



General Overview: -

Gladys Mary is part of the Bupa group and provides rest home and dementia level of care for up to 39 residents. On the day of audit, there were 34 residents.

The service is managed by a facility manager who is non-clinical. He is supported by a clinical nurse manager. The residents and relatives interviewed all spoke positively about the care and support provided.

This unannounced surveillance audit was conducted against a sub-set 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, and interviews with residents, family, management and staff.

The service has addressed one of two shortfalls from the previous certification audit around medication documentation. Improvement continues to be required around training.

This surveillance audit also identified further improvements required around open disclosure, self-medicating and care plan evaluations.

Health and Disability Sector Standards

Consumer Rights - The rights of the resident and/or their family to make a complaint are understood, respected and upheld by the service. Evidence of communication is documented in the family/whānau communication record on the resident file.

Organisational Management - Services are planned, coordinated, and are appropriate to the needs of the residents. The facility manager and clinical nurse manager are responsible for the day-to-day operations of the facility. Goals are documented for the service with evidence of annual reviews. Corrective actions are implemented where opportunities for improvements are identified. A risk management programme is in place, which includes managing adverse events and health and safety processes.

Residents receive appropriate services from suitably qualified staff. Human resources are documented in accordance with good employment practice. A comprehensive orientation programme is in place for new staff. There is a Bupa annual education schedule documented and staff are required to complete annual competencies. Staffing levels are adequate to meet the needs of the residents.

Continuum of Service Delivery - The registered nurses are responsible for each stage of service provision. A registered nurse assesses and reviews residents' needs, develops care plans and evaluates outcomes and goals. There is evidence of resident and/or family/whānau input. Care plans reviewed in resident records demonstrated service integration and the care plans were reviewed at least six monthly.

Medication policies reflect legislative requirements and guidelines. Staff responsible for administration of medicines complete education and medication competencies. The medicine charts were reviewed at least three monthly.

There is a varied activity programme which is delivered on-site by an activities coordinator. The programme includes community visitors and outings, entertainment and activities that meet the individual recreational, physical and cognitive abilities and preferences for each consumer group. Residents and families reported satisfaction with the activities programme.

All food is cooked on-site, and residents' nutritional needs are identified and documented, and choices are available and provided. Meals are well presented. Nutritional snacks are provided over 24 hours.

Safe and Appropriate Environment - The building holds a current warrant of fitness.

Restraint Minimisation and Safe Practice

Enablers are voluntary and the least restrictive option. There were no residents with enablers or restraints.

Infection Prevention and Control

The infection control programme and its content and detail are appropriate for the size, complexity and degree of risk associated with the service. The infection control coordinator uses the information obtained through surveillance to determine infection prevention and control activities, resources and education needs within the facility. The service engages in benchmarking with other Bupa facilities.

Total out of 101 HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here)	CI	FA	PA	UA	NA
	0	37	4	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)