

CARE OUTCOMES

Service Users Guide



Care Outcomes

INFORMATION FOR USERS OF OUR SERVICE

Office:8am -5pm0191 519 7465

On call 5pm – 8am 0191 5197465

email: recruitment@careoutcomes.co.uk

A. Aim of this document

This document gives you basic information about us, Care Outcomes, and our services. This document will be useful for:

- people using our service;
- people considering using our service; and
- friends, relatives, carers and representatives of people using or considering using our service.

It also includes the material required by the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

B. About us

We are a healthcare organisation, based in Boldon, Tyne & Wear. We help care for people who, because they are getting older or have a disability or illness, to find it difficult to cope with their own personal -care needs or domestic responsibilities. We provide personal care, social care and practical care in people's homes, Nursing Homes and Supported Living to help them stay as independent as possible. Our services are designed using a Person Centred Planning approach. We provide care services to people who choose to pay for their own care (private clients), and to people referred to us direct by adult social care departments of local authorities and primary-care trusts

(PCT's) and for people within a care home or supported living environment.

We are registered, and therefore licensed to provide services, by the Care Quality Commission.

C. Your rights and our aims and objectives

The aims and objectives of Care Outcomes, as a quality care provider, are for you to enjoy your rights as an individual as much as possible. The following rights are, therefore, central to our work.

Privacy

Your right to privacy means that you do not receive unwelcome attention or intrusion.

We aim to protect your privacy in the following ways:

1. Our staff will not enter your home, and rooms within your home, without your permission.
2. You have the right not to be interrupted by a care support worker when, for example, you have a visitor or during an intimate activity, such as washing and dressing.
3. We respect that our records are only seen by the people who need to see them.

Dignity

The right to dignity involves recognising that you are an individual and have specific needs. We aim to do this in the following ways:

1. We can arrange help with personal things, such as dressing, bathing and going to the toilet. You can choose a care support worker, and whether you want them to be male or female.
2. We will make sure you get help with dressing, and maintaining your clothes, if you need this.
3. We will try to help you with your make up, taking care of your nails, hairdressing and other areas of your appearance, so you can present yourself as you would like.
4. We aim to make sure that you do not feel inferior or vulnerable because of a disability or problem.
5. We will treat you with respect and speak to you in a way you would like - for example, by calling you by the name you want us to. We aim to have relationships with you which are warm and trusting, but that are appropriate and keep to professional boundaries.

Independence

This means having opportunities to think, plan, act and take sensible risks without having to continually refer to other people. We aim to help you keep your independence in the following ways:

1. We help you manage for yourself where possible, rather than becoming totally dependent on care support workers and other people.
2. Our staff will, where possible, give you advice about situations or activities which are likely to put you or your property at risk.
3. We select, train and support our staff to provide services responsibly, professionally and with compassion - and never take advantage of their positions to abuse, or otherwise put you at risk.

Civil Rights

We aim to help you to continue to enjoy your rights in the following ways:

1. If you want to take part in elections, we will try to provide the information and help you need to vote.
2. We want to help you to make use of public services such as libraries, education and transport.
3. We will encourage you to make full use of health services in all ways appropriate to your medical, clinical and therapeutic needs.
4. We will make it easy for you, your friends, relatives and representatives to complain about or give feedback on our services.

5. If we can, we will support you to take part as fully as possible in community activities, such as voluntary work.

Choice

This is the opportunity to choose independently from a range of lifestyle options. We will respond to your rights to make choices in the following way:

1. We manage and arrange our services to respond as far as possible to your preferences, such as having the staff that you feel most comfortable with.
2. We respect your personal preferences and individual qualities.
3. We aim to create an atmosphere which welcomes and responds to your individual culture.

Fulfilment

Feeling fulfilled is the opportunity to realise your personal hopes and abilities. It recognises and responds to levels of human satisfaction that are separate from things we physically experience. But it is difficult to generally explain about fulfilment, as it deals with precisely the areas of your lifestyle that are different from someone else's. We respond to your right to fulfilment in the following ways:

1. We will try to help you take part in as broad a range of social and cultural activities as possible.

2. If you ask, we will help you take part in practice associated with religious or spiritual matters, and to celebrate meaningful anniversaries and festivals.

3. We aim to respond sensitively and appropriately to your special needs and wishes if you want to prepare for when you die.

4. We make particular efforts to understand and respond if you want to take part in unusual events or activities, such as driving a race car for your 80th birthday or a parachute jump!

D. Services we provide

We have an excellent team of skilled professional staff who can provide the following staff support:

Personal care

Your care support worker is able to provide you with physical assistance with daily essential activities such as eating and drinking; your toileting needs; washing; bathing and oral hygiene; care of your skin; hair and nails; helping you get up in the morning and going to bed at night; plus many other tasks you may need help and support with.

Incontinence is one of the most important factors in a family making decision to send their relative into residential care. We can help you to maintain the maximum level of independence, choice and control by supporting you to carry out your own

personal care, including continence management.

Companionship and assisted breaks

Our staff are trained to listen, to support your social and emotional wishes, to express your needs and wants, to alleviate loneliness and isolation, and to assist you to maintain confidence and positive self-esteem.

Your care support worker can sit with you and keep you company, and accompany you on walks and appointments. We can also go with you on trips out, including assisting you on short breaks.

Practical Support

Your care support worker can assist you to manage your home by carrying out light domestic tasks such as vacuuming, dusting, general cleaning, washing up and doing your laundry and ironing. We can also help you with social tasks such as buying birthday presents, and collecting your pension and prescription.

We can also help you with preparing shopping lists and doing your shopping for you. You can tell us what you want and we will prepare your breakfast, lunch and evening meal or supper (and drinks) for you at home. Our staff are trained to meet your nutritional and hydration needs and preferences, as part of a balanced diet.

Pop-in visits

If you are maintaining your independence but just need some occasional help, advice or guidance, your care support worker can visit you briefly during the day, at a time that suits you, to check that you are feeling fine and that you have everything you need, including your medicine.

Our medication management programme ensures that you have your medicines at the time when you need them, and in a safe way. We ensure that information about the medication being prescribed to you is made available to you or others acting on your behalf. Our staff are trained and supervised in the safe administration of medication.

Home-from-hospital and rapid response

Your care support worker can help assist you when you come out of hospital or if you are recovering from an illness, even overnight. We will work with you to regain your strength and independence by providing advice, guidance, information, and hands-off support rather than doing things for you. This process is sometimes known as re-enablement.

We have developed a rapid but thorough assessment process to aid your return from hospital back home, ensuring that you are safe and that your well-being is our priority.

End-of-life-care

Our approach to end-of-life care (also known as palliative care) enables us to support people with progressive incurable illness to live as well as possible until they die. We support the needs of you and your family and work very closely with our professionals to manage your care needs in your own home, focusing on your physical, psychological and spiritual comfort. To enable clients to approach end of life stages with dignity.

We empathise with the concept of a 'good death' where a person dies in a place of their own choosing, with their loved ones, friends and carers around them. We continuously emphasise respect and dignity in these circumstances, ensuring that preferences and choices are acted upon as part of a person-centred approach to care.

Continuing and complex care

Our staff are trained to deliver specialist care within a wide range of specific, complicated needs. Specialist services may include full medication management, using hoists, assessing equipment needs, moving and handling manoeuvres, assisting with mobility, falls prevention practice, and using continence equipment.

Our advanced training enables our staff to identify activities that maintain independence at home for the person with Alzheimer's Disease, Vascular Dementia, Lewy Body Dementia and Pick's Disease. This understanding of the

signs and symptoms of dementia, and the effect that these have on the person with dementia and the carers, allows the increasing complexity of the condition to be managed at home.

E. Services we are not able to provide

We have explained what we can do. There are also things we cannot do.

Our care support workers will not carry out tasks that need the skills and expertise of clinical professionals.

These tasks include:

- Cutting your toenails;
- syringing ears;
- removing or replacing catheters;
- all injections;
- changing or filling oxygen cylinders;
- lifting you on their own;
- tracheostomy care - such as changing tubes or oral suction (unless previously fully training, with certificate)
- Changing dressings;
- giving you medication rectal or vaginal;
- filling dosette boxes for medication.

F. How we provide care

Assessing your needs

If you are referred to us by a local authority or PCT the social services

department will have carried out an assessment of what you need before deciding that care in your own home is going to meet your needs.

We will receive a summary of this information, which is usually called a 'support plan'. We will then carry out our own individual 'Care needs assessment', ourselves. To do this we will need to ask you quite a lot of questions, and probably get information from you carer, your doctor and any other specialist who knows about your health and carry out the assessment.

We hope that you will not find this too intrusive. We want to build a full picture and will do this as quickly and tactfully as possible. Remember, we will use all your information confidentially. Our aim is always to make sure that we understand what your needs and preferences are, so that we can respond in ways which really suit you.

Assessing the risks

If you have decided to have care provision in your own home, you will know that there are some risks. The environment will not be the same as, for example, a residential home. On the other hand you will keep your independence and stay in your home, and many people find that a small amount of risk can be fulfilling.

Still, we have to make sure that everybody involved understands the risks

and has thought about them responsibly. So, with you (and your family members or representatives, if needed), we will carry out a risk assessment, looking at risks and advantages. Following this assessment if it is appropriate, we will make suggestions as to how unnecessary risks can be reduced.

Care Plan

After we have assessed your needs and the risks in your home, we work with you to prepare a plan for the care we will provide. This is called the 'Care needs assessment' (Care Plan), because you, as the service user, are central to it and, where possible, we want you to produce it with us. The plan will say what services we will provide, with details like visit/shift times and the special tasks we will carry out. It will also say what we all hope to achieve and how we plan to do this.

Re-assessing your needs and reviewing the care

Over time your needs may change. You may need more or less care, we may have to change the type or pattern of service or there may be new risks and opportunities. So, again with your help, we will review your needs and make decisions about the care we provide. If at any time there are parts of your care you would like to change, please let us know. We will continue to understand your needs and adapt the service that you receive. We will also need to discuss

changes to your care plan with the local authority/PCT and other health and social-care professionals, if they have been involved in it.

Visiting your home

When our staff are working in your home they will wear a uniform, they will also carry an identification badge, which has a photograph of them. If you would prefer staff to work without a uniform, please let us know. If we have keys to your home or a key safe number, our staff will always knock when using the key or Key Code so that you know who is calling.

While working in your home, our care support workers will not at any time bring their partners, children, friends or pets. If at any time a particular care support worker is not able to visit you, our office staff will always phone you to explain why, and tell you the name of the replacement care support worker.

Timesheets

When your care support worker visits you in your home, they need to record the amount of time they spend with you. So, at the end of each visit, the care support worker will fill in a timesheet and ask that you or your representative, if appropriate, sign it to confirm that they have done the work at the times and length of time given. We need accurate records of visits so we can maintain a correct and efficient invoicing system for the work done. This also acts as a control

to make sure that you receive the time that you or the local authority or primary care trust have paid for.

Written records

Each care support worker needs to record the tasks they do during their time with you, in line with the agreed care plan. This helps care support workers and other health and social care professionals to see what progress they are making with you. These records also help when a new care support worker has to step in to cover in an emergency. Records of important events and activities help your family and representatives, and Care Outcomes, to review your care. We maintain our written records as part of your care plan.

G. Terms, conditions and fees

Our fees are reviewed every year to ensure that they reflect variations, including:

- the cost of providing our service;
- the rates fixed by local authorities; and
- the rates set by the local primary care trust

Period of Engagement

The service will be provided for the period specified in the Service Users Plan being either a fixed period or a period terminable on notice.

Withdrawal of Service

We reserve the right to withdraw a Care worker and/or to cancel the agreement with immediate effect in circumstances which, in our reasonable opinion, make the continued provision of the Service untenable. Such circumstances would include (but would not be limited to) any failure by you or your funding organisation to pay (or persistent late payment of) our invoices, failure by you, or someone else at your home to provide a safe environment and/or appropriate equipment for the Service, sexual or racial harassment, extreme alcohol consumption, unreasonable behaviour or requests that a Care worker undertake unreasonable or illegal activities.

Following a risk assessment being undertaken on the premises, Care Outcomes determines that it is not possible to provide care and support safely to the Service User in the intended premises.

Care Outcomes determines that it is not able to provide the level of services required within the Service Users home and this concern is brought to the attention of the Client and Service User.

Should a staff member of Care Outcomes experience discrimination of any form by the Client or Service User.

Smoking

For the health and safety of our staff we ask you and anyone else present in your home, to refrain from smoking and ventilate any room in that will be used for your care for at least one

hour before the agreed time.

If you smoke while your Care worker is with you, the Care worker will be obliged to leave your home for the duration of your smoking and shall not be permitted to re-enter your home until 1 hour after you last smoked, in accordance with our smoking policy.

Any additional requirements or any variation to this clause will be specified in your Care Plan.

Cancellations and termination

You can cancel the Service at any time (and for any reason) within 7 days by giving us notice in writing .

In all other cases, you must give us at least 14 days' notice in writing if you no longer require the Service or want to suspend the Service for a period of time. If you give less than 14days' notice we reserve the right to charge a Cancellation Fee or a Service Suspension Fee as set out in the Fee Schedule.

Please note if you suspend the service for a period of time we cannot guarantee that the same Care worker attend your Home when you resume the Service.

In the event that you wish to cancel an individual assignment you must give us at least 48 hours' notice to a manager of

the organisation otherwise you will be charged for the assignment in full.

If cancellation of an assignment arises as a result of your admission to hospital, fees will be chargeable but only in relation to the time we were due to provide the Service on the day you were admitted to hospital.

For one-off bookings, 24 hours notice must be given of any cancellation or amendment to any booking or time agreed between Care Outcomes and the Client for the services delivered. Failure to do so will result in full charge for the visit being levied.

If a visit requires cancellation due to verifiable medical emergency then no charge will be made.

We may terminate this Agreement:

- (a) by giving 14 days' written notice for any reason; or
- (b) after giving 14 days' written notice that you have failed to pay the Fees; or
- (c) after giving 14 days' written notice that we are unable to meet your needs

The Service will terminate immediately in the event of your death and (for the avoidance of doubt) your funding organisation or other will remain responsible for paying any outstanding fees.

H. How do you view our service;

Should you wish to comment about the service we provide, or ask any questions, specific to your care needs. Please do not hesitate to contact us on 0191 519 7465.

I. How to make a complaint:

The company strives to ensure that all clients are provided with the highest standard of service. To help us maintain this excellence we operate a full grievance and complaints procedures to ensure that any problems or issues you may have, however small, are investigated and resolved.

Should you wish to make a complaint please do not hesitate to contact the Management Team on 0191 519 7465. Please do not hesitate to request copy of this should you require.

Our complaints procedure contains a full contact list and flow chart of how to complain.

All patients and service users, are owed a statutory duty of confidentiality under the Data Protection Act 1988, as well as a duty of confidentiality under the common law.

J. Out of Hours

Care Outcomes operate an out of hours on call service, it is the same contact number but your call will be diverted to our on call consultants who are also supported by a local care co-ordinator who works alongside the staff and are in regular contact

On call staff have access to advice and support from senior staff at all times via the telephone

On call staff can access each person's electronic care records so that they had up to date information about each person and can document advice given and any changes to their care and support

ADVOCACY

Advocacy services help people – particularly those who are most vulnerable in society – to:

- access information and services
- be involved in decisions about their lives
- explore choices and options
- defend and promote their rights and responsibilities
- speak out about issues that matter to them

What is an advocate?

An advocacy service is provided by an advocate who is independent of social services and the NHS, and who isn't part of your family or one of your friends.

An advocate's role includes arguing your case when you need them to, and making sure the correct procedures are followed by your health and social care services.

Being independent means they are there to represent your wishes without giving their personal opinion and without representing the views of the NHS or the local authority.

An advocate might help you access information you need or go with you to meetings or interviews in a supportive role. You may want your advocate to write letters on your behalf, or speak for you in situations where you don't feel able to speak for yourself.

Advocacy and disability organisations

People with learning or physical disabilities can often struggle to be listened to and have their wishes understood. [SEAP](#) is an organisation that provides advocacy support, and wants everyone to "have their voice heard on issues that are important to them within health and social care services".

It also provides training for advocates, volunteers and professionals who need to understand the role of advocacy in health and social care services.

The [British Institute of Learning Disabilities \(BILD\)](#) works with people with learning disabilities and their families to make sure they have the right support to make choices and decisions about their own lives.

Mencap's advocacy service enables people with a learning disability to speak up and make decisions about things that are important to them, while their [Empower Me service](#) provides personalised advocacy support for people with a learning disability. It aims to help people develop the skills, confidence and knowledge needed to voice concerns and secure rights.

Other advocacy organisations

Many local councils fund local advocacy services and some hospitals do, too. To find out if there are any in your area, you can [contact your local council](#) or check its website.

If you have a care co-ordinator from your local social services or healthcare team, they will liaise with other agencies for you.

Some advocacy services help people with a specific condition. For example, Diabetes UK offers an advocacy service for vulnerable people with diabetes, and is available in many areas of England and Wales. [Email the Diabetes UK advocacy service](#) or visit the [Diabetes UK website](#).

[Age UK](#) gives advice and information to older people and their carers, family, friends and other people involved in their care. Some branches offer advocacy services. Find out more on the [Age UK website](#).

Carers UK has a free advice line for carers – call 0808 808 7777 or visit the [Carers UK website](#) for advice on many aspects of caring. It doesn't provide an advocacy service, but can give you information on where to go for help.

Advocates from the charity [VoiceAbility](#) can help you get your voice heard and involved in making key decisions about your care and health needs.

Voiceability specialises in working with vulnerable people, such as those who have a disability, communication difficulties, mental health needs, and those who lack capacity, or those who have no one else to support them.

Advocacy and mental capacity

The Mental Capacity Act 2005 introduced Independent Mental Capacity Advocates (IMCAs). An IMCA supports people who can't make or understand decisions by stating their views and wishes or securing their rights.

This is a statutory advocacy service, which means in certain situations people who lack capacity must be referred to an advocate.

An IMCA is not the decision-maker (such as the person's doctor or care manager), but the decision-maker has a duty to take into account the information given by the IMCA.

The Independent Mental Capacity Advocate (IMCA) service aims to help particularly vulnerable people who otherwise have no family or friends consult about those decisions.

IMCAs are independent people who work with and support people who lack capacity, and represent their views to those who are working out their best interests.

An IMCA must be instructed, and then consulted, for people who lack capacity and have nobody else to support them (other than paid staff) whenever:

- an NHS body is proposing serious medical treatment
- an NHS body or local authority is proposing to arrange accommodation (or a change of accommodation) in hospital or a care home and (a) the person will stay in hospital longer than 28 days or (b)

they will stay in the care home for more than eight weeks

An IMCA may be instructed to support someone who lacks capacity to make decisions concerning:

- care reviews, when nobody else is available to be consulted
- adult protection cases, whether or not family, friends or others are involved

GOV.UK has more information on [what it means to have an IMCA](#).

Independent advocates under the Care Act

The IMCA service is not the only form of independent advocacy available to support individuals. New advocacy provision is being introduced as part of the Care Act 2014.

The Care Act introduces new statutory advocacy from April 2015. This is for people who have substantial difficulty in being involved with the assessment of their needs, or with their care planning or care reviews, if they have nobody appropriate to help them be engaged. Your local authority can provide more information.

Advocacy and mental health

The Mental Health Act introduced statutory advocacy for people who are detained under the Mental Health Act or who are under a Community Treatment Order (CTO). This form of advocacy is provided by advocates called Independent Mental Health Advocates (IMHAs).

Reporting Organisations

If, at any stage throughout, you are unhappy with our complaints handling, or if

you feel that your complaint has not been resolved properly you have the right to refer your complaint to both or one of the organisations below:

Care Quality Commission
Regulations Manager for the North West,
Citygate, Gallowgate, Newcastle Upon Tyne, NE1 4PA
Tel: 03000 616161

Information – this is Care Outcomes regulatory body and complaints regarding the services provided by Care Outcomes can be referred to them for investigation.

Local Authority
Newcastle City Council Adult Social Care
0191 278 8377
North Tyneside City Council Adult Social Care
019 643 2777

Information – this is the Local Authority who commissions and looks after care and support services in your area, even if you are not a client of the Council or pay for your own care, complaints about Care Outcomes service can be made here.



PRIVACY POLICY

HOW WE USE YOUR PERSONAL INFORMATION

This fair processing notice explains why Care Outcomes UK Ltd collects information about you and how that information may be used.

Records may be electronic, on paper or a mixture of both, and we use a combination of working practices and technology to ensure that your information is kept confidential and secure. Records which Care Outcomes hold about you may include the following information;

Details about you, such as your address, carer, legal representative, emergency contact details.

To ensure you receive the best possible care, your records are used to facilitate the service you receive. Information may be used within Care Outcomes for audit purposes to monitor the quality of the service that you receive from us.

Related information about the NHS England initiative to raise public awareness about how patient information is used to improve the safety and care of patients can be found here. <https://www.england.nhs.uk/2013/10/care-data/>

Our legal basis for processing your data is that you or your nominated representative, guardian or attorney have given consent for it to be used in the provision of advice or care.

Some of this information may necessarily be shared with designated care homes in order for us to provide the required services for you.

You or your nominated representative, guardian or attorney may withdraw consent to use your personal data at any time but this may affect our ability to provide you with the necessary level of service or care.

HOW WE MAINTAIN THE CONFIDENTIALITY OF YOUR RECORDS

We are committed to protecting your privacy and will only use information collected lawfully in accordance with:

- Data Protection Act 1998 (this will be superseded by the General Data Protection Regulation on 25th May 2018 – further information is provided below)
- Human Rights Act 1998
- Common Law Duty of Confidentiality
- Health and Social Care Act 2012

- NHS Codes of Confidentiality, Information Security and Records Management
- Information: To Share or Not to Share Review – Dame Fiona Caldicott

Every member of staff who works for Care Outcomes has a legal obligation to keep information about you confidential.

We will only ever use or pass on information about you if others involved in your care have a genuine need for it. We will not disclose your information to any third party without your permission unless there are exceptional circumstances (i.e. life or death situations)

WHO ARE OUR PARTNER ORGANISATIONS?

We may also share your information, subject to strict agreements and your consent on how it will be used, with the following organisations:

- NHS Trusts / Foundation Trusts
- GP's
- NHS Commissioning Support Units (CSUs)
- Private Sector Providers
- Voluntary Sector Providers
- Clinical Commissioning Groups
- Social Care Services
- NHS Digital (formerly known as the Health and Social Care Information Centre (HSCIC))
- Local Authorities
- Other 'data processors' which you will be informed of if we do this.

You, or where appropriate your nominated representative, guardian or attorney, will be informed who your data will be shared with and in some cases asked for explicit consent for this to happen when this is required.

ACCESS TO PERSONAL INFORMATION

You have a right under the Data Protection Act 1998 (and from 25th May 2018, under the General Data Protection Regulation) to request to obtain copies of what information Care Outcomes holds about you and to have it amended should it be inaccurate. In order to request this, you need to do the following:

Your request must be made in writing to Care Outcomes – for information from a hospital or other health care providers you should write directly to them.

There may be a charge to have a printed copy of the information held about you. We are required to respond to you within 40 days

You will need to give adequate information (for example full name, address, date of birth, and details of your request) so that your identity can be verified and your records located.

OBJECTIONS/COMPLAINTS

Should you have any concerns about how your information is managed by Care Outcomes, please contact:

The Director, Care Outcomes UK Ltd,
Quadrus Centre, Woodstock Way, Boldon
Business Park, Boldon, Tyne & Wear,
NE35 9PF

Care Outcomes UK Ltd, The Quadrus Centre, Woodstock Way, Boldon, NE35 9PF

If you are still unhappy following a review by Care Outcomes, you can then complain to the Information Commissioners Office (ICO) here <https://ico.org.uk/concerns/> or telephone: 0303 123 1113 (local rate).

CHANGE OF DETAILS

It is important that you tell Care Outcomes if any of your details such as your name or address have changed or if any of your details such as date of birth is incorrect in order for this to be amended. You have a responsibility to inform us of any changes so our records are accurate and up to date for you.

NOTIFICATION

The Data Protection Act 1998 requires organisations to register a notification with the Information Commissioner to describe the purposes for which they process personal and sensitive information.

This information is publicly available on the Information Commissioners Office website www.ico.org.uk

Care Outcomes UK Ltd is registered with the Information Commissioners Office (ICO).

THE GENERAL DATA PROTECTION REGULATION (GDPR)

This regulation will become law on 25th May 2018. It will supersede the Data Protection Act 1998 and will impose much stricter controls on how we collect and use personal data. It will encompass all the current requirements of the Data Protection Act 1998 and enhances the

rights of individuals in a number of areas. Further information about it can be found here: <https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr>

Information Security Statement

Care Outcomes understands that information, in whatever form, is a valuable asset; and consequently must be suitably protected, at all times, from risks and threats to its integrity, confidentiality and availability in line with internal policies, and that of legislative requirements, such as the Data Protection Act (GDPR - From 25th May 2018). We are committed to our corporate and ethical responsibilities to maintain and protect the information and data we store, process and use in the course of our business activities; a responsibility we take seriously and enforce through security and behavioural policies, internal training provisions, and formal information security. To assure information is suitably preserved, we regularly reassess the security risks and threats posed from our internal and external operating environments, and implement necessary changes to ensure controls for the protection of information assets are effective and proportionate.

Healthy Homes

Is your home affecting your health? We may be able to help if you:

- are over 18 years of age
- live in North Tyneside
- and own or privately rent your property

North Tyneside Council advice and guidance to help residents to solve health-related housing

Care Outcomes UK Ltd, The Quadrus Centre, Woodstock Way, Boldon, NE35 9PF

issues and improve physical / mental health through referrals to relevant services and organisations.

If you're a social housing tenant, you should contact your own social landlord.

We can provide information or advice on:

- heating issues, energy bills and fuel poverty
- damp and mould
- home safety - hazards and clutter
- outstanding repairs
- fire safety

We accept referrals from both professionals and residents.

Make a referral

If you make a referral one of the team at North Tyneside Council will contact you to discuss your situation, what help may be available and to arrange a home visit.

Any personal information which is shared with the team will be used by North Tyneside Council to deliver the help you have requested. All personal information provided is used in line with [North Tyneside Councils Privacy Notice](#).

Contact North Tyneside Council:

Safe and Healthy Homes
Telephone: 0191 643 7585
Email: healthyhomes@northtyneside.gov.uk



North Tyneside Council