

Service User's Guide

Welcome to



Ilsham Valley
Nursing Home

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Statement of purpose

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Aims and Objectives

Ilsham Valley Nursing Home (*the 'Home'*) is registered for 23 by the Commission for Social Care Inspection (CSCI) for care with nursing in the category physical disability over 65 years of age. The Home caters for both male and female residents and 24 hour nursing cover is provided.

The Home prides itself in providing a high standard of care by competent staff that are caring, motivated and well trained. We always try to provide for a residents individual's needs in a relaxed and homely environment.

We aim to provide each resident with the individual care and support they need to enable them to continue to lead a comfortable life, to exercise choice, be involved in their care and maintain outside links with families and friends.

It is the objective of the Home that all service users shall live in a clean and safe environment and be treated with respect and sensitivity to their individual needs and abilities. Staff will be responsive to the individual needs of service users and will provide the appropriate degree of care to assure the highest possible quality of life within the Home in accordance with our 'Charter for care' statement.

Our core aims are to up hold the following:

- PRIVACY:** **The right of a service user to be left alone and undisturbed whenever they wish.**
- DIGNITY:** **The understanding of service users' needs and treating them with respect.**
- INDEPENDENCE:** **Allowing a service user to make their own decisions (where possible) and think and act for themselves and to be active in their care.**
- CHOICE:** **Giving service users the opportunity to select for themselves from a range of alternative options.**
- RIGHTS:** **Maintaining all basic human rights to service users.**
- FULFILMENT:** **Enabling the service user to assert and realise their own aims and helping them to achieve these goals in all aspects of daily living.**
- TRAINING:** **To provide a happy and satisfying work environment for all employees. To encourage a team spirit and to provide on-going training opportunities.**

Registered provider / registered manager

Registered provider

Greenhill Care Homes Ltd

Responsible individual

Mr Sukhbinder Singh Paul BA (Hons), FCCA

Ilsham Valley Nursing Home

Torquay

TQ1 2JA

Experience:

Mr Paul is a qualified accountant with over 14 years accountancy and business experience and has a strong regulatory background gained in banking, reporting to the Bank of England and the Financial Services Authority (FSA) as well as extensive experience in the hospitality industry. He is committed to maintaining only the highest possible levels of care having recently attended a 'Delivering Quality Care' conference in 2008 where the latest industry issues were discussed by leading figures in the Care Sector.

Registered manager (Matron)

J. Billingham RGN, NVQ4, RMA

Ilsham Valley Nursing Home

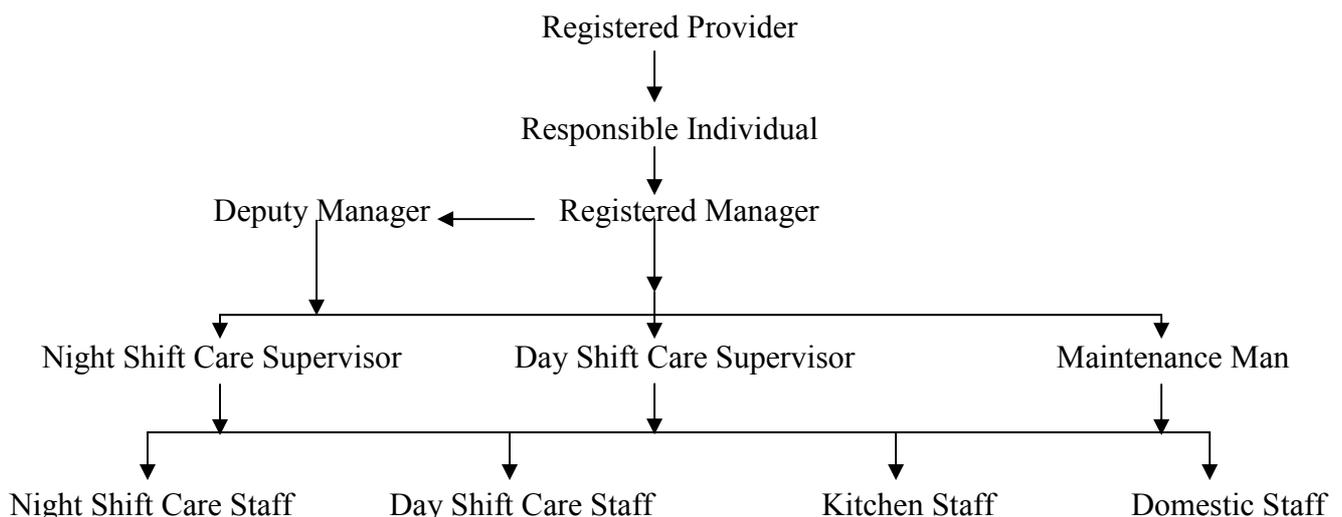
Torquay

TQ1 2JA

Experience:

Matron is a first level nurse with over 20 years experience who has run the Home for 6 years to a high standard and has also achieved her registered managers award (RMA).

Home organisational structure



All carers, kitchen, domestic and maintenance staff report direct to and are under the person-in-charge at the time (one of the Nurses), who in turn reports to Matron (registered manager). Matron is responsible for the day to day running of the Home and operates an 'open door' policy. Matron in turn reports to the responsible individual who is ultimately responsible for the ethos, structure and financial running of the Home. Lines of accountability are clear and communication is open and transparent which allows for the only the highest standards of care to be delivered to our service users.

Details of staff and staff training

At present the Home has 6 nurses in employment including Matron (registered manager with registered managers' award) and deputy matron and 12 care staff (5 are NVQ3 qualified, 2 NVQ2, and the remaining 5 are studying for their NVQ2).

Staff are selected for their qualities of reliability, integrity, skill, friendliness, professionalism and experience. Emphasis is given to valuing individuals and respecting their privacy and dignity. As part of their induction all staff are subjected to POVA and CRB checks and references are always checked. Nurses in addition are checked at the NMC and are kept up to date with their prep training requirements.

The safety of residents is firstly ensured by the induction process. Staff are constantly monitored and ongoing training is provided. There are policies for adult protection including whistle-blowing in place and in use. The Home is always staffed to a good level to ensure good care of all the residents. During induction staff are trained in-house by an experienced qualified senior.

Matron and her deputy are hands on to ensure informal supervision at all times as an ongoing function of their job. More formal staff supervision and training is carried out regularly and recorded. Staff also have end of year appraisals.

Staff are sufficient in numbers on each shift and in some cases are in excess of the required level.

All new members of staff will be given the opportunity to gain a NVQ qualification and achieve high standards of continuing professional development.

Staff are also trained in Basic First Aid, Infection Control, Moving and Handling, Abuse, POVA Awareness, Continence Management, Managing and Administering Drugs Safely, Care of the Elderly, Fire Safety, Food Hygiene, Death and Dying.

Charter for care

Greenhill Care Homes Ltd has developed a 'Charter for Care' to provide care to all service users to a standard of excellence which embraces fundamental principles of good care practice and that this is evaluated through the conduct and control of quality care in the Home:

- To deliver a service of the highest quality that will improve and sustain the service user's overall quality of life.
- To ensure that the care service is delivered in a flexible, attentive, and in a non discriminatory fashion while respecting each service user's right to independence, privacy, dignity, fulfilment, and the right to make informed choices.
- To ensure that each service user's needs and values are respected in matters of religion, culture, ethnic origin, sexual orientation, political affiliation and disabilities or impairments.
- To respect the service user's rights and wishes in the event of their death.
- To ensure that the care service as a whole is delivered in accordance with agreed contracts of care.
- To manage and implement a formal programme of staff planning, selection, recruitment, training and personal development to enable service user's care needs to be met.
- To manage the care service efficiently and effectively to make the best use of resources and to maximise value for money for the service users.

- To ensure all service users receive written information on the Home's procedure for handling complaints and how to use it.

Greenhill Care Homes Ltd is committed to ensuring that the highest possible standards in elderly care are attained. This will be achieved by placing the service users at the centre of the care planning process and ensuring that all our staff have the required skills, training and motivation.

We will also strive to actively promote the needs of the individual service users and their families by delivering a quality care package and aim to provide the service users with a secure, relaxed, and Homely environment in which their care, social and emotional well being and comfort are of paramount importance.

Carers will strive to preserve and maintain at all times the dignity, individuality and privacy of all service users within a warm and caring atmosphere, and in so doing will be sensitive to the service users ever changing needs. Such needs may be specific care needs, medical/therapeutic (for physical and mental welfare), cultural, psychological, spiritual, emotional and social. Service users are encouraged to participate in the development of their individual care plan, the involvement of family and friends is always welcome.

Accommodation

The Home currently has a total of twenty two bedrooms, with one room being a large double. The one double and six of the single bedrooms all have en-suite facilities. The smallest being 10 sq.m and the largest 15 sq.m with the double room being over 20 sq.m in size. The front door has coded entry to allow relatives and friends access whilst maintaining security and there is a large car park with level access to the Home.

All bedrooms have washbasins, a nurse call bell facility, digital flat screen TVs, radio, a smoke alarm, double glazing and central heating (which can be adjusted individually in each room). There are assisted bathing facilities and adequate lavatories on both floors. Our bathrooms are equipped with a Parker side entry bath and a Century therapeutic bath for easy assisted bathing.

Residents are encouraged to bring in personal effects and selected items of furniture if they wish, to make their rooms more homely. Residents are also allowed to hang pictures or photos on the wall if they wish and the maintenance person is always on hand to assist with this.

Communal Rooms:

There are adequate communal facilities. A large lounge with plenty of chairs and tables is provided. A large flat screen TV is provided for residents use in the lounge along with a DVD and video player. There are other smaller rooms which can also be used by residents during the day. There are patio areas to the front and rear of the Home and a veranda area by the lounge which is popular with the residents to sit out in the shade. The rockery to the rear is decorative and available for visitors.

The Home is well equipped with two hoists and a dedicated stand-aid to help mobilise residents to their maximum potential. All floors are level or ramped for ease of movement and grab rails are installed where helpful. There is a selection of wheelchairs, Zimmer frames and adjustable seating also available and pressure sore mattresses if required.

The Home is fully ramped and hand-railed for safe access for the disabled and wheelchairs. There is a shaft lift to the first floor. Radiator covers are fitted for resident's safety and bathing water is thermostatically controlled.

The home is protected by CCTV to safeguard residents, staff and visitors. All fire exits are alarmed.

Admission

Service user's interested in coming to the Home are encouraged to visit the Home and if they would like to spend the day or a few hours and we are happy to provide coffee, tea and lunch. Hopefully this gives an opportunity to sample the atmosphere, level of service and observe staff at the Home and meet the other residents.

We aim to visit and interview every resident prior to admission. If the admission is an emergency we always receive a report as to the prospective resident's needs and abilities from their present carers and a full assessment will be done as soon as possible, normally within 48 hours of admission.

We do our very best to ensure that we are able to meet any residents needs and will not accept a prospective resident if we do not feel able to care for them adequately. On admission all residents are fully clerked and assessed and a detailed care plan is made out tailored to that individual's needs and desires. There is consultation with residents, relatives and friends regarding daily life on matters such as activities and dietary preferences and their suitability for the Home confirmed.

Every effort will be made to reduce the person's anxieties immediately on arrival. An important step in achieving this is by being welcomed by familiar faces, if possible the person who carried out the assessment and any other members of staff the resident has met will be present during the admission, relatives and friends are also encouraged to attend.

To make the resident feel they are moving "home from home" we encourage them to bring their own possessions, family photographs, ornaments and items of furniture (providing they meet fire regulations). These will be placed in the resident's room prior to admission.

Under normal circumstances the resident will be taken to their room and shown how to use the call system, light switches, allow them to rest and familiarise themselves with their new surroundings. Every effort will be made to ensure the resident feels welcome and is being looked after by our friendly and caring staff.

Care plan review

Every resident has a care plan which details the level of care required and subsequent needs. Once developed the care plan will be reviewed every four weeks. Input from the resident and their family is most welcome to ensure that resident's specific needs are fully met.

Family and relatives will be encouraged to participate in the service user's daily routine as far as is practicable. Service users and their relatives are always welcome to talk with a member of the care staff or Matron if they have any concerns.

The Care Plan is reviewed at three levels:

- Daily on a shift-to-shift basis. At staff shift changeover service user's daily care notes are handed over by the out-going shift to staff on the in-coming shift. Service user's responses and activity patterns are then discussed as needed. Changes to the care plan may be proposed at this point.
- At the end of the four week settling-in period.
- Thereafter a review is held with care staff every four weeks.

Service user's plans will be reviewed monthly by qualified nursing staff of RGN grade. Any relevant changes will be discussed with all related parties or authorities.

Privacy and dignity

Ilsham Valley is a Home for individuals. All residents have an absolute right to privacy and dignity. It is our absolute aim to treat all residents as we would wish to be treated ourselves, as individuals and with love, care and respect. There are policies and procedures in place (available in Matron's office for review) which help ensure this, and this is at the core of what we do and is the backbone of our whole approach to care.

We will endeavour to retain as much privacy and dignity as possible by:

- Helping service users to personalise and equip their rooms as they wish
- By providing keys to their rooms (where applicable) and a secure place for valuables as they wish
- Giving service users the opportunity to have privacy when receiving guests, making telephone calls or opening and reading mail
- Securing all service users' records and information and respecting the confidentiality of those records
- Treating each service user as an individual and a respected member of the "family unit"
- Assisting service users to maintain their dignity through their personal appearance and behaviour
- Promoting activities that encourage service users to express themselves as individuals
- Helping service users to overcome any shortcomings they may experience through age or disability
- By adherence to the Liverpool Care Pathway (LCP) guidelines at the time of their death

Social activities

Residents are free to engage in any reasonable activities which will enrich their quality of life. The Home encourages and enables the pursuit of hobbies, social activities and leisure interests. The Home has an active social life. Hobbies and interests are encouraged and facilitated where appropriate by the staff or by outside specialists or relatives and friends.

The Home also has a dedicated activities co-ordinator who actively listens and encourages residents to participate in activities should they wish to do so. The Home also uses an external activities company that visits the Home every two weeks.

We hope to introduce an in-house quarterly newsletter where residents can actively participate in the editorial. This will be sent to all residents their families and interested community groups.

Staff take residents out if they wish and "buddy" schemes are available to help take residents on outings also. The Home has regular activities provided such as; concerts, sing-a-longs, quizzes, pet therapy, bingo, cards, scrabble, dominoes and crafts. Church visits are on an individual basis, apart from Christmas, and residents are facilitated to go to church and social clubs if they wish. A library service is provided as are music CDs, videos, a DVD library (portable DVD player for use in resident's rooms) and magazines.

Access to medical services

All Residents have a right to access NHS services. Residents can retain their own GP if the GP agrees. Otherwise, Residents will be registered with a GP nominated by the Home. The GP's visit as and when requested by the Matron and the nursing staff and all the GP's carry out regular reviews on their patients.

The Doctor will arrange for physiotherapy and other treatments if this is thought necessary or of benefit.

A Dentist and Optician can be separately arranged by appointment. Residents are entitled to NHS treatment but will need to produce an Exemption Certificate to avoid paying a charge.

There is no visiting NHS chiropody service. There is a visiting private Chiropodist, who offers concessionary rates to our Residents who visits every 6 weeks.

A manicurist and hairdresser also regularly visit the Home.

Contact with family and friends

Service user's family, relatives and friends are encouraged to visit the service user regularly and maintain contact by letter or telephone when visiting is not possible. In these cases, staff will offer to assist the service user to respond where help may be needed.

Visitors will be welcomed at all reasonable times, and are asked to let the person-in-charge know of their arrival and departure from the Home. For security and fire safety reasons, visitors must sign the visitor's book on each occasion.

The service user has the right to refuse to see any visitor, and this right will be respected and up-held by the person-in-charge who will, if necessary, inform the visitor of the service users wishes.

Residents can entertain visitors or one another in the lounge or in their rooms privately. Meals can be provided for visitors as an aid to socialising.

Religious observance

Service users may attend religious services either within or outside the Home as they so desire. Transport is always made available to places of worship and every effort will be made for care staff to accompany service users on specific occasions if required.

Service users have the right to meet clergy of their chosen denomination at any time. If required, a private room will be made available for such meetings.

There is a regular Anglican communion in the Home for those who wish to attend.

Therapeutic techniques

There are no specific techniques employed in the Home. Any specialist therapies would only be allowed on the request or direction of service users or their general practitioners. Any person coming into the Home to carry out such procedures would have to be suitably qualified and be prepared to be under the supervision of the person-in-charge of the Home at that time.

Smoking and alcohol

It is now illegal to smoke on the premises, for a resident who smokes this will be addressed as a specific issue with specific arrangements put in place by the management.

Residents may consume alcohol in the Home either in their bedroom or in the communal areas.

Fire safety and emergency procedures

The Home has in place policies and procedures to be followed in the event of a fire or emergency. The Home has a modern fire alarm system fitted with 'Fire Exit Notices' and 'Fire Emergency Instruction Notices' displayed at strategic points throughout the Home, as advised by the local Fire Department and in line with UK and EU regulations.

The Home has a direct alarm connection to the local fire services.

- Staff are instructed during induction training with regard to the Fire Prevention/Drills Policy. This includes use of the Home's fire appliances, evacuation, meeting points and raising the alarm. Service users are informed of the emergency procedure during admission.
- The Fire Procedure is discussed quarterly; this ensures all staff and service users have a comprehensive understanding of their responsibilities. A full fire drill is conducted quarterly.
- The fire alarm is tested weekly by staff at the Home and documented. The fire detection system is tested every six months by an outside specialist fire management company. Records are kept of all such testing as part of the Proprietor/Manager's responsibilities.
- All fire fighting equipment is serviced regularly by a qualified fire maintenance engineer.

In the event of a fire the following procedures should be followed:

STAFF

- 1 Sound the fire alarm
- 2 Dial 999 and ask for the fire service
- 3 Locate the area of fire from the main fire indicator panel
- 4 Evacuate residents away from the area of fire to the fire evacuation meeting places
- 5 Tackle the fire if safe to do so using the correct fire extinguisher for the type of fire
- 6 Close all doors after you
- 7 Check all residents and staff are accounted for

RESIDENTS AND VISITORS

Unless in immediate danger, sit and wait for a member of staff to arrive. The member of staff will escort you to a place of refuge.

MEETING PLACES

- 1 Either of the two car parks
- 2 Bottom of Ilsham close

Complaints

If as a service user, relative or visitor, you feel that there is cause for complaint, you should first discuss the matter with the person-in-charge. If you remain dissatisfied, the complaint will be passed onto Matron and ultimately to the registered provider. A full investigation will be made into the complaint as laid down in the complaints procedure and timetable which is available for inspection in the lobby.

If after this investigation, you are still not satisfied, or if you feel that the complaint is of a serious nature and you wish to speak to a registration officer first, then you should contact CSCI. Contact details are available in the complaints procedure document which is displayed in the lobby and all resident's bedrooms.

A record is kept of all complaints made and includes details of investigation and any action taken. This record is kept in Matron's office. All complaints are dealt with promptly and effectively within a maximum of 28 days.

Monitoring and quality assurance

The Home has an open door policy. Matron is always pleased to discuss with any resident or relative any issues within the Home, there are various systems which ensure that close monitoring is maintained on all of the Home's services and procedures. Attention to the smallest detail is pivotal to everything that we do.

An important part of our quality assurance programme is to involve the service users and their relatives. We regularly ask for comments on the Home, the standard of care, staff and the services provided, this is usually done by a annual quality survey that is sent to all residents and relatives, but comments made at any other time are welcomed.

Bereavement

In the unfortunate event of bereavement, the family can expect every possible support and consolation from staff.

Every effort is made to ensure a peaceful and dignified death. Good policies and procedures are in place, including the Liverpool Care Pathway (LCP) guidelines which are read and signed by all staff.

Funeral arrangements are usually made by the next of kin, the Home staff can be relied upon to assist and explain what is required. Where there is no next of kin, the appointed person will attend to the necessary arrangements.

Terms and conditions of admission & contract

Name: Date: Room:

The acceptance of a person to stay at a Nursing Home involves a special relationship of intimate care. Please be assured that we do our utmost to nurse and care for all our residents in all circumstances. However to do this we need to define the terms and conditions in which we operate and make clear any relevant financial arrangements.

Below are listed our basic conditions for mutual benefit.

- 1) Where possible, a letter from a Doctor, Social Worker, Ward Sister or Hospital Consultant should accompany the resident on admission.
- 2) All drugs medications and creams must be handed in on admission. Relatives and visitors are expressly asked not to bring in any medication or food or drink for the resident without consulting Matron or the Nurse in charge.
- 3) Residents are asked to discuss arrangements for alcoholic drink requirements on admission. Personal stocks are allowed but amounts taken must be monitored by the Nurse in charge. The Home is a non-smoking.
- 4) The fees due to the home (whether paid by the resident or social services) include accommodation, full board, laundering of personal items and nursing care. Registration with doctors can be private or under the NHS. If private, the supply of prescription medication will also be private and the Doctor will charge in the usual way, but if NHS then medical attention and medications will be available on the NHS.
- 5) Other services are available on request and include Dentist, Optician, Chiropody, Hairdressing, Manicurist, supply of newspapers and personal requisites (e.g. toothpaste, shaving equipment etc) and the use of taxis. These sundry items will be charged to resident's accounts.
- 6) Visiting times are as flexible as possible. It is most convenient between 11.00 and 18.00 but any time is possible by arrangement with Matron or the Nurse in charge. When visiting, if you wish to talk privately please ask Matron or the Nurse in charge and arrangements can be made.
- 7) A list of items brought in by the resident must be agreed on admission and signed by both parties. Residents are asked not to keep excessive amounts of cash or valuable items in their rooms. We can lock valuables away by arrangement. The Home can accept no responsibility for any item not agreed or handed in for safe keeping. Likewise we cannot accept responsibility for personal possessions not clearly and permanently named. Clothing should be identified ideally with woven name tapes. Any missing items must be reported to Matron immediately.
- 8) Residency in the Home does not constitute a tenancy within the meaning of the Rent Acts. We reserve the right to terminate the agreement to occupy any room on formal written notice of four weeks. If the medical profession feels that the resident would benefit from services we are not equipped to offer, after consultation with yourself, the resident may need to be moved sooner than this. On the resident's side, termination of occupation must be given by formal written notice of 4 weeks, unless the stay is for a predetermined period.

9) In the event that the resident vacates the room permanently without notice, we reserve the right to make a formal charge of the full fee for the period of notice of 4 weeks. We are entitled to a general lien in respect of resident's possessions until all outstanding charges have been settled in full. In the case of a temporary absence the usual daily fee rate for the room will be charged. Rooms will be charged up until and including the day the room is cleared of all personal effects.

10) Private residents will be charged up to and including the day of discharge.

11) There may be instances when admission to the Home is on an emergency basis before any of the above paper work can be reasonably be put into place. In such circumstances the resident will be taken to be admitted on a Private fee paying basis until such time as formal written notification from Social Services is received as to the fee arrangements.

12) Queries and complaints, if any, should be addressed to Matron or the Nurse in charge. The complaints procedure is also displayed in the entrance hall to the Home. If further queries or complaints arise, please feel free to contact the Responsible Individual, Mr. Paul.

13) The Home reserves the right to amend fees dependent upon economic conditions. Any fee changes will be made in writing with 4 weeks notice.

14) The resident or their representative who signs this agreement assumes personal joint and several responsibility and liability to pay all fees, sundry charges, extras, etc as may be claimed under this agreement on demand. In the event of non-payment of fees, the resident may, upon written notice, be asked to vacate the home unless full payment is received within 7 days. Any outstanding fees will then be reclaimed through legal proceedings.

Please read these conditions before signing this form. Failure to do so does not limit your from compliance with them.

I understand that fees due are to be paid by *(please tick)*:

Service User

Social Services

Other - please specify

I understand that I am liable for payment of any sundry items (such as hairdressing, newspapers etc) even when care is being provided by Social Services.

Signed (service user or representative):

Date:

Signed (Ilsham Valley Nursing Home):

Date:

This part to be completed by Private clients only

I understand that as a private client I am liable for all fees. Payment or non payment of any subsidy received from any source does not excuse my overall liability for the fees due. However, I understand that the NHS will pay, subject to a Nursing Assessment a proportion of the fees, called NHS funded Nursing Care. The amount of the subsidy will depend on the assessment banding (low, medium, high).

Gross fee agreed: £...../ week

This fee assumes a medium banding. If the client is assessed at a high band of nursing need, the extra funding provided will be due to the home.

Less NHS Funded Nursing Care assessment band of: £...../ week

Net fee due: £...../week - per 4 weeks

All private fees due are payable 4 weekly in advance.

The Home reserves the right to charge interest at 8% over Bank of England base rate on any sums outstanding for 30 days or more. I accept that fees are subject to review from time to time.

Signed:..... Date:

This part to be completed if someone other than the resident is to be responsible for the payment of the fees

In respect of the above mentioned resident I/we take full responsibility for payment of the fees due and agree to abide by the Terms and Conditions above on the residents behalf. This shall remain binding even in the event of my/our death, in which case the liability will be transferred to my/our personal representatives in this case. I have read the terms and conditions before signing and fully accept them.

Signed: Relationship:

Name: Date:

Free advice service on payment of fees:

Impartial free advice as to the funding of care fees can be sought from the NHFA. This care fee advice service is the chosen firm of independent financial advisers and care fees specialists as recommended by Help the Aged. NHFA care fees advisers provide impartial financial advice, helping you find the best way to pay for care fees. They can be contacted at:

NHFA
St Leonards House
Mill Street
Eynsham
Oxford
OX29 4JX

NHFA Care Advice Line 0800 99 88 33 / 01865 733000

Email: enquiries@nhfa.co.uk

Complaints Procedure

Ilsham Valley Nursing Home regards all complaints seriously however trivial.

If as a service user, relative or visitor, you feel that there is cause for complaint, you should first discuss the matter with the person-in-charge. If you remain dissatisfied, the complaint will be passed onto Matron and ultimately to the registered provider. A full investigation will be made into the complaint as laid down in the complaints procedure and timetable which is available for inspection in the lobby.

Investigations will be thorough, impartial and where appropriate, take into account all the people involved. Where a service user is visually impaired the Home will discuss the complaints procedure verbally with the individual concerned or supply a copy in a form which is suitable for that person.

If 14 days after talking/registering your complaint with Matron you remain dissatisfied, then it is requested that you contact the Responsible Individual. If after a further 14 days you are still not satisfied, or if you feel that the complaint is of a serious nature and you wish to speak to a CSCI registration officer first, then you should contact CSCI directly.

A record is kept of all complaints made and includes details of investigation and any action taken. This record is kept in Matron's office. All complaints are dealt with promptly and effectively within a maximum of 28 days.

The Commission for Social Care Inspection (CSCI)
4th Floor
Colston 33
33 Colston Avenue
Bristol
BS1 4UA
Tel: 0117 930 7110

Note:

From the 1 April 2009, a new regulator for health and adult social care services in England, the CQC, comes into being having been established by the Health and Social Care Act (HSCA) 2008. The CQC will perform the functions previously carried out by the Healthcare Commission, the Commission for Social Care Inspection and the Mental Health Act Commission, all of which will be dissolved on its inception.