



Business Update

'Unity In Care Ltd'

A spring message from Bev Garrett



Happy and a blessed new year to each and every-one of you. I hope and pray that this year will bring us good things.

Teamworking:

This year I feel that as a team of workers we need to set ourselves goals to achieve each and every quarter. So, I am going to split us up into 4 teams as follows:

- Green Team: Farnborough/Cove
- White Team: Fleet
- Yellow Team: Aldershot
- Red Team: Blackwater/Yateley

Let's see which teams has the lowest points at the end of the year. Who knows there might be a little prize in it for each team member. Go to page 2 for more information, and 'of course' the goals and objectives.

Appraisals:

This year appraisal will be taking place later in the year, hopefully you all have a good idea of your own self development. Dates and times will be sent out, please ensure that you are on time, if you cannot make the date—

please contact the office and let them know, so we can rearrange.

Supervisions:

You will all receive an updated supervision diary. It is up to you to ensure you turn up for supervision. You know the client/s you work with, should your name not be on the list. A lot of supervisions have been missed, this forms part of your working conditions - failure to attend supervisions staff will now receive a 'written warning'.

Care Quality Commission:

Well, we did have an unannounced inspection (see page 4). We shall continue to conduct our internal audits over a scheduled period of time—any issues problems and corrective action being completed along the way. This certainly helps us to keep focused and working within policy and procedures, and of course always prepared for any unannounced or official visits from CQC—which as we now know by experience happens.

Training update:

2013 rolling training programme has been compiled. Please ensure that you arrive on time. It is costly to organise these training sessions, and I don't want to impose 'any training fines'. Again, this is part of your working conditions.

Christmas Party:

Another good turnout of staff and a great time was had. Hopefully, next year—even more staff will come to get together and share some social / out of work hours.

Client 'Staff Nominations'

Our clients continue to nominate 'their care/support worker'. This really is a chance to show their appreciation. Well done to ALL staff that were nominated. For more details see page 3 for winner and runners up-along with photographs.

Investors in People - Ongoing improvement plan:

We have received positive feedback and the official report. We will update you accordingly with any appropriate recommendations the assessor has made, and agree on the action plan to enable us to improve going forward into this year.

Let us continue to work as 'a team', adding positive thoughts and actions within 'our company', for our clients and each other.

Regards

Beverley Garrett
Managing Director



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Mar 2013

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We welcome

Tyrone Green

Denise Yeomans

Gemma Upton

Elizabeth Lyne

Giovanni Camacho

and hope they will enjoy working with us, and become an integral part of the company

COMING SOON:

- Next Issue June 2013
- Improvement Programme
- Staff profiles
- Volunteer articles

Appraisals

All new staff will be sent details of when they will have an appraisal. Please make a note of these, as when staff 'forget to show' this causes rework, frustration and 'cost to the company' in having to re-schedule.

If unable to attend on the given date—contact the office.

In addition, you will be sent a pre-self assessment form—this needs to be completed and returned to the office 4 days prior to appraisal date (or at very least bring it with you on the day).

Two other documents that are sent out are: 'A guide to objective settings', and 'why do we have appraisals'. These are aimed to help you in preparing for your appraisal, and to give a few ideas around your own self development.

Training Update



Coming up between 'March—May 2013'

MARCH

Health and Safety Training

APRIL

Basic Food Hygiene Training

First Aid Training

MAY

Infection Control Training

Staff will be invited, but if you would like to confirm that you are going to be included contact :

Sian Garrett 01252 44423

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- ☐ Yellow Team: Aldershot
☐ Red Team: Blackwater/Yateley

CONTINUOUS IMPROVEMENT PROGRAMME

TEAM GOALS AND OBJECTIVES— 'raising the bar'

- ☐ Green Team: Farnborough/Cove
☐ White Team: Fleet

As part of our '*Continuous Improvement Programme*'. We log and monitor '*ALL FEEDBACK*' - the results are publicised through this newsletter, and various charts and graphs are displayed around the office.

Results from this feedback indicate that we need to focus on a few areas. However, for the next 3 months—I'm looking at '*specific problem areas*':

GOAL 1: No missed calls:

How can we achieve this ?

- * Collect your rota as early as you can
- * Immediately look at rota, check it for your initials (not just the clients that 'you normally work with'. Rota mistakes do happen
- * If there is a double up, but only 1 set of initials—bring it to my notice immediately
- * Transfer ALL your initials into your own diary/planner. This leaves less room for error/s. Any queries/problems—report to me as soon as possible
- * If on a double up, don't leave it until the last minute to communicate with your colleague
- * If you have a problem 'reading the initials' on the rota, **don't guess that 'its not you'** - check with me

GOAL 2: No calls later than 15 minutes:

How can we achieve this ?

- * Collect your rota as early as you can
- * Communicate with your double up partner the evening before. Any conflict of time bring it to my notice the day before
- * Leave enough time to get to client, think about the time of day that you are travelling

- * If you find your 'double booked on the rota' - inform me immediately
- * If there is a double up, but only 1 set of initials—bring it to my notice immediately
- * If on a double up, and your running late, contact the office—that way we can alert the client
- * Don't wait 30-45 minutes before notifying the office that 2nd worker has not arrived

GOAL 3: To wear uniforms, and wear or carry our I.D badges:

How can we achieve this ?

- * Attach it to your clothing night before
- * Pop it in your bag / or your fleece
- * Read your contract and remind yourself of your need to wear the uniform, think the financial penalties attached if you don't !
- * Need to think of the client and safeguarding
- * Advertising our company
- * It forms part of your contract
- * It tells client, family, friends and neighbours who you are

The results will be published for these 3 goals in the next Staff Newsletter—which will be June 2013. I shall then set 'new goals'. So, the objectives are to ensure that 'all teams' communicate better as a team; not letting your colleagues down; ensuring that we keep the client at the centre of everything that we do; keeping up team spirit and morale; to willingly

help your team colleagues. So come on, but with these goals '*points definitely 'don't mean prizes*'. It's the team with *the lowest points* that will 'win' over the next year.

Bev Garrett
Managing Director



NEW Arrival

for Bibhuta and her family

A bouncing baby girl —

Savyata

born on 5th January 2013

3 kg

**Congratulations go out
to the
'proud parents'**

JULIANA BRIMICOMBE ANSWERS YOUR QUESTIONS—



Question 1:

Can I change a shift on the rota with my colleague/s ?

JB/Care Co-ordinator reply:

Yes, but there are a couple of things to remember:

- ◆ The staff who is arranging the shift change must inform the office/manager immediately so that the rota is amended to show who is going to do the call/visit.
- ◆ The one agreeing the swap must realise that they have now taken on the responsibility and duty of care to ensure that the call/visit is attended.
- ◆ Ensure that you know the client, and are aware of the care plan for example: is the client one you have worked with before, is it a complex care package, is it a double up—if so who is the double up partner and where/when to meet up with them.



Question 2:

Why must I wear my uniform and wear /carry my ID badge ?

JB/Care Co-ordinator reply:

That is the only way our client/s and the public can identify what company you are working for. It also forms part of the Health, Safety and Security in the workplace. It is also part of your contract.



NOTE:

SPOT CHECKS ARE NOW GOING TO BE UNDERTAKEN TO ENSURE THAT WE ARE ALL IN UNIFORM



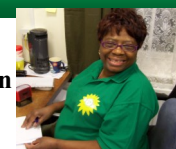
Question 3:

Why must we date and sign the client medication form

JB/Care Co-ordinator reply:

This ensures that the client has received their medication at the right time of day, and at the correct dosage, recording so as to assure the next member of staff, or clients relatives that the medication has actually been taken/administered.

Some clients have their medication dispensed in a box or bottle for example: Morphine, Antibiotics and Insulin.



NEWSLETTER & WEBSITE FEEDBACK

We are confident that you would like to contribute to future issues, or a topic that you would like to see included. Maybe an idea to our company website. Please call into the office; telephone (01252 544423) or email jwilliams@unityincareltd.co.uk

OPPORTUNITIES & TENDERS

Working on Pre-Qualification questionnaires for various long term contractual work covering children/young people; challenging needs;

This would certainly give us the flexibility to offer our staff more regularity of hours.

2012/13 BUSINESS PLAN/Policies & Processes

To continue to familiarise ourselves with not only our contracts; handbooks, but policies and procedures.

It is a legal requirement, and will make us so much more knowledgeable when carrying out our duties. These are available to view, so call into the office.

XMAS PARTY & CLIENT 'STAFF NOMINATIONS AWARDS'

Again the Christmas Party was well attended. A great time was had by all. Giving everyone the opportunity to 'get together'. This event was used as an opportunity to present the yearly client 'Staff Nomination Awards' for 2012.

Our clients continue to support this initiative. Our **congratulations** and a big 'well done' goes out to the winner and runners up (see below).

STAFF NOMINATIONS 2012

1st Simon Garrett

2nd Gundevi Pun

3rd Michael Maxwell

Well done, to all the 'nominees':

Denise Thomas

Janice Green

Nichole Lattimore

Sara A Hunter

Sharon Blundell

Pauline Picard

Pansy Wright

"A big well done to THE WINNER—

***Simon Garrett**" (unfortunately he couldn't attend the Christmas Party)*



"Bev presenting the 2nd and 3rd place awards to Gundevi Pun and Michael Maxwell"



"Sara Hunter"

"Sharon Blundell"

It's a great opportunity to demonstrate that we do celebrate 'our success', and it provides a chance for management to show appreciation of the effort and hard work of the staff. The client 'staff nominations' now forms part of our business year, and each year clients are given the chance to



"Pauline Picard"



"Pansy Wright"

nominate their care/support worker—so good luck to you all in the coming year.

We all know that verbal feedback is great, but to have a more 'formal recognised system' in place makes each and every one of us realise what we mean to the clients and the impression and impact you have on their lives—as well as the importance of your contribution to the overall wellbeing and reputation of the company.

Keep up the teamwork, communication and reliability—it is these things that will ensure that Unity in Care can continue to compete with our competitors in the market place.

***Julie Williams**
Business Administrator*

Are you 'Caring the *personal* way?'



What is 'Personalisation'?, it is about choice, empowerment and the things that a client wants for themselves, whether they are being cared for in their own homes or whether they live in a care home. Their wants and needs should be at the centre of their care plan, and will always be document in the 'care plan' - making the care plan such a very importance document. Staff don't simply need to listen to what a client is saying, but to be familiar with the care plan, up to date with family or personal details and events.

Personalisation is not just about meeting the client's basic human rights, it's about getting to know them as an individual and making sure their voice/s are heard.

For example, when a client with dementia moves into a care home, it needs to be understood, to ensure that their needs are met and finally to ensure that there is little change and disruption to their routine in their daily life, which helps the transition to be as comfortable and smooth as possible. This sounds simple on paper, but the reality is complex to build certain elements and routines—made to the requirements of an

individual within the care home daily working routine. At the moment the majority of our care/support is in the 'clients home' - even this for a client suffering dementia can be distressing for the client the lows and highs, forgetting what happened yesterday—but such an active and vivid memory of the past. They look forward to staff visits, they will watch the clock. For those that have no immediate family nearby, or perhaps are away will become even more anxious and worried than those clients with family close by. We need to ensure that where possible we are including the client and keeping them up to date—with anything that may affect or impact on their lives, just a simple phone call. We all realise that staff are against time and the rota. However, to go into client 'make them feel special', they don't want to know that 'you are rushing off to tend to another client'. Look at your own time scheduling and what you are actually doing within the clients' environment. Is there a 'time saving' task that could be achieved, is there a task that could be made quicker and easier—not to allow you to rush off to the next client, but simply that you could actually use with the client that you are currently tending to. Make each client 'feel' that you are there for them, not to hear staff stressing that they have such a busy day with a whole long list of clients—it makes the job sound more of a 'chore' and 'pain', and that the clients are seen at times as an 'inconvenience'.

Spending time: Although our staff get an allocated amount of time it is still important that our staff values, attitudes and beliefs are a large part of this and it's very important to ensure that the correct procedures are followed from the outset. If there is a lack of vision and training through the initial assessment process, in the way that a care plan is compiled, then we may think that we are working in a clients best interest, but could be blocking the 'personalisation' aspect of the care.

When reviewing a client to develop a care plan, personalisation must be at the very heart of any discussion or assessment. Giving real attention to their needs, routines, plus an understanding of their personality and motivations, are key to ensuring that high quality care is delivered. Starting with the 'individual needs' and not trying 'to fit a person into an established way of operating or way of working'.

Unity in Care wishes to keep personalisation at the centre of the care, ensuring staff undergo training that will help them to empathise with the clients they are working with and looking after. They need to take time to understand and 'get to know each client' their likes, dislikes, personal achievements and so on, not simply just their name.

article continued overleaf.....

continued from page 3:

Are you 'Caring the *personal* way?'

A change in attitude:

Understanding the challenges a client may face when changing staff, or a change in personal circumstances is a great way of getting staff to buy into a personalisation approach and deliver it well, as it challenges our values and attitudes.

Staff need to understand that safeguarding, personalisation, choice, dignity and respect are all part of a whole systems approach to their job role and responsibilities.

It's about meaningful input, not just perceived or 'expected of us' input, but to make each client feel empowered and involved in their future care; for instance, involving them in decisions such as what and when to eat; what to wear; and when to go to bed.

It's wrong to think that clients are unable to make their own decisions, but important to use 'jargon-free' words and information so that they understand and remain in control of what happens to them.

Recent news reports have highlighted the consequences of getting things wrong, and although people may think that they don't have the time to dedicate to maintaining someone's dignity and independence, it's a vital 'investment' that must be encouraged not just through our company at 'Unity in Care'— but throughout the care industry in general.

Julie Williams
Business Administrator

LAUNCH OF 'LEADERSHIP QUALITIES FRAMEWORK' A GREAT SUCCESS

Care talk JANUARY 2013

02 November 2012



'Care Minister launches Skills Academy's Leadership Qualities Framework for Adult Social Care'

Norman Lamb MP, Minister of State for Social Care, marked the launch of the national Leadership Qualities Framework for Adult Social Care at a reception at Central Hall, Westminster on 1st November 2012.

The Reception was a great success, with over 100 attendees from across health and social care coming together to mark the occasion.

The Framework, developed by the Skills Academy, is the first of its kind in social care. It describes, in a clear and accessible way, what good leadership looks like in different settings and situations, illustrating the attitudes and behaviours needed for high quality leadership at every level of the sector.

The Minister gave strong endorsement to the Framework, saying:

"Great Leadership requires the right skills and values. The new Leadership Qualities Framework is a fantastic step in the right direction. This is about leadership at all

levels and care workers leading from the front line.

It provides clear guidelines enabling organisations to introduce training to help their leaders deliver higher quality and better care. I am also delighted that this work will support development of leaders in both social care and the NHS to help the drive towards better integration of services."

Replying for the Academy, **Jo Cleary, Chair of the Board**, said:

"Good leadership is fundamental to the delivery of excellent care and support. The launch of the LQF is a landmark moment in social care, placing leadership at the heart of driving transformation in the sector and making integrated services a reality on the ground."

According to **Debbie Sorkin, Acting Chief Executive**:

"We know that the government sees developing leadership as key to realising the objectives set out in the White Paper, Caring for our future. The LQF is one of the Skills Academy's primary contributions to achieving those aims."

We'll be sending out more details, and news about how the Framework's being adopted across social care, on a regular basis.

For more information visit:

<https://www.nsasocialcare.co.uk/about-us/-framework>

CQC UNANNOUNCED INSPECTION / VISIT



On December 18th 2012 we received an 'unannounced inspection' from the CQC. On this particular visit, the inspectors efforts were placed and focus concentrated on '5 Outcomes' (out of the possible 16 standards) which were:

Outcome 1: Respecting and involving people who use services

Outcome 4: Care and welfare of people who use services

Outcome 7: Safeguarding people who use services from abuse

Outcome 12: Requirements relating to workers

Outcome 16: Assessing and monitoring the quality of service provision

As we conduct our own 'internal audits' based on the CQC outcome groups. We were well prepared in as much as.

*Knowing what information they would require, and ensuring that we could 'dynamically' retrieve this—with feedback database.

*To demonstrate areas of staff training, around our own 'Training Programme'

*Appraisals and Supervisions (who had/had not attended these)

*Client feedback and surveys—of which we record, monitor, analyse and graph up into meaningful statistics.

The inspector had quite a few requests to what she was going to need to conduct the audit and evidence what, when and how we do things. The required level of documentation, policies were given within 10 minutes of her arrival. The main reason for our effectiveness here was due to the fact from our own audits. It 'simply is the way we do business on a day to day basis'. So, it was **GREAT** to be able to demonstrate how we manage the administration, feedback of all sorts, and what we actually do with this feedback.

The inspector was given a list of staff, clients and their families that could be contacted with regards to the care/support that they have received or receiving. Some of the staff that 'simply walked in' the office that day, were actually approached by the inspector and asked to go upstairs for a brief chat, whilst other staff were telephoned. The same went for clients and their families—our company really did receive some very good and constructive feedback from all those that were involved.

We have now received the official report, and we are delighted to say that there were no cautions, warnings or even recommendations for improvement over the areas that were audited.

However, we don't want to get complacent—these visits can happen at any time. Our own 'internal audits' shall continue and where we pick up issues, problems and non conformances—we shall include these to our 'ongoing business improvement programme'.

Please find the CQC summary of the inspection overleaf (see page 5). Should you wish to read the full report—this is available at the office.



Julie Williams
Business Administrator

MICHAEL MAXWELL—Joined June 2012

On my way to 'Beating the Odds'



Hi, my name is Michael Maxwell. I was born in Jamaica where I was raised by both parents-and being 1 of 12 siblings. My father was a well known preacher in 'the community'. As a child growing up, I was raised on nothing but high morals, one of which was to always respect the people around you. Back in those days

we were taught to respect 'our elders'- I will be forever grateful for the values I learned, because that is what has moulded me into the person I am today.

I came to the United Kingdom when the country was in the great depths of recession. I had spent over 12 year in Jamaica as an office clerk 'for a well known international law firm'. I certainly didn't think that it would be difficult to find a job in that field of work. However, the job market became extremely competitive, and I soon came to realise that I would have to rely on 'other skills', 'thinking outside of the box' - to enable me to find a career, a vocation.

I had heard about Unity in Care through a relative, I was in the mind set that I would try something totally different. What I didn't realise was that I was being led to the 'interesting field' of Health and Social Care.

I started my 'new endeavour' in June 2012 and not really knowing what the outcome would be. To be

totally honest - I was simply 'testing the water'. I found my first day very challenging. I was sent to a particular client, after reaching the address. I asked for the person that I was supposed to attend to. They pointed over to a person who was at the time sitting around his table enjoying his lunch. I casually walked over, introduced myself and initiated conversation. This was made more difficult as the person's first language was not English. By the time I had understood what he had said - I then realised it was the wrong person I was supporting. Regardless of the fact that this person and 'my client' were called by the same name. So, there I was in a frenzy, time was running out, and I couldn't find 'my client'. This was not looking good for me. It was only after communicating with my manager that I found the client, and got on with the job. These are the little experiences that you remember and learn from. After spending a few weeks in my new role, attending various modules of training given by talented and experienced manager and care co-ordinator, having assurance and support from my work colleagues - I feel I have truly found '*a new passion*' which is to care for individuals with both mental and physical challenges.

I strongly believe that 'Unity in Care' is one of those organisations that have positioned themselves in the care industry to 'raise the bar' of effective healthcare in today's society. Unity in Care has and does touch the lives of many - providing their clients with quality care, and at the same time continues to build the reputation of the company.

I have now personally witnessed how 'our company' has restored and supported the 'lives of many' in the Aldershot and Farnborough

region, and now spanning into other surrounding areas. This has made me a very proud member of staff, because on a daily basis I get the opportunity of supporting individuals and making a difference to their lives. In addition to work as part of a team. To achieve together the objectives of 'Unity in Care'. This has personally been a rewarding experience - I am contributing towards a 'great and worthy' cause.

My hobbies are cricket and football. When I do have 'spare time' - I play for a Farnborough cricket team and a London football team.

I have worked and met many work colleagues, but for those of you that I don't know—I look forward to meeting you soon.

Michael Maxwell
Support/Care Worker

WHAT WOULD YOU DO AND SAY in these scenarios ?

Scenario 1:

My double up partner talks down to me in front of clients. What should I do?

- Get defensive put him/her in their place
- Burst into tears
- Wait until I have left the clients home, then approach my colleague

Scenario 2:

A client has shared some sensitive information about a team member. What should I do?

- Do nothing-client is known as a 'gossip'
- Approach 'my manager' and 'share the sensitive' information
- Go straight to the member of staff and let them know what the client has been saying

Scenario 3:

I have noticed there is no care plan in the client folder. What should I do?

- Think to myself - I know this client and know what I am supposed to do
- Inform the office at first opportunity
- Oh, another one of the team members would have noticed and reported it

Please note: Have a chat with one of your 'Care Co-ordinators' if you are unclear or unsure about anything

CQC SUMMARY OF INSPECTION cont from page 4.....

Why CQC carried out the inspection:

This was a routine inspection to check that essential standards of quality and safety were being met. This was an unannounced visit.

How they carried out the inspection:

We looked at the personal care or treatment records of people who use the service, carried out a visit on 18th December 2012, talked with people who use the service and talked with carers and / or family members. We talked with staff.

What people told them and what they found:

We spoke to two members of staff, an administrator and the registered manager during the inspection. Following the inspection visit we spoke, by telephone with two service users and three relatives.

People and their relatives were very complimentary about the service provided by this agency. They all said that staff generally arrived on time or they had been informed if staff were delayed, and staff stayed for the full visit or longer if needed. People told us the staff were always kind and treated them with respect.

People said that they had built up a good rapport with their teams of staff, and one relative said their family member looked forward to the staff

visits. One person who used the service said the staff enabled them to remain as independent as possible, and they always felt safe when the staff were caring for them.

People said they were fully involved in planning their care, and the staff provided the care that they or their relatives required in a way that suited people's need.

We found that the agency was effectively managed, and the registered manager was committed to monitoring the quality of service and making improvements. The improvements had been based on the feedback they received from staff, the people who used the service and relatives.

The staff we spoke with-were positive about their roles and the support they received from the manager. The staff told us how they would appropriately respond to any allegations or suspicions of abuse.

bits, bobs 'n' bumpf

Mother's Day Sunday 10th March 2013



Why not create your own mini-world full of lush and beautiful plants to brighten up your 'mothers' day—by making her a terrarium?'

You will need:

- A clear glass jar, vase, bowl, glass, or whatever interesting glass container (open or closed)
- Rocks, pebbles or recycled glass chunks
- Activated charcoal (sometimes called activated carbon)
- Potting soil appropriate for your plants
- Moss (optional)
- Figurines, sticks or decorative items (optional)
- Various small plants
- A scoop, spoon or shovel
- Scissors
- Gloves



For the plants, the sky is the limit, but generally look for tiny plants that you can get inside your jar. To ensure that your terrarium will be successful, keep succulents and cacti together and fern and tropical plants together, because they require different amounts of water and soil. You'll want cactus soil for the succulents and regular old potting soil for everything else.

STEP1: Prepare the container. Remove price tags or stickers from your jar, wash both inside and out. Imagine how you want to arrange your plants inside the jar

STEP2: Add your drainage layers. Fill the bottom of container with rocks or pebbles. This is to create a false drainage layer so water can settle and not flood the plant. *The depth of rocks totally depends on the size of your container, - aim for 1/2" to 2".*

STEP3: Add the activated charcoal. This charcoal looks exactly like what you would expect it to and it's messy. Sometimes it comes as small granules other times it comes as shards - either works. You don't need much, just enough to cover the rocks. The charcoal will improve the quality of your 'little world' including reducing bacteria, fungi and odours.

STEP4: Add soil. Cactus and succulents need a special soil compared to most other plants, so be sure to get the appropriate bag depending on which plants you're using. Add soil so plant roots have plenty of room to fit and then grow.

STEP5: Plants. Take your plant out of the pot and break up the hard soil ball. Using a spoon, your fingers or even a pencil, dig a well to place your plants roots in.

STEP6: Add Accessories. After you're done, you can add little things like a blanket of moss (dried or living), little figurines, glass beads—this is your work and you can put whatever you think 'mum' would like in the terrarium.

STEP7: Clean and water. You will likely have dirt all over the sides of the container, so wipe down both the insides and outside. Give the terrarium a little water, just a couple of shots of water.

Care notes:

- * Monitor plants water needs based on how dry the soil is. If you used a container with closed lid, if water is dripping down from the top, open the lid to let some evaporate. If it looks parched then add a little water. You shouldn't need to water them very often.
- * If leaves die or wilt remove them,
- * Do not place in direct sunlight it will scorch the plant/s. Place in indirect light for best results.

Conference Room Hire

'Unity In Care Ltd'

Looking for a 'function room'?

- **Conferences**
- **Demonstrations**
- **Exhibitions**
- **Meetings**
- **Seminars**
- **Training**
- **Workshops**

We have a very spacious and airy conference facility which is appropriate for various activities. Accommodating up to 40 delegates, and is situated on the first floor. Partitioning is available if required.

Situated within easy access from the M3, 331 and the A325.

If you would like further information contact:

01252 544423

or

e-mail info@unityincareltd.co.uk

SATURDAY SCHOOL

Term-time:

10.00am-12.30pm

Looking for some extra support for your child?

The Saturday school is expertly run by qualified, driven teachers Angela Coleman and Nichole Lattimore. It helps to bring together different cultures in a very friendly and pleasant environment.

The success of the school can only be attributed to the dedication of Angela's and Nichole's deft organisational skills where they ensure all sessions are immaculately prepared to each year group's specific educational needs. The focus is on the core subjects, Maths and English so any mathematical or literacy problems encountered in mainstream school can be addressed in the Saturday sessions. This extra 'tuition' is invaluable, and ensures our children keep up with the school curriculum.

For more information please contact:

Angela Lightbody-Coleman



Are you looking to hire a function room/hall for that special birthday, christening, wedding event?

West Indies Association Hall

Queens Road, North Camp, Aldershot.

For further information:

Contact Bev Garrett on 07850 092991

Volunteers wanted:

We are looking for volunteers to help with Elegantly Aged, our Saturday Community Club for the over 50's. If you would like to participate or contribute to this venture, please give us a call on **01252 544423** between 11.00am-5.00pm (Monday-Friday)

Disclaimer:

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Easter 'Simmel Cake' recipe

Simmel cake is a light fruit cake covered with a layer of marzipan baked into the middle of the cake. Traditionally, Simmel cakes are decorated with 11 or 12 balls of marzipan, representing the 11 disciples and, sometimes, Jesus Christ. One legend says that the cake was named after Lambert Simmel who worked in the kitchens of Henry VII of England sometime around the year 1500.



Ingredients:

4oz (125 grams) granulated sugar
4oz (125 grams) almonds, ground
1 egg, beaten
8½ teaspoon almond extract

4oz (125 grams) butter, softened
4oz (125 grams) soft brown sugar
3 eggs, beaten
5oz (150 grams) all-purpose flour
¼ teaspoon salt, ½ teaspoon mixed spice
12oz (350 grams) mixed dried fruit
2oz (50 grams) mixed citrus peel
grated zest of ½ lemon
1 teaspoon apricot jam warmed
beaten egg for glazing

Method:

- ◇ Mix together granulated sugar and ground almonds, and add enough beaten egg to give a soft consistency
- ◇ Add almond extract and knead for one minute or until the paste is smooth and pliable
- ◇ Set aside, covered
- ◇ Preheat oven to 140°C (275°F)
- ◇ Cream together butter and granulated sugar
- ◇ Beat in eggs, a bit at a time
- ◇ Flour, salt and spice, add to mixture alternately with dried fruit, mixed peel, zest of lemon
- ◇ Mix well together
- ◇ Place half the mixture into a well lined 7 inch (18 cm) tin and smooth top with a wooden spoon
- ◇ Roll out ½ the almond paste into a circle and place on top of the cake mixture
- ◇ Pour in remainder of cake batter and smooth top, hollowing the top slightly
- ◇ Bake in a preheated oven 140°C (275°F), for one and a half to two hours
- ◇ Remove and set on rack to cool
- ◇ When cake is quite cold, brush top with slightly warmed apricot jam
- ◇ Roll out remainder of almond paste to fit top of cake
- ◇ Lay it on top of the apricot jam
- ◇ With the scraps of paste, form eleven small egg shapes, and place eggs around the edge
- ◇ Brush entire top including eggs with a little beaten egg
- ◇ Return cake to the oven for about 10 minutes at 180°C (350°F) for almond paste to brown

Many thanks to the following contributors:

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