

# Statement of Purpose

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PRAXIS CARE Ardee 'Cornerstones'

8 Rockfield, Stoney Lane, Ardee, Co. Louth



Registration Number 0032975

Date: 29/02/2024

Expiry Date of Registration: 20 September 2024

Revision Number: 9

<p><b>Registered Provider:</b> (as per Certificate of Registration)</p>	<p>Praxis Care,  Unit 18, Ardee Business Park, Hale St, Ardee, Co. Louth Telephone: 041-6871904 or 048-902-3455  The Person carrying out the business of the service (Provider Nominee) is Amanda Gray, Director of Care</p>
<p><b>Person in Charge:</b> (as per Certificate of Registration)</p>	<p>Noeleen Ryan Mobile: 085-8705193 Email: noeleenryan@praxiscare.ie</p>
<p><b>Persons participating in Management:</b> (as per Certificate of Registration)</p>	<p>Head of Operations Noeleen Ryan Mobile: 085-8705193 noeleenryan@praxiscare.ie</p>

## Services and Facilities in the Designated Centre

### Aims and objectives of the designated centre:

The service will provide appropriate quality care and support to individuals with an Intellectual Disability, Autism, mental ill health, dementia or brain injury and who are assessed as requiring this input to enable them to live as independently as possible in his/her own community.

### The specific care and support needs that the designated centre is intended to meet:

Praxis Care Cornerstones provides a full range of care and support needs for a maximum of 4 residents with an intellectual disability, Autism, mental ill health, dementia or brain injury. The residents require medium to high care and support.

The service endeavours to meet the following needs. (Please note that the following is not an exhaustive list)

#### Housing Support

- Assistance acquiring essential household items
- Locating essential local services
- Paying bills
- Maintaining the property
- Safety issues
- Signposting to specialist services
- Budgeting
- Good neighbour relations / dealing with disputes
- Essential daily living tasks
- Emotional support
- Supporting people to comply with treatment
- Where appropriate, notifying agencies of concerns about a service user

#### Care Tasks

- Administering medications
- Health care
- Specific rehabilitation tasks
- Intensive / therapeutic behaviour management
- Supervision of people at night - time
- Personal care

### Facilities which are to be provided

- Cornerstones is a mixed residential home, providing care and support for up to four service users with an intellectual disability, autism, mental ill health, dementia or brain injury
- Praxis Care Cornerstones will provide housing, care and support to residents with an intellectual disability, autism, mental ill health, dementia or barain injury, who will live there on a permanent basis. The house is a detached dormer bungalow on 0.25 acres, located in a quiet cul-de-sac in central Ardee.
- As you enter the front door of the house, there are three Service User bedrooms to the right. All Service User bedrooms are en-suite. To the left, a hotpress is on the right and a staff office and visitor/staff toilet is on the left. A Service User bedroom is past the office on the left, adjacent to the kitchen. The laundry room and a small sitting room are off the hallway to the fourth bedroom. The sitting room is further down the hall, past the kitchen. There is a newly built staff bedroom and bathroom and storage press which is accessible through the sitting room and laundry room. The hallway for this area has a door which leads out to the back garden. There are double doors from the kitchen, which access the garden where there is a boiler room, housing a second fridge, a freezer and tumble dryer. There is also a garden shed storing the lawnmower and garden tools.
- Further information on the service can be found in the Residents Handbook.
- Praxis Care is committed to the ongoing training and professional development of all staff. There will be regularly scheduled supervision of all staff members in order to facilitate high standards of care for all service users within the service

## Services which are to be provided

Praxis Care works with residents, and his/her friends, relatives or representatives (if appropriate) to draw up a written plan of the support the organisation will aim to provide. The plan sets out the resident's needs, risks that need management; support/care provided and desired outcomes.

Each resident is provided with a copy of his/her assessment and plan and is encouraged to participate as fully as possible in the support planning process. It is a priority that all residents are supported and are able to access this information in a user friendly format and in a language that is age appropriate to aid them in their understanding.

Prior to the commencement of a service at Praxis Care Ardee, a risk assessment is carried out with all residents and agreed upon by social workers. This risk assessment is reviewed on an individual level on a regular basis but particularly when there have been significant changes to the individual's life.

There is a formal review process within three months after first placement and at least annually thereafter. An emergency review can be convened at any time. From time to time further assessments of the service user's needs are required to ensure that the support provided by the organisation is relevant to helping the service user achieve his/her full potential.

All Service Users are empowered to enjoy everyday living, irrespective of the complexity of their needs. This is evidence based through the setting of person centred outcomes which are measured on a regular basis to evidence achievement. The staffing of the centre reflects the care and support needs of the service users which are outlined in their personal plans.

## Admissions to the Designated Centre

<b>Registered Bed Numbers:</b>	The maximum number of persons that may be accommodated at the designated centre is 4
<b>Age range of residents to be accommodated:</b>	Cornerstones offers accommodation to residents aged over 18 years.
<b>Gender of residents to be accommodated:</b>	Cornerstones offers accommodation to male residents only.

### Criteria used for admissions:

#### Referral Process

Referrals for admissions will only be accepted from members of **Disability Services (H.S.E.)** multi-disciplinary team. Referral agents from outside the geographical area should in the first instance contact their local Health Service Executive office.

- Noeleen Ryan, Head of Operations, Praxis Care  
085 8705193
- Noeleen Ryan, Person in Charge, Cornerstones , Praxis Care, 085 8705193

#### ***Referrals should meet- certain criteria below***

- \* An application form must be fully completed and include information on risk history and finance
- \* An applicant must be aged over 18 years at time of admission
- \* The applicant and carer (if so desired) will be invited to visit the service and discuss his/her needs with Praxis Care staff.
- \* A joint risk assessment conducted by the relevant parties must indicate compatibility with current residents.
- \* The registered provider and person in charge must ensure that the risk assessment protects all residents from abuse.
- \* The registered provider must be satisfied that the appropriate staffing and resources are available to meet the needs of the individual.
- \* The registered provider must be satisfied that there is adequate multi-disciplinary input to support the individual's needs.

- \* The Person in Charge must be satisfied with the training and educational plan for the individual.
- \* The Person in charge must be satisfied that the designated centre can meet all the needs of the individual, such as behavioural or communication for example.
- \* An Admission Panel will meet to consider all applications. The referral agent or any other relevant party will be invited to discuss the application and provide further information/clarification as appropriate.
- \* The registered provider will require a full health assessment and immunisation records for the individual.
- \* The registered provider will complete a comprehensive joint risk assessment involving the relevant multidisciplinary personnel. The registered provider has to be satisfied that all residents will be protected from abuse and compatible to reside together within the designated centre.
- \* The Admission Panel's decision will be communicated to the referral agent as soon as possible and will always be followed up with a written explanation of the decision.
- \* An Appeals Procedure is in place if a prospective applicant is not satisfied with the outcome from the admissions panel.
- \* Prospective residents will be provided with as much information as possible about the service to help him/her make a decision about whether or not he/she wants to receive care and/or support. Praxis Care offers the opportunity for a prospective resident to visit the accommodation/service and meet and talk with residents and staff. The organisation is happy for a prospective resident to involve his/her friends/family before making the final decision about placement or commencement of service.
- \* If it is felt that the accommodation or service is not suitable for a particular person, advice will be given on how to look for help elsewhere. This will only happen after full and inclusive discussions with all relevant parties.
- \* The person in charge must be satisfied that all relevant documentation is provided to fully ensure that the designated centre can meet the needs of the individual, for example psychological assessment, psychiatric assessments and financial agreements.
- \* Requests for emergency placements cannot be facilitated as a thorough risk assessment and support plan needs to be put in place prior to admission to the service

## Management and Staffing

### Total staffing complement (in full time equivalent )

Person in charge	1 FTE- 0.5 in The Avenue: OSV 005634 0.5 in Cornerstones: OSV 0001909
Team Leader	3 FTE
Support Staff	6.46 FTE

A person centred approach to resident's needs is implemented and each resident will have a named key worker.

- A Team Leader/Relief Team leader will be rostered on each shift and they will provide effective leadership, supervision and management to a team of support workers ensuring that the practical, physical and emotional needs of the Residents are met. Cornerstones has a team of team leaders & support workers.
- Staff are available 24 hours per day, 7 days a week Staffing levels vary with occupancy levels. A Team Leader/ Relief Team leader will be rostered on and they will provide effective leadership, supervision and management to a team of support workers ensuring that the practical, physical and emotional needs of the Residents are met.
- The Person in Charge is available during the hours 9am-5pm.
- There is an on-call system in place. The on-call rota will be found at the back of the Rota Folder. Management on-call systems are in place for annual leave, sick leave or days off. There is also an Head of Operations and Director on-call system at all times. Details are again found in the Rota Folder.

Further information on the service can be found in the Residents Handbook.



**Organisational structure of the designated centre:**

**Management Team**

<b>CEO:</b>	Carol Breen
<b>Director of Care (Operations):</b>	Amanda Grey
<b>Regional Director of Care:</b>	Rosarie Tynan
<b>PPIM of Cornerstones :</b>	Noeleen Ryan
<b>Person in Charge of Cornerstones:</b>	Noeleen Ryan
<b>Complaints Officer:</b>	Linda Lyons
<b>Data Protection Officer:</b>	Vincent Lavery
<b>Designated Safeguarding Officer:</b>	Noeleen Ryan
<b>Champion Safeguarding Officer:</b>	Brian McCready

- **Note: see appendix 2 for Organisation Structure**

**Resident Wellbeing and Safety** – Only a short accurate summary around each of the headings is required- make reference to policies and/or procedures where appropriate

**Review and development of residents’ personal plans  
(refer to the requirements of Regulation 5)**

Praxis Care works with residents, and his/her friends, relatives or representatives (if appropriate) to draw up a written plan of the support the organisation will aim to provide. The plan sets out the resident's needs, risks that need management; support/care provided and desired outcomes.

Every resident is provided with a copy of his/her assessment and plan and is encouraged to participate as fully as possible in the support planning process. It is a priority that all residents are supported and are able to access this information in a user friendly format and in a language that is age appropriate to aid them in their understanding.

Prior to the commencement of a service at Praxis Care Ardee, a risk assessment is carried out with all residents and agreed upon by social workers. This risk assessment is reviewed on an individual level on a regular basis but particularly when there have been significant changes to the individual's life.

A review is convened within three months of moving in and annually thereafter. An emergency review can be convened at any time. From time to time further assessments of the service user's needs are required to ensure that the support provided by the organisation is relevant to helping the service user achieve his/her full potential.

**Specific therapeutic techniques used in the designated centre**

Service Users are offered a range of therapeutic supports via the HSE and other recognised therapies such as:-

- Physiotherapy
- Occupational Therapy
- Speech and Language
- Dietician
- Chiropodist
- G.P
- Reflexology
- Specialist Behavioural Support/Behaviour Consultancy
- Community Psychiatric Care

Service users are supported by Praxis Care staff to attend therapies as required. Praxis Care ensures that service users are supported to attend registered professionals when accessing therapies.

If costs are incurred by residents for any therapeutic supports, these costs are detailed within the residents bills agreements.

#### **Use of Restrictive Practices and Positive Behaviour Supports**

Praxis Care aims to provide extra supports as deemed necessary to any resident residing in our centre. Praxis Care staff are trained in approaching behaviours in a positive manner. A positive behaviour support plan will be put in place as deemed necessary with an emphasis on the proactive strategies. Should a resident become physically aggressive or pose a serious risk of injury towards them or others, Praxis Care staff are trained in techniques to manage violent and aggressive behaviour. Any restrictive practice will be recorded in conjoined approval by Multi-Disciplinary teams, the resident and Next of Kin. All restrictive practices are recorded in the resident's restrictive practice register and implementation of same is recorded in the restrictive practice log record. Any restriction will be reviewed at least 6 monthly by the person in charge of the centre with the aim toward reducing and removing the restriction as positive behaviour supports are focused upon.

In order to maintain a safe environment for residents it may sometimes be necessary to take actions that may restrict or affect their rights to liberty and security of person, or their right to a private and family life. In all instances where such an infringement is required the centre will risk assess this, record the incident and report it to the proper authorities. Such restrictions will only be employed to protect residents from serious harm, and only following the unsuccessful use of less restrictive options. The least amount of restriction will be used for the least amount of time.

When this restrictive practice is used it is essential that this information is passed onto the MDT team.

## Respecting residents' privacy and dignity

- All residents have their own bedrooms. Each bedroom is private and no other resident is allowed access to another service user's bedroom.
- Personal care is attended to, in each service users own bedroom/en-suite or in a bathroom.
- Access to the telephone/mail/visitors is permissible to all service users at all times.
- Personal records are maintained for each service user on their daily routines, personal information and reports from external professionals.
- Independence and autonomy is promoted and maintained for all service users at all times.
- Personal belongings are stored as service users wish within their homes in an informed consented manner.
- At the service user monthly meeting, service users are given the opportunity to speak openly about all matters and raise any concerns they may have. Staff will also use these meetings to update the service users on any previous actions or other relevant information. Details of daily activities, menu options etc. are presented to the service user through pictorial menu, activity and welcome boards.
- All information is in a format that is appropriate to the information and communication abilities of each person living in the residential service.

## Social activities, hobbies and leisure interests

Cornerstones will try to make it possible for service users to live their life as fully as possible. In particular, it will do the following:-

- As part of the moving-in/commencement of service process, potential service users will be encouraged to share as much information as possible about her social, cultural and leisure interests.
- Service users will be helped to continue to enjoy a range of individual and group activities and interests, both inside and outside the accommodation, to carry on with existing hobbies, pursuits and relationships, and to explore new avenues and experiences. In group living settings, all service users are entitled to use the dining room, the communal lounge, and the grounds of the scheme but those who wish, may remain in her own rooms. Service users are encouraged to personalise their rooms with items of furniture and other possessions, and individual preferences in matters of decoration and furnishings are encouraged.
- In partnership with service users, social and leisure activities will be designed to form the basis of the communal content of the life of the scheme/service. Friendships among service users will be facilitated and it is hoped that service users will enjoy being part of a community, but there is no compulsion on a service user to join in any of the communal social activities.
- With the full and inclusive involvement of service users, local councillors, TD's, representatives of voluntary organisations, students, school children and others will be encouraged to visit schemes/services.
- Recognise that risk-taking is a vital and often enjoyable part of life and of social activity. Some service users will wish to take certain risks despite or even because of his/her disability. Cornerstones does not aim to provide a totally risk-free environment, though care will be taken to ensure that service users are not subjected to unnecessary hazards. When a service user wishes to take part in any activity which could involve risk, a thorough risk assessment will be carried out with that individual, involving relatives, friend or representative, if desired and The Avenue will agree and record all agreed outcomes which will appropriately balance the factors involved. Risk assessments will be regularly reviewed, with the participation of all parties.
- For the benefit of all service users and staff, the communal areas of the accommodation are designated as non-smoking. Service users may smoke in designated smoking areas only.
- There may be a charge associated with some social activities and services; where this applies, the details will be made clear to the service user in advance.

## Accessing education, training and employment

- All service users in Cornerstones will have the opportunity to attend attend day care/ college/ educational programmes.
- All service users are encouraged to take part in activities which promote independence and develop social skills. These are developed in accordance with the service user abilities and interests.
- All Service users will be afforded the opportunity to avail of educational and training opportunities as they so wish.
- All Service users will be afforded the opportunity to avail of supports from Praxis Care staff to source suitable employment as they so wish.

### **Consultation with, and participation of, residents in the operation of the designated centre**

Praxis Care aims to give service users opportunities to participate in all aspects of life in the accommodation/service. In particular, service users are regularly consulted both individually and corporately about the way the accommodation/service is run. The organisations objective is always to make the process of managing and running the accommodation/service as transparent as possible, and to ensure that the accommodation/service has an open, positive and inclusive atmosphere. Regular service users meetings are held and input is sought on matters relating to the everyday running of the scheme. Regular satisfaction surveys are carried out by Praxis Care's Research Department in relation to user involvement issues. Service Users will have the care/support received reviewed at least annually. Praxis Care staff are always keen to hear from Service Users and representatives. Heads of Operations will endeavour to make contact with service users on a monthly basis as part of the organisations monitoring processes.

### **Access to religious services of residents' choice**

#### Arrangements for Religious Observances

Service users who wish to practise his/her religion/faith will be given every possible help and facility. In particular, Praxis Care will do the following:-

- If asked, Praxis Care will make contact with any local place of worship on a service user's behalf. The organisation can usually arrange for a minister or a member of the relevant organisation to visit a service user.
- Particular care will be taken to try to meet the needs of service users from minority faiths. These should be discussed with the manager before placement.

## Contact between residents and their relatives, friends, representatives and the local community

### Relatives, Friends and Representatives

- Service users are given every possible help to maintain and retain the links with families and friends.
- If a service user wishes, his/her friends and relatives are welcome to visit at a time convenient to the service user and to become involved in daily routines and activities.
- If a service user wishes to be represented in any dealings with the accommodation/service by a nominated friend, relative, professional person or advocate, Praxis Care will respect his/her wishes and offer all necessary facilities.

### Dealing with complaints

The person in charge is Noeleen Ryan, who is the designated complaints officers. Within Cornerstones, individuals with complaints may directly approach Noeleen with their complaint. Noeleen can be contacted in writing at Cornerstones, 8 Rockfield, Stoney Lane, Ardee or via email at [noeleenryan@praxiscare.ie](mailto:noeleenryan@praxiscare.ie).

Noeleen can also be contacted on 046 9090035 via the phone. If Noeleen is not in the designated centre the Team Leader on duty will take the complaint and forward to Noeleen or the Buddy Manager/Assistant Director in Noeleen's absence.

Praxis Care endeavours to locally resolve any issue raised in the first instance but recognises that in some cases complaints require further investigation. The complaints procedure therefore comprises of 3 internal stages and 2 external stages which can be additionally applied to permit the effective management of a complaint where required:-

- Stage 1: Point of Contact Resolution i.e. all complaints resolved in 3 working days
- Stage 2: Not resolved within 3 working days OR requiring Investigation or Management
- Stage 3: Internal Appeal process
- Stage 4: External Review (e.g. Ombudsman/ Confidential Recipient (ROI), HSCOB (IOM) )

[COMPLAINTS MANAGEMENT POLICY v.15 - 1701252702869 \(navexone.eu\)](#)

[COMPLAINTS PROCEDURE v.3 - 1701252794087 \(navexone.eu\)](#)

Complaints policy and procedure available on EDMS

If the complainant is not happy with the response to the complaint from Grange Bective's Complaints Office, Praxis Care's named Complaints Officer, Linda Lyons, can be contacted on +44(0)7585129417 or via email at [lindalyons@praxiscare.org.uk](mailto:lindalyons@praxiscare.org.uk) The complaints officer will inform the complainant when they have received the complaint and he/she will say what they will do. You have the right to receive a response within 4 weeks. Details of the actions, responsibilities and timescales at every stage are outlined in full within the organisation's Complaints Policy and Procedure. Brian Mc Cready is the champion Safeguarding Officer for Praxis Care. Any concerns in relation to safeguarding will be forward to Brian for his immediate attention.



## Dealing with complaints continued

### Recommendations and redress

Praxis Care will aim to ensure that redress will be consistent and fair for both the complainant and

### Additional Advice/Support

Advice can be sought from the designated organisational Complaints Officer at any stage or any other Praxis Care staff member with delegated authority, which shall be determined by the nature and seriousness of the complaint. Advice can also be sought from the Ombudsman's Offices at any stage. Ultimately, the nature and seriousness of the complaint will determine the personnel, timescales and stages most relevant in the process.

Notification of all complaints, regardless of what stage the complaints were resolved will be sent to the organisation's Complaints Officer and the appropriate Health Service Executive social worker. The person in charge of the service will ensure that each service user is kept fully informed of the complaint process and understands this procedure.

the individual service against which the complaint was made. The forms of redress or responses will be appropriate and reasonable where it has been established that a measurable loss, detriment or disadvantage was suffered or sustained by the complainant personally.

During key working sessions, staff will read out the complaints procedure to the service users and the process involved in making the complaint.

Staff are also there to advise the service user's, if they are unhappy with a service. This may be in respect of when the staff or the service does something in the wrong way; staff or service doesn't do something that should have been done; staff or service does something that should not have been done. Staff then advise the service user that a staff member can help them with this or if they want they can make a written complaint to the person in charge. If the service user is still unhappy about how the complaint has been dealt with at this stage, or if the service user has a serious complaint that he or she feels unable to raise with the manager of the service, the service user should contact: **The Complaints Officer, Linda Lyons Praxis Care, 25-31 Lisburn Road, Belfast, BT9 7AA.**

## Fire precautions and emergency procedures

### Fire Precautions, Emergency Procedures and Safe Working Practices

All service users are made aware of the action to be taken in the event of a fire or other emergency, and copies of the accommodation's/services fire safety policy and procedures are available on request. Regular fire drills are conducted and information is displayed through the building to guide all persons in the event of a fire. All staff have training in First Aid in the event of an emergency. The accommodation/service conforms to all relevant government guidance on promoting and protecting the health, safety and welfare of service users and staff. Each service user has a personal Evacuation plan in preparation for a fire.

#### **Position/Measures in Place:**

Praxis Care will ensure the property has been maintained to a high 'fire safety' compliant standard with for example:

1. Fire detection & alarm system (ie system category L1) - tested and commissioned in accordance with the requirements of I.S.3218:2013, with zoned fire panel located within front entrance corridor.
2. Minimum 30 minute self closing 'fire resistant door sets' fitted throughout.
3. Emergency lighting installed throughout - tested and commissioned in accordance with the requirements of I.S.3217:2013.
4. Compliant fire fighting equipment installed within the property (includes a fire blanket within the kitchen area).

In addition the mains wiring installations are tested and Praxis Care will ensure that this are deemed as 'satisfactory' by a 'Safe Electric - Registered Electrical Contractor' and that periodic inspection/testing within properties such as this (ie classified as Category 1d Community Dwelling Houses) is recommended on a 5 yearly basis.

#### **Praxis Care Fire Emergency Evacuation Policy/Procedure:**

In the event of a fire alarm activation Praxis Care's basic fire emergency evacuation policy/procedure is to **'get out, stay out & call the Fire Service'**. However, all staff receive initial (and yearly refresher) fire safety training and their initial role on activation of a fire alarm would be to (**only** if considered safe to do so) identify the location/source of the fire alarm activation (e.g. by reading the fire panel etc.) and then to quickly make a decision as to either to fight the fire or effect a swift evacuation. In essence our staff are trained **only** to fight fires which are no bigger than small office bin size (i.e. with the correct grade of fire extinguisher or fire blanket) and **only** if they have received fire safety training and are fully confident that they can extinguish the fire - in **all** other scenarios the clear advice/guidance is to **'get out, stay out & call the Fire Service'**.

## Appendix 2:

<b>Layout of the Designated Centre:</b>	
<b><u>AREA</u></b>	<b><u>Metre Squared</u></b>
Lounge	23.75m <sup>2</sup>
Kitchen	7.40m <sup>2</sup>
Dining Room	13m <sup>2</sup>
Utility	3.8m <sup>2</sup>
Corridor	10.23m <sup>2</sup>
Area inside front door	13m <sup>2</sup>
Sensor Room	6m <sup>2</sup>
Bedroom 1	9.37m <sup>2</sup>
EnSuite 1	3.45m <sup>2</sup>
Walk in Wardrobe	6.87m <sup>2</sup>
Bedroom 2	8.63m <sup>2</sup>
EnSuite 2	3.83m <sup>2</sup>
Bedroom 3	15.25m <sup>2</sup>
Ensuite 3	3.45m <sup>2</sup>
Bedroom 4	10.53m <sup>2</sup>
Ensuite 4	3.45m <sup>2</sup>
Office	8.85m <sup>2</sup>
Visitor/ staff bathroom	2.85m <sup>2</sup>
Boiler Room	4.82m <sup>2</sup>
Staff Bedroom	14.5m <sup>2</sup>
Staff Ensuite	3.5m <sup>2</sup>
Corridor	9.5m <sup>2</sup>
Store	1.4m <sup>2</sup>

**Appendix 3:**

**List of additional items and applicable charges:**

Contracts of care are in place for residents which outlines associated charges.

## Document Version History

Version Number	Version update comment	Effective date
V1	Document updated to HIQA version	18/01/21
V2.0	Floor plan measurements and staffing details amended	09/03/21
V3.0	Page 3: Details of individual services offered to amended. Assistant Director amended to Head of Operations on two occasions in document. Version of document updated Number of FTE staff amended to 8	16/09/21
V4.0	Page 7: Staffing levels corrected to 6.4 FTE support workers and 0.4 FTE staffed by regular relief staff	06/07/22
V5.0	PPIM details updated to Rosarie Tynan	02/09/22
V6.0	Complaints Officer details updated to Linda Lyons	19/01/23
V7.0	Updated with extension details	09/03/23
V8.0	CEO and Director of care updated to Carol Breen and Amanda Gray	17/04/23
V9.0	PIC updated and new complaints policy	29/02/24

