

Statement of Purpose

Regulation 3. Conditions of registration: general of the Regulation of Care (Standards and Requirements) (Jersey) Regulations 2018, requires providers to submit a Statement of Purpose for each service within an organisation. Please submit this form as part of your registration application or upon request by the Care Commission (if registration has transferred). You must inform the Care Commission of any changes to your Statement of Purpose within 28 days.

1. Provider information			
Name	<i>Methodist Homes for the Aged: STUART COURT</i>		
Address of Provider	<i>La Rue De Haut, St Lawrence. JE3 1JQ</i>		
Legal status of service	<i>Registered Charity No 65</i>		
2. Service information			
Service type	Care Home (adults)	<input checked="" type="checkbox"/>	
	Care Home (children/young people)	<input type="checkbox"/>	
	Day Care	<input type="checkbox"/>	
	Home Care	<input type="checkbox"/>	
Name of Service	<i>Stuart Court Residential Home</i>		
Address of Service	<i>La Rue De Haut, St Lawrence. JE3 1JQ</i>		
Manager of the service	<i>Elaine Jackson</i>		
Location of the service	<i>Stuart Court is situated in a central Island position in a semi-rural location close to a supermarket, on good bus route and near a large park. Stuart Court has two very large well-maintained gardens with uninterrupted views of St Aubin's Bay.</i>		
3. Categories of Care Provided			
Old age	<input checked="" type="checkbox"/>	Substance misuse (drugs and/or alcohol)	<input type="checkbox"/>
Dementia care	<input type="checkbox"/>	Homelessness	<input type="checkbox"/>

Physical disability	<input type="checkbox"/>	Domestic violence	<input type="checkbox"/>
Learning disability	<input type="checkbox"/>	Children (under 18)	<input type="checkbox"/>
Autism	<input type="checkbox"/>	Other (please specify)	<input type="checkbox"/>
Mental Health	<input type="checkbox"/>		
Age ranges:	Over 60 years		
Types of Care	Nursing care Personal care Personal support	<input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<i>Refer to definitions in Regulation of Care (Jersey) Law 2014</i>
4a. Accommodation Services			
Total number of beds	25 rooms for long term stay and 2 rooms for short term/respice stay.		
Total number of bedrooms	27		
Number of nursing care beds	NA		
Number of personal care/support beds	27		
4b. Home care services			
Size of home care service	Small (less than 112 care hours per week)	<input type="checkbox"/>	
	Medium (112-600 care hours per week)	<input type="checkbox"/>	
	Medium plus (600-2250 care hours per week)	<input checked="" type="checkbox"/>	
	Large (2250 + hours per week)	<input type="checkbox"/>	
4c. Day Care Services			
Maximum number of people using the service at one time	27		
5. Aims and objectives of the service			
<p>Our aim at Methodist homes for the aged is to provide excellent residential care for the older person aged 60 plus, inspired by our Christian concern, while at the same time continuing to support and promote their independence. To assist residents to live in a home from home environment, whilst empowering them to make their own choices.</p> <p>Stuart Court is a charitable residential home, overseen by a voluntary board of directors, we are non-discriminatory and shall serve all residents regardless of</p>			

race, nationality, language, religion or beliefs, sexual orientation, or social standing, nor is there any discrimination made between residents who pay directly for the service and those who do not.

Our objective is the provision of a high-quality professional organisation that is committed to assisting the resident to maintain his/her quality of life. Our friendly experienced staff pride themselves on the care they give. Our home is well established and aims to provide a wide range of activities within a safe environment. We aim to safeguard the privacy and confidentiality of the resident, and to maintain their independence. To give the residents informed choices and an opportunity to enjoy and contribute to society.

6. Range of Care Needs Supported

Stuart Court provides care and support to 27 residents who require residential care and support over 60 years old.

Residents are admitted based on a comprehensive pre-admission assessment of their health, personal and social care needs. This will be undertaken by an appropriately skilled and experienced M H A professional, who will consider the views of the individual, their families and other community or hospital-based healthcare professionals involved in their care. Residents are not admitted our residential home if their have a greater nursing need.

The Home Manager and Deputy Home Manager are responsible for ensuring that staff in the home have up to date relevant skills and competency to deliver the assessed care needs.

The resident may at this point wish to choose an available room within the home.

7. How the service is provided

Commencing care/admissions, assessment, planning and review

We will not accept an emergency admission unless the resident is known to the home, for example if the resident has previously stayed at the home on respite and there have not been any further changes to their care needs since their last admission.

The respite at Stuart Court is booked in advance following an assessment of care needs to ensure that we have time to contact their GP to obtain their latest medical history and any current medication prescribed. The care plans are formulated following the assessment of care needs in conjunction with the resident. Our respite room is Room 27, which is on the floor adjacent to the main lounge this location aids orientation and reassurance for short term residents.

We provide a package of care to each resident 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 maximize each resident's independence and to ensure as fully as possible the resident's maximum participation in the community.

We use the ZURI electronic system for the resident's personal plans and risk assessments. These are regularly reviewed and updated with the resident using an electronic tablet in their own bedroom to promote privacy and dignity. Each month the resident will have one to one time with one of the Senior Care Assistants to review their own personal plan.

Care and support

We provide residential care for up to 27 residents, although we do not provide specialist dementia care some of our residents may have a mild cognitive issue. We will always seek specialist assistance for any resident that requires a greater care need, working closely with the resident and family to ensure that they receive the care they need even if unfortunately, this means a review in placement.

Before we provide services, we ensure that a potential resident needs and preferences are thoroughly assessed. We aim to ensure that what the home provides meets the assessed needs of each resident, that needs are re-assessed as frequently as necessary.

Our residents are at the heart of everything we do. We aim to provide personal care and support in ways which have positive outcomes for our residents and promote their active participation.

Residents are given one to one time each month to review their personal care profiles. Risk assessments are discussed and any other issues the resident chooses.

The residents and relatives have a regular meeting with the Home Manager and care team to encourage ownership and participation of all aspects of the home.

We are in the process of recruiting and activities organiser to enhance residents physical, mental wellbeing and facilitate connections with the community

Meantime we have several groups and outings in the minibus planned to keep the residents stimulated and engaged.

The hairdresser visits the home on a twice weekly basis, residents can make an appointment as they would in the community.

The chiropodist attends the home every 4-6 weeks again offering the residents appointments.

Communication and involvement

We try to help residents to participate in as broad a range of social and cultural activities as possible. If the resident chooses, we will assist to participate in practices associated with religious or spiritual matters and to celebrate meaningful anniversaries and festivals. We aim to respond sensitively and appropriately to the

special needs and wishes of residents who wish to prepare or are close to death, following the Gold Standard Framework for palliative care. We will make efforts to understand and respond to the wish of any resident to participate in minority-interest events or activities.

The residents and relatives have a regular meeting with the Home Manager to encourage ownership and participation of all aspects of the home. Regular survey are sent out to residents to complete to ask their views on a range of subjects, this will then form an action plan of any short comings and the results fed back individually to the residents or in a group involving any staff members from the department involved. This is increases service user involvement and in turn improves the care provided.

Stuart Court embrace the 'No decision about me without me' NHS 2012

We believe that greater resident involvement and greater choice are all part of the same goal: to ensure that "no decision about me, without me" is the norm. This is achieved through greater resident involvement in decisions about their own care We will support not dictate. We believe in greater resident involvement and shared decision making.

Rights and responsibilities

An individual's rights to privacy involves being free from intrusion or unwelcome attention. Staff will enter a resident's rooms within the home only with express consent. A resident has the right not to have to interact with or be interrupted by a staff member when, for example, they are entertaining a visitor or are engaged on an intimate activity on their own account. We respect the fact that a resident's possessions are private and always act in accordance with the principle that our staff are guests. Our staff respect a resident's right to make telephone calls and carry on conversations without being overheard or observed by a staff. We ensure that records of the service provided are seen only by those with a legitimate need to know the information they contain, In line with General Data Protection Regulation 2018

The right to dignity involves recognising the intrinsic value of people as individuals and the specific nature of each person's needs. We aim to maximise our resident's dignity in the following ways. We arrange for residents who require assistance with bodily tasks such as dressing, bathing and toileting to be helped as far as possible by the care staff of their own choice and, if desired, of the sex of their choice. We ensure, if asked, that residents receive the necessary assistance with dressing and maintaining their clothes.

We will try to provide help for residents with make-up, manicure, hairdressing and other elements of their appearance so that they can present themselves as they would wish. We aim to minimise any feelings of inadequacy, inferiority and vulnerability which residents may have arising from disability. We treat residents with the sort of respect which reinforces personhood and individual characteristics, addressing them and introducing them to others in their preferred style, responding to specific cultural demands and requirements, and aiming to maintain

relationships which are warm and trusting but appropriate to the relationship of staff member to resident.

Independence means having opportunities to think, plan, act and take sensibly calculated risks without continual reference to others. We aim to maximize our resident's independence in the following ways. We help residents to manage for themselves where possible rather than becoming totally dependent on care staff and others. We encourage residents to take as much responsibility as possible for their own healthcare and medication if they are able. We involve residents in planning their own care. We work with relatives and friends of residents to provide as continuous a service as is feasible. We aim to create a climate in the delivery of care and to foster attitudes in those around a resident which focus on capacities rather than on disabilities.

We aim to help our residents to continue to enjoy their civil rights in the following ways. If residents wish to participate in elections, we will try to access them necessary information and either provide or obtain any assistance which they need to vote. We want to help our residents to make use of as wide a range as possible of public services, such as libraries, education and transport. We will encourage our residents to make full use of health services in always appropriate to their medical, and therapeutic needs. We will provide easy access for our residents and their friends, relatives and representatives to complain about or give feedback on our services. If we can, we will support our residents in their participating as fully and diversely as they wish in the activities of their communities through voluntary work, religious observance, involvement in associations and charitable giving.

Choice consists of the opportunity to select independently from a range of options. We avoid a pattern of service delivery which leads to compulsory timings for activities like getting up and going to bed. We will manage and schedule our services to respond as far as possible to resident's preferences as regards the staff with whom they feel most comfortable. We respect resident's eccentricities, personal preferences and idiosyncrasies. We hope to cultivate an atmosphere and ethos in our service delivery which welcomes and responds to cultural diversity. We encourage residents to exercise choice into which individuals who provide them with assistance.

8. Staffing arrangements

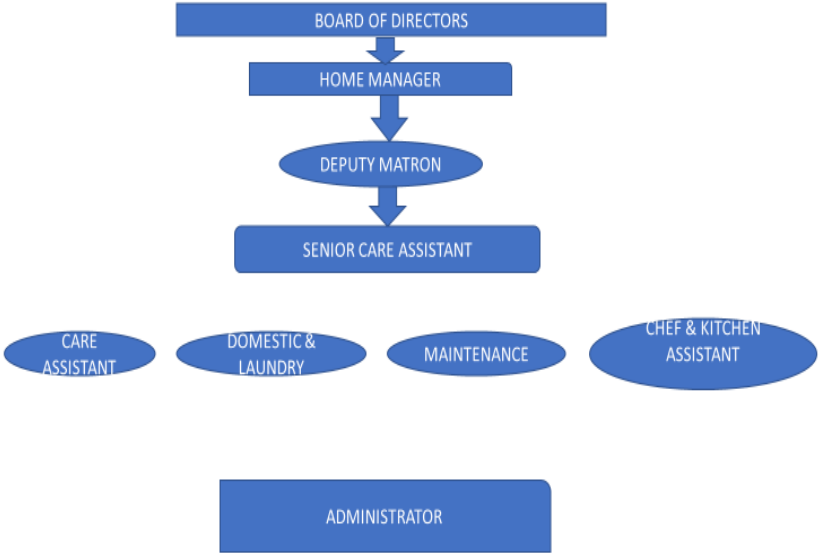
Numbers and qualifications of staff	Registered Manager: Mrs Elaine Jackson. RMN with 31 years nursing and managerial experience 1 Deputy Manager Yvonne Brown QCF level 3 and 20 plus years management experience at Stuart Court.
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	<p>1 Part time Administrator</p> <p>4 Senior care assistants (QCF level 3. Many years' experience in elderly care)</p> <p>12 Care assistants (Varying degrees of experience most have or are working towards QCF level 2)</p>
Staff levels	<p>Staffing from 8am until 8pm is 1 to 2 Senior Carers and 3 care assistants. From 8pm until 8am 2 care assistants with access to an on-call Senior or manager if required.</p> <p>Our staff members are extremely important in order to ensure the smooth running of our services. It is paramount that our staff receive job satisfaction and are always happy to work for the organisation. We have a stringent recruitment process. MHA places prime importance on employing staff that are fit for the job, have appropriate qualifications, skills and experience to ensure the health and wellbeing of residents are met.</p>
Specialist staff	<i>Number and details</i>
Staff deployment	The home is on 4 floors with the 4th floor only having 6 resident bedrooms which are only used by very independent residents. The staff work across the whole home.
Delegated tasks	The Home Manager is ultimately in charge of the home delegating the task of head of care to the Deputy Manager. The deputy manager works with the Senior carers leading the care team on each shift.
Other staff	<p>1 Part Time Activities Organiser</p> <p>1 Full time cook</p> <p>1 Part time cook</p> <p>2 Kitchen assistants (All have food handling and hygiene certificates)</p> <p>1 Laundry assistant</p> <p>3 Domestic. 1 Maintenance. 1 Gardener</p>
Staff training	<p>Staff are required to have a full interview, a full and satisfactory DBS check and may only commence employment when this has been received, together with satisfactory references. All staff complete an Induction programme within their probationary period meeting with the home manager during that period to ensure clarity of expectations.</p> <p>MHA also ensures that all staff are properly trained, our training methods are varied and include traditional group sessions, group supervisions, individual training sessions and DVD based learning options. Our staff are encouraged to obtain their QCF with a large percentage of the care staff having a level 2 or above. The staff are given regular</p>

	supervision and appraisal. MHA endeavours to ensure that residents have confidence in their staff members and that their service can be relied upon to provide the best quality of care.
9. Services and facilities	
Provision of food / drinks / snacks	<p><i>Each day the residents get an opportunity to speak with the chef and discuss the menu and their choices and preferences. Staff can also facilitate shopping trips to accommodate any unusual or individual preferences.</i></p> <p>We have commenced a Food Satisfaction survey ensuring that each residents view is considered. Following the survey, the results were collated and discussed with the chef, kitchen staff and residents together. This ensures involvement. We have a small kitchenette area on the 4th floor, where residents, their families or friends can have refreshments throughout the day and night if they wish. Of course, the residents can request a staff member to make a cup of tea at any time.</p>
Activities	<p>We have an activities organiser to enhance residents physical, mental wellbeing and facilitate connections with the community Meantime the care staff have several groups and outings in the minibus planned to keep the residents stimulated and engaged.</p> <p>Prior to any outings a thorough risk assessment is completed. The staff have been trained in the use of the minibus tail lift.</p>
Specialist equipment	<i>8 Seater Minibus for Outings</i>
Communal areas <i>(Care homes/Day Care)</i>	<p>At Stuart Court we have a comfortable communal lounge on the second floor, it is carpeted and has a selection of lounge chairs in different arrangements.</p> <p><i>We also have a smaller quieter lounge located on the 4th Floor. We have recently converted a bedroom (Room 9) to provide an activities room and a more private space for residents to see family or visiting professionals.</i></p>
Dining areas <i>(Care homes/Day Care)</i>	<p>One large dining room. The dining room has several tables for residents to choose where to sit. On assessment prior to being admitted to the home it is ascertained whether they wish to eat in the dining room, although it is encouraged residents can eat where they choose. We have several residents who wish to eat mainly in their rooms.</p>
Access to outside space <i>(Care homes/Day Care)</i>	<i>We have two large enclosed gardens and a small patio with raised beds, for the residents who wish to engage in light gardening.</i>
Specialist bathing facilities <i>(Care homes/Day Care)</i>	<p>On the 1st floor we have an assisted bath with integrated hoist.</p> <p>The 2nd floor has a wet room, with plans to add an assisted bathing area.</p>

	The 3 rd floor has a wet room
Number single occupancy bedrooms <i>(Care homes)</i>	27 single occupancy bedrooms each with profiling beds and pressure mattress available dependent on the needs of the individual
Number of shared rooms <i>(Care homes)</i>	<i>We have accommodated married couples in side by side rooms, on occasions they have chosen to use one room as private lounge and another room as their bedroom.</i>
Number of rooms with en suite facilities	24 rooms have an en suite with a toilet, sink and shower. 3 bedrooms have en suite toilet and sink.
Security arrangements <i>(Care homes/Day Care)</i>	The home is not locked throughout the day, visitors are required to sign in for fire safety and security, so we are aware who is in the building. The external doors are secured in the evening with visitors having access to the home by the use of the call bell system.
Office/meeting rooms <i>(Home Care, Care homes/Day Care)</i>	The main care office is in reception and has a coded locked door to maintain confidentiality. The Home Manager uses this office and has staff files in a locked cabinet. When larger meetings are taking place the residents or staff use the activity room when it is not being used for the purpose of activities.
10. Quality Assurance and Governance	
Complaints and concerns	<p>If a resident is unhappy, then we would like to hear about it.</p> <p>MHA Complaints Policy</p> <p>We aim to provide a high standard of care for all residents and is committed to ensuring that residents are treated with respect. It is the right of all residents to express dissatisfaction and if they deem it necessary, to make a formal complaint.</p> <p>If you are not happy, then we would like to hear about it.</p> <ul style="list-style-type: none"> • All complaints made by or on behalf of you will be taken seriously and fully investigated and no one will ever be victimised because of making a complaint. • We will do everything we can to make sure our residents get the best possible service, but occasionally we get things wrong. If you have a concern or complaint, we want to resolve it, quickly and simply. • Simply talking to a member of staff, the Deputy Manager or the Home Manager, we can often clear up any issues quickly. • If we are unable to address any issues to your satisfaction and wish to take it further, please put this in writing. Your complaint will be acknowledged within

	<p>three working days of receipt and will be referred to the Deputy or Home Manager for investigation. The Deputy/Home manager will conduct a full investigation and will make every effort to send you a full response within 28 working days. On the rare occasion when this is not possible, we will provide an update on progress made and explain the reason for the delay. This letter will also give some indication of when the investigation will be completed.</p> <ul style="list-style-type: none"> • If you are not satisfied with the response you receive from the Home manager at stage one, you can request a review by the Chairman of the Board. This should be requested within 28 working days of the date of the final written response or meeting. The Chairman of the Board will acknowledge your request within three working days, informing you that your complaint is under review. They will review the handling of your complaint and conduct further investigations where necessary and will then contact you within 28 working days to let you know the outcome of that review. • We will do everything we can to help resolve a complaint. • If you are still dissatisfied with the outcome and where we have exhausted our internal process, you may wish to contact: <ul style="list-style-type: none"> • Professional & Care Regulation • 2nd Floor, 23 Hill Street, • St Helier, Jersey, JE2 4UA • Tel: +44 (0)1534 445798 • Fax: +44 (0)1534 445773 <p>Each resident has a copy of this with their contract and in their welcome pack. It is also on the agenda at the resident's monthly meetings as a reminder that if they do have a concern then it is OK to raise this.</p>
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<p>Organisational structure</p>	 <pre> graph TD A[BOARD OF DIRECTORS] --> B[HOME MANAGER] B --> C([DEPUTY MATRON]) C --> D[SENIOR CARE ASSISTANT] D --> E([CARE ASSISTANT]) D --> F([DOMESTIC & LAUNDRY]) D --> G([MAINTENANCE]) D --> H([CHEF & KITCHEN ASSISTANT]) I[ADMINISTRATOR] </pre>
<p>Service oversight</p>	<p>MHA has a board of directors which oversee the service. They meet on a monthly basis to discuss both Maison La Corderie and Stuart Court. The home manager of Stuart Court attends the meeting to discuss any issues and how those issues can be addressed. Two of the board members are now to commence a monthly audit gathering information from the home manager, the residents, staff and visitors. This information will form any actions required to raised standards and wellbeing for residents. Each month the Home Manager will be requesting the residents complete a short survey in a different subject to monitor the service being delivered, and any improvements to be made.</p>
<p>Involvement</p>	<p>The residents are at the heart of everything we do, no decisions which impact on the residents will be taken without their input.</p> <p>Some health and safety decisions may be taken in the resident’s interest ensuring they are made aware of what, why and the plan of action.</p> <p>We respond to residents right to involvement in the following ways. We try to help residents to participate in as broad a range of social and cultural activities as possible. If the resident chooses, we will assist to participate in practices associated with religious or spiritual matters and to celebrate meaningful anniversaries and festivals. We will make efforts to understand and respond to the wish of any resident to participate in minority-interest events or activities. Positively communicating to our residents that their diverse backgrounds enhance the life of the community. Stamping out negative discriminatory behaviour by staff and others. Accommodating individual differences without censure. Helping residents to</p>

	celebrate events, anniversaries and festivals which are important to them.
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