

In Compliance with:

**Health and Social Care Act 2008 (Regulated Activities) Regulations 2010
Care Quality Commission (Registration) Regulations 2009 Regulation 12
and Schedule 3**

Statement of Purpose

BOWLACRE HOME

Bowlacre Home , Elson Drive, Stockport Road, Hyde, SK14 5EZ

Registered Manager:

Mrs Janette Frances Wilson

Bowlacre Home is an Industrial & Provident society with charitable aims

Registered under the Industrial & Provident Societies Act 1982

Model H12 1975 rules. Reg No 14738 Cheshire

REQUIREMENTS OF THE HEALTH AND SOCIAL CARE ACT 2008 (REGULATED ACTIVITIES) REGULATIONS, AND REGULATION 12 AND SCHEDULE 3 CARE QUALITY COMMISSION (REGISTRATION) REGULATIONS 2009

The Care Home must provide each resident with a written “Statement of Purpose”.

It must:

- It must comply with Regulation 12 and Schedule 3 of the Care Quality Commission (Registration) Regulations 2009 and include all the information stated in Schedule 3 of those Regulations.
- Clearly set out what it is that the Home aims to achieve and the values that underpin the objectives.
- Defines those people for whom the Home will provide care.
- State what facilities and services the Home is able to provide for residents.
- Confirm that the accommodation provided is suitably proportioned and fit for the use of the resident.
- Demonstrate that the management systems in use are suitable and effective in promoting quality care and takes into account the views, opinions and needs of the resident.

PLEASE NOTE; If you require this document in another language or format (large print, Braille, Audio) please ask at the care office and arrangements will be made.

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STATEMENT OF PURPOSE

MISSION STATEMENT

**‘TO BE THE BEST RESIDENTIAL HOME IN THE GREATER MANCHESTER AREA WHERE EVERY ONE FEELS AT HOME’
The home has the welfare and the well being of the residents as its prime objective.**

The committee is the controlling influence on the running of the organisation and is the final decision point and is run under an open management principle. The committee’s decision is final. Minutes of meetings are available for public scrutiny. The committee is bound by the rules and regulations of the industrial & friendly society’s charter.

However in order to achieve our objective we need to be an ‘employer of choice’ in order to attract the staff of the calibre required to maintain these objectives. We are open with the staff and will provide them with a forum to discuss their ideas and any problems that they may have.

The day to day running of the home in respect of residents and staff is the responsibility of the ‘care manager’ who will refer to the ‘responsible person’ if necessary for advice & guidance. In this respect we endeavour to be an equal opportunity employer and, where necessary, to provide the training required for our staff. The home has a clearly stated ethical policy with clear and simple principles of resolving any issues.

We will keep everyone in the news by having a website (www.bowlacre.org)

Introduction

The contents of this Statement of Purpose have been produced to meet the requirements of Schedule 3 – Care Quality Commission (Registration) Regulations 2009. It sets out:

- The mission of the Home
- Aims and objectives of the Home
- The quality policy of the Home
- The range of needs intended to be met
- Accommodation
- Qualifications and experience of staff
- Required statutory information
- The rights of residents

1.0 A DESCRIPTION OF THE CARE HOME AND THE PHYSICAL ENVIRONMENT

Bowlacre Home is situated off Stockport Road in Hyde and is a licensed residential care home. It is close to Gee Cross Village with all its amenities- shops, restaurants etc.

It is on the main 330 bus route from Hyde to Stockport.

Bowlacre Home stands in its own grounds along with flats and bungalows which are rented to elderly tenants & owned by the business.

The landscaped gardens are a significant factor in making Bowlacre the Home that it is. The gardens are maintained to an extremely high standard; a sensory garden also provides fresh produce for the kitchen. Accommodation at Bowlacre is 36 bedrooms most of which have en-suite toilets. We have a large dining room, 2 lounges, and a conservatory. All rooms are double glazed. The bedrooms are on two levels; we have 2 lifts to access the upper floor. All rooms are fully furnished but residents can bring small items of their own furniture to personalize their room if they wish to do so.

The home has an approved fire detection & warning system & a nurse call system in all rooms.

All areas of the home are cleaned regularly by our own household staff with consideration to all the infection control requirements.

Bowlacre is centrally heated and extra heaters are provided for bedrooms if required.

Bowlacre home is a no smoking environment and Residents are not allowed to smoke in bedrooms or other areas of the home. The home is no smoking for staff & visitors; the rear garden has designated areas for day & darkness smoking.

We have all the required equipment such as hoists and bath lifts which are kept to the standards required. Wheel chairs and frames are provided for each individual requiring the use of one as assessed by the Occupational Therapist

2.0 AIMS AND OBJECTIVES OF THE HOME

To provide personal care to 37 elderly people, of both sexes, over the age of 65 generally in long term care but occasionally for respite purposes. To foster an atmosphere of care and support which both enables and encourages our residents to live as full, interesting and independent a lifestyle as possible with rules and regulations being kept to a minimum.

3.0 OUR POLICIES FOR QUALITY AND EVALUATION**3.1 OUR QUALITY POLICY**

Bowlacre Home is committed to providing quality services for residents by caring, competent, well trained staff in a homely atmosphere.

This will be achieved by:

- a. Staff development programme.
- b. Recruitment of staff who share our values and will create a homely atmosphere.
- c. Providing such resources as may be required to ensure that training takes place and is effective.

Our Home will provide services based upon consultation and assessment of the residents' needs.

This will be achieved by:

- a. Listening to staff, residents and others with an interest in the Home.
- b. Ensuring that assessments are made which balance risks and needs.
- c. Promoting a level of responsible risk-taking in daily living activity.
- d. The operation of an effective care planning system.

Our Home will involve residents in the planning and review of the services that are provided for them to ensure that their needs are met.

This will be achieved by:

- a. Enabling and empowering residents to influence the services provided in the Home by giving each resident a real say in how services are delivered.
- b. Encouraging residents to become involved in all decisions which are likely to affect them, either now or in the longer term.

Our Home will consult people about their satisfaction with the service and suggestions for improvement.

This will be achieved by:

- a. Residents' consultation and satisfaction surveys.
- b. Residents' and staff meetings.
- c. Management review of our Quality Management System.

Our Home will provide catering services which meet the expectations of residents.

This will be achieved by:

- a. Planned, structured menus which include residents' wishes, choices and preferences.
- b. Menus which are nutritionally balanced in the view of a qualified dietician.
- c. Menus which allow residents to change their food choices.

Our Home will ensure that residents are fully informed about all matters which might affect their well-being.

This will be achieved by:

- a. Residents' meetings.
- b. Keyworker support.
- c. Provision of notice boards or other displays which inform residents.

Our Home will afford all residents and staff an equality of opportunity in respect of living or working in the Home.

This will be achieved by:

- a. An Equal Opportunities Policy.

Our Home will ensure that the Home is a safe and secure place to live.

This will be achieved by:

- a. Ensuring that the physical environment meets all Health and Safety standards.
- b. Providing each resident with their own front door key if requested.
- c. Providing each resident with a safe and secure place to store their valuables.
- d. Ensuring that policies and procedures are in place to safeguard our residents from any form of abuse and these are maintained and audited on a regular basis for compliance and effectiveness.

Our Home will offer a range of social activities which meet the needs of the residents.

This will be achieved by:

- a. Ensuring that activities are offered to each resident which are appropriate to their needs, abilities or expressed wishes.
- b. Ensuring that the Home considers their social, spiritual, cultural, emotional and physical needs in the services it offers to residents.
- c. Ensuring that residents feel comfortable to decline any or all of the activities offered by the Home.

3.2 EVALUATION AND MONITORING

Regulation 12 and Schedule 3 of the Care Quality Commission (Registration) Regulations 2009 states:

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

3.3 IMPROVEMENT PLAN

- (1) If requested to do so by the Care Quality Commission, the registered person shall produce a plan (the Improvement Plan) setting out the methods by which, and the timetable to which, the registered person intends to improve the services provided in the care home.
- (2) The registered person shall provide a written copy of the Improvement Plan to the Commission within the agreed timescale.
- (3) A copy of the Plan shall be made available to service users and their representatives.

(4) The improvement plan must meet the SMART principle:
Specific, Measurable, Achievable, Relevant, Time bound.

4.0 RESIDENT'S RIGHTS

- The right to be called by the name of your choice.
- The right to care for yourself as far as you are able.
- The right to take personal responsibility for your own actions and expect all staff to accept that a degree of risk is involved.
- The right to personal privacy at all times and a right to lock your own room door.
- The right to invite whoever you choose into your room.
- The right to independence.
- The right to have your dignity respected and to be treated as an individual.
- The right to receive an anti-discriminatory service which is responsive to your race, religion, culture, language, gender, sexuality, disability and age.
- The right to live your chosen lifestyle.
- The right of access to your own personal records and information relating to decisions made with all staff that affect your life, and where necessary to be assisted with this.
- The right to take an active part in any decisions about daily living arrangements that affect your life.
- The right of access to outside agencies of your choice e.g. doctor, optician, chiropodist etc., and where necessary to be assisted with this.
- The right to look after your own medicines.
- The right to control your own finances, if you are able to do so.
- The right to make personal life choices such as what food you eat and what time you get up and go to bed.
- The right to be involved in your own care plan and be involved in any formal reviews of your needs, which take place at regular intervals.
- The right to access a formal complaints procedure and to be represented by a friend, relative or adviser if necessary.
- The right to participate in voting at elections.

5.0 FACILITIES AND SERVICES

5.1 Meals

Your meals will be carefully prepared by our fully qualified catering staff, in consultation with a nutritionist; meals are as interesting and varied as possible. Residents are offered choices each day and special diets including kosher and vegetarian will be catered for.

Choices are available at all meal times. The day usually begins with an early morning cup of tea followed by full English or Continental breakfast, mid-morning tea/coffee and biscuits, 2 course lunch, mid-afternoon tea/coffee and cakes, 2 course evening meal and night time drinks and supper snacks.

All meals, snacks, supplements and drinks are provided within the fees for service. Special diets are catered for and advice of the dietician is sought where necessary. Limited quantities of alcohol are offered at special occasions.

Whilst every effort is made to provide for individual residents preferences the Home does not provide an 'a la carte menu'.

5.2 Medical Care - Qualified Nursing and Care Staff

Staff are always on duty to plan and supervise resident's care, ensuring the highest standards at all times. GP's are called as required; residents may of course retain their own Doctor if this is practical. Community nurses and primary care team staff will visit residential care residents as appropriate.

5.3 An Optician and Dentist visit regularly although you can make outside appointments if you prefer.

5.4 Physiotherapy can be arranged as necessary.

5.5 Chiropody - A private chiropodist visits the Home regularly and is charged for separately.

5.6 Hairdressing can be provided, at an additional charge, in our fully equipped salon by our hairdresser who visits weekly or by your own hairdresser by arrangement although you are free to go out to a hairdresser if you wish.

5.7 Personal Telephones – Phone and fax numbers & contact details are as detailed in Appendix G ‘The Organisation’

Incoming calls can be taken to the resident, subject to availability of the handset, on the Home’s hands free phone using one of the numbers listed. Residents having personal mobile phones are acceptable within the Home. Residents who want a direct dial telephone in their room can have one installed at their own expense.

5.8 Administration Support is available to the Home and residents who may require a letter to be typed can avail themselves of this service.

5.9 Benefits Advice can be provided via the Manager / Home’s Administrator. Information can be obtained about Pension and Social Security Benefits.

5.10 Shopping - Where appropriate we encourage residents to go shopping on their own, with relatives or a staff member. Where this is difficult staff can assist residents by purchasing goods on their behalf within the necessary safeguards of our Personal Finance Policy and Procedure.

5.11 Laundry is undertaken within the Home within the normal fees for service. The laundry equipment meets the 1998 Water Regulations.

The Home expects all personal clothing to be labelled and cannot be held responsible for any loss of items not so marked. There are no facilities for residents to do their own laundry.

5.12 Dry Cleaning can be provided at cost plus a service charge and arranged through the manager.

5.13 Kitchen Facilities are built to the standards laid down by the Environmental Health Department.

The Kitchen is managed by the chef.

These facilities are not accessible to residents owing to Health & Safety and Food Hygiene Regulations.

Residents can avail themselves of drinks and snacks at most times by requesting these from care staff.

After a risk assessment, which is reviewed regularly, residents may be allowed to have a kettle and tea/coffee making facilities in their rooms.

6.0 OTHER SERVICES

6.1 Resident’s Property

The Home will not accept any liability whatsoever for loss of or damage to any money or other valuable property kept (or said to be kept) by the Resident in or about the Home unless such money or property shall have been:

- Identified to the Home in writing with a current written valuation.
- Deposited within the Home’s safe for safekeeping.

PROVIDED THAT in the case of money liability will not be accepted unless the money is deposited with the Home for safekeeping and in no event whatsoever for sum exceeding £500 (of which not more than £50 may be other than deposited with the Home for safekeeping) and in the case of all other property the Home's liability in respect of any item shall not exceed £500. For items above £500 the individual resident is solely responsible for a separate insurance policy to cover that risk. A more detailed position on valuables is outlined in the Service Users Guide.

6.2 Gifts and Signing Legal Documents

The Home's employees or staff are not permitted to accept any gifts, and/or presents from residents or to sign as a witness any legal document which pertains to one of the residents in the Home.

6.3 Arrangements for Pets

The Home recognises the therapeutic and emotional benefits that pet ownership can bring to residents and will as far as practical try to accommodate the wishes of the residents.

The Home takes a positive approach to the responsible ownership of pets. The manager will consider each request by an existing or prospective resident for pet ownership within the Home. The manager of the home is responsible for all decisions to accept a pet into the Home and their decision is final. The manager of the home is responsible for any pets owned by the home. The Home will ensure that in a case where the resident gives up a pet or the pet dies, a network of support will be put in place to help the resident to cope with their loss.

7.0 NAME AND ADDRESS OF THE REGISTERED PROVIDER AND HOME MANAGER

See Appendix G for details.

8.0 QUALIFICATIONS AND EXPERIENCE OF THE HOME MANAGER AND REGISTERED PROVIDER

See Appendix G for details

9.0 NUMBER, QUALIFICATIONS AND EXPERIENCE OF STAFF

See appendix C for details

10.0 ORGANISATIONAL STRUCTURE OF THE HOME

See Appendix G for details.

11.0 AGE RANGE AND SEX OF RESIDENTS

Our Home provides long term care services for 37 people aged over 65 years for both male and female clients. We also provide respite care if rooms are available. All accommodation is provided in single rooms, each of which most are en – suite; see appendix F, room details. Current residents profile as in Appendix D.

12.0 RANGE OF NEEDS THAT THE HOME IS INTENDED TO MEET

Our Home provides services in the following categories: Care Home providing personal care

Our Home provides services to the following categories of resident:

Dementia

Physical Disability

Old Age (not falling within any of the categories above)

13.0 NURSING CARE PROVISION

Our Home does not provide nursing care for residents in the Home. This means that we are not required to staff our Home in accordance with Regulation 18 (3) – Care Homes Regulations 2001 in respect of ensuring that at all times a suitably qualified registered nurse is working in the Home.”

14.0 ADMISSION CRITERIA, INCLUDING EMERGENCY ADMISSIONS

Our Home’s admission criteria are set out in the Cared 4 Quality Management System Procedures:

SD-01 Admission Enquiries for Care Homes.

SD-02 Admission to the Home and associated forms.

15.0 SOCIAL ACTIVITIES, HOBBIES AND LEISURE INTERESTS

Our Home is able to provide a variety of ways that residents can engage in the enjoyment of social activities, hobbies and leisure interests. Residents are consulted individually in relation to their interests and wishes regarding social activities as part of the Service User Planning process and at regular residents meetings. The Home employs an activity organiser. The range of activities available are set out below:

- Bingo
- TV , Video players and DVD are available in 2 lounges
- There is a wide range of music available.
- We have a piano for any one who has those skills
- Dominoes
- Skittles
- We have a selection of musicians and entertainers who visit regularly and perform all the resident’s favourite golden oldies.
- Our extensive & well kept gardens along with our sensory garden are available for everyone’s enjoyment including outdoor furniture. Our rural setting gives some wonderful natural views of our surrounding country side & wild life.

The following procedures also relate to how activities are organised in the Home. These are set out in the Cared 4 Quality Management System Procedures Manual:

MA-18 Gaming, Gambling and Lotteries

SD-11 Amenities Fund

SD-23 Terrestrial, Satellite and Cable Television

SD-24 Pets

PC-09 Interests and Activities

16.0 ARRANGEMENTS FOR RESIDENT CONSULTATION ABOUT THE HOME

Our Home is committed to ensuring that residents are fully consulted about matters which are significant in the running of the Home or about matters which might affect their well being or quality of life. We have a residents committee and the management and staff are available to listen to the views of residents.

The Cared 4 Quality Management System used in the Home includes policies and procedures which try to ensure that effective consultation takes place. These policies and procedures include:

- SD-12 Residents' Committees
- SD-16 Comments, Suggestions and Complaints
- CI-03 Management Review of the Quality System
- CI-04 Quality Review Group
- CI-05 Internal Audits of the Quality System
- CI-08 Residents' / Relatives' Satisfaction Surveys
- QP-10 Resident's Charter of Rights

17.0 FIRE PRECAUTIONS AND EMERGENCY PROCEDURES IN THE HOME

Our Home's fire precautions have been designed with advice from the Fire Officer and to date all recommendations are implemented following the annual Fire Officer's visit. However, whilst every attempt has been taken to minimise risk of fire there can be no guarantee of safety. The Home undertakes regular fire drills and reviews of procedures. The Home operates a separate FIRE PROCEDURE FILE which includes records of fire drills, alarm tests and records of staff training.

All staff are provided with information about the fire procedure at induction. All staff are required to attend annual up-date lectures on fire procedures and use of fire equipment.

Our Home has implemented the Cared 4 Quality Management System which requires the production of emergency policies, procedures and other such arrangements as may be required in situations which may arise. The relevant documents are listed below:

- QP-03 Fire Policy
- SD-22 Emergency Planning
- MA-02 Accident and Incident Reporting
- SD-21 Missing Resident Procedure

18.0 ARRANGEMENTS FOR RESIDENTS TO ATTEND RELIGIOUS SERVICES

Our Home takes all reasonable steps to ensure that each resident's wishes are known and understood in relation to the practice of their chosen religion. Where requested, we will observe and ensure confidentiality in respect of religious belief or alternatively we will take such steps as may be necessary to enable residents to attend religious services or access religious leaders, ministers or priests in private. Our Home operates the Cared 4 Quality Management System that contains the following relevant procedures:

- MA-15 Confidentiality and Access to Records
- QP-10 Resident's Charter of Rights
- QP-06 Home Equal Opportunities Policy
- SD-03 Assessment and Care Planning
- PC-10 Religion

19.0 ARRANGEMENTS FOR MAINTAINING CONTACT WITH RELATIVES, FRIENDS AND REPRESENTATIVES

Our Home actively encourages residents to maintain all forms of social contact that they enjoyed before moving into our Home. We will assist residents to maintain contact if requested.

Our Home is looked upon as a resident's Home and hence, subject to the resident's wishes, visitors are, within reason, generally welcome at any time. Normal visiting is encouraged between: 09:00 and 21:00 All visitors are requested to enter their details in the 'Visitors Book' and to sign out on departure.

Visitors will be made aware that this is to comply with Health & Safety legislation and Fire Regulations.

Residents can usually receive visitors in their own room or in one of the lounges or, outside meal times, in the dining room.

Visitors wishing to take residents off the premises should speak to the Senior Member of Staff or Senior Nurse on duty first to ensure that any medication can be provided and that the trip out is within the capacity of the resident. This needs noting in the Visitors Book on departure and return.

Relatives and friends are encouraged to attend social events such as resident's Christmas Party, Summer Fair, entertainment evenings etc.

The Cared 4 Quality Management System contains procedures which demonstrate this. These are shown below:

SD-09 Advocacy

SD-20 Visitors to the Home

20.0 ARRANGEMENTS FOR DEALING WITH COMPLAINTS

Our Home welcomes any Comments, Concerns or Complaints about the services delivered or how to improve the running of the Home. Complaints or Concerns about the service provided within any Home will be treated seriously

If a resident or relative requires help to make a complaint then they should be afforded advice about potential advocates

Our Home has implemented the Cared 4 Quality Management System which includes comprehensive arrangements for dealing with Comments, Suggestions and Complaints as detailed below:

QP-01 Comments, Suggestions and Complaints Policy

MA-15 Confidentiality and Access to Records

SD-16 Comments, Suggestions and Complaints

21.0 ARRANGEMENTS FOR REVIEWING SERVICE USERS' PLANS

Our Home operates a full service user planning and review system as contained in the Cared 4 Quality Management System Resident's Care Plan (Service User Plan) used in the Home. The procedures and documentation relevant to this process are shown below:

C4-079 Resident's Care Plan (Service User Plan)

SD-02 Admission to the Home

SD-03 Assessment and Care Planning (Service User Planning)

22.0 ROOM SIZES AND NUMBERS IN THE HOME

See Appendix F for details

23.0 THERAPEUTIC TECHNIQUES USED IN THE HOME AND ARRANGEMENTS FOR THEIR SUPERVISION

These are not normally available; private arrangements can be made with qualified providers.

24.0 ARRANGEMENTS FOR RESPECTING PRIVACY AND DIGNITY

All staff are instructed, as part of their induction, to respect residents and preserve their dignity at all times.

Arrangements for ensuring that our residents are treated with respect and dignity are clearly shown in all our policies, procedures and actions.

The Cared 4 Quality Management System which clearly demonstrates our commitment to privacy and dignity contains the following relevant procedures:

QP-10 Resident's Charter of Rights

The Homes' Quality Policy see Cared 4 Quality Manual Section No. 4 page 3-5.

25.0 ENSURING THE STATEMENT OF PURPOSE CONTINUES TO MEET REQUIREMENTS

We will continually keep our Statement of Purpose under review and make revisions where appropriate as required by section 12 (2) of the Care Quality Commission (Registration) Regulations 2009.

26.0 THE CARE QUALITY COMMISSION

This is a National body which regulates the conduct of Care Homes in England. Our Home is part of the North West Region and the Care Quality Commission Offices contact details are as in Appendix E.

APPENDICES**Appendix A Current Fees** 1/6/2016

As of 1/04/2016 the fee agreed with Tameside is £432.19 per week for a standard room. There is no top up fee for council supported residents.

Fees for private individuals are £540.00 per week.

Appendix B Current charges. 1/6/2016

Hair dresser (Shirley Ewbank) prices are men's trim £5:00, ladies shampoo & set £8:50 *other charges by agreement.*

Chiropodist (Mrs Booth) charges £12:50

Newspapers & Magazines are charged at newsagent's cost including delivery.

Visitors & staff meals are £2:50 main course; starter or sweet £1:00 (2010).

Dry Cleaning is charged at cost plus staff costs for collection and transport costs.

Administration assistance charged at cost based on staff hourly rates.

Escort duty for appointments at hospital, clinic, doctors etc is based on the cost of providing the service which depends on the member of staff, number of hours away from the home and could also attract premium rates depending on days etc and could involve third party costs (taxi or other transport). You will be advised of these at the time of making such arrangements.

The above may be subject to an administration charge of £1:00 per transaction.

Appendix C Staffing summary As of 1/6/2016

Care team leaders are Mr. Eddie Woods (NVQ4, LMA), Miss Sharon Shields (NVQ4), & Mrs Pat Taylor (Nvq4). Night team leaders are Mrs Cheryl Little (NVQ3) & Miss Francine Little (NVQ3).

There are 21 carers; 8 of whom have NVQ3, 12 have NVQ2 and 1 carer doing her NVQ2.

There are then a further 9 support staff including domestics, chef, kitchen staff and a handyman; 1 of these has an nvq2.

Appendix D No of and Age range of residents 1/6/2016

We currently have 12 men ranging from age 77 to 99

& 15 ladies from 74 to 104. The overall average age is 89

Appendix E Contact details for CQC 1/6/2016

CQC Citygate, Gallowagate, Newcastle On Tyne, NE1 4PA; telephone: 03000 616161, or E- Mail: enquiries.northwest@cqc.org.uk

Appendix F Room Sizes 1/6/2016

Room no	Size	En- suite
1	11.34	1
2	9.55	1
3	9.55	1
4	9.73	1
5	9.73	1
6	9.69	1
7	9.62	1
8	10.58	X
9	10.58	X
10 A	17.38	1
10 B	14.72	1
11	13.55	1
12 A	13.93	1
12 B	13.93	1
14	13.93	1
15	13.99	1
16	13.99	1

17 A	13.99	1
17	17.12	X
18	18.00	1
19	9.32	1
20	10.50	1
21 A	9.48	1
21 B	14.74	1
22	15.50	1
23	14.06	1
24	13.00	1
25	12.51	1
26	10.50	1
27	9.72	1
28	9.50	1
30	13.68	1
34	19.32	1
35	15.17	1
36	15.05	1
37	10.00	1

Appendix G Registered Manager , Provider, Organisation details 1/6/2016

Contact Details: Care office tel 0161 368 2615, fax 0161 368 6015, E-mail care@bowlacre.org.

Admin Office tel 0161 368 8481, E-mail info@bowlacre.org

Website www.bowlacre.org

Residents E-mail residents@bowlacre.org

Registered Manager:

Manager : Mrs Janette Frances Wilson

Mrs Wilson has NVQ4, RMA, NVQ diploma 5.

Approved by CSCI in January 2007.

She has 12 years experience in care with the last 7 as manager.

Registered provider

Bowlacre Home is an Industrial & Provident society with charitable aims

Registered under the Industrial & Provident Societies Act 1982 Reg No 14738 Cheshire. The society is managed by a voluntary committee under the articles of association of an 'Industrial & Provident Society'. This was established in 1956 by the Lord Mayor of Hyde and has been in continuous operation since then. Along with the residential care home Bowlacre Home owns 12 housing units which are rented to elderly people capable of 'independent living' which are situated in the grounds of the home.

The registered address is 'Bowlacre Home, Elson Drive, Stockport Road, Hyde, SK14 5EZ'

The chairman, Mr Robert W Smith is also the 'Responsible Person' and again approved by the CSCI in 2004.

Appendix H Version control

1/6/2016 Version sp4 Minor changes to appendices.

1/4/2014 Version sp3 Minor updates especially appendices with costs / personnel etc

5/12/2011 Version sp2 Update Appendices – costs, people etc

1/9/2010 Version sp1 Complete re-issue in new format