



Spencefield Grange

Davenport Rd, Evington
Leicester, LE5 6SD

Registered since
1995



Tel: (0116) 241 8118
Email: spencefield@hicare.co.uk
Web: www.hicare.co.uk

STATEMENT OF PURPOSE

East Midlands
CARE



CONTENTS

Page

| | |
|----|---|
| 3 | Introduction |
| 4 | Registration Details |
| 5 | Categories & Services |
| 6 | Staffing |
| 7 | Qualifications |
| 8 | The range of needs that the care home is intended to meet |
| 12 | Facilities |
| 14 | Photos |
| 16 | Residents' Charter (<i>appendix A</i>) |
| 18 | Aims & Objectives (<i>appendix B</i>) |
| 21 | Residents / Relatives survey (<i>appendix C</i>). |
| 22 | Complaints Procedure (<i>appendix E</i>). |
| 23 | Fire Procedure (<i>appendix F</i>) |
| 25 | Home Details (<i>appendix G</i>). |

Service users guide (*brochure*) and Last inspection report (*this is located in the home's office, please ask senior in charge*).

INTRODUCTION

Under the Health and Social Care Act 2008, all providers of health and adult social care must provide a 'statement of purpose'.

What do the regulations say?

The regulations state:

Regulation 12 of the Care Quality Commission (Registration) Regulations 2009:

- (1) The registered person must give the Commission a statement of purpose containing the information listed in Schedule 3.
- (2) The registered person must keep under review and, where appropriate, revise the statement of purpose.
- (3) The registered person must provide written details of any revision to the statement of purpose to the Commission within 28 days of any such revision.

Schedule 3 – Information to be included in the Statement of Purpose

1. The aims and objectives of the service provider in carrying on the regulated activity.
2. The kinds of services provided for the purposes of the regulated activity and the range of service users' needs which those services are intended to meet.
3. The full name of the service provider and of any registered manager, together with their business address, telephone number and, where available, electronic mail addresses.
4. The legal status of the service provider.
5. Details of the locations at which the services provided for the purposes of the regulated activity are carried on.

This Statement, along with other information materials (*service users' guide, terms of acceptance etc...*) sets out our aims and objectives, the range of facilities and services we offer to residents and the terms and conditions on which we do. In this way prospective residents can make a fully informed choice about whether or not this home is suitable and able to meet their individual's particular needs. Copies of the most recent inspection reports are also available on request.

REGISTRATION DETAILS

Registered Provider Details :

Company Name : Hicare Ltd
CQC Provider ID : 1-101648586
Head Office Address : 13b Highview Close, Hamilton Office Park, Leicester LE4 9LJ
Head Office Tel. : 0845 273 5333
Website : www.hicare.co.uk
Email address : enquiries@hicare.co.uk
Managing Director : Satnam Nanuwa
Directors : Sukhjit Nanuwa & Harjit Nanuwa BSc (HONS)

Registered Location Details (*Care Home Registered since 1998*) :

Location Name : Spencefield Grange,
CQC Location ID : 1-112807288
Location address : Davenport Rd, Evington, Leicester. LE5 6SD
Location Tel : (0116) 241 8118
Website : www.hicare.co.uk
Email Address : spencefield@hicare.co.uk

Registered Manager Details :

Manager Name : Amanda Cooke
CQC manager ID : 1-101647586

The provider, the home and the manager are registered with the CQC for the following regulated activities :

- Accommodation for persons who require nursing or personal care
- Treatment of disease, disorder or injury.

CATEGORIES & SERVICES

Spencefield Grange is registered with the CQC to provide the following regulated activities :

- Accommodation for persons who require nursing or personal care (*we do not provide nursing care, but it is provided from NHS district nurses*)
- Treatment of disease, disorder or injury.

We can provide care for adults for the above regulated activities (*from the age of 18*) in the below categories, although each resident would be assessed on their individual needs to ensure that we can meet their needs.

- Dementia (DE)
- Mental disorder, excluding learning disabilities (MD)
- Old age (OP)
- Physical disability (PD)

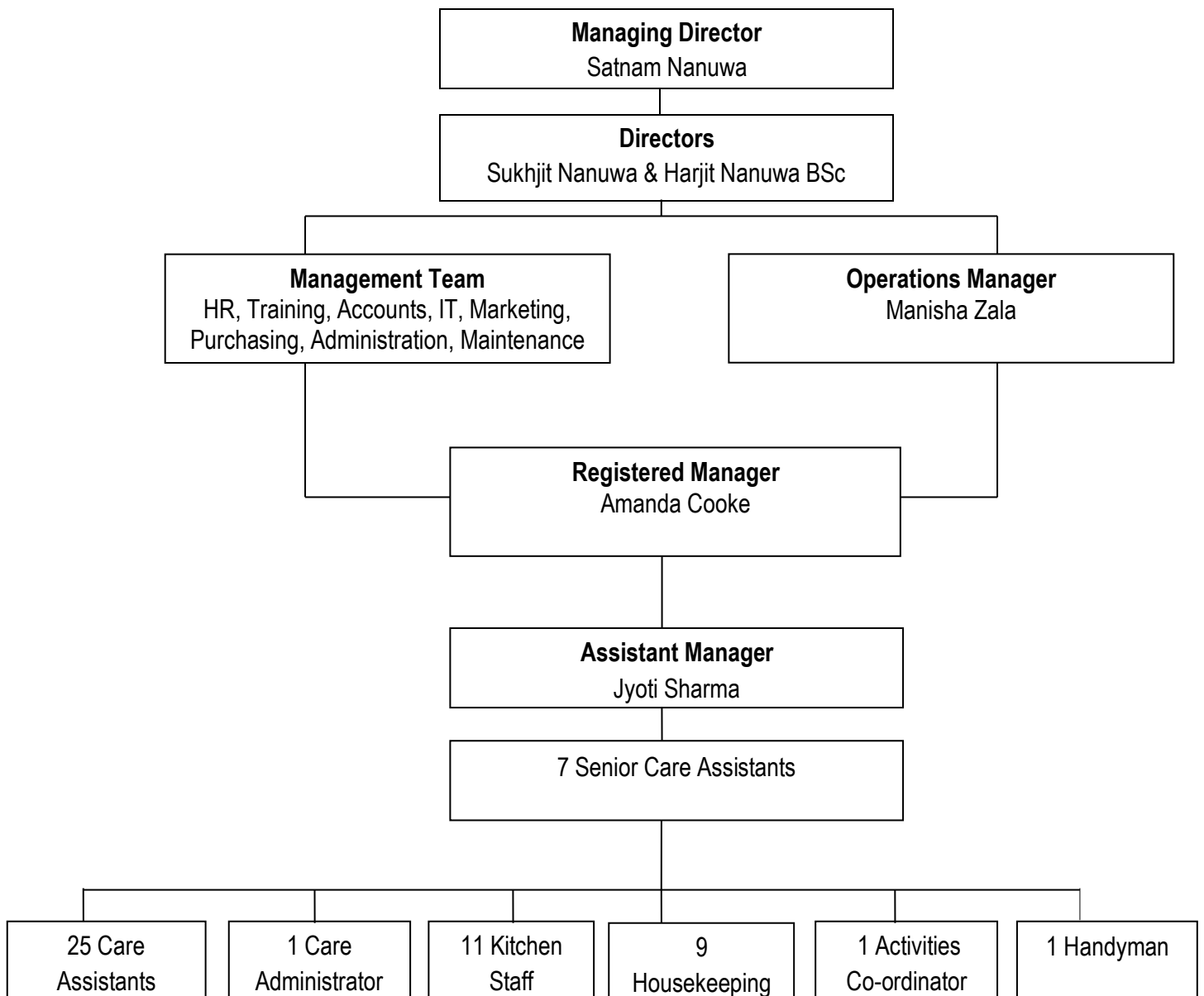
We can offer a range of services to meet the individual needs of each residents, this could be as follows :

- Long Stay
- Short Stay
- Respite Care
- Holiday Care
- Day Care
- Evening Care
- Night Care
- We could also offer a bespoke package, if none of the above services meets your needs.

STAFFING

The organisational structure of Spencefield Grange

Staffing levels are reviewed regularly and are dependent on the number of residents and their individual needs. Between the hours of 10pm and 8am there are a minimum of 2 waking night staff and one sleep-in on duty, with at least 1 additional staff member being on call and available to assist with any emergency within 15 minutes travelling time. The below is accurate as date of update.



QUALIFICATIONS

1. Satnam Nanuwa has been managing the family businesses since 1972, as Managing Director and has management experience of Residential Care Homes since 1989.
2. Sukhjit Nanuwa has been managing the family businesses since 1975. She has been at management level for a number of years and has worked as an acting manager and registered manager of the residential care homes. She has an NVQ level 4 Registered Managers Award, A1 assessor's award and holds several other certificates.
3. Harjit Nanuwa BSc (HONS) has experience in Management of Residential Care Homes since 1998. He holds a Bachelor of Science degree with Honours in Chemistry with Medicinal Chemistry and several other certificates. Currently, he is on the Executive board of EMCARE (Local Care Association) where he jointly represents Leicester County residential care homes. He represents Dementia care homes on the Independent Sector Consultants Forum at the Leicester City Council.
4. Manisha Zala has experience working in care since 2000; she has progressed through her career from receptionist, to training coordinator, to PA and now to Operations manager. She is a Safe Guarding trainer, Dementia Champion, holds a Level 5 diploma in leadership Health and Social Care & CYPS and holds several other Certificates.
5. Amanda Cooke has experience working in a care home since 1981; she has progressed through her career from care assistant to senior care assistant to assistant manager and now as Registered Manager since 1999. She holds a Level 5 diploma in leadership Health and Social Care & CYPS, an NVQ level 4 Registered Managers Award, has an A1 assessors award and holds several other Certificates.,
6. Jyoti Sharma has experience working in care homes since 2004; she has progressed through her career from care assistant to senior care assistant and now to assistant manager. She holds a Level 5 diploma in leadership Health and Social Care & CYPS, holds an NVQ Level 3 and several other Certificates.

Other Staff:

- All staff complete the Hicare Induction programme within 6 weeks of their start date
- We aim for a minimum of 50% of the Care Staff Team to be qualified with at least NVQ Level 2.
- All staff are required to have a satisfactory DBS.
- All staff involved in Food Preparation and Moving & Handling have been trained on an accredited course.
- There will be a trained First Aid Appointed Person on duty at the home 24 hours a day

- Other training courses that some staff have attended include - Moving and handling, Health & Safety, Control of Infection, Safe handling of Medication, Care Practices, Alzheimer & Dementia, Safeguarding, Mental Capacity Act, DoLs, Dignity in care etc...

THE RANGE OF NEEDS THAT THE CARE HOME IS INTENDED TO MEET

A full assessment of care needs for every individual in our care will be recorded and reviewed regularly. This will include the help and assistance that will be given by staff. Wherever possible, we will undertake to continue to care for residents whose condition deteriorates or who become terminal ill and in accordance with good practice guidance, we will usually care 'till death', wherever possible.

Our priority will always be to ensure the wellbeing of those in our care, both individually and collectively. If it becomes apparent that the needs of an individual cannot continue be met fully by the staff within the home, then this will be discussed fully with the resident, their relatives and advice will be sought from medical professionals. If necessary, the option of either short-term hospital care or a transfer to another care establishment will be included in this discussion.

Admission

Prior to admission a trained member of staff from the home will carry out an "Assessment of Need". A prospective resident will only be accepted if the manager feels confident that the home can adequately meet those needs. The prospective resident is encouraged to visit the home, at least once prior to admission and then to stay for a trial period of up to 4 weeks, before reaching a final decision to stay.

It is our policy to avoid unplanned admissions where possible. However, there may be occasions when an emergency arises for an individual and subject to availability we will be able to act flexibly in order to meet that need. Emergency admissions will only be accepted on the condition that sufficient information is given to the manager, so that they can determine that the prospective resident's needs can be broadly met within the facilities and services on offer at the home. The manager undertakes to inform the resident, within 48 hours about key aspects of the home and to complete a full assessment of need within 5 working days.

Client Care – Aims & Objectives *(see appendix B)*

Philosophy of the home

The Home has adopted a Residents' Charter of Rights (*see appendix A*). Our philosophy is based upon a belief that all residents have the right to be treated as individuals. Whilst we require staff to work within basic guidelines and routines this must not institutionalise care. This will be monitored at regular intervals, in full consultation with all residents, relatives, staff and visiting professionals.

The arrangements for service users to engage in social activities, hobbies and leisure interests

Residents where able, will be encouraged to continue with their individual interests outside the home. Residents' interests are recorded and opportunities will be given for stimulation through leisure and recreational activities, both inside and outside the home. These will be planned in accordance with reference to the combined abilities and needs of residents, their preferences and capacities. There is an activities programme in the home.

Activities Room

The home has an activities room, which has a range of activities for varying abilities and ages, throughout the day to encourage residents to participate in social activities and pursue to their hobbies and interests. This room has an up to date home cinema system with DVD player to play classic golden oldie films, drama's romantic files, classic films, documentaries etc..., Music centre, a pc with printer, various games (such as bingo, cards, chess, mind / memory games, song books), sensory equipment etc...

The arrangements made for residents to attend religious services of their choice

It is the right of every resident to continue to attend a place of worship of his or her particular faith. Staff will do their best to accommodate their needs, however the resident may have to make their own arrangements to attend their own place of worship. For those unable to attend services outside the home, ministers of religion will be invited to the home. The home will facilitate the observance by individual residents of those religious festivals that are appropriate to their faith.

The arrangements made for contact between residents and their relatives, friends and representatives

Our Policy is that visitors are always welcome at the home. As such, we keep an 'open house' and encourage relatives, friends and voluntary persons to call at any reasonable time. Whilst there are no restrictions on visiting hours, in the event of a fire it is essential that the senior member of staff on duty knows how many persons are in the building. All visitors without exception are therefore respectfully be requested to sign in and out in the visitor's book. Unacceptable behaviour or behaviour which falls against Hicare standards and code of conduct will not be accepted and appropriate action will be taken.

The arrangements made for consultation with residents about the operation of the care home

The opinions of residents, relatives, friends and staff are of great importance to us. Through consultation we can ensure that our Aims and Objectives are upheld and that the home is meeting all realistic expectations.

Regular Residents' Meetings are held to discuss matters relating to the running of the home, including entertainment programmes, menus, staffing etc... and resident's recommendations, wherever possible, are acted upon. Minutes of these are recorded.

We will undertake Quality Assurance audits, which will include the issuing of questionnaires to residents, relatives and stakeholders (*e.g. GPs*), requesting their views and comments on the operation of the home. The results of this survey will be published, and circulated (*See Appendix C*).

Residents and their relatives will be informed of planned CQC inspections and will be invited to meet inspectors. The views of residents will be included in inspection reports. Our last inspection report is available in our office.

The arrangements made for dealing with reviews of the residents plan referred to in regulation 15(1)

The residents' care plan is reviewed at least once a month (*more frequently if required*) and updated to reflect changing needs and current objectives for health and personal care. The initial care plan is drawn up with the involvement of the resident and/or their relatives, if they so wish and we will then ask the resident or their relative to agree and sign the document.

The arrangements made for dealing with complaints

In order to maintain a happy and homely environment, it is imperative that residents or their relatives inform us of any problems or grievances that they may have at the time of the problem arising. We also welcome constructive suggestions and positive comments. Our Complaints procedure is attached (See *Appendix E*).

The fire precautions and associated emergency procedures in the care home

The home has carried out a fire risk assessment and maintains the appropriate recording system.

Procedure to be followed in the event of fire (See *Appendix F*).

FACILITIES :

Details of the number and size of rooms in the care home are attached (*See Appendix G*).

The Building and Gardens:

- The home provides accommodation for a total of 60 residents in 60 bedrooms with WC en-suites (*married couples are welcome*).
- All bedrooms are furnished with bed, wardrobe, chest of drawers, easy chair.
- There are 4 spacious lounges (*including an activities room*) and 1 dining room.
- A call bell system is installed throughout the home.
- The home is equipped with a fire alarm system.
- The home is wheelchair accessible.
- There are wheelchair accessible WC's on the ground floor and on the first floor.
- There are wheelchair accessible bathrooms and walk in showers, with some baths being assisted and some unassisted.
- The home's main kitchen is located on the ground floor and the menu is available on the notice board.
- The central laundry is located on the ground floor and residents' washing will be collected from their bedrooms and returned to them. All clothing will require name labels. Dry cleaning is not included.
- Medical nursing care is not provided by staff employed in the home. When necessary, such care will be given by community nursing services from the NHS

Equipment:

- We only provide standard equipment that can be used by all the residents in the home and not individual equipment. If individual equipment is required, for an individual resident, this would need to be provided to the home e.g. through the NHS, family etc.... If we are able to provide individual equipment, this may be subject to additional costs to the weekly fees.
- The home is equipped with hoists and other moving and handling equipment to assist in the transfer of residents according to their assessed needs.
- The home has a weighing machine.
- The home can accept specialist equipment e.g. profiling beds, pressure relieving equipment if it is assessed by the D/N, and is provided through the District Nurse, NHS, family, etc... as and when required, which is used according to the individually assessed needs of the residents. If we are asked to provide individual equipment, this may be subject to additional costs to the weekly fees.

Services:

- The home has a Hair Dressing Room. A hairdresser visits the home on a weekly basis. The cost of this service is not included in the fee and will be invoiced separately.
- A chiropodist visits the home on a regular basis. The cost of this service is not included in the fee and will be invoiced separately.
- Dry Cleaning is not included in service.

Fees :

- Fees are payable on a calendar month basis with all accounts due for payment by the first day of admission and each month in advance (*Late Payment may incur late payment charges, interest and admin fees, as stated on invoice*). They can be paid by cheque or standing order.
- We are happy to accept residents through Social Services Contracts.
- Fees vary and they are dependent upon the care needs of the individual resident.
- It is our policy to review prices on a regular basis, one month's notice will be given as to any increase in fees.

Accreditations :

- Member of East Midlands CARE Association
- Achieved Investor in People Standard



Front Entrance



Activities Lounge



Bedroom



Rear Garden



Dining Room



Lounges



Rear Sit out

RESIDENTS CHARTER *(appendix A)*

The Right of Fulfilment

To assist residents to achieve their full potential capacity, however small, in respect of their physical, intellectual and social needs.

The Right of Dignity

To preserve the self-respect of residents by

- I) Maintaining Status
- ii) Affording privacy in space, belief and opinions.
- iii) Recognition and use, where appropriate of talents.
- iv) The practice of courtesy and respect toward residents at all times.

The Right of Autonomy

To maintain a resident's right to self-determination and freedom of choice, subject to the limitations of group living.

The provision of choice, with assistance where necessary to express wishes and preferences, including external help, for example, Doctor, Solicitor.

The Right to Individuality

To respond to the individual needs of residents, to enable them to maintain their particular identity in respect of beliefs and opinions.

The Right to Esteem

To recognise the qualities, experiences, talents and former status of residents.

To get to know relatives and visitors.

To then use this information to help maintain the morale of individual residents.

The Right to a High Quality of Life

To expect a wide range of normal activities to be available.

To enable a resident to exercise freedom of choice and to provide opportunities to go out shopping and visiting etc...

To provide facilities for residents to follow their own particular religious or political pursuits and to recognise the necessity for privacy at all times and to carry them out.

The Right to Freedom of Emotional Expressions

To maintain the resident's right to have normal opportunities to develop personal relationships within and outside the home.

The Right to take Risks

To allow residents to undertake activities which contain an element of risk. The criteria being the resident's competence to judge and the risk to others.

The Right of Access to all Personal Records

Residents have the right to access all of their personal records kept at the home. A resident may nominate someone else, such as the next of kin or person holding a Power of Attorney to access the records on their behalf.

AIMS & OBJECTIVES (*appendix B*)

We aim to create a friendly home with a family atmosphere and to preserve the quality of life of our residents (*see appendix A*). Our aim is to ensure that residents are provided with care to meet individual needs and are comfortable homely, “Home from Home” for people who can no longer cope with living in their own homes. Residents are offered the opportunity to enhance their quality of life.

- Each resident will be offered a high degree of choice in day to day living.
- Each resident will be viewed as an individual and treated with respect and dignity.
- Each resident will have their privacy and independence respected.
- Each resident will be encouraged to take control of care provisions in their day to day living.

a) A resident’s bedroom is their own private space. Bedroom doors are designed to lock and have a door knocker. Staff are requested to knock and wait until invited to enter (*except in an emergency*). Each bedroom is furnished and decorated individually for a personal touch. Residents are encouraged to bring their own furniture and personal possessions if they so wish.

b) Each Resident will be allocated a Key Worker, who will be responsible for ensuring that the Resident’s needs are identified & met. This will allow Residents to develop a close one to one relationship with staff.

c) Care Plans for each Resident on admission will be completed by the management to ensure that all individual needs are met. Regular reviews will include care plans so that information relating to individual needs can be updated and will be held on regular basis or earlier if changes in needs are identified. Future review meetings shall include an invite to Resident’s NOK, if they so wish

d) Residents will have access to their personal files which will be maintained by the home. Access to medical information would require the consent of a doctor or a third party, all nursing tasks are undertaken by community services. Access to public information relating to the community services may be displayed in the home.

- e) Public information will be available on rights and responsibilities under the data Protection act 1998.
- f) Residents will have the right to take control of their own lives which will include taking risks as they would have done before. Advice regarding risk taking will be offered and supervision provided, if required to ensure that the residents are allowed to make informed choices. Their bedrooms are their own and if they wish to have any relationship with any person they may do so.
- g) Residents will be allowed to consume alcohol in the dining room or in the privacy of their own room. The home has a responsibility to other residents and staff, grossly anti-social behaviour of residents, relatives or friends that occur from alcohol abuse will not be tolerated.
- h) Residents will be provided with information regarding complaints procedures and will be encouraged to use these procedures confidently and comfortably should the needs arise. Residents can also get help to complete any forms from Age Concern, family and friends etc... We would hope that in most cases any complaints will be resolved very quickly. In the event that we need to gather more information, or speak to other people we will guarantee to respond within a maximum of 28 days
- i) To enable residents to enjoy their stay at our home, residents will be encouraged to form a Residents Committee and will be provided with a room in order for meetings to take place in private. Staff will be involved on an invitation only basis. A forum will be created which meet regularly and fully involve people in decisions regarding the daily running of the home, activities and social events.
- j) The home's manager and staff will seek to identify the needs of residents from different cultural backgrounds and ensure to provide the highest quality of care which is culturally sensitive and acceptable to all.
- k) Managers are to identify a staff member in order to encourage resident participation in activities i.e. board games, trips to shops, park, pub etc... Occasionally there will be external and internal entertainment.

l) The manager is to maintain close liaison with professional bodies such as Social Workers, CPN's and General Practitioners. Professional involvement is to be requested should any resident show signs of challenging behaviour. Close monitoring and recording on relevant contact sheets should be maintained. Following the advice from professionals and with the co-operation of the resident, family involvement should take place. Any treatment offered by a professional body is to always be agreed with by the Resident.

m) Staff induction will outline the home's policies, aims and objectives and will also support training both internal and external. All staff will be given regular supervision to monitor our ability and commitment to fulfil our role.

n) Our Homes pride themselves on a comprehensive approach to care where staff receive specific training to develop skills aimed at meeting the needs of all people residing in the home.

o) Personal belongings for each resident is fully insured to a limited amount, as per current insurance policy, additional personal insurance for amounts above this should be taken out by each resident. We regret that Hicare Limited cannot be held responsible for any resident's cash and valuables left in resident's bedrooms. Please note that the office of the Home operates a safe keeping facility, free of charge and valuables can be deposited there. Safe cash box with key is also available for small cash or private items in each bedroom.

p) Any Criminal activities, theft/burglary in the home will not be tolerated; as we are duty bound to safeguard the other service users and individuals will be reported to the relevant authorities.

MANAGERS ARE TO ENSURE THAT STAFF ARE AWARE OF & ARE CONVERSANT WITH FIRE REGULATIONS, INCLUDING FIRE DRILLS & EVACUATION PROCEDURES.

MANAGERS ARE ALSO TO ENSURE THAT STAFF ARE AWARE OF & ARE CONVERSANT WITH REQUIREMENTS OF THE HEALTH & SAFETY POLICY.

MANAGERS ARE TO REGULARLY REINFORCE INFORMATION RELATING TO FIRE REGULATIONS & HEALTH & SAFETY REQUIREMENTS.

SERVICE QUALITY QUESTIONNAIRE

Name:

Address:

Home Name: Meadow's Court [] Spencefield Grange []

Resident [] Family of resident [] Friend of resident [] Visitor to Home [] Other []

Please tick the above as appropriate

1 = EXCELLENT 2 = V.GOOD 3 = GOOD 4 = AVERAGE 5 = POOR

Please tick the following service as provided.

| | 1 | 2 | 3 | 4 | 5 |
|--------------------------------------|---|---|---|---|---|
| Hospitality | | | | | |
| Helpfulness of staff | | | | | |
| Information provided on arrival | | | | | |
| Atmosphere of the Home | | | | | |
| Cleanliness | | | | | |
| General Condition of Home | | | | | |
| Quality of furnishings | | | | | |
| Security of Home | | | | | |
| Hospitality & Service of staff | | | | | |
| Timeliness of staff response to call | | | | | |
| Quality of food | | | | | |
| Entertainment | | | | | |

Would you Recommend the Services & Home to Friends & Family YES / NO

Please Comment on how our Services can be improved

**Please leave at any of our Homes that you are visiting or send to
Hicare Ltd, Head Office,
13b High View Close, Hamilton Office Park, Leicester, LE4 9LJ.**

COMPLAINTS PROCEDURE *(appendix E)*

In order to maintain a happy and homely environment, it is imperative that residents or their relatives inform us of any problems or grievances that they may have at the time of the problem arising.

This procedure addresses the matter of how residents and/or their relatives and representatives can make complaints about anything which goes on in the home, both in terms of the treatment and care given by staff or the facilities which are provided. You are assured that any complaint will be listened to, taken seriously and acted upon. We also welcome constructive suggestions and positive comments.

Minor problems should be brought to the attention of the senior on duty, who will do their utmost to resolve the situation immediately. The matter will automatically be reported to the management.

In the event that the complaint is of a more serious nature, or if a minor complaint has not been dealt with satisfactorily, the matter should be raised with the manager.

We would hope that in most cases any complaints will be resolved very quickly. In the event that we need to gather more information, or speak to other people we will guarantee to respond within a maximum of 28 days

If the complaint cannot be resolved to your satisfaction by the manager, then you may wish to make a formal complaint to the Head Office for the attention of our Director, Harjit Nanuwa located at :

Hicare Ltd, 13b High View Close, Hamilton Office Park, Leicester, LE4 9LJ

Tel : (0845) 273 5333 or Email : enquiries@hicare.co.uk

If still not resolved to your satisfaction you can contact The Care Quality Commission (CQC) at :

CQC National Customer Service Centre, Citygate, Gallowgate, Newcastle upon Tyne, NE1 4PA

Tel : 03000 616161 or Email: enquiries@cqc.org.uk

FIRE PROCEDURE (*appendix F*)

Action To Be Taken in the Event of a Fire

If the Fire Alarm sounds, the PERSON IN CHARGE OF THE HOME must follow this procedure.

- 1) Summon the fire brigade.
- 2) All staff must go to the control panel (*located in the reception area*). The person in charge must identify for which Zone the alarm is sounding.
- 3) The person in charge must send a member of staff to the area identified by the panel and establish if a fire has occurred, or whether it is a false alarm.
- 4) If it is a false alarm, silence the alarm, the person in charge must call the fire brigade and inform them that it is a false alarm.
- 5) If a fire is in progress, evacuate horizontally only the zone where the fire is occurring, if safe to do so. Other zones will be safe until the fire brigade arrives.
- 6) If a fire is in progress, staff must proceed quietly to the evacuation point, which is at the reception area.
- 7) The person in charge of the home must take the register of residents and the visitor's book to the evacuation point and await the arrival of the Fire Brigade.

If a Fire is discovered, and the alarm has not yet sounded:

- 1) Raise the alarm by breaking the nearest fire alarm glass.
- 2) Close the door to the room where the fire has started.
- 3) Inform the person in charge, who must summon the Fire Brigade.
- 4) Only if the fire is small, must it be tackled.
- 5) The person in charge to evacuate horizontally, only the zone where the fire is occurring. Other zones will be safe until the fire brigade arrives.
- 6) Staff must proceed to the evacuation point. That is in the reception area.
- 7) The person in charge must take the register of residents and visitors book to the evacuation point.
- 8) If a return to the home is not possible, refuge can be found.

Evacuation Procedure

- 1) The home is constructed in 'Fire Zones'. This means that fires will be contained within the zone where they began for at least an hour. The likelihood is that the fire brigade will have arrived at the scene before a fire could move from one zone to another.
- 2) The staff will evacuate residents horizontally ONLY from the zone where the fire is currently burning, if safe to do so.
- 3) Residents should be evacuated to an adjacent zone to await the arrival of the fire brigade, who will decide whether a complete evacuation is necessary.
- 4) Residents should be escorted from the zone where the fire has occurred. Those residents who are not mobile should be escorted using wheelchairs. Remember that each bedroom is protected by a half hour fire door. Staff must not run, as this will create an atmosphere of panic amongst the residents.
- 5) If evacuation is required the LIFTS MUST NOT be used under any circumstances for any purpose.
- 6) If evacuation is necessary, staff will ONLY evacuate residents. Personal possessions must be left where they are. Once a room has been evacuated the door must be closed and the room not re-entered until the fire brigade has given the all clear.

HOME DETAILS (appendix G)

Details of the home to include the number and sizes of rooms in the Care Home

| ROOM | SIZE (m ²) | WHEELCHAIR ACCESSIBLE / USABLE | EN-SUITE WC |
|--------------------------------------|---------------------------|-----------------------------------|-----------------|
| 1 | 15.00 | yes | Wc-Ensuite |
| 2 | 15.00 | Yes | Wc-Ensuite |
| 3 | 15.30 | Yes | Wc-Ensuite |
| 4 | 16.10 | Yes | Wc-Ensuite |
| 5 | 15.30 | Yes | Wc-Ensuite |
| 6 | 15.30 | Yes | Wc-Ensuite |
| 7 | 15.30 | Yes | Wc-Ensuite |
| 8 | 15.30 | Yes | Wc-Ensuite |
| 9 | 16.58 | Yes | Wc-Ensuite |
| 10 | 15.30 | Yes | Wc-Ensuite |
| 11 | 16.19 | Yes | Wc-Ensuite |
| 12 | 16.19 | Yes | Wc-Ensuite |
| 13 | 15.30 | Yes | Wc-Ensuite |
| 14 | 15.30 | Yes | Wc-Ensuite |
| 15 | 15.30 | Yes | Wc-Ensuite |
| 16 | 11.62 | Yes | Wc-Ensuite |
| 17 | 14.00 | Yes | Wc-Ensuite |
| 18 | 14.00 | Yes | Wc-Ensuite |
| 19 | 17.42 | Yes | Wc-Ensuite |
| 20 | 15.0 | Yes | Wc-Ensuite |
| 21 | 15.0 | Yes | Wc-Ensuite |
| Medical Room | 9.6 | yes | Wash Hand Basin |
| Rose Lounge (<i>Quiet Lounge</i>) | 13.95 | Yes | N/A |
| Primrose Lounge (<i>TV Lounge</i>) | 58.50 | Yes | N/A |
| Smoke Lounge | 9.23 | Yes | N/A |
| Dining Room | 74.19 | Yes | N/A |

| ROOM | SIZE (m ²) | WHEELCHAIR ACCESSIBLE / USABLE | EN-SUITE WC |
|-------------------------------|---------------------------|-----------------------------------|-------------|
| Daffodil Lounge | 35.65 | Yes | N/A |
| Very Large Kitchen | | Yes | N/A |
| Office I | | Yes | N/A |
| Reception | 7.00 | N/A | N/A |
| Shower Room 1 | | Yes | N/A |
| Bathroom with Hoist 1 | | Yes | N/A |
| 1 Bathroom | | Yes | N/A |
| 3 Walk in Showers | | Yes | N/A |
| 2 Baths with Hoist | | Yes | N/A |
| Communal WC 1 Nr. Dining room | 3.70 | Yes | N/A |
| Communal WC 2 Nr. Dining room | 3.70 | Yes | N/A |
| Communal WC 3 Nr. Dining room | 3.70 | Yes | N/A |
| Communal WC 4 Nr. Lift | 3.70 | Yes | N/A |
| Communal WC 5 Nr. Lift | 3.70 | Yes | N/A |
| Communal WC 6 Nr. Lift | 3.70 | Yes | N/A |
| Activity Room | 35.65 | Yes | N/A |
| Hair-dressing Room | 12.00 | Yes | N/A |
| Staff Room | 9.00 | Yes | N/A |
| Nurse Room | 9.60 | Yes | N/A |
| 22 | 15.30 | Yes | Wc-Ensuite |
| 23 | 14.00 | Yes | Wc-Ensuite |
| 24 | 15.30 | Yes | Wc-Ensuite |
| 25 | 11.33 | Yes | Wc-Ensuite |
| 26 | 15.36 | Yes | Wc-Ensuite |
| 27 | 15.30 | Yes | Wc-Ensuite |
| 28 | 15.36 | Yes | Wc-Ensuite |
| 29 | 15.30 | Yes | Wc-Ensuite |
| 30 | 16.58 | Yes | Wc-Ensuite |
| 31 | 15.30 | Yes | Wc-Ensuite |
| 32 | 15.30 | Yes | Wc-Ensuite |

| ROOM | SIZE (m ²) | WHEELCHAIR ACCESSIBLE / USABLE | EN-SUITE WC |
|-----------------------|---------------------------|-----------------------------------|-------------|
| 33 | 15.30 | Yes | Wc-Ensuite |
| 34 | 15.30 | Yes | Wc-Ensuite |
| 35 | 15.30 | Yes | Wc-Ensuite |
| 36 | 15.75 | Yes | Wc-Ensuite |
| 37 | 14.50 | Yes | Wc-Ensuite |
| 38 | 14.50 | Yes | Wc-Ensuite |
| 39 | 14.50 | Yes | Wc-Ensuite |
| 40 | 14.50 | Yes | Wc-Ensuite |
| 41 | 12.28 | Yes | Wc-Ensuite |
| 42 | 12.12 | Yes | Wc-Ensuite |
| 43 | 11.91 | Yes | Wc-Ensuite |
| 44 | 16.16 | Yes | Wc-Ensuite |
| 45 | 9.60 | Yes | Wc-Ensuite |
| 46 | 15.5 | Yes | Wc-Ensuite |
| 47 | 9.60 | Yes | Wc-Ensuite |
| 48 | 15.5 | Yes | Wc-Ensuite |
| 49 | 10.98 | Yes | Wc-Ensuite |
| 50 | 13.67 | Yes | Wc-Ensuite |
| 51 | 11.47 | Yes | Wc-Ensuite |
| 52 | 12.48 | Yes | Wc-Ensuite |
| 53 | 11.89 | Yes | Wc-Ensuite |
| 54 | 12.90 | Yes | Wc-Ensuite |
| 55 | 13.99 | Yes | Wc-Ensuite |
| 56 | 14.38 | Yes | Wc-Ensuite |
| 57 | 15 | Yes | Wc-Ensuite |
| 58 | 15 | Yes | Wc-Ensuite |
| 59 | 15 | Yes | Wc-Ensuite |
| 60 | 15 | Yes | Wc-Ensuite |
| WC Staff Only | | 1 st Floor | N/A |
| Communal WC Near Lift | | Yes | N/A |

Dignity
Stimulation
Individuality
Comfort



and above all...

we care

FREE
Day Trial
Available

Luxurious Accommodation
NOW AVAILABLE

- ▶ Long & Short Stays
- ▶ Day, Morning, Evening & Night Care
- ▶ Respite & Holiday Care

freephone

08000 27 50 44

enquiries@hicare.co.uk | www.hicare.co.uk



Meadow's Court
Old Church Street, Old Aylestone
Leicester LE2 8ND **Tel.** (0116) 224 8888

Spencefield Grange
Davenport Road, Evington
Leicester LE5 6SD **Tel.** (0116) 241 8118