

Updated 21<sup>st</sup> January 2010

*Welcome To*

**MEADOW'S COURT  
RESIDENTIAL CARE HOME  
REGISTERED SINCE 1998**

## **STATEMENT OF PURPOSE**

Old Church St, Old Aylestone  
Leicester

(0116) 224 8888

website : [www.hicare.co.uk](http://www.hicare.co.uk)

e-mail : [enquiries@hicare.co.uk](mailto:enquiries@hicare.co.uk)

[meadows@hicare.co.uk](mailto:meadows@hicare.co.uk)



*Member of*



*East Midlands  
C.A.R.E.*



INVESTOR IN PEOPLE

## **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~~s~~ 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**

ResidentsqCharter 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

Meadow~~s~~ Court, Old Church Street, Aylestone, Leicester, LE2 8ND (Hicare Ltd)

**Care Home Registered since 1998.**

**The registered manager:**

Maureen Cullen, *Registered Manager*

Anne Bevins, Assistant Manager

Sukhjit K. Nanuwa, Area Manager

Human Resources & Accounts

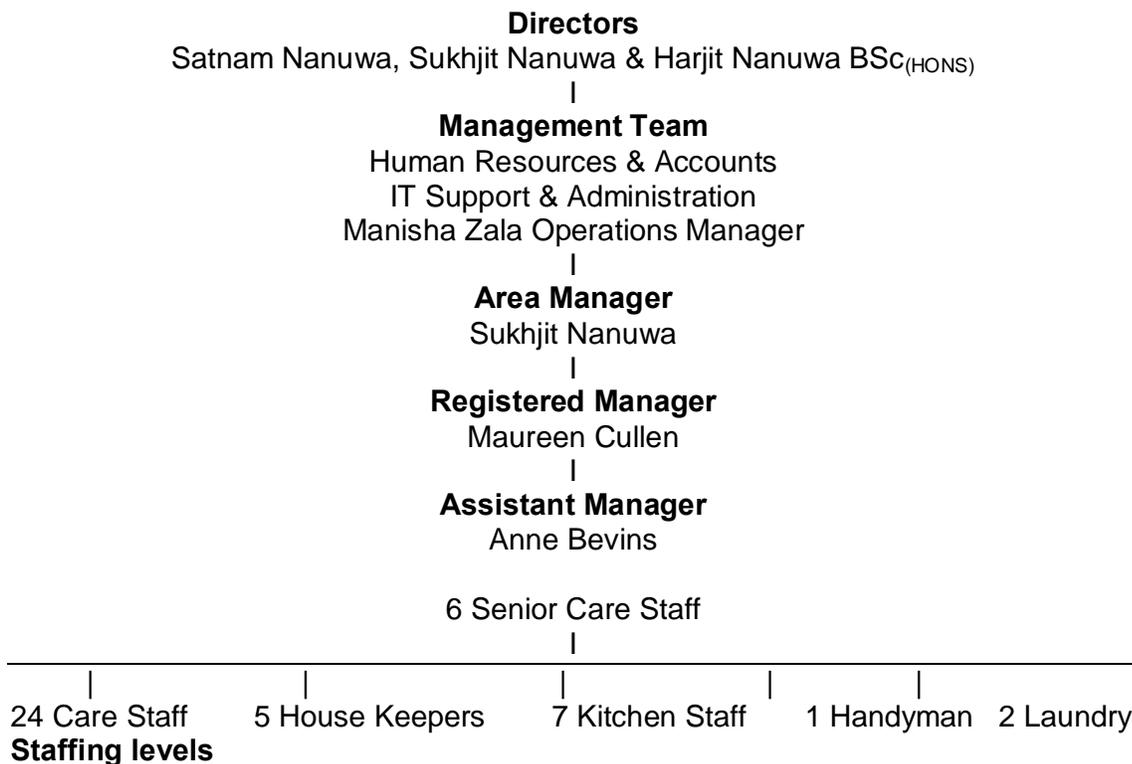
Manisha Zala, Operations Manager

IT Support & Administration

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

**STAFFING**

**The organisational structure of the Care Home**



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 6am 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**

<b>Resident category</b>	<b>Resident Nos</b>	<b>Nos CAs</b>	<b>Ratios</b>
Resident Care High Mobility	48	6	1-8
Resident Care Low Mobility	18	2+	1-7
<b>TOTALS</b>	<b>66</b>	<b>8Plus</b>	

**NIGHT TIME STAFFING**

<b>Resident category</b>	<b>Resident Nos</b>	<b>Nos CAs</b>	<b>Ratios</b>
Resident Care High Mobility	48		
Resident Care Low Mobility	18		
<b>TOTALS</b>	<b>66</b>		

2 awake & 1 sleep on duty

1 on call

NB: The Asst. Manager/ Senior Care in charge in the Managers 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 Residential care Homes, 1<sup>st</sup> of experience years as acting manager, registered manager's award, certificate in care for the 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) Maureen Cullen has experience in working in a care home since 1998; she has progressed through her career from housekeeper, care assistant, senior care assistant, to assistant manager and now as Registered Manager since 2004. Holds several relevant Certificates, and NVQ level 4 Registered Managers adults award.

**The Staff:**

- All staff completes the Hicare 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 with (CQS) as a care home providing care for people in the following categories:

**Service user Registered Categories**

	<b>Sex</b>
	(66 both)
Dementia (DE)	(66 both)
Dementia ó Over 65 years of age (DE(E))	(66 both)
Mental disorder, excluding learning disabilities or dementia (MD)	
Mental disorder, excluding learning disability or dementia- over 65Years of age (MD (E))	(66 both)
Old age, not falling within any other category (OP)	(66 both)
Physical disability (PD)	(65 both)
Physical disability over 65 Years of age (PD(E))	(65 both)
Sensory impairment over 65 Years of age (SI(E))	(2 both)
Sensory impairment (SI)	(2 both)

**Additional Conditions Of Registration**

1. Meadows Court is registered to provide personal care for male and female residents in the following categories: Old age not falling within any other category (OP) 66, Sensory Impairment over 65 years of age (SI (E))2. Sensory Impairment (SI) Dementia over 65 years of age (DE(E)), Dementia (DE)66, Mental disorder excluding learning disabilities or dementia over 65 years of age (MD(E)), Mental disorder excluding learning disabilities over 65 years of age(PD(E))65,Physical disability (PD) 65.
2. No persons falling within the category SI (E) or SI can be accommodated at Meadows Court when 2 persons who fall within these categories/combined categories are already residing at the home.
3. No person within the category DE between 40 and 54 years of age may be admitted when 11 people within this category and age group already reside at the home.

4. No person falling within the category MD between the age of 40 and 54 years of age may be admitted when 11 people within this category and age group already reside at the home.
5. No person falling within the category PD between 40 and 54 years of age may be admitted when 11 people within this category and age group already reside at the home.
6. No person under 40 years of age, falling within categories SI, MD, DE or PD may be admitted to the home.
7. No service user within the category PD or PD (E) may be admitted to room 9.

### **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 deathq

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 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 & romantic files, 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. 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 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. 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 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.

**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 CSCI 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) 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 if they so wish 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 can accommodate for 66 residents in 62 Rooms (*married couples are welcome*), 58 single bedrooms 35 with WC en-suites, 23 single bedrooms with hand wash basin facilities, 4 double bedrooms with WC en-suite. All bedrooms are furnished with bed, wardrobe, chest of drawers, easy chair.
- (*See Schedule A for a list of rooms together with their dimensions*).
- There are 5 lounges and 2 dining rooms.
- 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 5 wheelchair accessible WC on the ground floor and 3 on the first floor.
- There are total 8 Bath Rooms 4 walk in Showers, and 4 baths some are 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 attached that's where we need the support of family and friends to achieve this.

### **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 can provide pressure relieving equipment if it is assessed by the D/N, 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:**

- 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.

Updated 21<sup>st</sup> January 2010



Front Entrance



Rear Garden



Updated 21<sup>st</sup> January 2010  
Bed Room



Dining Room



Library

Sit-Out



Lounge

## **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 elderly 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 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 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. Future review meetings shall include Resident's 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 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 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 Dining Room or in the privacy of their own room. The home has a responsibility to other residents and staff, grossly anti-social behavior 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

l) 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 behavior. 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 21<sup>st</sup> 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](http://www.hicare.co.uk) Email: [enquiries@hicare.co.uk](mailto:enquiries@hicare.co.uk)

Updated 21<sup>st</sup> January 2010

## **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 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: [enquiries@hicare.co.uk](mailto:enquiries@hicare.co.uk)**

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

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

<b>ROOM</b>	<b>SIZE (m<sup>2</sup>)</b>	<b>WHEELCHAIR ACCESSIBLE / USABLE</b>	<b>EN-SUITE WC</b>
<b>GROUND FLOOR</b>			
<b>BEDROOMS :</b>			
1	10.35	Yes	Wash Hand Basin
2	10.15	Yes	Wash Hand Basis
3	10.15	Yes	Wash Hand Basin
4	11.18	Yes	Wash Hand Basin
5	16.47	Yes	Wc-Ensuite
6	16.55	Yes	Wc-Ensuite
8	12.68	Yes	Wc-Ensuite
9	13.78	Yes	Wc-Ensuite
10	12.12	Yes	Wc-Ensuite
12	16.14	Yes	Wc-Ensuite
13	16.12	Yes	Wash Hand Basin
14	10.64	Yes	Wc-Ensuite
15	17.13	Yes	Wc-Ensuite
16(Double)	16.06	Yes	Wc-Ensuite
17	11.16	Yes	Wc-Ensuite
18	11.15	Yes	Wc-Ensuite
19	16.16	Yes	Wc-Ensuite
20	10.15	Yes	Wash Hand Basin
21	11.18	Yes	Wash Hand Basin
22	10.15	Yes	Wc-Ensuite
23	11.05	Yes	Wash Hand Basin
24	10.11	Yes	Wc-Ensuite
25	10.38	Yes	Wash Hand Basin
26	11.22	Yes	Wc-Ensuite
27	10.15	Yes	Wash Hand Basin
28	10.21	Yes	Wash Hand Basin
Main Office 1		Yes	
Admin Office 2		Yes	
Marigold Lounge 2N/H/D	20.87	Yes	N/A
Magnolia Lounge3	22.92	Yes	N/A
Bluebell Lounge 4NOffic1	27.96	Yes	N/A
Tulip Lounge/Office 2	13.50	Yes	N/A

<b>ROOM</b>	<b>SIZE(m<sup>2</sup>)</b>	<b>WHEELCHAIR ACCESSIBLE / USABLE</b>	<b>EN-SUITE WC</b>
Reception Lounge,	15.00	Yes	N/A
Residents Hair-dressing Room	12.00	Yes	
Residents Comfort Medical Room	12.00	Yes	
Dining Room (1)	74.13	Yes	N/A
New Dining Room (2)	16.25	Yes	N/A
Shower Plus WC (1)		Yes	WC
Bathroom (walk in shower + unassisted Bath + WC)		Yes	WC
Bathroom (walk in shower + WC) (2)		Yes	WC
Bathroom Shower+WC(3)		Yes	WC
Asst. Bathroom with Ambulift +Shower (4)		Yes	WC
WC (1 – 5)	3.70	Yes	WC
<b>FIRST FLOOR</b>			
<b>BEDROOMS:</b>			
29	16.16	Yes	Wc-Ensuite
30 (Double)	16.16	Yes	Wc-Ensuite
31	11.14	Yes	Wc-Ensuite
32	11.14	Yes	Wash Hand Basin
33	11.58	Yes	Wc-Ensuite
35	15.51	Yes	Wc-Ensuite
36 (Double)	17.16	Yes	Wc-Ensuite
37	10.28	Yes	Wash Hand Basin
38	10.18	Yes	Wash Hand Basin
39	10.25	Yes	Wash Hand Basin
40	10.27	Yes	Wash Hand Basin
41	10.28	Yes	Wash Hand Basin
42	11.28	Yes	Wash Hand Basin
43	10.24	Yes	Wash Hand Basin
44	10.24	Yes	Wash Hand Basin
45	10.31	Yes	Wc-Ensuite
46	17.08	Yes	Wc-Ensuite

<b>ROOM</b>	<b>SIZE(m<sup>2</sup>)</b>	<b>WHEELCHAIR ACCESSIBLE / USABLE</b>	<b>EN-SUITE WC</b>
47	15.57	Yes	Wc-Ensuite
48	10.21	Yes	Wc-Ensuite
49	10.17	Yes	Wash hand basin
		Yes	
Cowslip Lounge (5)	26.03	Yes	N/A
Resi./Fmly K/Priv.Room	6.00	Yes	Wc-Ensuite
Bathroom plus WC (5)		Yes	WC
Bathroom (walk in shower + Wc) (6)		Yes	WC
WC (6 – 10)	3.70	Yes	WC
50	14.33	Yes	Wc-Ensuite
51	13.34	Yes	Wc-Ensuite
52	11.87	Yes	Wc-Ensuite
53	10.95	Yes	Wc-Ensuite
54 (Double)	18.31	Yes	Wc-Ensuite
55	10.23	Yes	Wc En-Suite
56	9.55	Yes	Wash hand basin
57	10.87	Yes	Wc-Ensuite
58	15.87	Yes	Wc-Ensuite
59	11.06	Yes	Wc-Ensuite
60	12.00	Yes	Wc-Ensuite
61	11.00	Yes	Wc-Ensuite
62	10.89	Yes	Wash hand basin
63	12.00	Yes	Wc-Ensuite
64	12.00	Yes	Wc-Ensuite
Bathroom plus WC (7)	3.70	Yes	WC

- **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

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Leicester LE2 8ND **tel : 0116 - 224 8888**

**Spencefield Grange** Davenport Road Evington  
Leicester LE5 6SD **tel : 0116 - 241 8118**



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