



## **Reading Borough Council Equipment in Care Home Guidance**

Date: 17/04/2023

### **Purpose**

The purpose of this document is to clarify the responsibilities for the provision of equipment between Reading Borough Council, NHS Buckinghamshire, Oxfordshire & Berkshire West ICB and Care Homes including those offering residential or nursing care.

### **Overarching Principles**

Residents of care homes have the same rights to a service and access to an assessment of their needs, including the provision of some equipment, as any other resident in their local area.

Residents have the right to safety and security; respect, privacy, and dignity; freedom of thought, faith, and self-expression; autonomy and choice and social participation and inclusion. Equipment can assist in meeting and maintaining these rights and support a person's health and well-being.

The provision of equipment can increase or optimize the functional independence and well-being of care home residents and carers. It enables occupational engagement, choice and participation in activities that are important to an individual.

Care Homes have a duty to ensure that they can meet the needs of their residents. They should not accept people whose assessed needs they are unable to meet.

### **Definition of Terms**

*Care Home:* In this document the term 'care home' is used generically for all care homes. 'Residential home' is used for a residential/rest home and 'nursing home' for a care home with nursing.

*BCES* – Berkshire Community Equipment store

*Resident* - Any person who is living in a care or nursing home for either a short or long stay

### **1. Overarching Duties of Care Homes for Community Equipment Provision**

1.1 CQC Guidance for providers on meeting the regulations of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 states:

1.2 Care settings should be suitable for the purpose for which they are being used. Premises must be fit for purpose in line with statutory requirements and should take account of national best practice. Premises must be suitable for the service provided, including the layout, and be big enough to accommodate the potential number of people using the service at any one time. There must be sufficient equipment to provide the service. 15 (1)

1.3 Care homes are expected to provide a standard range of equipment for its normal population of residents, at their cost, at the start of and throughout the placement. It is accepted that at times residents may require non-standard/bespoke equipment (appendix....) and that this would fall outside of what a care home may be expected to provide. In this event the care home would need to approach the Local Authority or NHS (as appropriate), with evidence that they are unable to meet the residents need and request further assessment. Should the Local Authority or NHS agree, they will then arrange provision of equipment through the Berkshire Integrated Community Equipment Service (BCES)

1.4 Definitions of standard and non-standard/bespoke equipment are included in this document, and local guidance regarding who is responsible for the provision of each type of equipment is available. The care home has a responsibility to continue to assess and report the need for a review of the equipment needs of its residents, and is responsible for day-to-day maintenance, including cleaning.

1.5 Where the equipment has been provided through BCES it is the responsibility of the prescriber (Local Authority or NHS) to demonstrate or arrange for the demonstration of the equipment to the user and a nominated person within the care home and to provide advice re maintenance required. Thereafter it is the responsibility of the care home to provide instruction and training to any other people who require it.

1.6 When the care home has privately purchased equipment, it remains their responsibility to arrange the appropriate training according to the relevant legislation/guidance. This can often be available through the equipment supplier.

1.7 Sufficient equipment and/or medical devices that are necessary to meet people's needs should be always available and devices should be kept in full working order. They should be available when needed and within a reasonable time without posing a risk. 12(2)

1.8 Equipment must be always accessible to meet the needs of the people using the service. This means it must be available when needed or obtained in a reasonable time so as not to pose a risk to the person using the service. 15(1)(f)

1.9 The National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care - July 2022 states that where individuals in receipt of NHS Continuing Healthcare require equipment to

meet their care needs and they are supported in a care home setting, the care home may need to provide certain equipment in order to meet regulatory standards or as part of its contract with the Integrated Care Board (ICB). (Section 325 (a))

1.10 The National Minimum Care Standards state that care homes should be 'fit for purpose'. To be 'fit for purpose' the home must be able to demonstrate that it is successful in meeting its stated aims (Section 23 (1) of the Care Standards Act 2000.

1.11 Under Standard 1, each care home must produce a Statement of Purpose to ensure that it is meeting the needs of its residents. For example, if a home states that it caters for the needs of people with physical disabilities in order to be 'fit for purpose' it must have good wheelchair access and a range of equipment that is likely to be needed by people with physical disabilities.

1.12 In order to meet these needs, the expectation is that the care home should have an adequate supply of equipment/medical devices to fulfil their obligations to residents and to their workforce for health and safety. Equipment includes, but is not limited to, chairs, beds, clinical equipment, telecare, and telehealth equipment and moving and handling equipment. Account must be taken of variations in size i.e., height, width, and weight of residents. 1.13 The Health and Safety at Work Act (1974) requires employers to provide suitably maintained equipment, staff training, and supervision in a safe working environment. It is the employee's responsibility to follow instructions and to ensure their own safety and that of others at all times. The Management of Health and Safety at Work Act (1992) requires employers to ensure risk assessments are carried out and that risks are minimised as far as possible.

1.14 Details of what care homes (residential care homes and nursing care homes) are expected to provide as "standard" and what they are not expected to provide, can be found in **Appendix 1**

## **2. Equipment that Care Homes are not expected to provide - non- standard /bespoke equipment**

2.1 It is expected that the Home will have a variety of equipment to meet most of their resident's needs. However, there will be a small number of Residents who may need a bespoke piece of equipment provided or purchased to meet their needs.

2.2 For the purposes of this guidance, bespoke equipment refers to equipment that is, designed or adapted or bio-engineered and manufactured for a specific individual.

2.3 By definition "bespoke" means that it cannot be used to meet another resident's care needs. The attached Equipment Matrix provides full details of responsibility for items of equipment.

2.4 Non-standard or bespoke equipment will be provided if it is not an item which the care home has undertaken to supply under the terms of its Statement of Purpose or in its resident plan of care.

2.5 In order for NHS or Local Authority to supply, there must be an assessment by equipment prescriber who is authorised to prescribe specialist equipment i.e., not an Enhanced/ Trusted assessor.

2.6 The equipment will be provided via BCES for the resident's assessed needs and will not be used for any other residents. It will be returned to BCES when it is no longer needed. There is no time limit on how long this non-standard/ bespoke equipment can be used by the resident to meet their needs. If the equipment provided for a specific individual is subsequently used with another resident and an incident or accident occurs, the care home will be held liable.

2.7 The care home is responsible for ensuring that all equipment continues to meet the needs of the residents. If there are any concerns or changes, the care home manager should contact the Local Authority or NHS to organise a review.

2.8 In the event of loan equipment failure the care home manager is required to promptly report this to BCES who will arrange repair or replacement as appropriate.

### **3. Seating**

3.1 It is the care home's responsibility to provide a range of seating options suitable for the resident group normally admitted. The range of seating to be supplied by care homes would include high seat chairs, riser recliner chairs, tilt in space. As a resident's needs change, so should seating provision be updated. It is important to note that there are more stringent rules for fire retardant materials in a care home setting compared to a domestic setting. Manufacturers will be able to give advice.

3.2 This means that chairs normally provided for domestic use are likely not to be suitable for care homes. On occasions there may be the need to provide individual bespoke moulded seating; an assessment will be required by one of the following as appropriate: occupational therapy/wheelchair/ nursing service and/or physiotherapy.

### **4. Pressure Prevention/Relieving Equipment**

4.1 Care homes are responsible for the provision of all equipment such as pressure reducing mattresses, cushions, and overlays and/or pressure relieving overlays, cushions, and replacement mattresses to maintain tissue viability (static and dynamic systems) for those residents assessed to be at risk of developing pressure related damage or have existing pressure damage. Residential homes should contact District Nurses Services for further advice and assessment.

4.2 It is the responsibility of the care home to ensure that all beds, mattresses, and cushions are fit for purpose and in serviceable condition. Equipment should be inspected regularly and cleaned according to the manufacturer's instructions, to avoid any cross infection. Dynamic mattresses and cushions should have an annual maintenance check.

4.3 In order to assist in determining which residents may be vulnerable to developing pressure related damage, a formal risk assessment should be carried out to help identify the intrinsic risk factors. This must be undertaken by a professional who has had the appropriate training. Once risk

has been identified action must follow to reduce risk wherever possible. These actions must be fully documented in the resident's records.

4.4 If the resident is identified as at risk of developing pressure injuries or has existing areas of pressure damage, the support/care plan must include the provision of equipment to prevent and/or treat these injuries and it must be reviewed regularly. As residents needs change the provision of equipment also needs to be reviewed.

4.5 All staff involved with residents who are vulnerable to pressure damage should access relevant training or education in pressure ulcer risk assessment, prevention, and treatment.

## 5. Manual handling equipment

5.1 It the responsibility of the care home to provide a range of manual handling equipment for their residents and to meet their obligations to their workforce to maintain health and safety. All homes should have sufficient equipment to facilitate care in a safe, timely and appropriate manner.

5.2 Care homes should complete a manual handling risk assessments for all customers who have such needs, which should be done by a suitably trained person. The assessment should be dated and indicate a review. The assessment should consider resident's health and care needs and will should inform a manual handling care plan that provides sufficient detail and instruction on how to complete the task. For example, number of carers, equipment used etc. Guidance can be found on Health and Safety Executive website. <http://www.hse.gov.uk/healthservices/moving-handling.htm>

5.3. Care homes should ensure all staff supporting residents with manual handling should be appropriately trained. Staff should be able to dynamically risk assess and be skilled in identifying any changes in the resident's functional ability that may indicate a need for re-assessment.

5.4 Where resident skin-to-skin contact with equipment is likely, such as hoist slings and slide sheets, in order to reduce risk of cross infection, care homes are recommended to provide equipment identified for the resident's sole use.

## 6. Wheelchairs

6.1 It is the responsibility of the care home to provide standard transit (attendant propelled) wheelchairs and pressure relieving cushions for their residents. Subject to assessment, the NHS wheelchair service will loan self-propelling and powered wheelchairs to residents to support independent mobility. For pressure ulcer prevention, safety and comfort, residents who are not independent wheelchair users should not be left sitting in a transit wheelchair. Residents should be supported to transfer into a supportive armchair with an appropriate pressure relieving cushion.

6.2 Residents who have a need for a transit wheelchair, but due to complex physical disability, could not safely sit in a standard transit chair are eligible for assessment by the NHS wheelchair

service. Consideration will then be given to NHS provision of a wheelchair with specialist bespoke postural supports to meet the complex postural needs of the resident. An example of this is where a resident leans heavily to one side in sitting and is unable to independently correct their position.

## **7. Operational Guidance on the Issue and use of Equipment in Care Homes**

7.1 It is important to consider the safe working weight limit of equipment in relation to its user. Manufacturers' specifications vary and safe working loads should be checked against manufacturers' specifications. A thorough risk assessment which includes task, individual, load, environment, and other factors (TILEO) is indicated in all cases.

7.2 Where the equipment has been provided through BCES store it is the responsibility of the prescriber to demonstrate or arrange for the demonstration of the equipment to the user and a nominated person within the care home and advice re maintenance required. Thereafter it is the responsibility of the nominated care home staff to provide instruction and training to any other people who require it. A record should be maintained of appropriate instruction together with any method statement and any visual prompts.

7.3 When the care home has privately purchased an item, it is their responsibility to arrange the appropriate training according to the relevant legislation/guidance. This should be available through the equipment supplier. Community equipment services may be willing, subject to capacity, to help care homes with advice on sourcing and replacing privately purchased equipment

7.4 When a resident purchases equipment privately, they must assume full responsibility for arranging training, maintenance, and insurance.

7.5 Day to day operational cleaning and decontamination of loan equipment is the responsibility of the care home and must follow the manufacturer's instructions and instructions provided by the community equipment service.

7.6 The care home or resident will need to meet the cost of all repairs arising from negligence, damage or inappropriate use of loan equipment or the cost of replacement if it is lost or beyond repair.

7.7 All repair and maintenance of BCES loan equipment should be coordinated and carried out by BCES staff or authorised service provider. Appropriate records need to be maintained for tracking and traceability of the loan items by the integrated community equipment service. The care home manager must notify BCES to arrange collection in the following circumstances involving loaned equipment:

- Resident no longer requires a loaned item of equipment;
- Resident has died or moved to another location;
- Resident needs have changed, and the loaned item may need to be replaced;
- Equipment breakdown or repair required.

7.8 Equipment risks need to be managed in the context of advice from the Medical Health products Regulatory Agency (MHRA)

7.9 The loan of equipment is non-discriminatory, in line with legislation, policies and guidance. Ethnic and cultural aspects must be considered. It may be necessary to seek appropriate advice.

## **8. Duty of LA to safeguard**

8.1 Where the LA has reasonable cause to suspect that an adult in its area is experiencing or at risk of abuse or neglect as a consequence, they have a duty to make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken (whether under this Part or otherwise), and if so, what and by whom (Care Act 2014).

8.2 The LA may at its discretion offer short-term provision of equipment if the provider is unable to source appropriate equipment in a timely manner and there is a risk to the safe delivery of essential personal care/significant impact on the individual's health and wellbeing. The LA are required to report all safeguarding concerns relating to care home to the Care Quality Commission who are responsible for monitoring, inspect and regulate services to make sure that they meet fundamental standards of quality and safety.

## **9. Equipment required in order to prevent delay in transfer of care from hospital to care home.**

9.1 The LA may at its discretion offer short term provision (of up to six weeks) of equipment if a provider is unable to source necessary and appropriate equipment needed to facilitate delivery of safe care at point of transfer.

## **10. General Legal Responsibilities of the Care Home re Community Equipment Provision**

- Health & Safety at Work Act [1974];
- The Lifting Operations and Lifting Equipment Regulations (1998) - LOLER;
- The Provision and Use of Work Equipment Regulations (1998) - PUWER;
- The Manual Handling Operations Regulations (1992);
- Care Standards Act (2000)
- National Minimum Care Standards
- National Framework for National Framework for NHS Continuing Healthcare and NHS funded Nursing Care;
- The Care Act [2014]

## APPENDIX 1 – EQUIPMENT MATRIX

### Equipment Responsibility Matrix for Care Services

#### Abbreviations:

BCES	Berkshire Community Equipment Service
NHS	Specialist health equipment not normally provided by BCES
ICB/CHC	Integrated Care Board/Continuing Health Care
GP	General Practitioner
LA	Local Authority

Type of Equipment	Arrangements & responsibilities for provision and maintenance		Comments
	Care Home with Nursing	Residential Care Home	
<b>For administration of medicine</b>			
For administration medicine e.g., measures, medication, Syringe drivers	Care Home	Care Home/NHS	
<b>Bathing Equipment (including plus size)</b>			
Range of bath seats	Care Home	Care Home	
Range of bath boards	Care Home	Care Home	
Powered bath lift	Care Home	Care Home	
Range of shower chairs	Care Home	Care Home	
Range of shower stools	Care Home	Care Home	
Bespoke/bio engineered shower chairs	Care Home/ ICB	LA/ ICB	NB Plus size is no longer considered non- standard /bespoke equipment.

<b>Beds (including plus size)</b>			
Standard powered variable height, profiling beds, may include integral cot sides and lever	Care Home	Care home/ NHS/ICB	In exceptional circumstances, beds may be loaned on a temporary basis (6 weeks) following assessment by a clinical practitioner.e.g.. to facilitate hospital discharge, to manage a period of increased need such as illness/terminal care/pressure care, short term rehabilitation.
Non-standard/bespoke beds for people with complex treatment and care needs	Care Home/ICB/	LA/ICB/	Joint funding arrangement may be considered.

<b>Bed Accessories</b>			
Bed blocks and raisers	Care Home	Care Home	
Range of back rests	Care Home	Care Home	
Bed Lever	Care Home	Care Home	
Blanket Cradle	Care Home	Care Home	
Powered Mattress Variator	Care Home	Care Home	
Over bed trolley / table	Care Home	Care Home	
Bed Rails, inc Divan bed rails (and bumpers) Profiling variable height bed rails (and bumpers)	Care Home	Care Home	
<b>Chair Raising Equipment</b>			
Range of standard chairs	Care Home	Care Home	
Chair blocks and raisers	Care Home	Care Home	
<b>Dressing Equipment</b>			
Stocking aid	Care Home	Care Home	
Tights aid	Care Home	Care Home	
Long handled shoehorn	Care Home	Care Home	
<b>Help with Feeding</b>			
PEG feeding equipment and consumables	NHS	NHS	Provision through acute hospitals
For intravenous feeding and transfusion	NHS	NHS	Provision through acute hospitals

Equipment e.g., plate accessories	Care Home	Care Home	E.g., Plate guards
Range of feeding equipment	Care Home	Care Home	E.g., Adapted cutlery
<b>Environmental Support</b>			
Helping hand	Care Home	Care Home	
Trolley	Care Home	Care Home	
Perching stool	Care Home	Care Home	
<b>Mobility Equipment</b>			
Walking stick	Care Home	NHS	Mobility aids prescribed by appropriately training clinical practitioner.
Fisher walking stick	NHS	NHS	
Walking frames with/without wheels	NHS	NHS	
Gutter walking frame	NHS	NHS	
Elbow crutches	NHS	NHS	
Gutter crutches	NHS	NHS	
3 or 4-wheeled walkers	NHS	NHS	
Standing frame	NHS	NHS	
Heavy-duty mobility equipment	NHS	NHS	
Ramps	Care Home	Care Home	
Assorted grab rails	Care Home	Care Home	
<b>Wheelchairs</b>			
Push wheelchairs, standard transit chairs and basic wheelchair cushions	Care Home	Care Home	For common use, variety of sizes will be needed.
Wheelchairs and accessories provided by wheelchair services for permanent and substantial usage after trauma or short-term palliative care	NHS	NHS	For a named individual to use and following an assessment by a qualified clinical practitioner. Referral to NHS Wheelchair Service who require assurance that the wheelchair is required to facilitate for independent mobility; it is not as an alternative to seating provision. Or that bespoke seating required to maintain a safe posture whilst being transported.
<b>Nursing Equipment</b>			
Venepuncture	NHS	NHS	Via GP /nursing prescription

Vacutaine bottles for blood tests	NHS	NHS	Via GP/nursing prescription
Syringes and needles	Care Home	NHS	Via GP/nursing prescription
<b>Catheterisation</b>			
For management of catheterisation e.g., bag, stand, packs	Care Home	NHS	Via GP/nursing prescription
Prescription for catheters and bags	NHS	NHS	Via GP/nursing prescription

<b>Dressings</b>			
For procedures related to aseptic and clean dressings	NHS	NHS	Via GP/nursing prescription
<b>Nursing Procedures</b>			
Routine nursing procedures e.g., testing urine, BP, BM (glucometer)	Care Home	NHS	District Nurses and Specialist Nurses. BM stix available for some diabetic patients (e.g., if on insulin) on prescription. Otherwise, would be purchased by Care Home
<b>Moving and Handling Equipment</b>			
Mobile Standard Hoist	Care Home	Care Home	
Ceiling Track Hoists	Care Home	Care Home	
Plus size Hoists	Care Home	Care Home	
Standard slings	Care Home	Care Home	
Bespoke/bio engineered slings	ICB	LA/ICB	
Standing Hoist	Care Home	Care Home	
Turn Aids	Care Home	Care Home	E.g ETAC, Romedic ReTurn
Transfer Boards	Care Home	Care Home	
Handling Belts	Care Home	Care Home	
Slide sheets/one way glide sheets	Care Home	Care Home	

<b>Pressure Care</b>			
Appropriate pressure care treatment and equipment such as wet and dry dressing	Care Home/NHS	Care Home/NHS	
High specification foam overlays/mattresses and cushions for low to medium risk	Care Home	Care Home	
Visco elastic / memory foam mattresses/air mattress/cushions – for medium to high risk	Care Home	Care Home/NHS	
Alternating Dynamic (and pump) overlays/ mattresses/ cushions – for medium to high risk	Care Home	Care Home/NHS	
<b>Respiration</b>			
For maintenance of respiration e.g., suction units	Care Home/NHS	NHS	
Oxygen cylinders/concentrators	NHS	NHS	
Oxygen administration consumables	NHS	NHS	
Simple nebulisers	Care Home	NHS	
Resuscitation equipment (e.g., mouth to mouth)	Care Home	Care Home	E.g., ambu masks and bags
Pulse oximeters	Care Home	NHS	
Non-standard complex. Nebuliser and humidifiers (e.g., for ENT, CPAP BIPAP)	NHS	NHS	Specialist secondary care services
<b>Therapeutic Equipment</b>			
Standing frames	Care Home/NHS	NHS	Assessment by a clinical practitioner
Postural supports/sleep systems	NHS/ICB	NHS/ICB	Assessment by a clinical practitioner

Seating			
Chairs including winged, riser/recliner, tilt-in-space, adjustable height, orthopaedic. Chairs with basic postural support (lateral, lumbar support) and integral pressure relief.	Care Home	Care Home	
Bio-engineered/moulded seat /inserts inc. seating as part of 24-hour posture management	NHS	LA/NHS/ICB	Assessed and prescribed by clinical practitioner to enable eating, drinking, head control and swallowing, and contracture prevention
Sensory			
Range of sensory impairment equipment	Care Home	Care Home/LA	Care Homes are expected to provide a range of standard equipment such as visual/vibrating fire alarms, door entry systems, hearing loops including but not limited to televisions, writing frames, signature guides, talking clocks or personal listeners. Other specialist equipment may be available to loan through referral and assessment (Sensory Needs Team) LA would make provision of by individual use by resident e.g., talking clocks to facilitate social inclusion, and not to replace care.
Assistive Technology			
Range of Assistive technologies	Care Home	Care Home	E.g., monitoring tools/ sensors such as door sensors, falls detectors, bed exit monitors.
Telehealth			
Range of Telehealth items	NHS	NHS	E.g., vital signs monitoring, e.g., epilepsy monitor. /Pulse Guards
Toileting			
Bedpans and urine bottles	Care Home	Care Home	
Range of commodes	Care Home	Care Home	
Raised toilet seats	Care Home	Care Home	
Toilet frames	Care Home	Care Home	
Continence pads/ Special sheets	Care Home/NHS	Care Home/NHS	