ST QUENTIN
Senior Living
Bespoke Residential & Nursing Care

Feel at Home

A warm welcome awaits at St Quentin Care Homes







Part of the HMT HEALTHCARE MANAGEMENT TRUST Group





ABOUT OUR HOMES...

St Quentin Care Homes is a trio of care homes located in Newcastle-under-Lyme, steeped in history. These homes are part of the Healthcare Management Trust Group, a not-for-profit health and social care charity dedicated to ensuring that everyone has access to high-quality, compassionate healthcare.

At St Quentin, our mission is to provide leading care solutions for individuals with complex needs, with a particular emphasis on supporting marginalized and underserved communities. We firmly believe that everyone, regardless of their circumstances, deserves access to top-quality, compassionate healthcare. By offering specialised care to those who need it most, we strive to enhance lives and foster healthier communities.

St Quentin comprises three distinctive care homes, all separate and rich in historical charm. Situated next to each other, they are nestled in beautifully landscaped gardens along Sandy Lane in Newcastle-under-Lyme.

St Quentin offers 19 single bedrooms, eight of which have en-suite facilities. Each room is equipped with wash amenities, a call system, and a TV point.

The Hawthorns features 31 single rooms—one of which is en-suite—along with two double rooms. All accommodations include wash facilities, a call system, and a TV point.

Langley House is a newer care home catering to younger adults, boasting 22 wet room en-suite bedrooms, a sensory room, and rehabilitation facilities.

St Quentin, The Hawthorns, and Langley House are all spacious detached properties set on approximately one acre of land, located in an exclusive residential area of Newcastle-under-Lyme. They are about one mile from the town center and easily accessible to local libraries and theaters.
These homes are tastefully decorated and equipped with modern amenities, designed for individuals who wish to maintain a dignified lifestyle while enjoying comfort in their later years.

Each property features large front gardens. St Quentin and The Hawthorns have their communal lounges situated on the ground floor, while Langley House offers communal areas on both levels. All residences are fully centrally heated and include lifts to accommodate disabled residents.

St Quentin and The Hawthorns provide single rooms, some of which come with en-suite toilets or en-suite toilet/wetroom facilities. Langley House offers 22 single en-suite rooms equipped with sky tracking. Each room includes a wireless/wired call system, WiFi, and TV points.

St Quentin Care Homes are designed for individuals requiring 24-hour care, with a registered nurse available at all times to manage and monitor medical needs. A higher staffing level reflects the greater dependency our residents have in their daily lives.

In a warm and inviting atmosphere, residents are encouraged to participate in a variety of activities, both indoors and outdoors, or to pursue their own interests and hobbies. Our activities coordinators customise activities to meet individual needs, delivered on a one-on-one or group basis depending on ability and preference. Friends and family are always welcome to join residents for meals in the spacious dining room, with prior arrangement. Our qualified kitchen staff prepare interesting and nutritious meals.











OUR STANDARD OF CARE

Here at St Quentin we follow the six C's which are Care, Compassion, Competence, Communication, Courage and Commitment.

Care -
Delivering person centred care to meet individual needs at every stage of their life.

Compassion -
Care given through relationships based on empathy, respect & dignity.

Competence -
Understanding individual health & social needs. To have Clinical & technical knowledge to deliver effective care.

Communication -
Good communication promoted successful caring and working relationships. It is also essential for 'no decision about me without me'.

Courage -
Encourages us to make the right decisions about the individuals we care for. It means we have the personal strength to innovate and embrace new ways of working.

Commitment -
A commitment to our patients is the cornerstone of when we do. A commitment to improve the care & experience of individuals.

MEALTIMES AT ST QUENTIN CARE HOMES

The Home offers three cooked meals every day. There is full cooked breakfast every morning, as well as a choice of cereals and fruits. Lunch comprises of a three course meal, of which there is a choice of hot & cold main course. In the evening there is a choice of a hot meal, selection of sandwiches or cheese board. All meals are tailored to individual requirements. Residents are given the opportunity to choose and order their meals daily from the menu. All diets and food consistencies are catered for.

Although we encourage residents to attend the dining room for meals, as this is an important social part of the day, we recognise that this is often not possible and offer meals where residents are most comfortable.

Meal Time Timetable	Snacks & Drinks available throughout the day.
Breakfast - 8.15am Onwards	A choice of continental & full English breakfast
Morning Tea & Coffee - 10.45am	Including fruit & biscuits
Lunch - 12.30pm	A choice of hot and cold meals
Afternoon Tea - 2pm & 4pm	4pm served with cakes
Evening Meal - 5pm	A choice of hot and cold meals
Evening Drink - 8.30pm	Served with biscuits

THE TEAM AT ST QUENTIN CARE HOMES

The dedicated teams at the Homes comprise of the Area Manager, Clinical Lead, Nurses, Activities Coordinator, Team Leaders, Care Staff, Cooks, Housekeepers, Maintenance Operative, administrators, and bank staff. Each care staff member embarks on their journey by completing the care certificate during induction, should they lack prior qualifications.

The Team Leaders possess either a QCF level 3 qualification or are actively pursuing it. We mandate that all Team Leaders either hold this certification or are committed to attaining it. Meanwhile, other care staff members are either on the path to completing QCF level 2 or have already achieved this. We require that all care staff possess NVQ or QCF credentials. Many team members bring with them a wealth of experience, often garnered from their time in private Residential or Nursing Homes.

The remaining team members have been nurtured through in-house training by the Senior Care Staff and Managers. Within the first twelve months of their service, all staff must successfully complete training in Manual Handling, Medication, First Aid, Basic Food & Hygiene, Safeguarding, Dementia, and Health & Safety.

Registered Provider/Manager
The CQC Registered Provider of St Quentin Care Homes is St Quentin Residential Home Ltd.

The Acting Registered Manager is Mrs Jacinta Greatrex
The Nominated Individual is Mr Andrew Willcocks





CHOOSING THE RIGHT CARE HOME

It's essential to understand the various funding options available to make informed decisions about covering the costs associated with living in a care home. Choosing the right place for yourself or a loved one is essential.

Our funding rules are outlined in our Residency Terms and Conditions (a separate document). When you become a resident, these terms, along with other key documents, create our agreement. We accept residents who pay for themselves and we also accept funding from the NHS and Local Authorities. We welcome residents from all funding sources, as long as the total fee covers the care needs in the care plan and the provided accommodation and facilities.

ADMISSION

It's essential to us that we undertake a deeply compassionate admission process. Our process begins with a heartfelt conversation, where prospective residents, their families and caregivers share their unique life stories, preferences, and medical history. This information forms the foundation for crafting personalised care plans prioritising dignity and comfort. This assessment will inform our decisions about which household will suit your needs best and the support package that will wrap around you.

Ultimately, our goal is to provide exceptional care and create a nurturing home where residents and their families can enjoy their time together.





KEY INFORMATION ABOUT OUR SERVICE

DURING YOUR STAY

SERVICES INCLUDED IN YOUR BASIC FEES.
Nursing Resident (Only)Your fees cover a 24-hour service 7 days a week, provided by Registered Nurses & care staff under the supervision of the General & Nurse Manager.

Residential Resident (Only)Your fees cover a 24-hour service 7 days a week, provided by care staff under the supervision of the General Manager.

Included in this (for all residents), are all your meals, snacks & beverages available on the menu, personal Laundry, linen & towels, entertainment & some outside visits to places of interest.

Continence aids to the value given by the funding authority.

EXTRA SERVICES
The home also provides Newspapers, private chiropody, hairdressing, telephone, an in-house shop, trips out, and escort to hospital & doctor appointments. All these services are provided but at an extra charge. Please see the management for details. There will be an extra charge for any continence aids over & above the value of the funds provided by the NHS.

CHIROPODY
This is provided every eight weeks by a qualified chiropodist who visits the home. Residents who choose this service can either pay at the appointment themselves or have the amount added to their monthly account. State Chiropody is available via referral from your GP if you meet the required criteria.

HAIRDRESSING
This is provided every week by a qualified hairdresser who visits the home. Residents who choose this service can either pay at the appointment themselves or have the amount added to their monthly account.

IN HOUSE SHOP
There is an in-house shop situated on the ground floor. Residents are able to purchase sweets & chocolate, drinks, cards and toiletries. Items can either be paid for by the resident at the time or have the amount added to their monthly account.

OUTSIDE VISITS
Throughout the year we periodically go out on trips with the residents, mostly funds are raised to cover these expenses, however, occasionally a contribution from the resident may be required.

ESCORT TO DOCTORS & HOSPITAL APPOINTMENTS
Every effort is made to provide escort duty free of charge, however there are occasions where this is not possible. If escorting a resident results in extra staff wages i.e. overtime or an extra duty, then an hourly rate, plus travelling expenses will be charged and added to your invoice at the end of the month or your stay. We would therefore advise relatives to escort their own family in these instances where possible.

NEWSPAPERS & MAGAsINES
The home can arrange for newspapers & magazines to be delivered by the local Newsagent. If you choose this service, you will be invoiced for goods you have had, this will be added to your account as we are invoiced by the newsagent.

CLOTHING
Please make sure you bring adequate clothing with you. You will need at least seven days of underwear, several changes of day &night wear, suitable to the time of the year, all clearly marked.

TELEPHONE CALLS
There is a pay phone situated privately, in the hall, where residents can make calls. Long-stay residents may want to consider having a private line installed to their bedroom. If you wish to do this, it is at your own expense, you will be listed in the phone book, as you would be at home, and will receive your bill directly from British Telecom. Please see the manager before instructing the phone company.

COMPUTER ACCESS, WIFI & SKYPE
Residents have access to a computer (with a larger keyboard and mouse) and a laptop (on request). This equipment has proven great for keeping in contact with family and friends and as a reminiscing tool. The computer station in locatedin the communal areas. Skype is available on the computers for all residents. Wi-Fi is available throughout the building - please ask management for the password.

LAUNDRY
Full laundry facilities are provided, including all your personal laundry, which will be returned to you within 24 hours. Please make sure that all your items are CLEARLY marked or name-taped. All clothes must be machine washable, and colourfast, we do not accept responsibility for any items that are not, and would advise you not to bring them into the home. All items of clothing sent to the laundry are at your own risk.

CONTINENCE NEEDS
Continence is assessed by the Registered Nurses or if you are residential the continence nurse who is based at the Health Clinic and they will assess your needs. If it is felt that you need some continence aids, then it will be arranged for them to be delivered to you every month. For nursing residents- continence products are supplied free up to the value awarded by the funding authority, anything above this is charged.

DISTRICT NURSE
If you have nursing needs during your stay that are outside the remit of the in-house nurse, your GP will arrange for the District Nurse to visit you.

PERSONAL BELONGINGS
All residents are welcome to bring in their own personal possessions, provided we can accommodate them. However, we do advise residents not to bring in items that are expensive or items that are irreplaceable for obvious reasons. Residents' personal possessions are insured, there is a maximum level for this (there will be an excess) for details please see the management. If you require further cover, you must arrange this yourself.

All items are recorded on an inventory, kept by the home. In addition ornaments and items of expense are photographed on request. PLEASE NOTE THE COMPANY DOES NOT ACCEPT ANY RESPONSIBILITY FOR YOUR PERSONAL BELONGINGS. THESE ARE BROUGHT IN AT YOUR OWN RISK.

MONEY
Whilst you are staying at St Quentin you will not require a lot of money. £10.00 per week is more than adequate. Should you wish to bring in larger amounts of money, we can keep this for you in the safe. Please note that money not kept in the safe is brought in at your own risk.

MEDICATION
Whilst you are living at St Quentin, the Home will arrange for your medication to be ordered and delivered. Mostly medication is dispensed by the staff at the appropriate times, however, you can self-medicate if you prefer and are capable.

DOCTORS APPOINTMENTS
We do encourage residents to visit the surgery if they can, however, we recognise that most of our residents are not able to do this. The home's main GP practice visits every week, sometimes twice a week for routine appointments. The doctor will also visit in-between as required at the Home. Residents & their families can request appointments through the manager who will make the arrangements, or the manager may suggest the resident should see a doctor if she feels it is necessary. Residents can use their existing GP if they are still in their catchment area and they are agreeable.

REGISTRATION
This Home is dual registered with the Care Quality Commission. Inspection reports available from the Home or the Care Quality Commission website or by post from:–
CQC West Midlands, Citygate, Gallowgate, Newcastle-on-Tyne, NE1 4PA

OPTICIANS
The Home contracts with a domiciliary eye clinic to provide free eye tests once a year for all residents. They will provide a prescription, which you can use elsewhere or alternatively buy your lenses and frames directly from them.

HEARING AID CLINIC
This is situated at the University Hospital. If your aid is faulty and needs checking, or is no longer suitable, you can take it there. If you are not able to do this yourself the manager will arrange to have it checked for you. If you require batteries, please ask the staff, who will assist you.

PRACTICE NURSE
Every year the practice nurse will visit the home to administer flu injections. The nurse may also be involved in your medical care plan.

DIET/FOOD
All diets are individually catered for. Fresh food is prepared daily and sourced from local suppliers. There is a six-week menu plan with is frequently reviewed by the catering staff in conjunction with the resident's requests.

ACTIVITIES
There are in-house activities coordinators. Your activities coordinator creates and organises all your daily activities, entertainment, trips out to the theatre, lunches out and various visits to the home. etc. The daily activity is shown on the resident's noticeboard situated in the hall. Activities are focused on residents ' needs and are organised with their input.
(Although the majority of the activities are included in your fee's, some outings may require an additional fee.)

FEES
Fees are payable 4 weekly or monthly in advance by cheque, or direct debit . Fees are usuallyset in April of each year for the year, howeveroccasionally there may be a further increase in October.

COMPLAINTS PROCEDURE

All complaints will be treated seriously and recorded. They should not be dismissed automatically as without foundation because of the personal characteristics or mental capacity of the resident. All residents may bring complaints on any subject to the Directors without fear of incurring disappointment.

All residents are notified upon entering the Home that should they have a complaint then they are at liberty to report the matter to the Officer in Charge. Should the matter not be satisfactorily resolved then the Board of Directors are advised and the matter is discussed with the Officer in Charge and the complainant if the resident so wishes. If a satisfactory solution cannot be reached then the Director of Social Services will be advised immediately.

Notwithstanding the above procedure the resident at all times has the right to contact Social Services or CQC without notification to either the Officer in charge or the Directors.

All complaints will initially be thoroughly investigated following which a response will be made by the Manager to the complainant within a maximum of 28 days. Dependence on the complexity of the complaint will determine the length of time required to give a response however complaints will be dealt with as quickly as possible.

Address: CQC West Midlands, Citygate, Gallowgate, Newcastle-on-Tyne, NE1 4PA
Telephone: 0300616161

Address: Newcastle Social Services, Civic Offices, Merrial St, Newcastle, Staffs, ST5 2AG
Telephone: 03001118010

Complaints can also be made to the ombudsman if a satisfactory result is not achieved through Inspection Services. Complaints should be made to: The Local Government Ombudsman, The Oaks, No 2 Westwood Way, Westwood Business Park, Coventry, CV4 8JB.

Assist - Advocacy
Advocacy is when one person helps another to have their veiws, opinions and concerns heard. It is available for anyone with a disability and/or mental health need.
Address: Asist, Winston House, Stoke Road, Stoke on Trent, ST4 2RW
Telephone: 01782 845584
Website: www.asist.co.uk
Email: help@asist.co.uk

ADDITIONAL INFORMATION

Admission
The Homes provide accommodation and a range of care in line with our CQC registration for up to 72 residents accommodated in single rooms some of which are ensuite. The Homes provide large dining areas, and large lounge areas, which overlook the gardens. We are able to accept both Residential and Nursing clients.

Each resident has a min of 5.46 sqm of communal space and a min of approximately 17.85 sqm of overall space; this is a combination of bedroom space and communal space.

The Homes provide:
accommodation for all aspects of residential and nursing care. CCTV is installed in the Homes to protect both residents and staff, it is also used as a quality monitoring tool but is not monitored 24/7. To protect residents' dignity & privacy cameras are only located in communal areas and corridors and have the ability to monitor audio. The bedrooms at Langley House have been fitted with CCTV however, these are only switched on at the permission of the resident.

Admission to the Home is subject to a full assessment being carried out by a qualified member of staff, this will include input by relevant professionals if any. For funded residents, we will have access to the assessments and care plan produced by Social Services. For privately funded clients who may not have been previously assessed a needs assessment will be carried out which will include the following- Personal Care & physical well-being, Diet & weight

including dietary preferences. Sight, hearing & Communication, Oral Health, Foot Care, Mobility & Dexterity, History of falls, Continence, Medication usage, Mental state and cognition, Social interests, Hobbies, Religious and cultural needs, Personal safety & risk, Carer & family involvement and other social contacts/ relationships.

Emergency admissions usually follow from referral from a GP or Social Services, and in these cases, information will be faxed or telephoned. An assessment of the client may not be able to be carried out fully until the resident has arrived at the Home. Every effort will be made to retrieve as much information as possible prior to admission.

The Home employs Activity Coordinators who are dedicated to carrying out in-house activities every week. The Home enjoys regular visits from the clergy, arts & crafts instructors, exercise classes, and entertainers and has library books available. In-house activities are also organised regularly and include board games, music & movement, singing songs, bingo etc. External entertainers are also booked at regular intervals to entertain the residents. Outside trips, weather permitting, are also arranged from time to time.

Mealtimes are considered to be an important social part of the day, and care is taken to make sure that residents are sitting with their friends. Routines of daily living are flexible and residents are able to choose their waking times and retiring times, rest periods, & where they eat their meals.
Residents are encouraged to retain their links with family and friends,

Residents' input with regard to the daily operation of the Care Home,and religious preferences are catered for, either by individual visits from their vicar or by participating in the communal communion held in the Home every month. Residents can also carry on visiting their church if they wish to do so. The outcomes of all social activities are recorded in the client's individual care plans on a designated form.
Some external trips may require a financial contribution from the service user, however most are funded by the Residents Comfort Fund.

Confidentiality
We believe that any confidential information given to us about our residents or other related matters should be treated confidentially & respectfully, our care team will need to share information when it is needed in order to deliver safe & effective care. We acknowledge the rights of the individual to object to the sharing of information & have policies and procedures in place. Residents are welcome to approach the management at any time, should they wish to have input towards the operation of the Home. Their Ideas or suggestions will be taken seriously and included in the agenda of the following management meeting. They will then be informed of the outcome.

Residents and relatives are also encouraged to attend regular meetings where ideas and suggestions can be discussed. A questionnaire is also sent out regularly which families and residents can use to put forward suggestions and express any likes and dislikes & there is a suggestion box in the hall.

Going to Church
All residents are encouraged to continue with their normal lifestyle where possible, following admission to the Home. This would include attending a religious service of their choice. Transport can be arranged should it be required, also an escort, however these would have to paid for by the service user.

Maintaining contact with Relatives, Friends, Representatives
The Home operates a policy of open visiting, which means that families and friends can visit at any time, however, we do ask people to avoid mealtimes where possible, unless they are actively involved with the care of the client. Residents can receive visitors either in the privacy of their own room or in the communal lounges. Residents can choose whom they wish to and wish not to see, and the Home would expect visitors to respect this.

No restrictions will be made to visitors unless the client has requested the Home to do so, and this will be recorded. The Homes' policy on this subject will be made available to relatives, friends and representatives on admission. Voluntary workers and students who may be in the Home will abide by the wishes of the clients. The Care Manager's office can also be used for resident meetings on request.

Review of the Service User's plan
The residents' Care Plan will be reviewed every month by qualified staff; it will be updated to reflect the changing needs of the residents and current objectives for health and personal care. The review will be carried out in consultation with the resident and any other health professional that may be involved. It will then be actioned and a copy given to the resident in an accessible style, or representative if the resident is not capable.

Smoking & Alcohol
This Home does not permit smoking inside the premises, but residents can smoke in the gardens. With regard to alcohol, residents will normally make their own arrangements, but, may need to be supervised. If you wish to consume alcohol, this will be discussed during the pre-admission assessment. Some alcoholic beverages are available at meal times.

Equality & Diversity
This Home recognises the importance of equality & diversity for our residents, all our staff have training and understand the need for person-centred planning & Care. It is important that residents are treated as individuals and that we provide facilities, care and activities that reflect the diversity within the Home.

Bereavement
In the unfortunate event of bereavement, the family will receive every possible support and assistance from the staff. Whereas the next of kin usually makes funeral arrangements, the staff are available to assist if required. In the case of a death the resident's medication needs to be kept for seven days. On admission you will be asked to agree to this and give permission for us to dispose of the medication after this period.

Privacy & Dignity of the Service User
The privacy & dignity of the resident will be observed at all times. In particular whilst using the toilet or bathroom, whilst receiving personal care, nursing care, during consultation with the doctor, which will be carried out in the client's own bedroom or other health care professionals, during consultation with legal or financial advisors or at any other time when the client requires privacy.

All staff will knock on bedroom and bathroom doors prior to entering, and wait for an appropriate response where one would be expected. Residents' will be able to see their friends and relatives in the privacy of their own room should they desire.

Following death, dignity and privacy will continue to be observed and carried out. Residents have access to a payphone situated in the entrance to the hall, and will receive their post unopened. If the resident is unable to receive their own mail, then a system of handing it to the next of kin will be devised; again the post will not be opened. The Home does not permit the use of communal clothing, and following death rel- atives will be asked to remove all items of clothing that belonged to the deceased.

Residents' will be addressed by their preferred form of address, and staff will be trained how to treat the residents' with respect at all times, when they first start to work at the Home. This will form part of their induction. In the case of the communal rooms, screens are provided to preserve dignity and privacy if needed.

MRSA & C-Diff
MRSA- what is it? MRSA is an abbreviation for Meticillin Resistant Staphylococcus Aureus, it is strain of Staphyloccocus Aureus Bacteria which is resistant to Meticillin or Flucloxacillin. Residents who have been diagnosed as positive to MRSA will not be aware of its presence; a proportion however may develop an infection which requires treatment. MRSA can spread in two ways- A person with MRSA may transfer bacteria from one part to another, or it can be spread from person to person. Residents with MRSA are not a hazard to other people and can continue to live in communal areas as long as any open wounds or sores are covered. They can continue to receive visitors as normal. Good hygiene & hand washing is the most important method of the spread of infection.

C- Difficile-What is it? Clostridium Difficile is a bacteria that doesn't grow in the presence of oxygen. It is found in the large intestine and is carried without symptoms in about 5% of healthy adults. It is estimated that as many as 20% of residents over the age of 65 carries c-difficile. Residents may develop an illness as a result of C-difficile infection and this is referred to as CDI. CDI is usually triggered by the use of anti-biotics, however this may not happen immediately and infection can occur six weeks after treatment. Symptoms include diarrhoea, nausea, lossof appetite, and abdominal pain. Residents who are symptomatic will be isolated to their bedroom until they have had no symptoms for at least 48 hours, personal protective equipment will be worn by the staff and thorough hand hygiene undertaken. Alcohol hand gel in ineffective and should not be used. Visitors should wash their hands before & after visiting. Stool samples will be sent to the laboratory to ascertain when the resident is free from infection.

Privacy & Dignity of Service User
The privacy & dignity of the resident will be observed at all times. In particular whilst using the toilet or bathroom, whilst receiving
personal care, nursing care, during consultation with the doctor, which will be carried out in the residents' own bedroom or other health care professionals, during consultation with legal or financial advisors or at any other time when the client requires privacy. All staff will knock on bedroom and bathroom doors prior to entering, and wait for an appropriate response where one would be expected. Residents will be able to see their friends and relatives in the privacy of their own room should they desire. Following death dignity and privacy will continue to be observed and carried out.

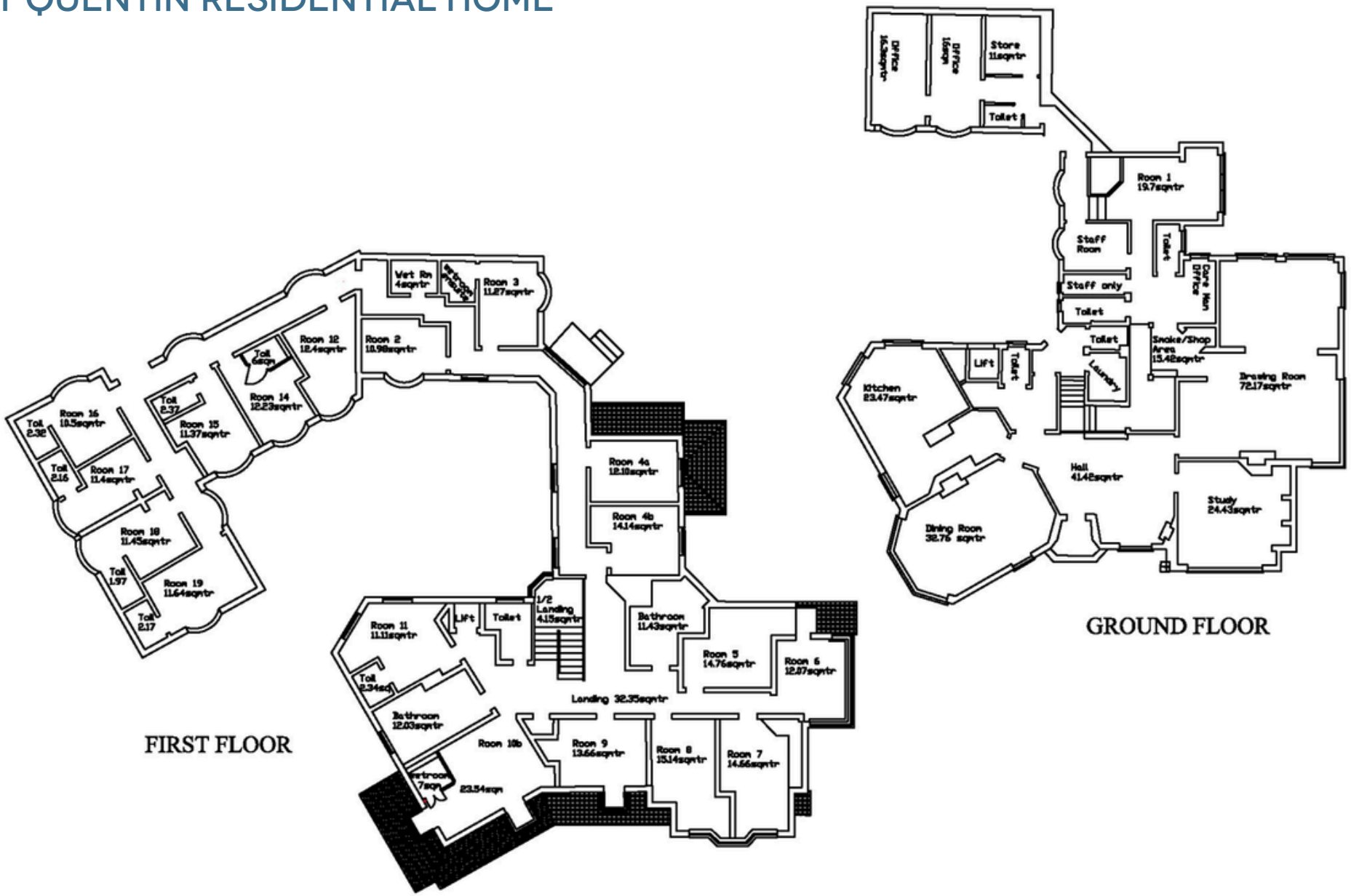
Residents have access to a pay phone in the entrance hall and will receive their post unopened. If the resident is unable to receive their own mail, then a system of handing it to the next of kin will be devised; again the post will not be opened. The Home does not permit the use of communal clothing, and following death, relatives will be asked to remove all items of clothing that belonged to the deceased. Residents will be addressed by their preferred form of address, and staff will be trained on how to treat the residents with respect at all times when they first start to work at the Home. This will form part of their induction.

Fire Precautions/ Emergency procedures
All residents and relatives are asked not to smoke in the buildings. Staff are also not permitted to smoke in the buildings. All electrical equipment is regularly checked and the appropriate amp fuses in place. Staff are trained in general Health & Safety and undertake a certificated course. Fire training is given every three months for night staff and every six months for day staff. One session per year will be taken by an external instructor, the remainder by in-house staff who have completed the train the trainer course All sessions are recorded. Fire alarms are checked and run every week; a different point is checked each week and the outcome is recorded. Emergency lights are checked monthly along with fire fighting equipment and the outcome is recorded. The whole system is maintained by North Staffs Fire who service the equipment every three months, fire extinguishers every twelve months. Fire drills for staff and residents are carried out at least once every three months.

In case of fire, all relatives should proceed to the nearest fire exit, and residents will take instructions from the care staff. Should the fire bell be activated the fire brigade will be called immediately by the person in charge of the shift. It is the policy of the Home that residents will not be evacuated outside unless instructed by the Fire Brigade, as this can be detrimental to their health. Instead, residents will be evacuated to a safe zone within the building.

Should you discover a fire, you should activate the bell via the break glass points that are situated by exit doors and the top of the staircase.
The main evacuation point is the front car park.

ST QUENTIN RESIDENTIAL HOME



THE HAWTHORNS





LANGLEY HOUSE



SECOND FLOOR PLAN



GROUND FLOOR PLAN - WORKING DRAWING




ST QUENTIN
Care Homes
St Quentin
Main Entrance


Easter
HAPPY EASTER!









Part of the

HMT

HEALTHCARE MANAGEMENT TRUST

Group

Registered in England No. 02213814