

Updated 21st January 2010

*Welcome
To*

SPENCEFIELD GRANGE

RESIDENTIAL CARE HOME

REGISTERED SINCE JULY 1995

STATEMENT OF PURPOSE

Davenport Road

Leicester

(0116) 241 8118

website : www.hicare.co.uk

e-mail : enquiries@hicare.co.uk

spencefield@hicare.co.uk



Member of
East Midlands
C.A.R.E.



Introduction

This document is produced in accordance with The Care Homes Regulations, (*Statutory Instrument 3965*), Regulation 4.

This Statement, along with other information materials (*service users' guide*) 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 & particular needs. Copies of the most recent inspection reports are also be available on request.

Review

In accordance with Regulation 6. This statement of purpose will be kept under review, where appropriate, revised, and the commission and residents will be notified of any such revision within 28 days.

See Also

Residents Charter of Rights . A statement of Philosophy (*see appendix A*).

Aims & Objectives (*see appendix B*).

Residents / Relatives survey (*see appendix C*).

Last inspection report (*this is located in the office please ask senior in charge*)

Complaints procedure (*see appendix E*).

Procedure to be followed in the event of fire (*see appendix F*).

Number and size of rooms in the care home (*see appendix G*).

Service users guide brochure (*see appendix H*).

REGISTRATION DETAILS

The name and address of the registered provider:

Managing Director Satnam S Nanuwa

Director Sukhjit K Nanuwa, Director Harjit S Nanuwa

Spencefield Grange, Davenport Road, Leicester. LE5 6SD. (Hicare Ltd)

Registered since 1995

The registered manager:

Debbie Crawford, Registered Manager

Sheila Sturt, Assistant Manager

Sukhjrit K. Nanuwa, Area Manager

Human Resource & Accounts

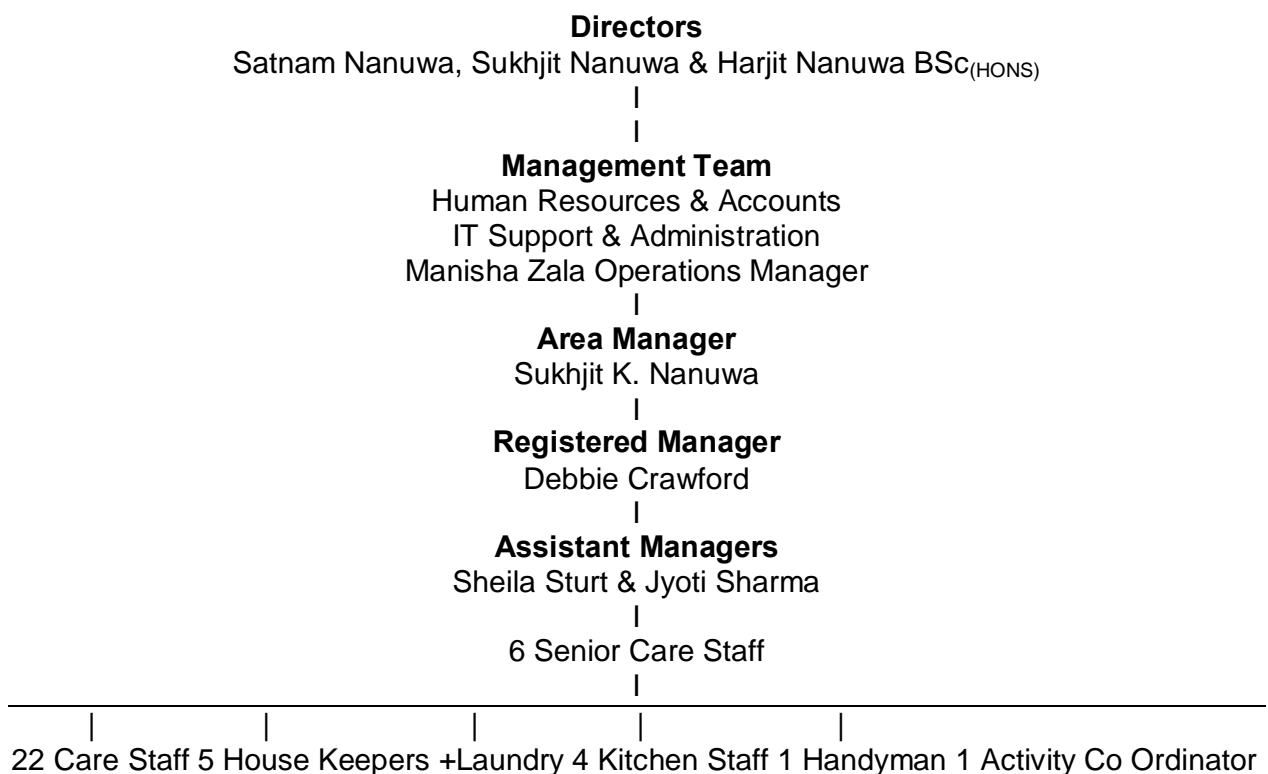
Manisha Zala, Operations Manager

IT Support & Administration

Head Office : 13b High View Close, Hamilton Office Park, Leicester LE4 9LJ.

STAFFING

The organisational structure of the Care Home



Staffing levels There are a minimum of 6 plus care staff on duty at all times throughout the day. This is in addition to dedicated cleaning, kitchen and maintenance staff and usually in addition to the registered manager. Between the hours of 10pm and 8am there are 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 10 minutes travelling time.

OR

DAY TIME STAFFING

| <i>Resident category</i> | <i>Resident No's</i> | <i>No's CAs</i> | <i>Ratios</i> |
|-----------------------------|----------------------|-----------------|---------------|
| Resident Care High Mobility | 24 | 4 plus | 1-7 |
| Resident Care Low Mobility | 39 | 5 plus | 1-8 |
| TOTALS | 63 | 9 Plus | |

NIGHT TIME STAFFING

| <i>Resident category</i> | <i>Resident No's</i> | <i>No's CAs</i> | <i>Ratios</i> |
|-----------------------------|----------------------|-----------------|---------------|
| Resident Care High Mobility | 24 | 2 | 1 - 16 |
| Resident Care Low Mobility | 39 | 3 | 1- 14 |
| TOTALS | 63 | | |

2 Night staff awake 1 sleep on duty in 1
on call,

NB Day Staff The Asst. Manager or Senior Care in charge in the Manager's absence is over and above these figures

Qualifications

The relevant qualifications and experience of the registered provider:

- 1) Satnam Nanuwa has been managing family businesses from 1972 as Managing Director and since 1989 has the experience of Management of Residential Care Homes.
- 2) Sukhjot Nanuwa has been managing the family businesses since 1975. In 1989 she went onto the Management of Residential Care Homes, as a registered Manager for the Residential Care Homes, 1st of experience years as acting manager, Registered Manager and years at the Management Level. She also has NVQ level 4 Registered Manager Adults Award, certificate in Care for Elderly A1 assessor's award and a certificate in Alzheimer & Dementia.
- 3) Harjit Nanuwa BSc (HONS) has experience in Management of Residential Care Homes since 1998.
- 4) Debbie Crawford since 1999 has experience of management in caring where she has progressed through her career from Carer, to Senior, to Assistant Manager and now as Registered Manager since 2004. She also has NVQ level 4 Registered Manager Adults Award.

The Staff:

- All staff completes an Induction programme within 6 weeks of their appointment.
- The aim is for 50% of the Care Staff Team to achieve NVQ Level 2.
- All staff involved in Food Preparation and Moving & Handling have been trained on an accredited course.
- There will be a trained First Aider on duty at the home 24 hours a day
- Other training courses that some staff have attended include;
Hoist Training, Health & Safety, Control of Infection, Safe handling of Medication, Care Practice, Alzheimer & Dementia

This care home is formally registered since 1995 as a Residential care home provides care for people in the following categories:

Registered Categories of Hicare Ltd- Spencefield Grange :- Care Home Service user Category - Care home only (PC)

Service user categories

| | Sex |
|---|---------|
| Dementia (DE) | 63 both |
| Mental disorder, excluding learning disability or dementia (MD) | 63 both |
| Old age, not falling within any other category (OP) | 63 both |
| Physical disability (PD) | 63 both |

Maximum Number Registered 63

Age (if specified)

Additional Conditions of Registration

1. the registered person may provide the following categories of service only:
Care Home only- Code C

To service users of the following gender:
Either

Whose primary care needs on admission to the home are within the following
Categories:

Dementia- Code DE

Mental disorder, excluding learning disability or dementia- Code MD

Old age, not falling within any categories- Code OP

Physical disability – Code PD

2. The maximum number of service users who can be accommodated is 63

Additional Conditions of Registration

The home provides accommodation for total 63 residents in 61 Bedrooms, 59 being Single bedrooms most of the rooms are WC en-suite but 3 with wash hand basin only, 2 being double both with WC en-suite. Medical nursing care is not provided by staff employed in the home. When necessary, such care will be given by community nursing services.

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 ill and in accordance with good practice guidance, we will usually care 'till death

Our priority will always be to ensure the well being 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)

STATEMENT OF THE 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.

An updated activities programme plan with close liaison with professional bodies is produced regularly with consultation of residents and circulated to all residents. Additionally, a copy is available on request.

ACTIVITIES ROOM

The home has now 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 their hobbies and interests. This room has an up to date home cinema system with DVD player to play classic golden oldie films, dramas, romantic films, classic films, documentaries etc, Music centre, an

advanced computer system with printer, various games such as bingo, cards, chess, mind/memory games, song books, scented fruit balls, sensory equipment etc., vector full sensory machine, Nintendo Wii comprising of various sport games/activities

The arrangements made for service users 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 and staff will ensure that assistance is given where needed. 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 services users 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. Unsociable behaviour will not be accepted. 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 requested to sign in and out in the visitors book.

Details of any specific therapeutic techniques used in the care home and arrangements made for their supervision

Weekly craft class and weekly keep fit sessions.

CONSULTATION

The arrangements made for consultation with services users 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 residents recommendations wherever possible, are acted upon. Minutes of these are recorded.

We will undertake a Quality Assurance audit during the course of the year, and annually thereafter, 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 regulating Inspecting Body inspections and will be invited to meet inspectors. The views of residents will be included in inspection reports. Our last inspection report is attached (*See Appendix D*).

The arrangements made for dealing with reviews of the service user's plan referred to in regulation 15(1)

The residents care plan is reviewed at least once a month, (*or more frequently if the needs of the resident change significantly*) and updated to reflect changing needs and current objectives for health and personal care.

The care plan is drawn up with the involvement of the resident and/or their relatives and we will then ask the resident or their relative to agree and sign the document.

COMPLAINTS

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*).

FIRE SAFETY

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 PROVIDED AT THE HOME :

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

The Building and Gardens:

- The home is constructed on 2 Floors with access by staircases and a lift.
- The home provides, total accommodation for 63 residents . 59 single bedrooms most of the rooms are wc en-suite but 3 with hand wash basin only, 2 being double bedroom both with wc en-suite. (See *Schedule A for a list of rooms together with their dimensions*).
- A spacious dining room which links to an adjoining dining Conservatory
- There are 6 spacious Lounges, one lounge links to an adjoining Lounge Conservatory
- A call bell system is installed throughout the home.
- The home is equipped with a fire alarm system.
- The home is wheelchair accessible throughout.

- There are 6 wheelchair accessible WC on the Ground Floor and 1 on the first floor.
- There is 1 bathroom with hoist and 1 walk in shower on the ground floor.
- There are 3 Bath rooms one assisted and two with Hoist on the first floor.
- 3 walk in showers on the first floor
- 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 attached.

Equipment:

- The home is equipped with 3 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 be equipped with high/low fully profiling beds should the assessment indicate the need for any resident.
- The home is provided with pressure relieving equipment, which is used according to the individually assessed needs of the residents and additional equipment is provided through the District Nurse as and when required.

Services:

- 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.



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 the 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) Residents' bedroom is their own private space. Bedroom doors are designed to lock and have a door knocker. Staff is 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 as they wish.
- b) Each Resident will be allocated a Key Worker , who will be responsible for ensuring that the Residents' 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. Future review meetings shall include Residents' Family or Friends if they so wish and will be held on regular basis or earlier if changes in needs are identified.
- 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 residential homes and the community will be made available and 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 own bedrooms are

their own home 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 home 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... A weekly bingo session will take place in the home. A workshop group will take place for residents with varied abilities and will be a weekly amenity. Occasionally there will be external and internal entertainment.
- l) The manager is to maintain close liaison with professional bodies such as Social Workers, CPNs 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 fulfill our role.

- n) Our Homes Prides 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 for a maximum of £1,000, 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 residents' cash and valuables left in residents' 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 safe guard 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 REINFORCE INFORMATION RELATING TO FIRE REGULATIONS & HEALTH & SAFETY REQUIREMENTS AT ALL STAFF SUPERVISION SESSIONS

Updated 21st January 2010
RESIDENTS / RELATIVES SURVEY (appendix C)

SERVICE QUALITY QUESTIONNAIRE



Name : _____

Address : _____

Tel : _____ Email : _____

(please circle) Resident / Family of resident / Friend of resident / Visitor to Home / Other

Name of Home (please circle) : Meadow's Court / Spencefield Grange

As part our Quality Assurance, we would be obliged if you could please complete the below questionnaire.

Please tick the following as appropriate :

| | EXCELLENT | V.GOOD | GOOD | AVERAGE | POOR |
|--|-----------|--------|------|---------|------|
| Responses to complaints | | | | | |
| Helpfulness of staff | | | | | |
| Information provided prior and on arrival | | | | | |
| Atmosphere of the Home | | | | | |
| Cleanliness | | | | | |
| General ambience of Home | | | | | |
| Quality of furnishings | | | | | |
| Security of Home | | | | | |
| Hospitality & Service of staff | | | | | |
| Staff responses to calls | | | | | |
| Quality of dining area and food | | | | | |
| Entertainment, social activities and outings | | | | | |

Would you recommend the Services and Home to Friends and Family? Yes / No (please circle)

Please Comment on how our Services can be Improved _____

Thank you for taking the time to complete this questionnaire.
 We value your comments made, as we pride ourselves in our commitment to providing a high standard of care. Please return to home or send back in the SAE enclosed
 Website : www.hicare.co.uk Email : enquiries@hicare.co.uk

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.

Any 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 can not 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 the below address,

Hicare Ltd, 13b, High View Close, Hamilton Office Park, Leicester, LE4 9LJ
Tel: (0845) 273 5333
Email: enquires@hicare.co.uk

if still not resolved to your satisfaction you can contact the The Care Quality Commission,

The Care Quality Commission Correspondence, East Midlands, Citygate, Gallowgate, Newcastle Upon Tyne, NE1 4PA Tel: (03000) 616 161 **Email: enquiries@cqc.org.uk**

FIRE PROCEDURE - ACTION TO BE TAKEN IN THE EVENT OF A FIRE

(APPENDIX F)

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 which 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. 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 visitors 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) 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~~ 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.
- 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.

NUMBER AND SIZE OF ROOMS (appendix G)

| ROOM | SIZE(m²) | WHEELCHAIR ACCESSIBLE / USABLE | EN-SUITE WC |
|------------------------------------|----------------------------|---------------------------------------|--------------------|
| GROUND FLOOR: | | | |
| | | | |
| BEDROOMS : 1 | | | |
| 1 | 15.00 | yes | Yes En-Suite |
| 2 | 15.00 | Yes | Yes En-Suite |
| 3 | 15.30 | Yes | Yes En-Suite |
| 4 | 16.10 | Yes | Wash Basin |
| 5 | 15.30 | Yes | Yes En-Suite |
| 6 | 15.30 | Yes | Yes En-Suite |
| 7 | 15.30 | Yes | Yes En-Suite |
| 8 | 15.30 | Yes | Yes En-Suite |
| 9 | 16.58 | Yes | Yes En-Suite |
| 10 | 15.30 | Yes | Yes En-Suite |
| 11 | 16.19 | Yes | Yes En-Suite |
| 12 shared | 16.19 | Yes | Yes En-Suite |
| 13 | 15.30 | Yes | Yes En-Suite |
| 14 | 15.30 | Yes | Yes En-Suite |
| 15 | 15.30 | Yes | Yes En-Suite |
| 16 | 11.62 | Yes | Yes En-Suite |
| 17 | 14.00 | Yes | Yes En-Suite |
| 18 | 14.00 | Yes | Yes En-Suite |
| 19 Shared | 17.42 | Yes | Yes En-Suite |
| 20 | 15.0 | Yes | Yes En-Suite |
| 21 | 15.0 | Yes | Yes En -Suite |
| Rose Lounge (Quiet Lounge) (1) | 13.95 | Yes | N/A |
| Primrose Lounge (TV Lounge) (2) | 34.02 | Yes | N/A |
| Smoke Lounge (3) | 9.23 | Yes | N/A |
| | | | |
| Daisy Dining Room | 74.19 | Yes | N/A |
| Daisy Conservatory | 23 | Yes | N/A |
| Conservatory lounge | 43.55 | Yes | N/A |
| Daffodil Lounge | 35.65 | Yes | N/A |
| Very Large Kitchen | | Yes | N/A |
| Office I | | Yes | N/A |
| Reception | | Yes | N/A |
| Cherry Lounge (5) | 15.42 | Yes | N/A |
| SHOWER ROOM 1 | | Ground floor Yes | N/A |
| BATH ROOM WITH HOIST 1 | | Ground floor Yes | N/A |

| ROOM | SIZE(m²) | WHEELCHAIR ACCESSIBLE / USABLE | EN-SUITE WC |
|--------------------------------|----------------------------|---------------------------------------|--------------------|
| 1 BATHROOM | | 1 ST Floor Yes | N/A |
| 3 WALK IN SHOWERS | | 1 ST Floor Yes | N/A |
| 2 BATHS WITH HOIST | | 1 ST Floor Yes | N/A |
| | | | N/A |
| | | | N/A |
| Communal WC 1 Nr. Dinning room | 3.70 | Yes | N/A |
| Communal WC 2 Nr. Dinning room | 3.70 | Yes | N/A |
| Communal WC 3 Nr. Dinning 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 |
| | | | |
| New Lounge | 35.65 | | |
| FIRST FLOOR | | | |
| | | | |
| BEDROOMS: | | | |
| 22 | 15.30 | To be refurbished | Out of action |
| 23 | 15.30 | Yes | Yes En-Suite |
| 24 | 14.00 | Yes | Yes En-Suite |
| 25 | 15.30 | Yes | Yes En-Suite |
| 26 | 11.33 | Yes | Yes En-Suite |
| 27 | 15.36 | Yes | Yes En-Suite |
| 28 | 15.30 | Yes | Yes En-Suite |
| 29 | 15.36 | Yes | Yes En-Suite |
| 30 | 15.30 | Yes | Yes En-Suite |
| 31 | 16.58 | Yes | Yes En-Suite |
| 32 | 15.30 | Yes | Yes En-Suite |
| 33 | 15.30 | Yes | Yes En-Suite |
| 34 | 15.30 | Yes | Yes En-Suite |
| 35 | 15.30 | Yes | Yes En-Suite |
| 36 | 15.30 | Yes | Yes En-Suite |
| 37 | 15.75 | Yes | Yes En-Suite |
| 38 | 14.50 | Yes | Yes En-Suite |

| ROOM | SIZE(m²) | WHEELCHAIR ACCESSIBLE / USABLE | EN-SUITE WC |
|-----------------------|----------------------------|---------------------------------------|--------------------|
| 39 | 14.50 | Yes | Yes En-Suite |
| 40 | 14.50 | Yes | Yes En-Suite |
| 41 | 14.50 | Yes | Yes En-Suite |
| 42 | 12.28 | Yes | Yes En-Suite |
| 43 | 12.12 | Yes | Yes En-Suite |
| 44 | 11.91 | Yes | Yes En-Suite |
| 45 | 16.16 | Yes | Yes En-Suite |
| 46 | 9.60 | Yes | Wash Basin |
| 47 | 15.5 | Yes | Yes En-Suite |
| 48 | 9.60 | Yes | Yes En-Suite |
| 49 | 15.5 | Yes | Yes En-Suite |
| 50 | 10.98 | Yes | Wash Basin |
| 51 | 13.67 | Yes | Yes En-Suite |
| 52 | 11.47 | Yes | Yes En-Suite |
| 53 | 12.48 | Yes | Yes En-Suite |
| 54 | 11.89 | Yes | Yes En-Suite |
| 55 | 12.90 | Yes | Yes En-Suite |
| 56 | 13.99 | Yes | Yes En-Suite |
| 57 | 14.38 | Yes | Yes En-Suite |
| 58 | 15 | Yes | Yes En-Suite |
| 59 | 15 | Yes | Yes En-Suite |
| 60 | 15 | Yes | Yes En-Suite |
| 61 | 15 | Yes | Yes En-Suite |
| 62 | 15 | Yes | Yes En-Suite |
| WC Staff Only | | 1 st Floor | |
| Communal WC Near Lift | | Yes | |

- **Dignity**
- **Stimulation**
- **Individuality**
- **Comfort**

and above all ...

We Care



At Hicare our aim is to offer the highest standards of professional care & comfort in a warm friendly environment

Services available: Long & Short Stays
Day, Morning, Evening & Night Care
Respite & Holiday Care

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**

FREE
Day Trial
Available



FREEPHONE
08000 - 27 50 44

email : enquiries@hicare.co.uk website : www.hicare.co.uk