



General Overview: -

Bupa Hillsborough provides rest home and hospital level care for up to 47 residents. During the audit, there were 45 residents.

This unannounced surveillance audit was conducted against a subset of the relevant Health and Disability Standards and the contract with the district health board. The audit process included the review of policies and procedures, the review of residents and staff files, observations, interviews with residents, family, management, staff and a general practitioner.

There are well-developed systems, processes, policies and procedures that are structured to provide appropriate quality care for people who use the service. Implementation is supported through the Bupa quality and risk management programme that is individualised to Hillsborough.

The service has addressed the one shortfall from the previous certification audit around performance appraisals.

This surveillance audit identified improvements are required in relation to the adverse event process and interRAI assessments.

A continuous improvement has been awarded around infection control surveillance monitoring.

Health and Disability Sector Standards

Consumer Rights - There is evidence that residents and family are kept informed. The rights of the resident and/or their family to make a complaint is understood, respected and upheld by the service. Complaints processes are implemented, and complaints and concerns are actively managed and well-documented.

Organisational Management - Services are planned, coordinated and are appropriate to the needs of the residents. A care home manager and clinical manager are responsible for day-to-day operations. Annual goals are documented for the service with evidence of regular reviews. A quality and risk management programme is in place. Quality initiatives are implemented which provide evidence of improved services for residents.

Residents receive appropriate services from suitably qualified staff. Staff recruitment is managed in accordance with good employment practice. An orientation programme is in place for new staff. An education and training plan is being implemented and includes in-service education and competency assessments. Registered nursing cover is provided twenty-four hours a day, seven days a week.

Continuum of Service Delivery - Registered nurses assess, plan and review residents' needs, outcomes and goals with the resident and/or family/whānau input. Care plans viewed in resident records demonstrated a multi-disciplinary team approach. Resident files included medical notes by the general practitioner and visiting allied health professionals. There is a three-monthly general practitioner (GP) review.

The residents' activities programme provides diversional therapy activities, and these are varied and include one to one and group activities, community involvement and outings. There are regular entertainers, outings and celebrations.

Medications are managed appropriately in-line with accepted guidelines. Staff responsible for administration of medicines complete annual education and medication competencies. All medication charts have photo identification, allergy status and evidence of three-monthly reviews was noted.

Residents food preferences and dietary requirements are identified on admission. This includes consideration of any dietary preferences or needs. All meals are prepared on site. There is a food control plan in place. The four weekly seasonal menu has been reviewed by a dietitian. Individual and special dietary needs and residents' dislikes are catered for and alternative options are made available for residents.

Safe and Appropriate Environment - There are documented processes for the management of waste and hazardous substances in place and incidents are reported in a timely manner. Chemicals are stored safely throughout the facility. The building has a current warrant of fitness.

Restraint Minimisation and Safe Practice

Restraint minimisation and safe practice policies and procedures are in place. Staff are provided with training in restraint minimisation and challenging behaviour management. On the day of audit there were three residents using restraint and six residents with an enabler. Restraint management processes are being implemented.

Infection Prevention and Control

The infection control coordinator (registered nurse) oversees infection control activities for the service. Information obtained through surveillance is used to determine infection prevention and control activities, resources and education needs within the facility. Staff education with toolbox talks take place regularly. There have been no outbreaks.

Total out of 101 HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here)	CI	FA	PA	UA	NA
	1	38	2	0	60

Continuous Improvement (CI) - *Criterion are fully attained, with the service demonstrating continued review and improvement in this area.*

Fully Attained (FA) - *The service can clearly demonstrate the implementation of processes, systems and structures that meet the criterion.*

Partially Attained (PA) - *There is evidence of processes and systems without required supporting documentation or evidence of a documented process but the care home is unable to demonstrate full implementation*

Unattained (UA) - *The service is unable to demonstrate appropriate processes, systems or structures to meet the criterion.*

Not Audited or Not Applicable (NA)