

**Pan Dorset Guidance
on the Provision of Equipment under the Equip for
Living Service to Care Homes with and, without
Nursing.
April 2024**



Dorset



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1 Introduction

- 1.1 The purpose of this document is to clarify responsibilities for the provision and funding of equipment into Care Homes with Nursing (NCH) and Care Homes without Nursing (RCH) by Bournemouth, Christchurch, and Poole (BCP) Council, Dorset Council (DC) and the NHS Dorset Integrated Commissioning Board, including associated NHS Trust services, who together make up the Equip for Living Partnership.
- 1.2 The guidance has been developed to provide a consistent decision-making framework for clinicians and registered care providers when considering if equipment should be provided and funded by the Equip for Living Service. This document does not hold precedence over individual clinical judgement in exceptional circumstances.
- 1.3 The Equip for Living Service is an Integrated Community Equipment Service, commissioned by BCP Council as lead commissioner for the Partnership and currently run by NRS Healthcare, which provides a range of loan equipment, to named service users only, as specified by prescribers authorised by the Equip for Living Partnership.

2 Guidance Assumptions

- 2.1 Equipment provision in Care Homes is an integral part of supporting service users and frontline staff providing safe levels of care. Registered Providers (RPs) and managers who are registered for the regulated activity accommodation for persons who require nursing or personal care, are legally responsible for making sure that the equipment that is used to deliver care and treatment is clean, suitable for the intended purpose, maintained, stored securely and used properly.
- 2.2 The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 12 (Safe Care and Treatment) and Regulation 15 Premises and Equipment require that a registered care provider must ensure that the equipment used for providing care or treatment to a service user is safe for such use and is used in a safe way. Where equipment is supplied this must be in sufficient quantities to ensure the safety of service users and to meet their assessed care needs.
- 2.3 CQC guidance for Providers¹ states, “Equipment must be always accessible to meet the needs of 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. Equipment includes chairs, beds, clinical equipment, and moving and handling equipment”.
- 2.4 The Equip for Living Partnership assumes that Registered Providers will provide a level and range of equipment and adaptations necessary to deliver care to address the needs of the service user group/s specified in the Home’s statement of purpose/registration (this includes seating/moving and handling and appropriate beds to meet their needs). Care Homes should not accept residents whose assessed needs cannot be met within that Home and who fall outside of its stated purpose.

¹ <https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-15-premises-equipment#guidance>

- 2.5 Any care home should have an adequate range and supply of equipment to meet the needs of their residents (see table 11). They are required to provide information, instruction, training and supervision to ensure the health and safety of employees and the resident (HSE 2014). The Health and Safety at Work Act (1974) applies to Care Home employers and employees and specifies the requirement for suitably maintained equipment, staff training, and supervision in a safe working environment. Care Home staff have a responsibility to follow equipment instructions and to always ensure their own safety and that of others.
- 2.6 Care Homes will be aware of their other statutory obligations that include:

- 2.6.1 The Lifting Operations and Lifting Equipment Regulations (1998) – LOLER
- 2.6.2 The Provision and Use of Work Equipment Regulations (1998) – PUWER
- 2.6.3 The Manual Handling Operations Regulations (1992) which relate to Manual Handling needs of staff and residents, as amended in 2002.

3 Standard Equipment and Non-Standard (“Person Specific”) Equipment.

3.1 Standard Equipment:

- 3.1.1 Under no circumstances would standard equipment be loaned to a Care Home for multiple service user use by the Equip for Living Service as this would be in clear breach of NHS Act (2006) Section 75 rules and HMRC VAT regulations.
- 3.1.2 It is expected that Care Homes will provide a range of standard equipment to meet a variety of individual needs. Account should be taken of variations in height, size, width, and weight of residents. It is expected that Homes will have a range of different types of equipment that can be used to meet all their resident’s needs as described in their statement of purpose.

3.2 Non-Standard Equipment (or person specific equipment):

- 3.2.1 This equipment will have specialist functions that have been tailored to the specific needs of an individual. Characteristically it may:
 - 3.2.1.1 Require special manufacture or clinical modification and would be used to address the specific needs of an individual and could not be adjusted to suit others once no longer required for example a double amputee sling or moulded seating bespoke to an individual.
 - 3.2.1.2 Be prescribed by an individual who is a Registered Clinical Practitioner from either health or social care.
 - 3.2.1.3 Require enhanced training to operate and clinically use, or to teach others to operate it.

3.3 Scope of Flexibilities

3.3.1 Facilitating discharge and placements.

- 3.3.1.1 Getting Started Community Equipment and Care Homes, issued by the Department of Health and last updated 12 October 2004, highlights that “Care Homes should not accept people whose assessed needs they are unable to meet. However, where the absence of a particular piece of equipment in a Care Home is **temporary** and the provision of equipment would facilitate a discharge from an acute hospital bed or enable the end user to stay in the Home, the local community equipment service should consider providing support.”

- 3.3.1.2 To prevent admission to hospital or to facilitate discharge from hospital an authorised prescriber may, in exceptional circumstances (for example, where a care home needs more time to acquire a particular piece of equipment or where there may be a safeguarding issue) and with the agreement the relevant senior manager, approve the provision of equipment to a named individual until the end of the temporary period.
- 3.3.1.3 It is the responsibility of **the initial equipment prescriber** to ensure that an appropriate referral is made to either a Home First Team/Adult Social Care Team or Integrated Community Rehab Team to ensure that an assessment of the individual to be discharged home, has the correct equipment to support them in their home and arrange that all loaned equipment is returned at the end of the temporary period. All contractual remedies will be considered and where appropriate applied should the Care Home not return equipment as required.

3.4 Intermediate Care Equipment

- 3.4.1 The Care Act 2014 identifies Intermediate Care (including reablement support) services as services that can delay or prevent the need for more intensive care and support.
- 3.4.2 Intermediate Care is a range of integrated services to promote faster recovery from illness, prevent unnecessary acute hospital admission and premature admission to long-term residential Care, support timely discharge from hospital and maximise independent living (Intermediate Care, Intermediate Care – Halfway Home. Updated Guidance for the NHS and Local Authorities 2009).
- 3.4.3 In exceptional circumstances it may be necessary to supply a named service user with equipment to facilitate a temporary placement for Intermediate Care within a Care Home. The supply of short-term loan equipment for Intermediate Care purposes will be at the prescribers' discretion and should be authorised by the relevant senior manager. As with 4.1.2 above all equipment should be returned to the equip for living service within six weeks. All equipment issued to support an intermediate care /reablement bed must be returned to the equipment provider to be cleaned to avoid cross contamination, therefore replacement equipment to the individuals own home must be planned for in advance to support the discharge from the care home.

3.5 End of Life Care (including Palliative Care)

- 3.5.1 End of life care requires an active, compassionate approach that treats, comforts, and supports individuals who are living with or dying from progressive or chronic life-threatening conditions (Introductory guide to end of life care in Care Homes, National Council for Palliative Care, 2006).
- 3.5.2 Authorised Prescribers may provide stock equipment for the palliative care of named service users admitted to a Care Home in exceptional circumstances and as agreed by the relevant senior manager. It will be expected that the prescriber will work in Partnership with the Care Home to ensure that all loaned equipment is returned to the Equip for Living Service when no longer required by the service user.

3.6 Tissue Viability

- 3.6.1 Maintaining skin health is an important part of good standards of care in both Care Homes and Care Homes with nursing. Pressure sores cause discomfort and loss of function which can lead to infection and more serious risk of harm.
- 3.6.2 Registered care providers and managers are required to ensure that people receive safe care and treatment in accordance with the requirements of the Health and Social Care Act 2008 (Regulated Activities). Registered care providers who are registered for the regulated activity accommodation for persons who require nursing or personal care are required to provide appropriate range of pressure relieving equipment, including specialist mattresses and cushions for seating where appropriate.
- 3.6.3 In exceptional circumstances pressure relieving equipment may be loaned into a home for **up to 6 weeks** where a Registered Clinical Practitioner, with advice from the Tissue Viability Service as appropriate, has identified that a service user is at specific risk of developing a pressure sore or where it is needed to heal existing tissue breakdown. It remains the general responsibility of a home to have in place equipment and processes that minimise the risk to residents of developing pressure sores. Equipment should be returned to the equipment service once the 6 weeks loan is finished. The equipment prescriber will work in partnership with the Care Home in this case to ensure that equipment is used appropriately.
- 3.6.4 There are however links between contractures and the risk of pressure sores ([Pressure ulcers: Current understanding and newer modalities of treatment - PMC \(nih.gov\)](#)); this particular article highlights loss of movement as one of the three predisposing factors for pressure ulcers, and notes contractures as an indirect cause: "Contractures and spasticity can contribute by repeatedly exposing tissues to pressure through flexion of a joint".

3.7 Safeguarding

- 3.7.1 Provision of equipment in Safeguarding cases where there are pressure care issues or moving and handling/transfer issues may be approved in exceptional circumstances for named individuals. The need to provide equipment would be assessed on a case-by-case basis and would be agreed by a relevant senior manager from either health or social care. Equipment loans would be for no more than a 6-week period to allow the Home to procure their own equipment.

3.8 Other Flexibilities

- 3.8.1 Equipment may be supplied to a Care Home to allow a service user to remain in their Home when their needs have substantively changed to exceed the scope of the Home's statement of purpose. For example, a service user living in a Care Home for people with a learning disability develops age related problems which the Home is not equipped to deal with, equipment may be loaned, on approval from the relevant senior manager, on the basis that the Home has made all reasonable adjustments to accommodate the service user.

- 3.8.2 Equipment may be supplied where a Home is asked to accommodate a service user with equipment needs beyond the requirements suggested by the statement of purpose. An example could be where a service user requiring bariatric equipment is proposed to move to a Care Home where there has not been a previous need to acquire bariatric equipment to deliver care according to its statement of purpose. In this case equipment may be loaned to the individual service user. This does not replace the responsibility of the home to support an individual's changing needs and provide necessary equipment to support them such as contractures/pressure care and a joint assessment could be carried out.
- 3.8.3 Where the Equip for Living Service has provided a service user with specialist, non-standard equipment in their own home then this can move with them to a Care Home subject to conditions in 7.1 (Equipment Transfers) below.
- 3.8.4 Where the Equip for Living Service has prescribed for the service user **mobility** equipment or low-cost personal care equipment then this can move with them to a Care Home subject to conditions in 7.1 (Equipment Transfers) below.

4 Working in Partnership

- 4.1 The Equip for Living Service will support Care Homes wherever possible with the following:
 - 4.1.1 General advice on equipment issues²
 - 4.1.2 Equipment demonstrations.
 - 4.1.3 Equipment loans for eligible individual users.
 - 4.1.4 Maintenance, testing and decontamination where equipment has been supplied by the service to a Care Home service user. Guidance on purchase or private hire of equipment.
- 4.2 Care Homes should be willing to help The Equip for Living Service by:
 - 4.2.1 Checking ownership and arrangements for equipment when users are first admitted to the Home.
 - 4.2.2 Identifying when loaned equipment is no longer required and releasing it promptly for collection.
 - 4.2.3 Co-operating with the Equip for Living Service to allow planned maintenance on equipment loaned to individual service users.
 - 4.2.4 Informing the service promptly in the event of equipment breakdown.
 - 4.2.5 Notifying changes in service user arrangements for whom equipment has been loaned (e.g. hospitalisation, movement to another Care Home). See 7.1 below.

5 Guidance on Purchasing Care Home Equipment to enable the Delivery of Care

- 5.1 Homes are likely to need to periodically purchase a range of equipment to assist in the delivery of care services. Expenditure on equipment is likely to be a significant investment and so Homes are likely to have to balance functionality, adaptability, quality, cost, after care support and ease of decontamination. Further Guidance on appropriate provision of equipment can be obtained from the Royal College of Occupational Therapists (2019)³.
- 5.2 Care Homes **must not** ask service users or their families to directly fund equipment that is required to meet their needs, even if they are privately funding their care package or where funded by a local authority or NHS Dorset.
- 5.3 When purchasing equipment, Care Homes should shop around and compare products from a range of suppliers. Many suppliers produce lower cost Care Home versions of their mainstream products that do not compromise on functionality.
- 5.4 Chosen equipment should be as adaptable as possible. Adjustable toilet frames and wheeled commodes ensure that these types of equipment can be tailored to the height of different users.

- 5.5 While a variety of chairs may be needed there are modular systems available that can reduce the need for more bespoke seating systems and can be adapted to fit the different care needs of a range of service users when no longer required for the initial user.
- 5.6 Whilst choosing high quality products tends to cost more initially these increased costs need to be balanced against the lifetime costs of the product. Lower cost products can be less reliable, less functionally efficient, breakdown more often and have increased replacement costs.
- 5.7 When purchasing pressure relieving equipment Care Homes should be aware of the latest NICE guidance and if in doubt seek advice from a tissue viability specialist. Hybrid mattresses combine the benefits of both static and alternating mattresses which is useful when stepping care up and down. Alternating mattresses tend to be electrically efficient and have low running cost. Homes should be aware of the variable noise levels of alternating mattresses. Care Homes need to be clear of the emergency features of this type of equipment (CPR and transport functions).
- 5.8 All equipment can develop faults and it is important that the company supplying the equipment is in a position to remedy problems quickly. Care Homes are advised to check the level of aftersales support carefully and choose suppliers with a proven track record of Care Home support.
- 5.9 When equipment is purchased the ease of disassembly, cleaning and decontamination should be considered. Registered care providers should refer to up to date guidance published by the Department of Health and Social Care.

6 Bariatric Equipment

- 6.1 The term 'bariatric' is often used inappropriately in the health and social care system. Individuals who are classed as being "clinically obese" or "morbidly obese" are sometimes referred to as requiring 'bariatric' equipment, despite their weight and bodily proportions being within the **size and load-bearing limits of the standard equipment**. If they fall outside this then a joint assessment maybe needed.
- 6.2 Service users who weigh over 30 stone (191kgs) may require more specialist equipment. If this is the case, then a joint assessment may be necessary to decide whether and how this specialist equipment can be funded.
- 6.3 If a care home agrees to admit an individual who is classified as having bariatric care and support needs, it is good practice to offer bedrooms on the ground floor with widened door widths and suitable showering facilities to accommodate the individual's needs. The care home should also provide the relevant equipment to support this need. In addition, if this is in their statement of purpose, then they will need to supply specialist equipment to meet the need.

²NRS Healthcare may refer care homes to their central clinical colleagues at:

<https://www.completecareshop.co.uk/free-product-advice-from-ots>

³ <https://www.rcot.co.uk/care-homes-and-equipment>

7 Equipment Transfers

- 7.1 If an individual is moving within Bournemouth, Christchurch and Poole or Dorset, the Equip for Living Service should be contacted to discuss arrangements for the agreed transfer of any loaned equipment to a new address. Infection control measures will need to be considered when moving Equipment. The Equip for Living Service reserve the right to decontaminate equipment as a part of any agreed transfer process. Equipment cannot be transferred to an out -of-county placement and alternative arrangements will need to be considered by the placing authority.
- 7.2 The Care Act 2014 supports the movement of person specific equipment held by a service user from one authority to another. In these circumstances the first authority should agree with the second authority how the equipment will be moved and that the ongoing responsibility for maintenance will also transfer. A Care Home should notify the relevant local authority if a service user is likely to move loaned equipment to an out of area authority.

If an individual is moving to a permanent placement, it will be expected that the Home will have all the necessary equipment to support the individual's assessed needs. The exception to this is when the individual has been prescribed a person specific piece of equipment and it has been agreed that the equipment can be transferred prior to the placement taking place.

8 Returning Equipment Loaned from Equip for Living

- 8.1 If a service user has previously had equipment provided by the Equip for Living Service, then it should under no circumstances be given to other residents.
- 8.2 If items of loaned Community Equipment are no longer required, then the equipment should be returned to:

The Equip for Living Service
NRS HealthCare
Wallisdown Service Centre
498 Wallisdown Road
Poole
BH11 8PT

or

Piddlehinton Service Centre
Unit 50 A
Enterprise Business Park
Piddlehinton
Nr Dorchester
Dorset
DT2 7UA
TEL: 0344 893 6364

The Equip for Living Service can also be contacted by email at:
enquiries@equipforliving.nrs-uk.net

8.3 Wheelchairs supplied via the wheelchair service should be returned to:

Dorset Wheelchair Service
 The Acorn Building
 Ringwood Road
 St. Leonard's BH24 2RR
<https://www.dorsethealthcare.nhs.uk/wheelchairservice>

TEL: 01202 892874 or email dhc.wheelchair.services@nhs.net

9 Suggested Equipment for Care Homes (with and without Nursing*)

9.1 Care Homes are expected to provide and maintain a range and variety of equipment to support the varying needs of their residents. The following equipment may need to be provided by Care Homes depending on the statement of purpose of the Home.

9.2 Equipment supplied by either Health or Social care (H/SC) * subject to a full assessment.

Equipment Category	Equipment Type	Standard / Non-Standard	Weight Limit Kgs (st)	Funded by*
Bathing	Bath Board	Standard	190 (30st)	Care Home
	Bath seat	Standard	190	Care Home
	Bath step	Standard	317 (50st)	Care Home
	Bath lifts (electrical/mechanical)	Standard	140 (22st)	Care Home
Toileting	Raised Toilet seats	Standard	190	Care Home
	Toilet frames height adjustable	Standard	190	Care Home
	Commode height adj. static	Standard	127 (20st)	Care Home

Equipment Category	Equipment Type	Standard / Non-Standard	Weight Limit Kgs (st)	Funded by*
	Wheeled Commode	Standard	190	Care Home
	Extra wide toilet seat and frame	Standard	190	Care Home
	Extra wide commode	Standard		Care Home
	Male/female urinals	Standard	n/a	Care Home
	Bedpans	Standard	165 (26st)	Care Home
Mobility aids	Walking frame medium	Standard	160 (25st)	H/SC
	Walking frame with wheels	Standard	160	H/SC
	Elbow crutches	Standard	127	H/SC
	Walking stick	Standard	127	H/SC
	Ramps	Standard		Care Home
	Handrails	Standard		Care Home
	Wheelchairs-attendant propelled	Standard		Care Home
	Wheelchairs-bespoke e.g. amputee w/ch set back wheels or one armed self-propelling	Non-Standard	n/a	Contact Dorset Wheelchair Service
Personal Care	Helping hand/long handled shoehorn etc	Standard	n/a	Care Home
	Perching stool +arms and back	Standard	160	Care Home

Equipment Category	Equipment Type	Standard / Non-Standard	Weight Limit Kgs (st)	Funded by*
Showering	Shower seat static	Standard	159	Care Home
	Wheeled shower chair attendant	Standard	165 (26st)	Care Home
	Self-propelling shower chair	Standard	200 (31st)	Care Home
	Tilt in space shower chair	Standard	160	Care Home
Chairs & seating	High back standard chair	Standard	165 (26st)	Care Home
	Tilt in space adjustable seat heigh, width and depth chair on castors	Standard		Care Home
	Modular chair inc. accessories	Standard		Care Home
	Beanbag Chair-subject to assessment	Non-Standard		H/SC
	Riser recliner chair	standard	120 (18st)	Care Home
Beds and accessories	4 section, height adjustable	Standard	191 (30st)	Care Home
	Bed rails with mesh inserts	Standard	n/a	Care Home
	Bed -low level	Standard	191	Care Home
	Bed extension kit + mattress infill	Standard	n/a	Care Home
	Bed cradle (standard divan)	Standard	n/a	Care Home
	Bed rail (divan and slatted bases)	Standard	160 (25 st)	Care Home

Equipment Category	Equipment Type	Standard / Non-Standard	Weight Limit Kgs (st)	Funded by*
	Rope ladders/bed poles	Standard		Care Home
	Mattress Variators for divan beds	Standard	254 (40st)	Care Home
Pressure care	Visco-elastic mattress such as MSS Soft form Premier	Standard	247 (39st)	Care Home
	Hybrid Mattress such as Active Premier 2	Standard	247	Care Home
	Deep cell alternating mattress e.g. Talley quattro or similar	Standard	200 (31st)	Care Home
	Propad/Repose lite pressure cushion	Standard	139 (21-22st)	Care Home
	Flotech image cushion	Standard	140 (22st)	Care Home
Moving and Handling	Mobile hoist Midi	Standard	180 (28st)	Care Home
	Mobile hoist Maxi	standard	200 (31.5st)	Care Home
	Free standing overhead Gantry and hoist motor	Standard	200	Care Home
	Various universal slings/toileting slings	Standard		Care Home
	Specialist sling e.g. Double amputee	Non-Standard		NCH or H /SC following assessment

Equipment Category	Equipment Type	Standard / Non-Standard	Weight Limit Kgs (st)	Funded by*
	Stand aid hoist e.g. Oxford Journey	Standard	155 (24st)	Care Home
	Relevant stand aid slings	Standard	200 (31st)	Care Home
Moving and Handling continued	Patient turner e.g., Etac or similar	Standard	200 (31st)	Care Home
	Patient turner e.g., Romedic return	Standard	150 (23st)	Care Home
	Moving and handling belt – range of sizes	standard	170 (26st)	Care Home
Bariatric Equipment	Bariatric Walking frame	Standard	227 (36st)	H/SC
	Bariatric bed and foam mattress	Non-Standard	320 (50st)	NCH or H /SC following assessment
	Bariatric dynamic mattress	Non-standard	320	NCH or H /SC following assessment
	Commode adjustable static (bariatric)	Non-Standard	280 (44st)	Care Home
	Bariatric wheeled commode	Non-Standard	190 (30st)	Care Home
	Orthopaedic high backed Bariatric seat	Non-Standard	254 (40st)	Care Home
	Bariatric Toilet frame	Non-Standard	250 (40st)	Care Home

Equipment Category	Equipment Type	Standard / Non-Standard	Weight Limit Kgs (st)	Funded by*
	Bariatric shower chairs	Non-Standard		Care Home
	Liko Bariatric Dual motor gantry hoist	Non-Standard	70 st	NCH or H /SC following assessment

10 Glossary of terms

Term / Abbreviation	Description
CES	Community Equipment Services- the local service for a particular area or county that is responsible for providing community equipment on loan to adults and children following assessment by health and/or social care practitioners. These services are sometimes provided 'in-house' i.e. directly provided by the NHS or a Local Authority or they may be contracted out to private sector companies.
CQC	Care Quality Commission – are the independent regulator of health and adult social care services in England. Their role is to monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety.
Equip for Living	This is the name of the Community equipment service run by NRS Healthcare on behalf of the partnership of funders across health and social care in BCP and Dorset
Equipment prescriber	A member of health and social care staff who has prescribing rights for the Equip for Living service
Loan equipment	Equipment that is on loan to the care home from CES for use by an individual resident, where the need falls outside of the home's general provision. Loan equipment does not include domestic furniture e.g. divan beds and armchairs. Loan equipment is supplied following an assessment by Health and/or Social Care staff in accordance with eligibility criteria
LOLER	The Lifting Operations and Lifting Equipment Regulations (1998) place duties on people and companies who own, operate or have control over lifting equipment. This includes all businesses and organisations whose employees use lifting equipment, whether owned by them or not
MHRA	Medicines and Healthcare products Regulatory Agency (MHRA) are responsible for sending Medical Device Bulletins and Field

	Safety Notices. MDA DB 2006 (05) is guidance for managing medical devices and provides an outline for a systematic approach to the purchasing, deployment, maintenance, repair and disposal of medical devices.
Non-Standard equipment	Non-standard or Person specific equipment sometimes referred to as bespoke equipment refers to equipment that is specially tailored to the individual needs of a resident and is not available “off the shelf” from any manufacturer/supplier
PUWER	Provision and Use of Work Equipment Regulations came into force on 5th December 1998. The Regulations require that any risks to people’s health and safety, from equipment that they use at work, is prevented or controlled. Generally, any equipment that is used by an employee at work is covered. In addition to the requirements of PUWER, lifting equipment is also subject to the requirements of the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER)
Registered Clinical Practitioner	Is the qualified person responsible for assessing the resident and their equipment needs on behalf of either the health service or local authority, this could be an Occupational Therapist, Physiotherapist or District Nurse.