



## **General Overview: -**

Bupa Rahiri provides rest home, hospital and dementia level of care level care for up to 49 residents. On the day of the audit there were 47 residents

The care home manager is responsible for the day to day operations of the service and is supported by a regional manager and clinical manager.

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.

All previous audit shortfalls have been addressed relating to complaints management, internal audits, assessments and planned maintenance.

There were no further shortfalls identified at this surveillance audit,

The service has maintained a continuous improvement rating around activities.

## **Health and Disability Sector Standards**

**Consumer Rights** - The service has a culture of open disclosure. Families are regularly updated of residents' condition including any acute changes or incidents. Complaints processes are implemented and managed in line with the Code. Residents and family interviewed verified ongoing involvement with the community.

**Organisational Management** - There is a documented quality and risk management system in place. Quality data is collated for accident/incidents, infection control, internal audits, concerns and complaints and surveys. Incidents are appropriately managed. There are annual quality goals for the service that are regularly reviewed. There are human resources policies including recruitment, job descriptions, selection, orientation and staff training and development. The service has an orientation and training programme that provides staff with relevant information for safe work practices. There is a staffing policy documented.

**Continuum of Service Delivery** - The registered nurses are responsible for each stage of service provision. A registered nurse assesses, plans and reviews residents' needs, outcomes and goals with the resident and/or family/whānau input. Care plans viewed in resident records demonstrated service integration. Resident files included medical notes by the general practitioner and visiting allied health professionals.

Medication policies reflect legislative requirements and guidelines. Registered nurses and senior caregivers responsible for administration of medicines complete education and medication competencies. The medicine charts reviewed met legislative prescribing requirements.

Two activity coordinators implement the rest home and hospital activity programme Monday to Saturday and oversee the activities provided by caregivers in the dementia care unit. The programme includes community visitors, outings, entertainment and activities that meet the individual recreational, physical, cultural and cognitive abilities and preferences for each resident group.

All meals and baking are done on-site. Residents' food preferences and dietary requirements are identified at admission and accommodated. The menu is reviewed by the dietitian. Nutritional snacks are provided 24 hours. Residents commented positively on the meals provided.

**Safe and Appropriate Environment** - The building holds a current building warrant of fitness. There is a reactive and planned maintenance programme.

## **Restraint Minimisation and Safe Practice**

The service has policies and procedures to ensure that restraint is a last resort and safely used when required, and that enabler use is voluntary. There were no residents with any restraints and one using an enabler at the time of the audit. Training around restraint and enabler use has been provided.

## **Infection Prevention and Control**

The infection control coordinator uses the information obtained through surveillance to determine infection control activities, resources and education needs within the facility. This includes audits of the facility, hand hygiene and

surveillance of infection control events and infections. The service engages in benchmarking with other Bupa facilities. Staff receive ongoing training in infection control.

<b>Total out of 101 HDSS criteria reviewed</b> (NB: ARC contract criteria reviewed at audit are not counted here)	<b>CI</b>	<b>FA</b>	<b>PA</b>	<b>UA</b>	<b>NA</b>
	1	49	0	0	59

**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)**