



Service Specification: Residential

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Document Owner:	George Bray
Document Author:	Ami Bestall

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1 Introduction

- 1.1 This document sets out the service specification, outcomes and standards which apply to the provision of a **Residential** care service to individuals in receipt of services (**Individuals**) purchased by Somerset Council (**SC** or the **Council**) which are delivered to Individuals by the **Provider**.
- 1.2 This document should be read in conjunction with:
 - The contract and its appendices and schedules
 - The Generic Service Specification
- 1.3 It is a statutory requirement that all Providers of regulated care services for adults are registered with the Care Quality Commission (CQC). Therefore, the regulations required for registration (and their associated standards), and the monitoring of the achievement of those regulations and standards, are not duplicated in this specification.
- 1.4 This Service Specification reflects national policy advice and guidance and sets out the philosophy and care standards to be adhered to by Providers in the provision of Residential Care Services and Short Breaks for adults with Care Act (2014) eligible needs.

2 Scope

- 2.1 Individuals eligible for Residential Care Services will be aged 18 years and over and have an assessed need that meets the National Minimum Eligibility Threshold and have been assessed as requiring 24-hour accommodation and support which is to be provided in the form of residential care services. The service described in this Specification will be available 24 hour per day, 365/6 days per year.
- 2.2 Residential Care Services should be commissioned when it is in the best interest of the Individual. Residential Care Services specifically tailored for people with learning disabilities, autism, mental ill health and physical disabilities are based on individual need. The Council utilises the iESE Care Cubed calculator to ensure that a fair price is being charged by providers and paid by the Council.
- 2.3 CQC outline of residential care;
"A care home is a place where personal care and accommodation are provided together. People may live in the service for short or long periods. For many people, it is their sole place of residence and so it becomes their home, although they do not legally own or rent it. Both the care that people receive and the premises are regulated."

Examples of services that fit under this category:

- Residential home
- Rest home
- Convalescent home
- Respite care

- *Mental health crisis house*
- *Therapeutic communities.*

The service provided in care homes (without nursing) will include full board and personal care on a 24-hour basis in the form of shared hours. Somerset Council considers these shared hours to be the minimum staffing support provided to continuously meet the needs of the individual(s) accommodated within the care home. This is a care and support provision in situ, which is to actively support people who may not have any designated 1:1 support; e.g. 4 persons resident in the care home, none of which require 1:1 support as an individual, therefore shared hours are 15 hours per day. This shared support is active support for individuals and shared across the total number of people living within the care home. The volume of shared hours will vary depending on the size of the care home and the types of need that it supports, and details must be provided to the Referrer in advance of the placement being made and at the time of every review

The care provider will provide the individual with a licence agreement to live in the care home. Nothing in this agreement should conflict with the contents of this specification of the Generic Specification

3 Service Standards

3.1 The Service Standards that will be met are:

- Providers and staff are outward looking and engaged in their local communities, enabling people to be included when they want to be.
- Providers and staff work in partnership with partners across the wider system such as health professionals, social care, community and voluntary sectors to meet the needs of the Individual in a rounded, holistic approach.
- Staff are respectful towards Individual's homes and living environments and treat them in the same way as any other person's private space.
- Providers are able to show Individuals that they are responsive to comments and prepared to learn from both compliments and complaints to improve everybody's services.
- Individuals have personal privacy in their room within the home, experience respect for their personal possessions, are able to exercise reasonable choice and control over how it is decorated/furnished and when staff enter.
- Staff should be able to support Individuals to exercise control over how they spend time privately in the privacy of their own space.

4 Service Outcomes

4.1 The aims of Residential care Services are to:

- Offer Individuals a long term, supportive environment in which to live a fulfilled life or as part of a pathway to greater maximising their independence.
- Support people to promote and maintain their well-being and potential in relation to their physical, intellectual, emotional and social capacity.
- To empower people who use services to make choices through the expression of wishes, feelings and preferences.

- To support individuals who present with needs, circumstances or complexities which result in supported living provisions not being appropriate.

4.2 The Outcomes that SC requires all Residential care providers to adhere to are that Individuals are enabled to:

- Have equality of opportunity to become part of their communities in a real way and do the things that they enjoy, regardless of their needs.
- Engage in and embed initiatives led by the authority in relation to assistive technology. Ensuring that where there is a way to maximise an Individual's independence through assistive technology and this is incorporated into the Individuals support plan.
- Maintain their skills and develop new ones in the areas that they want to.
- Try new things, pursue leisure interests, participate in physical, mental and spiritual activity and access community resources.
- To choose how to dress, what to eat, where to go shopping, what to do and when to do it.
- Be active members of their local communities, attend groups that spark the Individuals' interests; these should not be based around what diagnosis specific activities are available but solely based on what the person wishes to do. Reasonable adjustments should always be explored to support the Individual attending any groups they wish to.
- Develop meaningful friendships and social networks away from their care and support environment, should they wish to; these friendships should be based on mutual interests and two people having the same or similar diagnosis.
- Take part in social, leisure and further educational activities which meet their needs, including during the evening or at weekends. The Provider will work with community resources to work through reasonable adjustments to support the Individual to attend activities they wish to, especially if these take place at the weekend or evenings.
- Achieve any additional, individual, outcomes contained in the Individual's Care and Support Plan.

5 Accessing Services

- 5.1 Providers will provide a clear financial cost breakdown for each individual, which includes hotel / accommodation costs, food, utility, service, activity, shared care and 1:1 hourly costs (where applicable).
- 5.2 The services should aim to be available 7 days a week for placement of new Individuals.
- 5.3 Somerset Council, or an organisation authorised to act on its behalf (the **Referrer**) will make the initial referral to the Provider.
- 5.4 All services will have a written procedure that ensures that the placement of a new Individual to the service is carried out in a timely, sensitive and person-centred manner, designed around the Individual's needs.
- 5.5 Introductory visits for each prospective Individual, their Carer and/or family, advocates or friends will be arranged as appropriate to support planning and decision making.
- 5.6 An appropriate, person centred, Transition Plan will be agreed to support the Individual to start receiving the service, and to assist the Provider with arranging the appropriate services to meet the Individual's needs.
- 5.7 The Provider will complete an inventory of **all** personal possessions (including clothing) brought into the Residential home by the Individual. The inventory will be kept up to date for the duration of the Individual's stay.
- 5.8 Arrangements for a new Individual need to be sensitive and personalised and reflect the uncertainty and anxiety that Individuals may experience when moving home and deciding whether to live in residential care. The placement will be reviewed after a 28-day period to support Individuals to reach the right decision for them. This will also allow the Council and the Provider the opportunity to confirm whether the long-term residential care offered is appropriate and in the best interests of the Individual.
- 5.9 The Provider will ensure that full details of the service to be provided are given to the Individual and/or their Carer and/or Independent Advocate as appropriate. This should be in an appropriate format as required to fully support the inclusion of Individuals in the design and delivery of their service. The Provider will ensure that the room offered at the time the placement is agreed is the same room then given to the Individual.
- 5.10 The Provider will issue the prospective resident with an agreement giving them permission to occupy the room. This will include details of the services to be provided, any conditions and/or restrictions and the notice period. This will also detail clearly what is included or not included across the service: including what the Individual will be financially responsible for.

- 5.11 Any conditions set by the Provider must be explained to the Individual, with the support of their Carer, representative and/or independent advocate, before the start of service delivery and must be made available in an accessible way that the Individual can understand. These rights and conditions must not contravene CQC standards, outcomes, guidance or SC Service Specifications and the Individual must not be required to enter into any agreement where they do not have Capacity to do so.

6 Service Provision

- 6.1 The services will be available 24 hours a day, 7 days a week, 365/6 days per year, including Bank and Public Holidays.
- 6.2 Upon signing onto the framework, the provider will provide a Statement of Purpose describing the services to be provided, including details of the nature and extent of services, as per CQC guidance.
- 6.3 The service will ensure appropriate staffing to provide a safe, quality service and to meet the assessed eligible needs of Individuals over a 24-hour period, to include either sleep-in or waking staff as assessed and required.
- 6.4 The Provider will provide personal care and support with activities that meet the specific needs of each Individual in full, as detailed in their Person-Centred Plan.
- 6.5 The Provider will provide three nutritious meals a day in accordance with an individual's personal preferences. If a resident goes out and requires a meal elsewhere, the Provider will be responsible for providing or funding the alternative.
- 6.6 The Provider will include access to social and leisure opportunities arranged to meet each Individual's individual needs. Any additional activities and support outside of the standard support package must be agreed and funded to meet the specific requirements the Individual with the agreement of the Provider and Referrer.
- 6.7 The Provider will provide appropriate activities that focus on maintaining and, wherever possible, promoting a person's life skills and independence both within the Residential Care home and in the wider community.
- 6.8 The Provider will ensure the provision of a management on-call service over evenings, weekends and Bank Holidays to support staff teams with the provision of management advice out of hours to ensure a safe and responsive service. This must include contingency planning for staff shortages.
- 6.9 Occasionally, situations arise where an individual may require an out-of-hours or emergency admission. The Provider will ensure that there is a procedure in

place to accept emergency admissions and, where necessary, have a system of delegated authority in place to facilitate assessments and responsive decision making.

- 6.10 The Provider must complete its own assessment within 48 hours of an emergency admission. A full needs Assessment will be undertaken, if required, by the Referrer who will also review the emergency.
- 6.11 Where it is an identified need that an individual has a holiday or short break, or where it was previously agreed as part of their original Care and Support Plan, details should be included in the Individual's Person-Centred Plan and a holiday included as part of their residential service. The details of what this might include (number of days/support provided/costs involved) will be agreed with the Referrer and documented in their Person-Centred Plan.
- 6.11 1:1 / Individual Hours. Somerset Council considers 1:1 support to be targeted, outcome focused and individualised support as identified within the individual's Care Act (2014) assessment and support plan. This support is identified to achieve a specific outcome or goal that the Referrer has identified cannot be achieved through shared support and will be stated within the Care and Support Plan. Care providers will not seek to enforce minimum levels of 1:1 hours or any other arbitrary figure as it must be based on the care and support plan.

7 Accommodation

- 7.1 The Provider must ensure that the accommodation provided will be fit for its planned purpose of providing quality, appropriate residential care. It should be designed and adapted to meet the types of need of the Individuals who are intending to use the service.
- 7.2 The Provider will ensure that the premises, including its furniture and fittings, is kept to a good standard of repair and decoration and to a high standard of cleanliness and hygiene. Furniture and equipment will be suitable, safe and sufficient to meet the needs of Individuals and of a non-institutional nature in line with the general aims and values of quality services.
- 7.3 Individual's bedrooms should be fully furnished to meet their needs and requirements unless stated otherwise during the assessment stage.
- 7.4 The Provider will be responsible for ensuring an annual schedule of regular maintenance, redecoration and improvement of the property, or as required, to maintain the quality of the facilities provided and to maintain safety.
- 7.5 The Provider will produce a list detailing the standard furniture that will be provided in an Individual's room. The list will be given to Individuals, and/or their representative and/or Carers and/or Independent Advocate as part of the information they are given in advance of receiving the Service and at any time

they request it. The list will also be made available to the Council and/or an organisation authorised to act on its behalf on request.

- 7.6 The Provider will make provision for Individuals to bring and/or purchase their own furniture, where desired, for their room as an alternative to that which is normally provided by the Provider. However, the furniture provided by the Provider will be of sufficient quality and state of repair that an Individual and/or the representative will not feel obliged to do this unless they wish to.
- 7.7 The Provider will not require Individuals to replace or contribute to the maintenance of items on the list of standard furniture or purchase **any** items that are for communal use, or which cannot be removed.
- 7.8 The Provider will ensure that personal possessions of Individuals will be respected with support provided to look after and to maintain personal property. The home will provide a facility for the safe storage of Individuals' valuables where this is requested.
- 7.9 The Provider will ensure that they have clear, documented procedures in place regarding looking after personal property and possessions, which will protect both the Individuals using the service as well as the Provider and its staff.
- 7.10 The Provider will make best use of assistive technology solutions, telecare, aids, adaptations and mobility aids, where appropriate, following individual assessment to support individual's safety, promote personal independence and provide the least restrictive measures.
- 7.11 The Provider will provide bedrooms which are large enough to accommodate Individuals who require more spacious accommodation due to their mobility needs and where they require the use of equipment and 2:1 support to mobilise. In addition, bedrooms should be large enough to meet any needs for the storage of belongings and required equipment, e.g., hoist, continence wear etc.
- 7.12 The Provider should endeavour to provide en-suite bathrooms in order to provide privacy and promote individual dignity. Where accommodation does not facilitate each individual having en-suite facilities there should be ongoing review of the longevity of the property purpose and potential for redevelopment or seeking alternative solutions to meet that need.
- 7.13 The Provider will provide facilities which enable privacy when required. Bedrooms, toilets and bathrooms will be capable of locking, although locks will be of a type to allow access from outside in the event of an emergency. In particular, attention will be paid to the sensitivities and individual preferences of Individuals in terms of gender and/or cultural separation.
- 7.14 The Provider will provide a spacious, accessible lounge area available to Individuals with television, radio, etc. for Individuals to use when required.

- 7.15 Where possible, the Provider will also have a dedicated quiet area to provide an alternative to the main lounge and that is in addition to Individual's bedrooms.
- 7.16 The Provider will provide specialist resources where services intend to meet the needs of people with complex health, communication and sensory needs, following assessment and advice in order to meet their identified needs.
- 7.17 Providers will ensure that, where they intend to meet the needs of people with complex health and physical needs, they provide all the necessary equipment required following advice and assessment, e.g., Occupational Therapy, Physiotherapy in order to ensure the provision of quality, safe, accessible accommodation, facilities and equipment which maintain personal dignity and respect.
- 7.18 A registered Care Home must be "fit for purpose" and is required to have immediately available the correct level of equipment for the number of residents for which it is registered. The Provider must ensure that all furniture and equipment to meet individual needs is provided in accordance with the current version of the joint SC and Somerset ICB (Integrated Care Board) Equipment in Care Homes' Policy that is prevailing at the time the service is delivered, requesting specialist assessments where required, and that safeguards are in place to prevent Individuals being inappropriately charged for equipment.
- 7.19 Where an individual is in receipt of full Continuing Health Care funding the Provider will approach the ICB for provision of any additional specialist furniture and equipment required that will not be provided by the Integrated Community Equipment Service.
- 7.20 The Provider will ensure that all equipment used is clean, safe and well maintained in accordance with the manufacturer requirements, service inspection and adherence to Medical Health product Regulatory Agency (MHRA) requirements and/or any guidance issued by the MHRA.
- 7.21 The Provider will ensure that the residential care home provides sufficient space for the safe storage of mobility equipment in order to keep communal lounges and corridors clear.
- 7.22 The Provider will ensure that the residential care home has an accessible laundry with adequate facilities to meet the needs of Individuals and for washing all types of fabrics and clothing.
- 7.23 The Provider will ensure that the grounds to premises are well maintained and accessible to Individuals. Gardens should be designed to safely meet the particular needs of the people who use the service and to encourage their involvement. Individuals should be encouraged and supported to use the grounds for their recreation where desired and in a way that is appropriate to their needs.

- 7.24 Gardens and outdoor spaces should have appropriate and engaging equipment, activities and accessibility adaptations to promote use of the space to benefit the well-being of all people living in services.
- 7.25 The Provider will ensure that any move by an individual to another room will be agreed with them, the Referrer and, if applicable, their carer and/or representative and/or family and/or an Independent Advocate.

8 Personalised Care and Support

- 8.1 The Provider will ensure that services are centred on the needs and aspirations of each Individual, taking into account who the person is in the context of their friends and family and ensuring that the quality and safety of the care and/or support they receive support enables people to feel safe and to enjoy positive experiences.
- 8.2 The Provider will ensure that visitors are made welcome at times to suit Individuals.
- 8.3 The Provider will provide a level of care and support appropriate to meet individual needs and in accordance with any particularly specified needs, but allowing the appropriate level of self-determination, choice and independence that will enhance the Individual's quality of life.
- 8.4 The Provider will appoint a key worker/key team to each Individual. Individuals will be involved in this process to ensure choice and the best possible match.
- 8.5 The Provider will ensure proactive and responsive communication between themselves and the Individual and their family. Where Individuals have complex communication needs and are unable to speak for themselves the use of additional ways of providing communication to families should be considered, e.g., communication books, emails, tablets, computers, photos etc.
- 8.6 In recognition that high staffing ratios can in themselves be a form of restrictive practice, the Provider will take steps to minimise the number of staff employed to meet the needs of a single Individual through an effective staffing policy/rota system and personalisation policy in order to provide them with continuity as far as is practicable.
- 8.7 The Provider will ensure that the needs (including spiritual, ritual and dietary) of people from all ethnic, cultural and religious backgrounds are catered for in a relevant and proportionate way, as specified in the Individual's Person-Centred Plan.

- 8.8 The Provider will seek the support of the Council and/or an organisation authorised to act on its behalf to provide specialist advice and assessment when required e.g., communication, behavioural, health conditions.
- 8.9 The Provider will work in line with health professionals around any health requirements of the Individual, ensuring that the right professionals are undertaking the practices that are within their remit. Staff should not be undertaking any health-related practices that are not approved by regulative bodies or health guidelines.
- 8.10 Where included in the Individuals' Care and Support Plan, the Provider will ensure that there are arrangements in place for Individuals to keep in regular touch with family members and friends and attend significant family or life events, through visits, by telephone and use of technology.
- 8.11 Providers will indicate whether they are able to offer End of Life Care in their Statement of Purpose. Where they do, they should ensure that they aim to work holistically and in conjunction with Individuals, their families, the Council and/or an organisation authorised to act on its behalf and health and palliative care specialists to support the person in the best way possible.
- 8.12 Providers will ensure that staff receive training in the best practice for End-of-Life Care for people with Care Act eligible needs and their families and in Bereavement and Loss.

9 Meeting Personal Care Needs

- 9.1 The Provider will ensure that Individual's personal choice and wishes regarding who they would like to provide their personal care are taken into account and given priority wherever possible. Intimate personal care tasks must be provided by suitably matched staff in terms of any cultural sensitivities and gender.
- 9.2 The Provider will ensure that the Individuals dignity and respect is maintained at all times during any and all person care activities.
- 9.3 Please see Generic Framework Specification (Quality Assurance) for further outline regarding personal care expectations.

10 Meeting Health Needs

- 10.1 Individuals maintain the right, where they are able, to make their own decisions about the care, treatment and support they receive. Providers will ensure that they have clear procedures, as per the Mental Capacity Act 2005, to assess individual capacity, to support people with decision making and to obtain valid consent and that these procedures are monitored and reviewed.
- 10.2 Providers will assist Individuals to meet their health needs through:
- The provision of nutritious meals and drinks to meet dietary needs and individual preferences.
 - Supporting access to NHS services as required and/or identified in assessments and the Individuals Person Centred Plan.
 - Providing advocacy to support Individuals to access the health care they require.
 - Enabling Individuals to have an Annual Health Check with their GP that results in a Health Action Plan detailing health improvement action for the next 12 months.
 - Identifying the barriers that make it difficult for an individual to access health services, e.g., availability of family/staff who know the person well; specific anxieties; phobias and set out the actions needed in the Individual's Person-Centred Plan.
 - Identifying and documenting the reasonable adjustments needed by Individuals to access healthcare and record in Person Centred Plans and Hospital Passports.
 - Providing one-to-one support where required and agreed with the Referrer to support access to appointments.
 - Ensuring that specialist health assessments are sought when required and that any treatments or therapeutic programmes are implemented as directed.
 - Supporting access to formal Advocacy services, including Independent Mental Capacity Advocates, as required under the Mental Capacity Act 2005.
- 10.3 The Provider will support Individuals to manage their own health conditions where appropriate, including through the provision of assistive technology, telecare, aids, adaptations, and mobility aids to promote independence.
- 10.4 The Provider must ensure that it has adequate and appropriate equipment to meet the health and physical needs of all Individuals on a 24-hour basis, guided by health and Occupational Therapy colleagues. Equipment provided must be safe and staff correctly and adequately trained and competent.
- 10.5 Where Individuals have additional health needs and require specialist health assessments, equipment and advice the Provider must ensure that they actively implement any specialist health recommendations into the Individual's Person-Centred Plan.

- 10.6 Tasks carried out by the Provider will exclude nursing care, which is the responsibility of the NHS and is subject to a separate Contract and Service Specification, except where this is part of a person's regular care routine **and** appropriate training has been delivered to key staff by suitable professionals, as advised in the joint Somerset Council and Somerset Partnership NHS Foundation Trust's Medical and Clinical Tasks Policy.
- 10.7 Health care tasks provided within residential care and short breaks services will be ancillary and incidental to the provision of the accommodation and social care support provided by these services, as directed by the NHS Continuing Health Care (CHC) National Framework 2012, or any framework/guidance that supersedes it.
- 10.8 The Provider will provide support to access all routine medical appointments to meet the needs of the Individual where required, e.g., Chiropodist, Dentist, Physiotherapist, and will be included and provided within the standard fee. The Provider must ensure that Individuals are supported to attend any emergency appointments and have access to medical attention when required.
- 10.9 The Provider will liaise with the relevant Referrer and, in Somerset, the Hospital Learning Disability Liaison Nurse for Musgrove Park Hospital and Yeovil District Hospital, prior to any outpatient appointments and hospital admissions to facilitate Person Centred Planning and the provision of reasonable adjustments to access the required NHS services.
- 10.10 Where an Individual is admitted to Hospital, the Provider will ensure that the referrer (Sourcing Care sourcingcareservice@somerset.gov.uk) is informed as well as their family and/or anyone who is important to them.
- 10.11 If requested to do so by the Referrer, and appropriate to the individual needs of the Individual, the Provider will provide support to Individuals within hospital settings, including admissions. Reference should be made in Somerset to the Musgrove Park Hospital Learning Disability Policy 2013 and the Yeovil District Hospital Learning Disability Protocol 2014, or any documents that supersede them.
- 10.12 Where the Individual is admitted to hospital the Provider is only expected to undertake up to the original commissioned hours of one-to-one support allocated to that individual. If a request is made from the hospital to provide additional support, then this must be funded through the NHS system and contact made directly with the onsite special nursing team, such as a Learning Disability Nurse.

11 Involvement in Activities

- 11.1 The Provider will ensure that they are aware of local community resources, activities, and events to support people's access and involvement in the community.
- 11.2 The Provider will enable Individuals to access community activities on an individual and / or small group basis as set out in the Person-Centred Plan, such as:
- Sporting activities
 - Musical and other cultural events
 - Shopping and leisure activities
 - Engagement with learning, voluntary and employment opportunities
 - Support to attend other activities already planned and provided by other agencies.
 - Drinks and meals out
 - Social events
 - Religious events or occasions
- 11.3 Any costs of activities planned to be funded within the placement cost, will be agreed at the time of the original placement with the Individual and/or their representative and/or their Carer as appropriate. All other activities will be funded by the residential service or the Individual themselves. Individuals should not be expected to fund activities which are included in their support plan and agreed to be met by a provider.
- 11.4 Where Individuals use public transport independently to attend an on-going activity, the Provider will ensure that they are encouraged to continue doing so once they have learnt any new routes that apply where a change of location occurs.
- 11.5 The Provider will ensure that, where appropriate and when included in their Person-Centred Plan, Individuals are supported to develop public transport skills.
- 11.6 The responsibility and method of payment for the cost of both public transport and that provided by the Provider should be agreed on an individual basis by the Individual / their representative, the Referrer and the Provider.

12 Managing Individual Finances

- 12.1 The Provider's staff's role in supporting an individual to manage their personal finances will be detailed in their Person-Centred Plan.
- 12.2 Please see Generic Framework Specification for details regarding supporting people to manage their money.

13 Training

- 13.1 The Generic Specification for this DPS outlines the minimum staff training and induction standards expected.
- 13.2 Residential Services should ensure their training reflects their specialism, including areas such as, Positive Behaviour Support and Restrictive Interventions, dementia, supporting physical needs (including manual handling / moving and handling).
- 13.3 Residential Care providers will ensure that they are equipped, and all staff trained to a high level to meet the needs of individuals residing in the service.
- 13.4 Residential care providers are expected to evidence their training and competencies demonstrating their capability to support complex needs relevant to the needs of those individuals referred for residential care.