame with front wheels	NHS	NHS	
Standing frame	NHS	NHS	
Heavy –duty / Bariatric mobility equipment on request	NHS	NHS	
Delta type walker	NHS	NHS	
Mobility equipment – wheelchairs NB. Wheelchairs & accessories provided by wheelchair			

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services for permanent & substantial usage, need must be greater than 6 months. Wheelchairs will be supplied for short term if palliative.			
Wheelchairs Standard transit chairs, & wheelchair cushions for communal use	CH	CH	
Self propelling wheelchair prescribed for the individual user, or transit chair to be used by family (kept at family members home address NOT at residential/nursing home) only , on an almost daily basis.	Disablement Services Centre-Wheelchair Services.	Disablement Services Centre-Wheelchair Services.	PCT fund wheelchairs for local population via DSC.
Nursing equipment			
Syringes and needles	CH	NHS	
Vacutaine bottles for blood tests	CH	NHS	
Patient Repositioning See LP4			*Subject to assessment & local policies
For lifting and manual handling under Health and Safety at Work Act, e.g. hoists, slings, transfer boards, glide sheets	CH	CH	
Non-standard sling	*ICES	*ICES	
Standing turntable	CH	*ICES	
Prevention therapy and prevention pressure sores Mattresses Static			
Foam replacement mattress medium to high risk	CH	*ICES	*All subject to DN assessment
Mattresses Dynamic			
Alternating pressure <i>overlay</i>	CH	*ICES	
Alternating pressure <i>mattress</i>	CH	*ICES	

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<i>replacement.</i>			
Cushion			
Foam/Gel for medium /high risk and treatment	CH	*ICES	
Respiration			
For maintenance of respiration, e.g., suction units	CH	*ICES	
Simple nebulisers	CH	NHS	
Pulse oximeters	CH	NHS	
Resuscitation equipment	CH	CH	E.g. ambu bags and masks
Seating			*Subject to OT assessment and local policies
Standard seating	CH	CH	
Non- customised riser/recliners	CH	CH	
Non- customised tilt-in-space chairs	CH	*ICES	
Adults /children's complex seating e.g. bespoke chairs and accessories.	ICES	*ICES	
Toileting			*Subject to OT assessment and local policies
Bed pan /slipper pan	CH	CH	
Commodes standard	CH	CH	
Commodes-mobile.	CH	CH	
Toilet seats 2", 4", 6" See LP1/2/3	CH	*ICES	
Commodes – non standard e.g. bariatric see LP2	CH	*ICES	
Commodes – bespoke see LP2	*ICES	*ICES	

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Note – In the case of the equipment marked #, it is expected that ICES would generally not provide to care homes unless special circumstances apply.

The CSCI minimum standards for Care Home provision is described thus:

Standard 22 – Adaptations and equipment.

22.2 Service users have access to all parts of...communal and private rooms through the provision of ramps and passenger lifts...

22.3 The home provides grab rails and other aids in corridors, toilets, communal rooms and where necessary in service users in accommodation.

22.4 Aids, hoists and assisted toilets and baths are installed which are capable of meeting the assessed needs of service users.

Standard 24 – Individual accommodation: Furniture and fittings

24.1 The home provides private accommodation... which is furnished and equipped... to meet the assessed needs of the service user

24.2 Furnishings for individual rooms...clean comfortable bed at a suitable, safe height for the service user

Implementation

Clearly there will be some service users who have complex needs and require equipment over and above what is ordinarily classified as standard. This equipment falls into category 2. It is bespoke and it is designed or adapted or bio-engineered and manufactured for a specific individual. In category 2 the community equipment service may provide subject to assessment by the appropriate professional.

However, some equipment may fall into category 1 where it has to be purchased separately and may be subject to special authorisation rules, but **could be used** by others, without further adaptation. In category 1 there is an expectation that nursing care homes would provide this equipment. There will however, be occasions where care homes will not have appropriate equipment for a service user, even although it falls within standard or non-standard category 1. If this is the case the care home will be able to loan the equipment from ICES for a period of maximum 3 months, to enable the care home to purchase the equipment. Care homes will be notified of the expected return of the loaned equipment after 2 weeks. This will not compromise continuing care or transfer of care arrangements or the quality of care to the

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service user. At the end of the loan period the care home should return the loan equipment to ICES.

Pauline Wilson

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