



**GUIDELINES**

**FOR**

**ALL TYPES OF**

**FACILITIES**

**FOR**

**OLDER PERSONS**

**IN**

**ANGUILLA**

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# **GUIDELINES FOR ALL TYPES OF FACILITIES FOR OLDER PERSONS**

## **1. Administration of All Facilities For Older Persons**

All facilities shall maintain a list of all residents admitted and discharged.

- 1.2 A written statement of policies and procedures must be developed for each facility prior to being granted registration. They shall include:
- a) A description of the services provided, including emergency medical and dental care of residents.
  - b) Policy and procedure for maintaining confidentiality of the resident's personnel records.
  - c) Procedures for handling acts committed by staff or residents, which are inconsistent with the policies of the facility.
  - d) Policy on in-services training for staff.
  - e) Policy and procedure for reporting incidents/accidents.
- 1.3 The services provided by the facility shall as far as possible meet the needs and preferences of residents.
- 1.4 Staff shall be assigned duties consistent with their position, training and experience. Written job descriptions shall be available to each member of staff.
- 1.5 A work schedule shall be posted indicating adequate coverage of all shifts.
- 1.6 Each facility shall have a written and regularly rehearsed disaster preparedness plan consistent with the National Disaster Plan and made readily available to all staff.

## **2. Requirements For Residents**

- 2.1 A home shall be so constructed, arranged and maintained as to provide adequately for the health, safety, access and well being of the residents.  
Residents who are not independently ambulant shall have their living quarters on the ground floor or a floor with access to ground level.
- 2.2 A home shall provide separate and distinct living and sleeping areas:
- a) A living room, dining room, hallway or other rooms not ordinarily used for sleeping shall not be used as such by residents, family or staff.



- b) No resident's room will be so located as to make it a thoroughfare for other residents and staff.
  - c) Space in the bedroom shall be so arranged that each resident has a small area that is seen as his/hers.
  - d) Supportive devices, excluding physical restraints, such as handrails and grab bars shall be installed to enable residents to achieve a greater degree of mobility and safety.
- 2.3 At least one ramp shall be available for wheelchair access.
- 2.4 There must be at least one centrally located living room for the free access to and informal use of the residents and visitors.
- 2.5 At least one current calendar and one working clock shall be placed in the common living area of each home.
- 2.6 A home shall provide laundering facilities on the premises for the residents' personal laundry.
- 2.7 There shall be no smoking in the bedroom or communal areas. An area shall be designated for smoking.

### **3. Minimum Floor Plan Requirements ( Residential Homes)**

- 3.1 The following minimum standards for resident bedrooms must be met:
- a) Bedrooms shall have at least 5.57 square meters (60 square feet) of usable space per resident. Each bed shall be at least 1.2 meters (4 feet) apart.
  - b) There shall be no more than eight residents per bedroom.
  - c) Bedrooms shall be well ventilated and maintained at a comfortable temperature.
  - d) Doorway of bedrooms occupied by residents shall be equipped with side hinged permanent mounted doors that can open by a single motion.
  - e) No bedroom shall open into any place or room where food is stored or prepared.
- 3.2 The following minimum standards apply to bathroom facilities:
- a) At least two functional toilets and two bathing or showering facilities shall be provided for each eight residents living in the home.
  - b) The height of the bath from the floor shall be of such to allow access to the residents who have difficulty lifting their legs.

- c) Grab bars and nonskid strips shall be installed in all showers and bath areas.
  - d) Bath seats shall be provided.
  - e) All shower stalls shall be at least 1.2 metres (4feet) x 1.2 metres (4feet) and must have handrails on both sides, be equipped with curtains and designed for wheelchair use.  
Thresholds to showers must be flush with the floor. The floor of showers shall be designed to drain properly.
  - f) Toilets, baths and showers shall provide for individual privacy.
  - g) All plumbing and bathroom fixtures shall be maintained in good working condition at all times and shall present a clean and sanitary appearance.
  - h) No toilet shall be open into any place or room where food is stored or prepared.
  - i) Bathroom doors must open outwards and light switches must be water resistant and located near the door.
- 3.3 All facilities with stairway and ramps shall have sturdy and securely fastened handrails. Exterior decks and porches shall have handrails on the open sides.
- 3.4 Any hazard that may cause tripping shall be removed. Rugs may be placed on top of rubber mats to prevent slipping.
- 3.5 All areas including hallways and stairs shall be lighted sufficiently with 80 watt bulbs.
- 3.6 Every room and corridor in the residence shall be provided with adequate natural ventilation through the use of operable windows and doors or mechanical ventilation to ensure the elimination of all odours and noxious gases as to replenish the oxygen content in the room.
- 3.7 Entrances, exits and escape routes shall be clearly marked and maintained free of all impediments to full instant use.

The yard area shall be kept free of all hazards, nuisances, refuse and litter to prevent infestation of insects and rodents.

The outside of the facility must be well maintained and in good repair.

#### **4. Furnishings and Fixtures**

- 4.1 Furnishings and housekeeping standards shall be such that the facility presents a clean and orderly appearance.

- 4.2 Resident bedroom furnishings shall include the following:
- a) Adequate closet space.
  - b) A dresser or the equivalent and at least one chair per resident in each room.
  - c) A mirror appropriate for grooming.
  - d) An individual bed, with bed rails, comfortable mattress, clean and in good condition.
- 4.3 A home shall maintain a linen supply for not less than twice the bed capacity.
- 4.4 Bed linen shall be changed daily or more often if soiled.
- 4.5 All mattresses shall be flame retardant and water proof, or flame retardant or with a water proof cover.  
Rubber sheeting and mattresses shall receive special deodorizing attention when the resident is incontinent.
- 4.6 Couches and chairs for the living room must be sturdy, secure, not too low or deep, and have full armrest to aid in the sitting, rising and or standing position.
- 4.7 The residence shall have a dining area with a sufficient number of tables and chairs to accommodate the maximum number of residents, scheduled for lunch or break at any one time.

## **5. Physical Plant**

- 5.1 The location of the facility shall be well landscaped and aesthetic, free from excessive noise, dust and nuisances and conducive to peace and good mental health.

There can be three (3) types of rooms:

- a) **Private rooms**- occupancy for one individual with private bathroom.
  - b) **Semi-private**- occupancy for not less than two (2) and no more than three (3) persons of the same sex with minimum of one bathroom.
  - c) **Open ward**- occupancy for a maximum of eight (8) persons of the same sex with minimum of two bathrooms.
- 5.2 Each facility shall be in compliance with fire and safety rules of the Fire Department. This should include fire drills and knowledge of how to operate the fire extinguishers. In absence of or in addition to any local ordinances, the following requirements must be met:

- a) Wall type electric outlets and lamps or light fixtures shall be maintained in a safe, operating condition.
- b) Rooms, corridors, interior stairways, outside steps, interior and exterior doorways, porches and ramps shall be adequately lighted to ensure clients safety and to avoid accidents.

The light switch should be located at the top and bottom of the stairs and at both ends of a long corridor.

- c) Each home must have at least a 4.5 kilograms (10 pounds) multipurpose fire extinguisher on each occupied floor.
  - d) These extinguishers shall be checked and tagged annually to ensure they remain in operable condition.
  - c) Exterior doors shall be equipped with locks that do not require keys to open them from the inside or at least two persons with copies of keys for locks. A wall mounted key-box is recommended for emergency use.
- 5.3 Water and sewage systems shall meet the applicable local standards and/or regulations.
- 5.4 Floors, walls and ceilings must be kept clean and in good repair.
- 5.5 Kitchen and bathroom areas shall be cleaned with disinfectant at least daily and maintained to ensure cleanliness and sanitation.
- 5.6 The storage and disposal of bio-medical and hazardous waste shall comply with local Health Protection standards.
- 5.7 Solid waste shall be stored in vermin-proof, leak proof, nonabsorbent containers with close fitting covers until removed.  
Waste shall be removed from the kitchen at least daily and from the premises at least three times per week.
- 5.8 Mesh screening of all areas is desirable and essential for the kitchen door and windows.
- 5.9 An insect, rodent or pest control program shall be maintained and conducted in a manner that continually protects the health of residents and shall be in consultation with the Department of Health Protection.
- 5.10 The following evacuation requirements must be met:
- a) Residents who need assistance with ambulation shall have bedrooms that are on the ground level with an exit to the outside.



- b) There shall be an established procedure and mechanism for alerting and caring for residents in case of emergencies and evacuating them to safety.
  - c) A facility serving persons dependent upon wheelchairs for mobility, shall have a clearly accessible route for emergencies throughout the common areas of the facility, and at least one fully accessible bathroom.
  - d) Written emergency evacuation procedures that include staff responsibilities, means of transportation, emergency shelter location and an evacuation diagram specifying direction shall be posted in the entrance hall.
- 5.11 Employees and visitors shall not use bathrooms provided for residents. Washrooms with soap and paper towels shall be provided near the nurse's station and the waiting room.
- 5.12 Wall mounted containers with desanitizing gel shall be strategically placed within the facility for use by employees, visitors and others.
- 5.13 Food service facilities shall be in compliance with the Department of Health Protections' Food Handling Regulations.

## **6. Services**

- 6.1 Each home shall provide room, meals, and personal services to the residents of the facility, which are commensurate with the needs of the individual resident.
- 6.2 Each home shall provide activities to promote the physical, mental, spiritual and social well being of each resident.
- 6.3 Each home shall provide at a minimum books, newspapers and games for leisure time activities. Each home shall encourage and offer assistance to residents who wish to participate in recreational, cultural and religious activities available in the home and in the community.
- 6.4 Activity programming shall take into consideration individual differences in health status, lifestyles, ethnicity, religious affiliation experiences, needs, interests, abilities and skills by providing opportunities for a variety of types and levels of involvement. Activities may include:
- a) Individualized activities.
  - b) Small and large group activities.
  - c) Active and spectator participation.
  - d) Intergenerational experience.
  - e) Involvement in community activities and events.
  - f) Out door activities as appropriate.
  - g) Opportunities to voluntarily perform services for individuals and the facility, community groups and organizations.

- 6.5 The routine of the home shall be such that a resident may spend the majority of his or her waking hours out of the bedroom, if he or she chooses.
- 6.6 At no time (other than when health and /or safety are jeopardized) shall a home restrict a resident free access to the common areas of the home, or lock the resident into or out of the resident's bedroom.
- 6.7 Adult Day Centers shall provide a place for rest for an individual who may require this during the course of a particular day.
- 6.8 The adult day care facility for the elderly may also provide or arrange transportation to enable persons to attend sponsored outings.
- 6.9 Physical Therapy Services are provided to restore maximum mobility, with programmes for restoration and maintenance of muscle function.

## **7. Staffing**

- 7.1 The facility shall have as many employees on duty at all times as may be needed to properly safeguard the health, safety and welfare of the residents. Employees are expected to be alert during the hours of duty. As a minimum the following shall be observed:
  - a. At least one (1) administrator, or trained staff person shall be on the premises twenty four (24) hours per day.
  - b. Residents shall not be left unsupervised.
  - c. A minimum on site staff to resident ratio shall be one (1) staff person for every four (4) residents.
  - d. All homes must maintain a written work schedule for all employees, including relief workers, showing adequate coverage for each day and night.
- 7.2 A registered nurse, or a medical practitioner or a person trained at the level of Basic Life Support shall supervise the facility.
- 7.3 Sufficient staff time shall be available to ensure that each resident:
  - a) Receives treatments, medication and diet as prescribed.
  - b) Receives proper care to prevent decubitus ulcer (bedsores) and contractures.
  - c) Is kept comfortable and clean.
  - d) Is treated with dignity, kindness, consideration and respect.



- e) Is protected from physical and verbal abuse.
- f) Is protected from injury and infection.
- g) Is given prompt unhurried assistance if he/she requires help with eating.
- h) Is given assistance, if needed, with daily hygiene, including baths and oral care.

## **8. Personnel**

- 8.1 All persons employed to the facility shall be mature persons over the age of 20 and of good character.
- 8.2 The administrator shall be responsible for ensuring all employees receive work related training within sixty (60) days of employment. This training must include emergency first aid and CPR.
- 8.3 Personnel must be given an orientation to the facility within one (1) month of employment. The orientation training programme should include:
  - a) The purpose and goals of the facility for the elderly.
  - b) Job responsibilities.
  - c) Resident's rights.
  - d) Operational procedures.
  - e) Disaster preparedness.
  - f) Complaints investigation.
  - g) Housekeeping and proper sanitation procedures.
  - h) Health and safety precautions.
  - i) Fire and safety measures.
  - j) Grievance procedures.
  - k) Employee dress code.
  - l) Work schedules.
  - m) Holiday and salary days.
  - n) The aging process of older persons.

- o) Facility polices and regulations.
  - p) Effective Communication Skills.
  - q) Emergency procedures.
- 8.4 Kitchen staff and all staff attending to the physical needs of residents in the home shall possess a valid food handlers' permit.
- 8.5 The administrator and each employee shall have received a physical examination by a licensed physician four (4) weeks prior to employment.
- 8.6 The employment history of each person working in the home must be on file and kept in the home. These files shall be made available for inspection by the appropriate enforcement authorities. The confidentiality of the information contained shall be otherwise maintained.
- 8.7 Personal records for each member of staff shall include:
- 8.8 Name, alias, sex, date of birth, date of employment, address.
- 8.9 Next of kin and telephone number.
- 8.10 Medical reports.
- 8.11 Unusual incident/behavioral reports.
- 8.12 No administrator or staff person shall be under the influence of alcohol, controlled substances or any illegal drug while at the home or facility.

## **9. Admission**

- 9.1 Each resident to the facility shall be assessed to determine his/her functional capacity.
- 9.2 The resident agrees that the admission is appropriate and if he/she is not competent his/her next of kin or designee shall agree that the admission is appropriate.
- 9.3 The facility must develop admission polices and procedures, which support the principles of dignity.
- 9.4 No home shall admit or retain a resident who needs care beyond which the facility is permitted to provide.
- 9.5 The applicant shall be required to provide the facility with a licensed physician's report of a physical examination dated within seven (7) days prior to the date of admission.

- 9.6 A trained member of staff shall be present in the facility at all times.
- 9.7 The Adult Day Care Centre facility shall not retain anyone who requires acute medical care, suffers from a serious and persistent mental disability and is a danger to self and/or others.
- 9.8 Routine medical examinations shall be performed on each resident annually.
- 9.9 Criteria for admission to a Home for Older Persons, Nursing Home/Infirmary, Convalescent Home.**
- a) The administrator shall conduct an interview with the applicant and/or representative or legal surrogate, if any, of the applicant to ascertain if the home can meet the applicant's needs.
  - b) Each resident who has an acute condition shall be under the continuing care of a physician and/or specialist.
  - c) A dietitian must provide dietary needs.
  - d) Persons admitted to the home for rehab purposes (short term) must be able to go back into the community after being rehabilitated.
- 9.10 Criteria for admission to an Adult Day Care Centre for the older persons.**
- a) The facility shall admit or retain only ambulatory residents.
  - b) The facility shall not admit or retain persons who require the use of physical or chemical restraints, isolation or confinement for behavioral control.
  - c) Persons admitted to the facility may not be confined to bed and must not require continuous medical or nursing care and treatment.
  - d) Implement a weekly exercise programme.

## **10. Resident Files**

- 10.1 Each resident shall have a file maintained by the administrator.
- 10.2 Each resident file shall include the following information:
- a) Identifying information include name, age, sex, and previous address.

- b) Name, address and telephone number of next of kin, legal guardian and/or representative or legal surrogate, if any.
- c) Name, address and telephone number of any person providing additional services to the resident.
- d) Date of admission, prior address of resident and referral source.
- e) The name, address and telephone number of a physician, hospital and pharmacy of the resident's choice.
- f) A record of all monetary transactions conducted on behalf of the resident with itemized receipts of all disbursements and deposits.
- g) Health information including all health appraisals, diagnosis, prescribed diets, medications and physician instructions.
- h) An inventory of all personal items brought to the home by the resident, to be documented and updated at anytime after admission.
- i) A signed copy of the Resident Rights Form.
- j) A signed copy of the admission agreement.
- k) The record of a resident shall be kept for at least seven (7) years following departure or death of a resident.

## **11. Medication**

- 11.1 All residents who are not capable of self administering his/her medication shall have it administered by an appropriately trained staff member.
- 11.2 Responsibility for initial acquisition and refilling of prescribed medications shall be specifically assigned in the admission agreement to either the resident, his/her representative or legal surrogate, if any, or the administrator.
- 11.3 Medications shall be stored under proper conditions in a locked cupboard at all times except when required to be kept by a resident on his/her person due to the need for frequent or emergency use, as determined by the resident's physician.
- 11.4 The person in charge shall keep on his/her person the keys to the medication cupboard.
- 11.5 Medications shall be kept in original containers with original labels intact.
- 11.6 An accurate record of administered medication shall be kept.



- 11.7 Expired drugs shall be removed from the medicine cabinet and destroyed in an appropriate manner.
- 11.8 The area in which medications are stored shall have sufficient lighting so that labels can be read accurately.

## **12. Dietary Services**

- 12.1 A minimum of three (3) regularly scheduled well balanced meals shall be assured seven (7) days a week. Meals shall be of sufficient quantity, proper form, consistency and temperature and shall be served at a minimum of five (5) hours apart during the day with no longer than fourteen (14) hours between the evening meal and breakfast. Between meals and bedtime snacks may be offered to each resident.
- 12.2 All perishable foods shall be stored at such temperatures as will protect against spoilage.
- 12.3 All food while being stored, prepared or served shall be protected against contamination and be safe for human consumption.
- 12.4 Dry stores shall be elevated at least 15.24 centimeters (6 inches) off the floor.
- 12.5 A facility shall have a properly equipped kitchen to prepare regularly scheduled, well balanced meals.
- 12.6 A facility shall maintain a three-day supply of non-perishable foods for emergency needs.
- 12.7 A minimum of one individual qualified by training or by experience and performance shall be responsible for preparation. Such a person shall be appropriately clad with clean clothing, nails and appearance.
- 12.8 Food Handlers' Permits are required for all persons engaged in the preparation and serving of food.
- 12.9 Facilities shall have written menu plans for all meals or snacks and arrange for special diets as prescribed.

## **13. Procedures For Change In Residents' Condition**

- 13.1 In case of an accident of sudden adverse change in a resident's condition, or adjustment, a facility shall immediately obtain emergency care and notify the representatives, or legal surrogate if any. A record of such incidents shall be maintained in the resident's files.



- 13.2 The administrator of the home shall initiate immediate investigation of the care of an accident or injury involving a resident. A report shall be made to the representative or legal surrogate, with a copy of the report maintained in the resident's file.

#### **14. Death of A Resident**

Should a resident die while in the facility, the administrator shall immediately notify the resident's physician, the next of kin and the representative or legal surrogate, if any. Statutes applicable to the reporting of sudden or unexpected death shall be observed.

#### **15. Application For License/Registration**

- 15.1 License fees shall be agreed upon and are subject to change by the amount prescribed under regulations and licenses and must be renewed annually.
- 15.2 No person/organization shall operate an Adult Home or Day Care Center for three (3) or more adults where a fee is charged unless he/she holds a valid license issued by the Ministry of Finance.
- 15.3 The facility must also be registered with the Ministry of Health and Social Development. No home shall be operated and no home residents admitted without such registration.
- 15.4 Anyone of these three (3) categories (a) an adult individual (b) a partnership (c) a body corporate designing to operate a facility for older persons must apply in writing to the Ministry of Health and Social Development six (6) months prior to the date of establishment.
- 15.5 The governing body of each home shall submit to the Ministry of Health and Social Development an application for registration to operate.
- 15.6 The application for registration shall be made on forms provided by the Ministry of Health and Social Development accompanied by the prescribed fee.
- 15.7 The ownership of the home shall be fully disclosed in its application for registration.
- 15.8 Local requirements regarding the proper location and establishment of homes shall be addressed by the applicant.
- 15.9 A floor sketch of the home showing windows, doors, room measurements and bed placement for residents. Family and or/staff shall accompany each application for registration.

## **16. Registration**

- 16.1 The governing body of each facility shall obtain a certificate of registration from the Ministry of Health and Social Development prior to beginning operations.
- 16.2 To be eligible for registration the facility must be in compliance with these guidelines and meet the criteria established by the Registration Committee.
- 16.3 The certificate must be displayed in a conspicuous place on the premises.
- 16.4 Registration is not transferable from one facility to another.
- 16.5 A registration certificate shall no longer be valid and shall be returned to the Ministry within thirty (30) days of the facility ceasing to operate, is moved to another location, the ownership changes, the governing body is significantly changed. If the registration certificate is not returned it will be suspended.
- 16.6 Registration shall be required for each facility located on different premises where more than one home is operated under the same governing body.
- 16.7 The registration certificate shall state the maximum number of residents who may receive care at the location. No facility shall offer its services to more residents than its permitted capacity.
- 16.8 A facility that fails to comply with the regulations shall be subject to the sanctions available to the Ministry of Health and Social Development, including but not limited to denial or revocation of its permit.
- 16.9 A copy of the minimum standard requirements and governing legislation should be obtained when available, and made visible in each operating facility.

## **17 Registration Committee**

- 17.1 The registration Committee on receiving the application form shall conduct an inquiry of the applicant, and set up an appointment to conduct an inspection audit of the facility for its readiness to operate guided by the criteria and guidelines issued.
- 17.2 A notice will be sent to the applicant(s) in writing within sixty (**60**) days of receiving the application from the Registration Committee stating that they are satisfied with the requirements of the applicant(s) and the facility following which a registration certificate is issued.
- 17.3 The name and address of proprietors and of the facility must be clearly established. The license must be displayed in a visible location within the facility at all times. The maximum number of residents to be housed in the facility must be outlined on the license based on maximum capacity and availability of space.

- 17.4 No facility shall operate unless they have a license and a valid Registration Certificate. A license cannot be transferred from one person or organization, or one place to another. In the event that this should occur the license shall be revoked and the Registration suspended.
- 17.5 The Registration Committee shall publish annually, and make available to interested persons a list or lists covering all licensed residential care facilities for the elderly and the services for which each facility has been registered. The committee shall also develop a written notice for the purpose of informing any individual who requests information regarding admission to a residential care facility for the elderly.



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