



Statement of Purpose

Lower Farm Care Home
126 Grimston Road
South Wootton
Kings Lynn
PE30 3PB

Telephone: 01553 671027
01553 670488



Introduction

Our Statement of Purpose is written to comply with of the Care Quality Commission's Guidance about Compliance: Essential Standards of Quality and Safety. This requires a care service provider to produce and keep under review a statement that describes:

- its values, aims and objectives
- the services it provides to meet the needs of the people who use or might use the service
- information about the organisation, including the full name of the service provider and of any registered manager, together with their business address, telephone number and, where available, e-mail addresses

- the legal or registration status of the service provider, e.g. a care home with or without nursing designed to provide care and accommodation for older people, people with dementia, etc
- the locations providing the organisation's registered services (where there is more than one).

Information about the Organisation

The person officially registered as carrying on the business of the care service is Archers Healthcare Ltd.

The person officially registered to manage the care service is Mrs Tracey Catlin and Mrs Julie Archer-Moran and the Registered Provider is Mr Ravi Selliah, FCMA.

Values and Principles of the LOWER FARM

The following statements reflect the values, principles and general aims of our care services.

- To focus on service users. We aim to provide personal care and support in ways which have positive outcomes for service users and promote their active participation.
- To ensure that we are fit for our purpose. We examine our operations constantly to ensure that we are successfully achieving our stated aims and purposes. We welcome feedback from our service users and their friends and relatives.
- To work for the comprehensive welfare of our service users. We aim to provide for each service user a package of care that contributes to his or her overall personal and healthcare needs and preferences. We will co-operate with other services and professionals to help to maximise each service user's independence and to ensure as fully as possible the services user's maximum participation in the community.
- To meet assessed needs. Before we provide services, we ensure that a potential service user's needs and preferences are thoroughly assessed. We aim to ensure that the care the service provides meets the assessed needs of each service user, that needs are re-assessed as frequently as necessary, and that the care and support provided have the flexibility to respond to changing needs or requirements.
- To provide quality services. We are whole-heartedly committed to providing top quality services and to continuous improvement in the level of the care we offer.
- To employ a quality workforce. Standards for our managers and staff are based on the national occupational standards for the care industry set by the National Training Organisation.

Rights

We place the rights of residents/people who use our services at the forefront of our philosophy of care. We seek to advance these rights in all aspects of the environment and the services we provide and to encourage our residents to exercise their rights to the full.

Privacy

We recognise that life in a communal setting and the need to accept help with personal tasks are inherently invasive of a resident's ability to enjoy the pleasure of being alone and undisturbed. We therefore strive to retain as much privacy as possible for our residents in the following ways.

- Giving help in intimate situations as discreetly as possible.
- Helping residents to furnish and equip their rooms in their own style and to use them as much as they wish for leisure, meals and entertaining.
- Offering a range of locations around the home for residents to be alone or with selected others.
- Providing locks on residents' storage space, bedrooms and other rooms in which residents need at times to be uninterrupted.
- Guaranteeing residents' privacy when using the telephone, opening and reading post and communicating with friends, relatives or advisors.
- Ensuring the confidentiality of information, the home holds about residents.

Dignity

Disabilities quickly undermine dignity, so we try to preserve respect for the intrinsic value of those who use our services in the following ways.

- Treating each resident as a special and valued individual.
- Helping residents to present themselves to others as they would wish through their own clothing, their personal appearance and their behaviour in public.
- Offering a range of activities which enables each resident to express themselves as a unique individual.
- Tackling the stigma from which our residents may suffer through age, disability or status.
- Compensating for the effects of disabilities which residents may experience on their communication, physical functioning, mobility or appearance.

Independence

We are aware that our residents/people who use our services have given up a good deal of their independence in entering a group living situation.

We regard it as all the more important to foster our service users' remaining opportunities to think and act without reference to another person in the following ways.

- Providing as tactfully as possible human or technical assistance when it is needed.
- Maximising the abilities our residents retain for self-care, for independent interaction with others, and for carrying out the tasks of daily living unaided.
- Helping residents take reasonable and fully thought-out risks.
- Promoting possibilities for residents to establish and retain contacts beyond the home.
- Using any form of restraint on residents only in situations of urgency when it is essential for their own safety or the safety of others.
- Encouraging residents to access and contribute to the records of their own care.

Security

We aim to provide an environment and structure of support which responds to the need for security in the following ways.

- Offering assistance with tasks and in situations that would otherwise be perilous for residents.
- Protecting residents from all forms of abuse and from all possible abusers.
- Providing readily accessible channels for dealing with complaints by residents.
- Creating an atmosphere in the home which residents experience as open, positive and inclusive.

Civil rights

Having disabilities and residing in a home can act to deprive our residents/people who use our services of their rights as citizens. We therefore work to maintain our service users' place in society as fully participating and benefiting citizens in the following ways.

- Ensuring that residents have the opportunity to vote in elections and to brief themselves fully on the democratic options.
- Preserving for residents full and equal access to all elements of the National Health Service.
- Helping residents to claim all appropriate welfare benefits and social services.
- Assisting residents' access to public services such as libraries, further education and lifelong learning.

Choice

We aim to help our service users exercise the opportunity to select from a range of options in all aspects of their lives in the following ways.

- Providing meals which enable residents as far as possible to decide for themselves where, when and with whom they consume food and drink of their choice.
- Offering residents, a wide range of leisure activities from which to choose.
- Enabling residents to manage their own time and not be dictated to by set communal timetables.
- Avoiding wherever possible treating residents as a homogeneous group.
- Respecting individual, unusual or eccentric behaviour in residents.
- Retaining maximum flexibility in the routines of the daily life of the home.

Fulfilment

We want to help our service users to realise personal aspirations and abilities in all aspects of their lives. We seek to assist this in the following ways.

- Informing ourselves as fully as each resident wishes about their individual histories and characteristics.
- Providing a range of leisure and recreational activities to suit the tastes and abilities of all residents, and to stimulate participation.
- Responding appropriately to the personal, intellectual, artistic and spiritual values and practices of every resident.
- Respecting our residents' religious, ethnic and cultural diversity.
- Helping our residents to maintain existing contacts and to make new liaisons, friendships, and personal or sexual relationships if they wish.
- Attempting always to listen and attend promptly to any resident's desire to communicate at whatever level.

Diversity

We aim to demonstrate that we welcome and celebrate the diversity of people in our community and in this home. We try to do this in the following ways.

- Positively communicating to our residents that their diverse backgrounds enhance the life of the home.
- Respecting and providing for the ethnic, cultural and religious practices of residents.
- Outlawing negatively discriminatory behaviour by staff and others.

- Accommodating individual differences without censure.
- Helping residents to celebrate events, anniversaries and festivals which are important to them.

Quality Care

We wish to provide the highest quality of care, and to do this we give priority to a number of areas relating to the operation of the home and the services we provide.

Choice of home

We recognise that every prospective resident should have the opportunity to choose a home which suits their needs and abilities. To facilitate that choice and to ensure that our residents know precisely what services we offer, we will do the following.

- Provide detailed information on the home by publishing a statement of purpose and a detailed service user guide/information about the home.
- Give each resident a contract or a statement of terms and conditions specifying the details of the relationship.
- Ensure that every prospective resident has their needs expertly assessed before a decision on admission is taken.
- Demonstrate to every person about to be admitted to the home that we are confident that we can meet their needs as assessed.
- Offer introductory visits to prospective residents and avoid unplanned admissions except in cases of emergency.

Personal and health care

We draw on expert professional guidelines for the services the home provides. In pursuit of the best possible care we will do the following.

- Produce with each resident, regularly update, and thoroughly implement a service user plan of care, based on an initial and then continuing assessment.
- Seek to meet or arrange for appropriate professionals to meet the health care needs of each resident.
- Establish and carry out careful procedures for the administration of residents' medicines.
- Take steps to safeguard residents' privacy and dignity in all aspects of the delivery of health and personal care.
- Treat with special care residents who are dying, and sensitively assist them and their relatives at the time of death.

Lifestyle

It is clear that service users may need care and help in a range of aspects of their lives.

To respond to the variety of needs and wishes of service users, we will do the following.

- Aim to provide a lifestyle for residents which satisfies their social, cultural, religious and recreational interests and needs.
- Help residents to exercise choice and control over their lives.
- Provide meals which constitute a wholesome, appealing and balanced diet in pleasing surroundings and at times convenient to residents.

Concerns, complaints and protection

Despite everything that we do to provide a secure environment, we know that residents may become dissatisfied from time to time and may even suffer abuse inside or outside the home. To tackle such problems we will do the following.

- Provide and, when necessary, operate a simple, clear and accessible complaints procedure.
- Take all necessary action to protect residents' legal rights.
- Make all possible efforts to protect residents from every sort of abuse and from the various possible abusers.

The environment

The physical environment of the home is designed for residents' convenience and comfort. In particular, we will do the following.

- Maintain the buildings and grounds in a safe condition.
- Make detailed arrangements for the communal areas of the home to be safe and comfortable.
- Supply toilet, washing and bathing facilities suitable for the residents for whom we care.
- Arrange for specialist equipment to be available to maximise residents' independence.
- Provide individual accommodation to a high standard.
- See that residents have safe, comfortable bedrooms, with their own possessions around them.

- Ensure that the premises are kept clean, hygienic and free from unpleasant odours, with systems in place to control the spread of infection.

Staffing

We are aware that the home's staff will always play a very important role in residents' welfare. To maximise this contribution, we will do the following.

- Employ staff in sufficient numbers and with the relevant mix of skills to meet residents' needs.
- Provide at all times an appropriate number of staff with qualifications in health and social care.
- Observe recruitment policies and practices which both respect equal opportunities and protect residents' safety and welfare.
- Offer our staff a range of training which is relevant to their induction, foundation experience and further development.

Management and administration

We know that the leadership of the home is critical to all its operations. To provide leadership of the quality required, we will do the following.

- Always engage as registered manager a person who is qualified, competent and experienced for the task.
- Aim for a management approach which creates an open, positive and inclusive atmosphere.
- Install and operate effective quality assurance and quality monitoring systems.
- Work to accounting and financial procedures that safeguard residents' interests.
- Offer residents appropriate assistance in the management of their personal finances.
- Supervise all staff and voluntary workers regularly and carefully.
- Keep up-to-date and accurate records on all aspects of the home and its residents.
- Ensure that the health, safety and welfare of residents and staff are promoted and protected.

The Underpinning Elements

A series of themes both cut across and underpin the aims we have relating to the rights of residents and quality care.

Focus on service users

We want everything we do in the home to be driven by the needs, abilities and aspirations of our residents, not by what staff, management or any other group would desire. We recognise how easily this focus can slip and we will remain vigilant to ensure that the facilities, resources, policies, activities and services of the home remain resident-led.

Fitness for purpose

We are committed to achieving our stated aims and objectives and we welcome the scrutiny of our service users and their representatives.

Comprehensiveness

We aim to provide a total range of care, in collaboration with all appropriate agencies, to meet the overall personal and health care needs and preferences of our residents.

Meeting assessed need

The care we provide is based on the thorough assessment of needs and the systematic and continuous planning of care for each resident.

Quality services

We are aiming for a progressive improvement in the standards of training at all levels of our staff and management.

The management's qualifications and experience

There are 2 joint managers at Lower Farm:

Tracey Catlin – Home Manager

Tracey has 21 years' experience within the care sector. Tracey was previously a registered manager for four years in a residential care home which she had worked in for 13 years overall. Tracey has her Level 2 in mental Health Awareness, NVQ level 3 in Health and Social Care and a NVQ Level 4 in Leadership and Management.

Julie Archer-Moran – RMN – Clinical Lead

Julie Archer-Moran, is a Registered Nurse Level 2 on the Professional Register. Julie has many years experience in the care home sector. Julie is also an Enrolled Nurse (M) holds a BA (Hons) in Business Management, a HNC in Business, she is an Epilepsy Nurse (N11) Specialist, Dementia Nurse Specialist, and an assessor for NVQ's and holds a Health & Safety Maintenance Technician's certificate. Julie is currently supporting the Home as Clinical Lead with a team of Registered Nurses.

The Home Manager has an open-door policy and is contactable at anytime by clients and relatives who may wish to discuss any issues with her. Tracey and Julie can be contacted via the home on 01553 671027 or 01553 670488. or by email

tracey.catlin@lowerfarmnursing.co.uk

The home's staff

The home's total staff establishment is approximately 46 who have duties involving direct care for service users. The relevant qualifications and experience of the staff are as follows:

Care staff with NVQ 2 and NVQ 3

Kitchen staff with Food Hygiene Level 2 and Level 3

Directors of Lower Farm

The registered providers of Lower Farm are Archers Healthcare Ltd. The Directors are Mrs. Julie Archer-Moran & Mr. Ravi Selliah FCMA.

Julie Archer-Moran RMN, is a Registered Nurse Level 2 on the Professional Register. Julie has many years experience in the care home sector. Julie is also an Enrolled Nurse (M) holds a BA (Hons) in Business Management, a HNC in Business, she is an Epilepsy Nurse (N11) Specialist, Dementia Nurse Specialist, and an assessor for NVQ's and holds a Health & Safety Maintenance Technician's certificate.

The organisational structure of the home

The home's operations

The team at Lower Farm is headed by the home Manager Tracey Catlin. The Clinical Lead is currently Julie Archer-Moran leads the Trained Registered Nurses, with Care & Ancillary Staff. They are In-Charge of each shift and is responsible together with the team on duty for the security, welfare and meeting the needs of individuals in their care. The Manager or Clinical Lead is on-call at all times to be contacted by staff if required. Lower Farm provides 24-hour care per day throughout the year. It runs two shifts which are from 0800 to 2000 and 2000 to 0800. We also have some shifts which are 0800 to 1400 and 1400 to 2000 Staff recruitment is undertaken by Tracey Catlin and Julie Archer-Moran as and when required. The home is fully committed to staff learning and development. Registered Nurses continue with their professional development according with their registered body the Nursing & Midwifery Council. Health Care Staff work towards their National Vocational Qualification in Care at Level 2 and 3. Healthcare staff then continue to undertake study days to keep them up to date in Health needs and patient care.

Service users accommodated

The home provides care and accommodation for older people. In particular we provide a service for End of Life, Palliative Care, Respite (short stays & convalescence)

The home is currently registered for 46 (forty-six).

The range of needs met

Lower Farm cares generally for elderly people requiring Nursing Care. We welcome people from all walks of life with many different needs; some require minimum care while others require a higher level of care. Almost everyone can be considered and they would receive the care and support consistent with their incapacities and disabilities.

Residents requiring nursing care

The home employs appropriate staff to provide nursing for any residents who need nursing and residential care.

Admissions

Under government regulations, potential residents must have their needs thoroughly assessed before entering a home; this is intended to provide each service user with the best possible information on which to make an informed choice about their future.

For potential residents who are already in touch with a social service or social work department, the initial assessment will be undertaken as part of the care management process, but we also need to assure ourselves and the service user that this particular home is suitable for them.

For potential residents who approach the home direct, appropriately trained staff will make a full assessment of need calling, with the service user's permission, on specialist advice and reports as necessary.

The assessment will cover the range of health and social needs set out in Care Quality Commission guidance. All information will be treated confidentially. The assessment process helps the home's staff to be sure that the home can meet a potential resident's requirements and to make an initial plan of the care we will provide.

We will provide prospective residents with as much information as possible about the home to help them make a decision about whether or not they want to live here. We offer the opportunity for a prospective resident to visit the home, join current residents for a meal and move in on a trial basis. Visits or a trial period extended more than one day would attract a normal charge.

We are happy for a prospective resident to involve their friends, family or other representatives in seeing the home and the care and facilities we can provide before making the final decision about admission.

If we feel the home is not suitable for a particular person we will try to give advice on how to look for help elsewhere.

If, exceptionally, an emergency admission has to be made, we will inform the new resident within 48 hours about key aspects, rules and routines of the home and carry out the full information and assessment process within five days.

Social activities, hobbies and leisure interests

We try to make it possible for our residents to live their lives as fully as possible. In particular, we do the following.

- We aim as part of the assessment process to encourage potential residents to share with us as much information as possible about their social, cultural and leisure interests, as a basis for helping them during their period of residence in the home.
- We try to help residents to continue to enjoy as wide a range of individual and group activities and interests as possible both inside and outside the home, to carry on with existing hobbies, pursuits and relationships, and to explore new avenues and experiences. All residents are entitled to use the dining room, the communal lounges, other sitting and circulating areas, and the grounds of the home, but those who wish to may remain in their own rooms whenever they like. Residents are encouraged to personalise their own rooms with small items of furniture and other possessions, and we try to follow individual preferences in matters of decoration and furnishings.
- We have an activities organiser who is on the premises during the week. We organise for outside entertainers to visit the home to mark the various occasions during the year. Our keep fit lady visits the home one a week. Professionals and other specialist within their fields visit the home regularly in meeting the needs of the patients. We hope that friendships among residents will develop and that residents will enjoy being part of a community, but there is no compulsion on a resident to join in any of the communal social activities.
- Our tranquil pond area in the back gardens is a wonderful feature. All our outdoor sitting areas have all weather wheelchair accessible routes. Charges are made for hairdressing and the supply of daily newspapers to our residents
- We recognise that food and drink play an important part in the social life of the home. We try to provide a welcoming environment in the dining room and to ensure that meals are pleasant unhurried occasions providing opportunities for social interaction as well as nourishment. As far as possible we encourage residents to choose where they sit in the dining room and meals can be served in residents' own rooms if desired. Three full meals are provided each day, there is a regularly changed menu for lunch and the evening meal, residents are always offered a choice at meals, we cater for special and therapeutic diets as advised by specialist staff and as agreed in each resident's care plan, and care staff are available to provide discreet, sensitive and individual help with eating and drinking for those needing it. Snacks and hot and cold drinks are available at all times. We aim to make all of the food and drink we provide attractive, appealing and appetising, and to mark special occasions and festivals.
- We try to ensure that the home is a real part of the local community, so in principle we encourage visitors to the home such as local councillors, members of parliament, representatives of voluntary organisations, school children and others. Naturally we respect the views of service users about whom they want to see or not to see.
- We recognise that risk-taking is a vital and often enjoyable part of life and of social activity and that some residents will wish to take certain risks despite or even because of their disability. We do not aim therefore to provide a totally risk-free environment though we take care to ensure that residents are not subjected to

unnecessary hazards. When a service user wishes to take part in any activity which could involve risk, we will carry out a thorough risk assessment with that individual, involving if they so desire a relative, friend or representative, and will agree and record action which will appropriately balance the factors involved. Such risk assessments will be regularly reviewed, with the participation of all parties, in the light of experience.

- For the benefit of all residents and staff, we have designated all the communal areas of the home as non-smoking. Residents who wish to may smoke outside the premises.
- We may make a charge associated with some social activities and services; where this applies, the details will be made clear to the service user in advance.
- Consulting service users about the way the home operates.
- We aim to give residents opportunities to participate in all aspects of life in the home. In particular, they are regularly consulted both individually and corporately about the way the home is run, and arrangements for surveys (questionnaires) of user satisfaction. Our objective is always to make the process of managing and running the home as transparent as possible, and to ensure that the home has an open, positive and inclusive atmosphere.

Consultation with residents and their representatives

We try to consult users as fully as possible about all aspects of the operation of the home and the care provided. A suggestion box is made available at one of the entrances to the home and also provide for obtaining feedback on the services provided such as anonymous user satisfaction questionnaires,

Fire precautions, associated emergency procedures and safe working practices

All residents are made aware of the action to be taken in the event of a fire or other emergency, and copies of the home's fire safety policy and procedures are made available in individual room and communal areas.

The home conforms to all relevant government guidance on promoting and protecting the health, safety and welfare of service users and staff.

Arrangements for religious observances

Residents who wish to practise their religion will be given every possible help and facility. In particular we will do the following.

- We will try to arrange transport for residents to any local place of worship if required.
- If asked to we will make contact with any local place of worship on a service user's behalf. We can usually arrange for a minister or a member of the relevant congregation to visit a service user who would like this.

- In the public areas of the home we celebrate the major annual Christian festivals. Residents have the opportunity to participate or not as they wish.
- Particular care will be taken to try to meet the needs of residents from minority faiths. These should be discussed with the manager before admission.

Relatives, friends and representatives

- Residents are given every possible help to maintain the links they wish to retain with their families and friends outside the home, but can choose whom they see and when and where.
- If a resident wish, their friends and relatives are welcome to visit at any time convenient to the resident and to become involved in daily routines and activities. Normally we would request that visiting at meal times is avoided. If a resident wishes to be represented in any dealings with the home by a nominated friend, relative, professional person or advocate, we will respect their wishes and offer all necessary facilities.

Concerns and complaints

The management and staff of the home aim to listen to and act on the views and concerns of residents and their representatives and to encourage discussion and action on issues raised before they develop into problems and formal complaints. We therefore welcome comments and suggestions from service users and their representatives, friends and relatives. Positive comments help us to build on our successes, but we can also learn from comments which are critical. We undertake to look into all comments or complaints as quickly as possible and to provide a satisfactory response.

Anyone who feels dissatisfied with any aspect of the home should, if possible, raise the matter in the first instance with a responsible member of staff. It may be that the staff member can take immediate action to respond, and if appropriate apologise. If the complainant feels uncomfortable about raising the behaviour of a particular member of staff with the individual directly, they should approach someone more senior. Any staff member receiving a complaint about themselves or a colleague will try to sort out the matter as quickly as possible.

If anyone who is dissatisfied with any aspect of the home feels that when they raised the matter informally it was not dealt with to their satisfaction or they are not comfortable with the idea of dealing with the matter on an informal basis, they should inform the manager of the home that they wish to make a formal complaint. The manager will then make arrangements to handle the complaint personally or will nominate a senior person for this task.

The person who is handling the complaint will interview the complainant and will either set down the details in writing or provide the complainant with a form for them to do so. The written record of a complaint must be signed by the complainant, who will be provided with a copy, together with a written acknowledgement that the complaint is being processed, outlining the timescale for responding. The complainant will be informed of their right at any

stage to pursue the matter with the Care Quality Commission and will be given details of how the Care Quality Commission can be contacted.

The person handling the complaint will then investigate the matter, interviewing any appropriate staff. If it is necessary to interview other service users or anyone else, the complainant's permission will be sought. Complaints will be dealt with confidentially and only those who have a need to know will be informed about the complaint or the investigation. The investigation will be completed within 28 days unless there are exceptional circumstances, which will be explained to the complainant. As soon as possible the person investigating the complaint will report back to the complainant, explaining what they have found and providing them with a written copy of their report.

The person who investigates a complaint will initiate any action which needs to be taken in response to their findings, will inform the complainant about any action, and will apologise or arrange for an apology if that is appropriate. We hope that this will satisfy the complainant and end the matter. If the complainant is satisfied, they will be asked to sign a copy of the report of the investigation and the action taken.

If a complainant is not satisfied with the investigation or the action taken, they will be informed of their right to pursue the matter with the Care Quality Commission. The address to write to: -

CARE QUALITY COMMISSION
CITYGATE - GALLOWGATE
NEWCASTLE UPON TYNE
NE1 4PA

TELEPHONE NO: 03000 616161
FAX NO: 03000 616172

WEB ADDRESS: www.cqc.org.uk
EMAIL ADDRESS: enquiries@cqc.org.uk

Service user plan of care

At the time of a new resident's admission to the home, we work with the service user, and their friend, relative or representative if appropriate, to draw up a written plan of the care we will aim to provide. The plan sets out objectives for the care and how we hope to achieve those objectives, and incorporates any necessary risk assessments.

Once a month, we review each person's plan together, setting out whatever changes have occurred and need to occur in future. From time to time further assessments of elements of the person's needs are required to ensure that the care we are providing is relevant to helping the resident achieve their full potential.

Every resident has access to their plan and is encouraged to participate as fully as possible in the care planning process.

Rooms in the home

The home has 46 bedrooms for residents letting rooms of which all are for single occupation. The residents' private rooms range from 9.9mt sq to 18mt sq. The old section of the home has the small room dimensions with further extensions ensuring the bedrooms met with the current requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2012.

Bedroom No & (Sizes)

Bedroom 01 - 17.64 m2	Bedroom 25 - 15.25 m2
Bedroom 02 - 10.03 m2	Bedroom 26 - 14.55 m2
Bedroom 03 - 10.03 m2	Bedroom 27 - 14.55 m2
Bedroom 04 - 10.03 m2	Bedroom 28 - 15.73 m2
Bedroom 05 - 10.03 m2	Bedroom 29 - 18.00 m2
Bedroom 06 - 10.03 m2	Bedroom 30 - 13.00 m2
Bedroom 07 - 10.03 m2	Bedroom 31 - 15.12 m2
Bedroom 08 - 10.03 m2	Bedroom 32 - 15.12 m2
Bedroom 09 - 10.03 m2	Bedroom 33 - 14.53 m2
Bedroom 10 - 10.03 m2	Bedroom 34 - 15.73 m2
Bedroom 11 - 10.03 m2	Bedroom 35 - 13.44 m2
Bedroom 12 - 10.03 m2	Bedroom 36 - 14.55 m2
Bedroom 14 - 17.86 m2	Bedroom 37 - 13.44 m2
Bedroom 15 - 18.42 m2	Bedroom 38 - 14.53 m2
Bedroom 16 - 17.71 m2	Bedroom 39 - 14.00 m2
Bedroom 17 - 10.03 m2	Bedroom 40 - 14.30 m2
Bedroom 18 - 09.90 m2	Bedroom 41 - 15.44 m2
Bedroom 19 - 19.18 m2	Bedroom 42 - 13.65 m2
Bedroom 20 - 09.90 m2	Bedroom 43 - 12.42 m2
Bedroom 21 - 10.53 m2	Bedroom 44 - 15.78 m2
Bedroom 22 - 11.23 m2	Bedroom 45 - 12.80 m2
Bedroom 23 - 09.90 m2	Bedroom 46 - 17.16 m2
Bedroom 24 - 10.71 m2	Bedroom 47 - 15.06 m2

The rooms in the home for communal use are as follows:

1 st Floor Lounge - 15.51 m2	Lounge 1 - 37.44 m2
Conservatory - 15.36 m2	Lounge 2 - 30.08 m2
Dining Room 1 - 51.18 m2	Lounge 3 - 26.80 m2
Dining Room 2 - 27.59 m2	

Furthermore, we have got 5 (five) bathrooms plus 1 "Push in" Shower room located in different areas of the home designed to assist the staff in managing with the needs of the residents. All areas of the home have got communal toilets for the use of relatives/visitors and designated ones for use by the residents.

In addition, there are some areas of the home which are generally for staff use only as follows:

There are two staff rooms with kitchen facilities and designated toilet areas for their specific use. In addition, there is a further kitchen adjacent to the Nurses' station on the ground floor.

In addition to the main office, area within the home is available for the use of visiting domiciliary & multi-disciplinary teams. The Nurse in-charge has access to an office adjacent to the general nursing area.

Privacy and dignity

The home places a high value on respecting the privacy and dignity of the people who live here. The detailed measures we take are set out in the paragraphs headed respectively Privacy and Dignity at the beginning of this document.

Review of this document

We keep this document under regular review and we would welcome any comments.