

Company Name:

CARE HOMES (including Mental Health)	Version 11.1ER (includes selected <i>Easy-Read</i> formats)
<b>CONTENTS (LIST OF RECORD FORMS &amp; WORKSHEETS)</b>	

## 1. BUSINESS MANAGEMENT:

### Forms 1-000 to 1-099: SPECIFIC FORMS FOR MANAGEMENT POLICIES:

01-1-000	Disability / Special Needs Monitoring Form
01-1-001	Disability Needs Assessment - <i>Inclusion Checklist</i>
01-1-002	Equality Impact Assessment - <i>Policy Screening Form</i>

### Forms 1-100 to 1-199: GENERAL ADMINISTRATION:

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01-1-101	Register of Service Users, GPs & Keyworkers
01-1-102	List of Useful Addresses
01-1-103	Register of Suppliers & Contractors
01-1-104	Register of Competent Persons
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01-1-110	Log of Visits by External Authorities
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### Forms 1-200 to 1-299: ORGANISATION, STAFFING & TRAINING:

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01-1-201	Interview Record
01-1-202	Job Applicant Reference Report
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01-1-204	Job Applicant Summary
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01-1-206	Equal Opportunities & Diversity Monitoring Form - <i>Job Applicants</i>
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01-1-209	Contract of Employment
01-1-210	Induction Training Plan & Record
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01-1-213	Staff Policy Awareness
01-1-214	Appraisal of External Training Course
01-1-215	Staff Skill Mix Profile
01-1-216	Staff Performance Appraisal
01-1-216-ER	Staff Performance Appraisal ( <i>Easy-Read format</i> )
01-1-217	Employee Supervision Record
01-1-218	Employee Portfolio
01-1-219	Staff Leave & Absence Record
01-1-220	Holiday Entitlement Record
01-1-221	Staff Duty Rota
01-1-222	Employee Exit Interview
01-1-222-ER	Employee Exit Interview ( <i>Easy-Read format</i> )

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**Forms 1-300 to 1-399: EMPLOYEE SPECIFICATIONS:**

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01-1-301	Employee Specification - <i>Manager</i>
01-1-302	Employee Specification - <i>Senior Care Assistant</i>
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01-1-304	Employee Specification - <i>Care Assistant</i>
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01-1-313	Employee Specification - <i>Activities Assistant</i>
01-1-314	Employee Specification - <i>Receptionist</i>

**Forms 1-900 to 1-999: DEMENTIA CARE:**

01-1-900	Staff Training Record - <i>Person-Centred Dementia Care</i>
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## **2. COMPLIANCE MANAGEMENT:**

**Forms 2-000 to 2-099: SPECIFIC QUALITY SELF-ASSESSMENT PLANS:**

01-2-000	Annual Plan of Quality Self-Assessments
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**Forms 2-200 to 2-299: FEEDBACK ON SERVICE QUALITY:**

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01-2-201	Service User Questionnaire
01-2-201-ER	Service User Questionnaire ( <i>Easy-Read format</i> )
01-2-202	Family & Relatives' Questionnaire
01-2-202-ER	Family & Relatives' Questionnaire ( <i>Easy-Read format</i> )
01-2-203	Visitor Questionnaire
01-2-203-ER	Visitor Questionnaire ( <i>Easy-Read format</i> )
01-2-204	Staff Questionnaire
01-2-204-ER	Staff Questionnaire ( <i>Easy-Read format</i> )
01-2-205	Complaint Record
01-2-206	Complaints Log
01-2-207	Staff / Management Review Meetings ( <i>Minutes &amp; Action Plan structure</i> )
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**Forms 2-200 to 2-299: DEMENTIA CARE:**

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### 3. LOOKING AFTER THE SERVICE USER:

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01-3-000	Enquiry for Residential Care
01-3-001	Enquiry Feedback
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01-3-003	Baseline Assessment of Needs for Daily Living - <i>Service User</i>
01-3-004	Risk Assessment - <i>Service User</i> - Daily Living
01-3-005	Risk Assessment - <i>Service User</i> - Bathing & Showering
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01-3-008	Service User - <i>Continence Assessment</i>
01-3-009	Risk Assessment - <i>Bed Rails</i>
01-3-010	Service User - <i>Assessment of Nutritional Needs</i>
01-3-011	Service User Religious & Cultural Requirements
01-3-012	Service User Diet, Ethnicity & Religion - <i>Master Matrix</i>
01-3-013	Consent to Care & Treatment - <i>Service User</i>
01-3-013-ER	Consent to Care & Treatment - <i>Service User (Easy-Read format)</i>
01-3-014	External Specialist Service Providers - <i>Master List of Agencies Used</i>
01-3-015	Body Map
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#### Forms 3-100 to 3-199: ADMISSION & CARE PLANNING:

01-3-100	Contract for Residential Care
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01-3-101	Service User Admission Checklist
01-3-102	Record of Admission to the Home
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01-3-104	Personal Care Plan - <i>Service User</i>
01-3-104-ER	Personal Care Plan - <i>Service User (Easy-Read format)</i>

#### Forms 3-200 to 3-299: SERVICE USER CARE:

01-3-200	Moving & Assisting a Service User
01-3-201	Record of Service User's Medical Appointments
01-3-202	Record of GP Visits to a Service User
01-3-203	Daily Report of Service User Care
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01-3-206	Service User's Total Balance Sheet
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01-3-208	Service User's Pension Book Register
01-3-209	Service User Reality Orientation
01-3-210	Plan of Weekly Organised & Community Visits
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01-3-212	Checklist for Organised Excursions
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#### Forms 3-300 to 3-399: MANAGEMENT OF MEDICINES:

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01-3-315	Covert Medication - <i>Review of Continued Need</i>
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01-3-317	Medication Risk Management Plan - <i>Service User</i>
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01-3-319	Approval to Handle Medicines - <i>Care Staff</i>
01-3-320	Medicine Accountability Audit
01-3-321	Homely / Household Remedies - <i>Risk Assessment</i>
01-3-322	List of Approved Homely / Household Remedies - <i>Service User</i>
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01-3-402	Staff Training Plan - Summary & Record - <i>Food Handling Staff</i>
01-3-403	Staff Training Plan - <i>Food Handling Staff</i>
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01-3-405	List of Catering Contractors to the Home
01-3-406	Start-up & Closing Checks of Food Hygiene Standards - <i>Daily Records</i>
01-3-407	Start-up & Closing Checks of Food Hygiene Standards - <i>Problems &amp; Action Taken</i>
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01-3-409	Food Hygiene Audit - <i>Food Hygiene (England) Regulations 2006</i>
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01-3-411	Temperature Probes - <i>Calibration Check</i>
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01-3-421	Daily Calorie Intake - <i>Service User Nutrition</i>
01-3-422	Diabetes Risk Assessment
01-3-423	Diabetes Care Plan
01-3-424	Risk Assessment - <i>Service User with Dysphagia</i>
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01-3-501	Assessment of a Service User's Mental Capacity - <i>Assessment for a Special Decision</i>
01-3-502	Risk Assessment - <i>Safeguarding Vulnerable Adults</i>
01-3-503	Deprivation of Liberty Safeguards - <i>Care Plan Guidance Checklist</i>
01-3-504	Anti-bullying Checklist
01-3-505	Bullying Report Form
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01-3-510	Safeguarding Incident - <i>Staff On-going Risk Assessment</i>
01-3-511	Safeguarding Vulnerable Persons - <i>Domestic Violence Case History</i>
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01-3-700	End-of-Life Care Strategy - <i>Service User Contact List</i>
01-3-701	End-of-Life Care Strategy - <i>Maintenance of Service User Health &amp; Assessment of Needs</i>
01-3-702	End-of-Life Care Strategy - <i>Advance Planning According to Service User's Wishes</i>
01-3-703	End-of-Life Care Strategy - <i>Preparation for Death</i>
01-3-704	"Do Not Resuscitate" (DNR) Record - <i>Service User</i>
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**Forms 3-800 to 3-839: MENTAL HEALTH:**

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01-3-803	Risk Assessment – <i>Tendency to Violence &amp; Assault</i>
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01-3-805	Assessment of Service User's Mental Health - <i>Anxiety</i>
01-3-806	Assessment of Service User's Mental Health - <i>Bipolar Disorder (Manic Depression)</i>
01-3-807	Assessment of Service User's Mental Health - <i>Schizophrenia</i>
01-3-808	Discharge into the Community - <i>Meeting Mental Health Needs</i>

**Forms 3-840 to 3-845: TREATMENT OF SUBSTANCE ABUSE:**

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01-3-841	Alcohol Dependence Questionnaire – <i>Service User Baseline Assessment</i>
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01-3-843	Core Service User Care Plan – <i>Alcohol Detoxification</i>
01-3-844	Alcohol Withdrawal – <i>Progress Assessment</i>

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01-3-900 Care Home Design for Dementia Care – *Adult Checklist*  
01-3-901 Baseline Assessment of Needs for Daily Living – *Service User with Dementia*  
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**4. HEALTH & SAFETY MANAGEMENT:**

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01-4-001 Risk Assessment - *Pregnant Staff Member*  
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01-4-003 Risk Assessment - *VDU Workstations*  
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01-4-207 Infection Control Checklist - *Sharps Disposal*  
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01-4-209 Infection Control Checklist - *Bathrooms & Toilets*  
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01-4-216 Infection Admissions  
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**Forms 4-300 to 4-399: MAINTENANCE OF PREMISES, UTILITIES & EQUIPMENT:**

01-4-300 Register of Home Equipment & Installations  
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01-4-303 Risk Assessment - *Vehicles used for Transporting Service Users*  
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- 01-4-305 Risk Assessment - *Wheelchairs*
- 01-4-306 Portable Electrical Appliances - *Equipment Register*

Forms 4-400 to 4-499: **ENVIRONMENTAL SAFETY & SECURITY:**

- 01-4-400 Visitor Register
- 01-4-401 COSHH Register of Substances Used in the Home
- 01-4-402 Substance COSHH Assessment Record
- 01-4-403 Temperatures - *Hot Water Supply*
- 01-4-404 Temperatures - *Environmental Warmth*
- 01-4-405 Radicalisation & Extremism - *Risk Assessment for Vulnerable Persons ("PREVENT")*
- 01-4-406 Emergency Kit ("Grab Bag") - *Checklist*
- 01-4-407 Carbon Monoxide Poisoning - *Environmental Risk Assessment*
- 01-4-408 Safe Storage of Denture Tablets in a Service User's Room - *Risk Assessment*

Forms 4-500 to 4-599: **ACCIDENTS & INJURIES:**

- 01-4-500 Accident Record
- 01-4-501 Audit of Accidents & Incidents
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- 01-4-504 Contents Check of First Aid Box
- 01-4-505 List of Qualified First Aiders

Forms 4-600 to 4-699: **RISK ASSESSMENT:**

- 01-4-600 Risk Assessment of a Care Home