Care Home Staffing Project

A revised questionnaire suitable for use in care homes for older people has been designed based on the Indicator of Relative Need (IoRN). The revised questionnaire has taken account of the increased dependency of residents of Care Homes, compared to the client group that the IoRN was designed for (living in the community); additional questions have been added to the original IoRN questionnaire. The questionnaire has been designed, tested and validated during the course of the study on over 3,300 care home residents.
Augmented IoRN

June 2008
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General Guidelines

- It is important that you know the person well, that’s why we ask the questions over the last seven days. So if you just think about the last seven days with each question.

- Please respond to these questions based on your professional judgement as to the person’s ability to perform the task regardless of whether or not the opportunity exists for them to do so or whether or not they choose to do so.

- Answer the questions based on the person’s health and social care needs drawing on mental health as well as physical needs.

- If person’s needs fluctuate between two differing categories, choose the one that has applied most often out of the last 7 days.
Question 1 – Eating

This question relates to a person’s ability to obtain appropriate nutrition. When eating a meal, the person:

1 – Eats without help, prompting or assistance with or without using special/adapted utensils

2 – Eats with some help to modify the texture or size of the food OR Eats with encouragement, prompting or supervision
   i.e. needs food cutting up, pureeing, does not generally need physical help but needs someone present in order to perform the task, because the person lacks confidence/ motivation

3 – Requires complete assistance OR Receives nutrition by tube or infusion
   i.e. needs physical assistance from another person in bringing utensils to the mouth or is fed by gastrostomy, intravenously or by syringe
Guidelines

This question relates to a person’s ability to obtain appropriate nutrition. e.g. Is the person motivated to eat? are they aware it’s lunchtime?

Select 1:
- If the person eats using ordinary utensils or adapted utensils without help, prompting or supervision, even if the meal must be prepared by someone else.

NB If the person can physically eat a meal without difficulty but because of their mental health needs requires their meal to be placed in front of them to prompt them to eat select 2

Select 2:
- If the person requires food to be cut up or its consistency to be modified in order to eat.
- If the person has difficulties eating a meal because of frailty, disability or lack of awareness and so requires prompting supervision and guidance.
- If the person needs staff to give an initial prompt to start eating a meal but then needs little further help with the meal.
- If the person needs frequent prompts to encourage them to continue to eat, or repeatedly needs to be encouraged to sit down at the table.

Select 3:
- If the person requires physical assistance in bringing utensils to the mouth.
- If, because of injury, disability or illness, the person must receive nutrition intravenously, by gastrostomy or by syringe.
- If the person will not eat.
Question 2 – Transferring Position

When transferring from a position of lying down to a position of sitting in a nearby chair or wheelchair the person:

1 – Transfers independently and safely with or without using equipment or adaptations
   e.g. bed assist rail, adapted chair, selected chair

2 – Needs the physical assistance OR Encouragement, prompting or supervision of one person
   i.e. needs observation because of lack of awareness or risk/fear of falling or needs equipment or adaptation set up or its use supervised

3 – Needs the physical assistance of two or more people OR Does not transfer from bed to chair
   e.g. confined to bed
Guidelines

This question relates to a person’s ability to transfer from a position of lying down to a position of sitting in a nearby chair:

Select 1:
- If the person is able to transfer independently and safely with or without the use of any equipment or adaptations, e.g. bed assist rail, specially adapted chair.

Select 2:
- If the person requires physical assistance from one person, irrespective of whether equipment is required.
- If the person requires encouragement, prompting or supervision, but does not require physical assistance.
- If the person uses any equipment or adaptation that requires one person to set it up or to supervise its use.
- If the person requires observation because of a risk or fear of falling.
- If the person has difficulties transferring because of frailty, disability or lack of awareness.

Select 3:
- If the person requires the physical assistance of two or more people, irrespective of whether equipment is required.
- If the person is confined to bed and/or does not sit in a chair because of illness, injury or physical disability.
Question 3 – Moving Location

When moving from one location to another within the home or from bedroom to the lounge the person:

1 – Moves independently and safely with or without using equipment or adaptations
e.g. stick, walking frame, calliper, wheelchair

2 – Needs the physical assistance OR Encouragement, prompting or supervision of one person
i.e. needs an initial prompt or supervision because of lack of awareness or risk/fear of falling or needs equipment or adaptation set up but no further help.

3 – Requires the physical assistance of two or more people OR Does not move location
e.g. confined to bed
Guidelines

This question relates to a person’s ability to move around the home.

Select 1:
- If the person is able to move independently and safely with or without the use of any equipment or adaptations, e.g. stick, walking frame, calliper or wheelchair (manual or electric).

Select 2:
- If the person requires physical assistance from one person, irrespective of whether equipment is required.
- If the person requires encouragement, prompting or supervision, but does not require physical assistance.
- If the person uses any equipment or adaptation that requires one person to set up or to supervise its use.
- If the person requires observation because of a risk or fear of falling.
- If the person has difficulties transferring because of frailty, disability or lack of awareness.

Select 3:
- If the person requires the physical assistance of two or more people, irrespective of whether equipment is required.
- If the person is confined to bed and/or does not move in a chair because of illness, injury or physical disability.
Question 4 – Toileting

This does not include moving to the toilet/commode OR continence.

When using the toilet/commode (transferring on and off, adjusting clothing and attending to perineal hygiene) the person:

1 – Is independent with or without a catheter, colostomy or continence pad
   e.g. raised toilet seat, hand rails

2 – Needs physical assistance, complete assistance OR Encouragement, prompting or supervision from one person
   i.e. performs majority of the tasks, needs some assistance in transferring or adjusting clothing, positioning continence pad or needs an initial prompt or supervision because of lack of awareness or risk/fear of falling or needs equipment or adaptation set up but no further help.

3 – Requires complete physical assistance from two or more people OR Does not use the toilet OR Requires assistance to manage their catheter or colostomy
Guidelines

This question relates to a person’s ability to use a toilet or commode.

Select 1:
- If the person is able to use the toilet or commode independently with or without the use of any equipment or adaptations, e.g., raised toilet seat, handrails, etc. This includes those persons who independently manage a catheter or colostomy or continence pads.

Select 2:
- If the person requires minimal physical assistance from one person to use the toilet or commode, but performs the majority of the tasks themselves, e.g., if the person needs a small amount of assistance in transferring on and off the toilet, or in adjusting clothing (including positioning of continence pad).
- If the person requires encouragement, prompting or supervision to use the toilet or commode because of a lack of motivation, fear of falling, confusion or memory loss, but does not require physical assistance.
- If the person uses any equipment or adaptation that requires one person either to set it up or to supervise its use.
- If the person has difficulties using the toilet because of frailty, disability or lack of awareness.

Select 3:
- If the person requires complete assistance with all aspects of using the toilet.
- If the person does not use the toilet or alternative receptacle because of physical disability or injury, or because they require assistance to manage their catheter or colostomy or continence pad.
Question 5 – Dressing

Is the person able to put on, take off, secure and unfasten all garments in an appropriate manner including following the use of the toilet, putting on and taking off braces, artificial limbs or other surgical appliances:

1 – Dresses without difficulty with or without using equipment or an adaptation e.g. hand rails, shoe horn

2 – Needs physical assistance, complete assistance OR Encouragement, prompting or supervision from one person i.e. needs physical help with one or more aspect of the task (e.g. putting on socks, fastenings) or needs someone present in order to start the task, because the person lacks confidence/motivation or has a fear of falling or other anxiety or has forgotten how to perform the task.

3 – Requires complete physical assistance from two or more people i.e. needs physical help with one or more aspect of the task due to disability even if it is minimal, or does not perform the task because of disability
**Guidelines**

This question relates to a person’s ability to dress appropriately.

Select 1:
- If the person is able to dress independently with or without the use of any equipment or adaptations, e.g., handrails, etc.

Select 2:
- If the person has difficulty with one aspect of the task (e.g., putting on socks and shoes), even if they have no difficulty with another aspect (e.g., putting on trousers or shirt).
- If the person lacks confidence or motivation to perform the task, but is able to do so when prompted or encouraged. This includes, for example, someone who requires clothing to be laid out for them, but is able to dress themselves once this has been done.
- If the person will not perform the task without someone present because of a fear of falling, a phobia or other anxiety disorder.
- If the person has forgotten how to perform the task, or is unable to perform it safely because of cognitive impairment or confusion.

Select 3:
- If the person requires physical assistance or support from others (for whatever reason), even if it is minimal.
- If the person requires physical assistance for one aspect of the task (e.g., putting on socks and shoes), even if they require no assistance for another aspect (e.g., putting on trousers or shirt).
- If the person does not perform the task because of disability.
Question 6 – Continence

Which of the following statements have applied to this person in the last 7 days:

The person is incontinent of urine:
A1 – Never
A2 – More than once a week but not daily
A3 – Once in each 24-hour period
A4 – Two or three times in each 24-hour period
A5 – Four times or more in each 24-hour period

The person is incontinent of faeces:
B1 – Never
B2 – More than once a week but not daily
B3 – Once in each 24-hour period
B4 – Two or three times in each 24-hour period
B5 – Four times or more in each 24-hour period
## Guidelines

<table>
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<tr>
<th>Question</th>
<th>Answer</th>
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<td>What if incontinence pads are worn?</td>
<td>What would happen if there was no intervention?</td>
</tr>
<tr>
<td>What if the person is catheterised/? has a urosheath?</td>
<td>How often is the person actually wet? e.g. has it bypassed?</td>
</tr>
<tr>
<td>Deliberate soiling/wetting?</td>
<td>Point out that the question asks how often they are actually incontinent irrespective of why this happens.</td>
</tr>
<tr>
<td>How would you classify dribbling?</td>
<td>Is it sufficient to cause a change of clothes or attention? If yes then counts as incontinence.</td>
</tr>
<tr>
<td>What if the person is regularly taken to the toilet and therefore don’t soil themselves?</td>
<td>How often are they actually incontinent?</td>
</tr>
<tr>
<td>How would you classify slight soiling of clothes for attention?</td>
<td>Is it sufficient to cause a change of clothes?</td>
</tr>
<tr>
<td></td>
<td>If yes, then choose the category that best reflect how often.</td>
</tr>
<tr>
<td>What if the persons are given suppositories and only soil themselves after having them?</td>
<td>Point out that the question asks how often the person is incontinent irrespective of why this happens.</td>
</tr>
<tr>
<td>What if the person has a colostomy/ileostomy?</td>
<td>Although this question is quite separate from that of toileting, if a person has a stoma, colostomy or ileostomy that is malfunctioning or leaking causing incontinence, the appropriate response should be made above.</td>
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Mental Health Guidelines

At this stage give them these Guidelines emphasis the change in timescale from seven days to thirty days.

- The next set of questions refer to the last four weeks rather than seven days.

- The responses to the questions will clearly be subjective in nature. However, in all cases, they should be based on the professional judgement of the respondent.

- If a person presents a particular behaviour, please indicate this. In some cases, the presentation of certain behaviours may not pose a problem to the person or others.

- Indicate the frequency with which the behaviour is presented, irrespective of whether it poses a problem to the person or to others.

- Please remember that these questions are over the last four weeks.

- Focus only on the last four weeks, even if the person has displayed certain behaviours frequently in the past, but not in the last four weeks. It is recognised that the successful treatment and management of certain mental illnesses may result in a reduction in the frequency of some behavioural problems.
Question 7 – Verbal Aggression

Is the person verbally aggressive towards other people, animals or objects...

1 – Never, or less than three times in the last four weeks

2 – More than once a week but not daily

3 – Once a day, on average

4 – More than once a day

5 – Throughout the day
Question 8 – Co-Operation

Is the person uncooperative or resistant to help with their care...

Such as:
- refusal to co-operate with their care
- or because of cognitive impairment and/or confusion will only co-operate with treatments/interventions such as medications when given repeated explanation and encouragement

1 – Never, or less than three times in the last four weeks

2 – More than once a week but not daily

3 – Once a day, on average

4 – More than once a day

5 – Throughout the day
Guidelines

Resistiveness may include not only a person’s active refusal to co-operate with their care, but also to situations where a person apparently agrees to receive care, but then is consistently unavailable at the time the care is due to be delivered or who because of cognitive impairment and/or confusion will only co-operate with treatments/interventions such as medications when given repeated explanation and encouragement.
Question 9 – Risk

Has the person’s behaviour constituted a risk of harm to themselves or others including dangers relating to accidental explosion, fire, poisoning (including medication, food), scalding, disorientation in the home, wandering, absconding, falls, inappropriate sexual behaviour, abuse (e.g. emotional, verbal, physical, financial, sexual) etc...

1 – Never, or less than three times in the last four weeks

2 – More than once a week but not daily

3 – Once a day, on average

4 – More than once a day

5 – Throughout the day
Guidelines
Question 10 – Immediate Intervention

Have there been episodes of a problem behaviour so severe, risky or disruptive that care staff have had to drop what they are doing to intervene immediately including accidental explosion, fire, poisoning (including medication, food or carbon monoxide poisoning), scalding, wandering, absconding, falls, inappropriate sexual behaviour, abuse (e.g. emotional, verbal, physical, financial, sexual) etc…

1 – Never, or less than three times in the last four weeks

2 – More than once a week but not daily

3 – Once a day, on average

4 – More than once a day

5 – Throughout the day
Glossary Of Medical Terms

**Gastrostomy**
Is an operation on the stomach to make an opening from the front of the abdomen into the stomach so that fluid food can be passed into the organ. Such an operation is usually necessary because the patient has lost the ability to swallow following a stroke. The care staff will be required to pour the feed into the tube with appropriate regard to precautions and method, or to prime and monitor a machine for this purpose.

**Nasogastric Tube**
A small plastic or rubber tube passed into the stomach through the nose, down the back of the throat. It is used to pass food or drugs into the stomach. As with the gastrostomy, the care staff will be required to pour the feed into the tube with appropriate regard to precautions and method, or to prime and monitor a machine for this purpose.

**Colostomy**
Creates an artificial opening into the bowel to act as an artificial anus, which allows the bowel to function when there is an obstruction or disease in the colon or rectum.

**Catheter**
Is a hollow tube that is passed along the urethra into the bladder. It draws off urine in the management of incontinence and loss of bladder control.

**Stoma**
An opening constructed when the bowel has to be brought to the skin surface to convey gastrointestinal contents to the exterior. The stoma is drained into a disposable plastic bag. (See colostomy: also used as a means to drain the bladder).