

STATEMENT OF PURPOSE

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 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 (Appendix A)
Residents Questionnaires (Appendix B1, B2)
Residents / Relatives survey results. (Appendix B3).
Last inspection report (Appendix C).
Complaints procedure (Appendix D).
Procedure to be followed in the event of fire (Appendix E).
Number and size of rooms in the care home (Appendix F1 +F2).
Aims/Objectives of the home (Appendix G).

REGISTRATION DETAILS

The name and address of the registered provider:

Mrs F & Miss J Aldridge
Bethel-Bethesda Residential Home
Equity Road East
Earl Shilton
Leices
LE97FY

The registered manager: Mrs Judith Wright

This care home is formally registered with C.Q.C. (Care Quality Commission) as a care home only PC and provides care for people in the following categories:

OP - old age, not falling within any other category.

The home provides care for persons of both sexes over the age of 65.

PROVISION OF NURSING CARE

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 need 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 practise 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 to 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 these 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 three months, 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 wish to 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) AIMS

We aim to create a friendly Home with a family atmosphere and to preserve the quality of life of our Residents. (See Appendix G).

OBJECTIVES

To carry out assessments of need that will be used to develop individual care plans with the objective of meeting the aims of the home for each Resident.

To provide equipment and competent staff to enable the aims and objectives to become a reality for each resident.

To deliver care sensitively and flexibly which reflects residents' individual needs and choices.

To consult as fully as possible, with residents, relatives in order to ensure that the stated aims and objectives are maintained.

STATEMENT OF THE PHILOSOPHY OF THE HOME

(Including the arrangements made for respecting the privacy and dignity of service users.)

The Home has adopted a Residents' charter of rights (see appendix A). Our philosophy is based upon a belief that all Residents regardless of age, sex, religion or race 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 needs of residents, their preferences and capacities.

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 service 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.

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

No therapeutic techniques are being used.

CONSULTATION - The arrangements made for consultation with service 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 related 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 Service Users, 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 B1 and B2).

Residents and their relatives will be informed of planned C.Q.C. inspections and will be invited to meet inspectors. The views of service users will be included in inspection reports. Our last inspection report is attached (See Appendix C).

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

The residents' 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, 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 D),

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 systems

Procedure to be followed in the event of fire - (See Appendix E).

FACILITIES PROVIDED AT THE HOME:

Details of the number and size of rooms in the care home are attached (see Appendix F).

The Building and Gardens:

Bethel-Bethesda is purpose built on ground floor level throughout and is organised into two individual areas.

Bethel provides five single bedrooms with ensuite WC and eleven without WC ensuite and one double room without WC ensuite. Bethesda provides sixteen single bedrooms with ensuite WC facilities, (See Appendix F for a list of rooms together with their size in square metres).

Bethel has two lounges and one dining room and Bethesda has two lounges and one 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 throughout.

Bethel has one wheelchair accessible WC and Bethesda has three wheelchair accessible WC's.

In Bethel there is one assisted bathroom and in Bethesda there are two assisted bathrooms.

There are two kitchens on the premises and the lunchtime menu is available on the residents' Notice Boards. The Bethel kitchen is available for residents use.

The laundry is centrally located and residents' washing will be collected from their bedrooms and returned to them. All clothing will be marked.

There are small gardens to the front and rear of the home and there is a central courtyard with raised beds. All areas of the gardens are accessible to residents.

Equipment:

The home is provided with one movable Oxford hoist and three fixed bath hoists and other moving and handling equipment to assist in the transfer of residents according to assessed need.

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 paid for from residents' own funds.

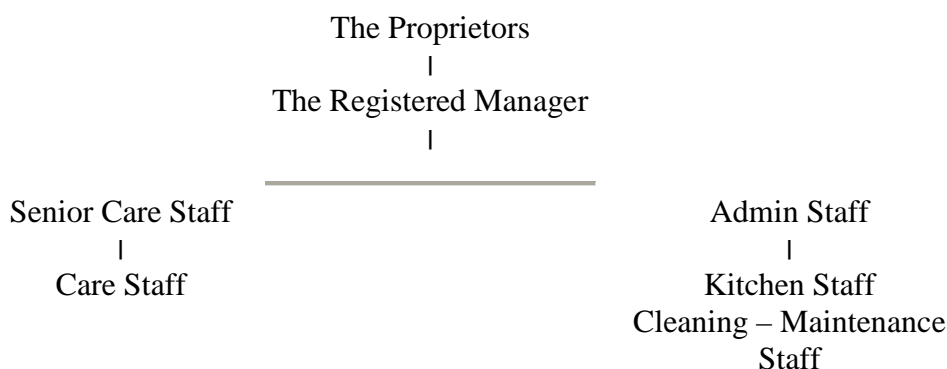
A chiropodist visits the home on a regular basis. The cost of this service is not included in the fee and will be paid for from residents' own funds.

A dentist's domiciliary visit can be arranged and any fee payable will be paid for from residents' own funds.

An optician's domiciliary visit can be arranged and any fee payable will be paid for from residents' own funds.

STAFFING

The organisational structure of the care home.



Staffing Levels

There are a minimum of five care staff on duty during the times of 7.00am until 11.00am, after which there are a minimum of four care staff from 11.00am until 9.00pm. This is in addition to cleaning, kitchen and maintenance staff, and usually in addition to the registered manager. Between the hours of 9.00pm and 8.00am, there are two waking night staff on duty, with one additional staff member being on call and able to assist with any emergency within ten minutes,

Qualifications

The relevant qualifications and experience of the registered provider:

The registered manager:

Mrs Judith Wright completed a course "From Carer to Manager. She is working on an NVQ Level 3 in Health and Social Care. She then hopes to take her NVQ Level 4 managers qualification and NVQ Assessors Course. She has worked in care with the elderly for the past thirteen years. She has undertaken training in Health and Hygiene, Parkinson's, Diabetics, Handling and Lifting, Infection Control, Managing Abuse, Bereavement and First Aid.

The staff:

All staff completes the Skills for Care induction programme within six 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 has been or are being trained on an accredited Foundation Food Hygiene course.

All care staff involved in Moving and Handling will be asked to attend a certified training course which may be delivered in house or will receive Manual Handling training by a staff member who has been trained on an accredited course.

There are trained First Aiders on the care staff and 24 hour cover is available.

Other training courses that some staff members have attended include:

- The Safe Handling of Medicines
- The Nail and Foot Care Course

RESIDENTS CHARTER

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, to carry them out.

The Right of 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.

| | | | | | |
|---|----------------------------------|--|--|-------|-----------|
| APPENDIX B 1 | | BETHEL & BETHESDA ADMISSION QUESTIONNAIRE | | | |
| | | | | | |
| This questionnaire is anonymous and the responses given will be used to improve our service as necessary. | | | | | |
| Please complete all sections | | | | | |
| INFORMATION: | | | | | |
| Paperwork | Was User Guide issued | | | | Yes/No |
| | Were Terms & Conditions issued | | | | Yes/No |
| | Given letter Petty Cash facility | | | | Yes/No |
| | | | | | |
| | | | | | |
| [ROOM: | Location | Distance to Lounge and dining room | | | OK/Not OK |
| | Furniture | Furnished to an acceptable standard | | | Yes/No |
| | Cleanliness | Was the room cleaned and ready | | | Yes/No |
| | Readiness | Were linen, towels & flannels available | | | Yes/No |
| | Security Facilities | Was the lockable drawer facility explains | | | Yes/No |
| | | | | | |
| | | | | | |
| STAFF: | Were the staff: | Helpful and polite | | | Yes/No |
| | Did the staff: | Understand any special needs | | | Yes/No |
| | Did the staff: | Identify the keyworker | | | Yes/No |
| | Did the staff: | Explain about the Home's Services | | | |
| | | (eg Hairdresser, Chiropodist, library book | | | Yes/No |
| | Did the staff: | Explain about the Home's activities | | | |
| | | (eg Bingo, Music & Movement) | | | Yes/No |
| | Did the staff: | Give details of meal times, visiting times and | | | |
| | | bathing arrangements | | | Yes/No |
| | Did the staff: | Explain about personal belongings | | | Yes/No |
| | | | | | |
| Any additional comments regarding the admission procedure would be appreciated. | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Service User / Relative / Other Representative | | | | Date: | |
| (Please delete as applicable) | | | | | |

| BETHEL & BETHESDA FOLLOW UP QUESTIONNAIRE | | | | APPENDIX B2 | | |
|---|--|---|--|----------------------------|-------------|--|
| This questionnaire is anonymous and the responses given | | | | | | |
| Will be used to improve our service as necessary | | | | | | |
| Please complete all sections | | | | | | |
| ROOM | Location | Distance to Lounge and dining room | | | OK - Not OK | |
| | Cleanliness | Is the room cleanliness acceptable | | | Yes - No | |
| STAFF | Do the day staff | Treat you with respect | | Always - Sometimes – Never | | |
| | Do the night staff | Treat you with respect | | Always - Sometimes – Never | | |
| FOOD | In the dining room | Is the table arrangements acceptable | | | | |
| | | Are you sitting with people you like | | | | |
| | If you have a special diet | Is your diet catered for to your satisfaction | | | | |
| ACTIVITIES | Would you like to see more regular in-house activities | | | | Yes - No | |
| | If Yes please list preferences in comments box below | | | | | |
| Any additional comments regarding the facilities in the home would be appreciated | | | | | | |
| | Comments: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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 they may have at the time the problem arises.

This procedure addresses the matter of how residents and/or their relatives and representatives 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:

C.Q.C. (Care Quality Commission)
CPC1
Capital Park
Fulbourn
Cambridge
CB21 5XE

For help to make a complaint contact e.g. relative, close friend, Age Concern Leicestershire (Tel: 0116 222 0555)

The Local Government Ombudsman will investigate complaints regarding alleged unfair treatment by the Department of Social Services. For more details either, ask at the office, or contact:

Local Government Ombudsman
The Oaks
No 2 Westwood Way
Westwood Business Park
Coventry
CV4 8JB
Telephone: 02476 695999

PROCEDURE - ACTION TO BE TAKEN IN THE EVENT OF FIRE

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

- I. Summon the Fire Brigade.
- II. All staff must go to the Control Panel (Bethel: located in the Bethel Staff Room, Bethesda: in Bethesda reception). The Person in Charge must identify which alarm is sounding.
- III. The Person in Charge must send a member of staff to the area identified by panel and establish if a fire has occurred, or whether it is a faulty alarm.
- IV. If a faulty alarm, turn off the alarm, reset the system and arrange for the alarm to be cleaned and repaired.
- V. If a fire is in progress, all care staff, admin, domestic, kitchen and laundry staff must go immediately to evacuate the residents to the evacuation point. Kitchen staffer senior staff member in charge of the shift must turn off the gas supply at the mains.
- VI. 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.
- VII. If a fire is in progress, staff must proceed quietly to the Evacuation Point, which is at the front garden of Bethel.
- VIII. 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.

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

- I. Raise the alarm by breaking the nearest Fire Alarm Glass.
- II. Close the door to the room where the fire has started and follow the above procedure 1-1. "If the fire alarm sounds".
- III. Inform the Person in Charge, who must summon the Fire Brigade.
- IV. Only if the fire is small, must it be tackled.

- V. Evacuate horizontally only the zone where the fire is occurring. Other zones will be safe until the Fire Brigade arrives.
- VI. Staff must proceed to the Evacuation Point. That is in the front garden of Bethel.
- VII. The Person in Charge must take the Register of Residents and Visitors Book to the Evacuation Point.
- VIII. If a return to the Home is not possible, refuge can be found.

This is at: Earl Shilton Parish Church Hall

By contacting: Reverend Graham Gittings

By telephone: 01455 843961 (Vicarage)

1.3 Evacuation Procedure

The Home is constructed into "Fire Zones". This means that fire 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.

- I) The staff will evacuate residents horizontally ONLY from the zone where the fire is currently burning.
- II) 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.
- III) 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 among the residents.
- IV) 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.

| | | APPENDIX F1 | |
|---|--------------------|-------------------------------|-------------------|
| NUMBER AND SIZE OF ROOMS | | | |
| (All rooms are around floor level) | | | |
| ROOM | SIZE (Sq m) | WHEELCHAIR ACCESSIBLE/ | ENSUITE WC |
| BEDROOMS (BETHESDA): | | | |
| 1 | | Yes | Yes |
| 2 | | Yes | Yes |
| 3 | | Yes | Yes |
| 4 | | Yes | Yes |
| 5 | | Yes | Yes |
| 6 | | Yes | Yes |
| 7 | | Yes | Yes |
| 8 | | Yes | Yes |
| 9 | | Yes | Yes |
| 10 | | Yes | Yes |
| 11 | | Yes | Yes |
| 12 | | Yes | Yes |
| 13 | | Yes | Yes |
| 14 | | Yes | Yes |
| 15 | | Yes | Yes |
| 16 | | Yes | Yes |
| BEDROOMS (BETHEL): | | | |
| 17 | | Yes | NO |
| 18 | | Yes | NO |
| 19 | | Yes | NO |
| 20 | | Yes | NO |
| 21 | | Yes | NO |
| 22 | | Yes | NO |
| 23 | | Yes | Yes |
| 24 | | Yes | Yes |
| 25 | | Yes | Yes |
| 26 | | Yes | Yes |
| 27 | | Yes | Yes |
| 28 | | Yes | NO |
| 29 | | Yes | NO |
| 30 | | Yes | NO |
| 31 | | Yes | NO |
| 32 (double) | | Yes | NO |

| NUMBER AND SIZE OF ROOMS | | APPENDIX F 2 | |
|--------------------------|-------------|------------------------|------------|
| ROOM | SIZE (Sq m) | WHEELCHAIR ACCESSIBLE/ | ENSUITE WC |
| 33 | | Yes | No |
| BETHEL: | | | |
| RECEPTION AREA 1 | | Yes | No |
| LOUNGE 1 | | Yes | No |
| LOUNGE 2 | | Yes | No |
| DINING ROOM | | Yes | No |
| KITCHEN 1 | | Yes | No |
| BATHROOM 1 | | Yes | No |
| WC1 | | Yes | No |
| WC 2 | | Yes | No |
| STAFF ROOM 1 | | Yes | No |
| BETHESDA: | | | |
| RECEPTION AREA 1 | | Yes | No |
| OFFICE 1 | | Yes | No |
| STAFF OFFICE 1 | | No | No |
| LOUNGE 1 | | Yes | No |
| LOUNGE 2 | | Yes | No |
| DINING ROOM | | Yes | No |
| KITCHEN 1 | | Yes | No |
| LAUNDRY 1 | | Yes | No |
| BATHROOM 1 | | Yes | No |
| BATHROOM 2 | | Yes | No |
| WC1 | | Yes | No |
| STAFF WC | | No | No |

APPENDIX G

Aims/Objectives of the home.

I/ Bethel/Bethesda is a Residential Home which aims to cater for 34 elderly residents, who have a degree of disability/frailty that can be associated with their age group. Those who are highly dependent, with a substantial and permanent physical and/ or sensory disability would not be offered a place in the home. The majority of our residents are permanent; we also aim to provide Respite (short stay) care. There are no restrictions/ discrimination on age, sex, religion or race.

II Assessment; Prospective residents may be referred by a social worker, a medical practitioner, or any person who has known of some one who has stayed at Bethel/Bethesda. He/she is invited with their relatives/ social worker to look around the home, and other homes to compare, prior to admission. Our Care Manager usually visits the person in his/her own home. All residents come for an initial monthly period, after which a review meeting with themselves, relatives and social worker is held. This is to determine everyone's views regarding the placement. The resident may choose to leave at this point in which case the social worker organises the move. If the resident wants to stay, the subsequent review meetings are held six monthly and then at yearly intervals.

3/ The main aim is to offer a high standard of loving care, by a team of dedicated and trained staff who respect the individuals choices, rights, dignity, needs, privacy confidentiality independence and fulfilment. Assistance may be given to help people in their daily needs but a resident can choose to be as self managing as possible and self administer their own drugs, clean their own rooms, launder their own clothes, prepare their own food and drink etc.

4/ The management strive to make Bethel/Bethesda a home from home, by creating an informal atmosphere, where residents can have freedom for example to get up, have a bath, retire, when they want, have meals in their bedroom if they choose and invite relatives and friends to visit at any time.

5/ Their home environment should be pleasant, so there is an emphasis on cleanliness, with well maintained decor and furnishings. The policy is to redecorate and replace carpets/curtains etc for new residents. They can choose their own decor.

6/ Their home environment should be safe, so regular premises risk assessments are carried out and a staff Health and Safety representative is employed. Residents can ask our maintenance man to carry out any repair job which they think needs doing.

II The home aims to provide in-house activities e.g. Bingo, Board games, workshops etc and once monthly Holy Communion. Coffee mornings are arranged. Summer trips are organised. Residents can choose locations and offer suggestions at informal residents meetings.

8/ It is the home's policy to attempt to keep a resident until death but if specialist equipment/ nursing skills were required in the best interests of the resident either a Hospital/ Nursing home situation may be necessary.

9/ The home aims to provide all the facilities the elderly require. In the event of someone needing e.g. physiotherapy, this is arranged together with transport.

10/ The home aims not to become involved in the financial affairs of residents.