Date: 28 – 29 January 2021

4 Years' Certification



## General Overview: -

Bupa David Lange rest home and hospital is part of the Bupa aged care residential group. The service provides rest home, hospital and residential disability – physical level care for up to 87 residents. On the day of the audit there were 72 residents.

This certification audit was conducted against 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 resident and staff files, observations, and interviews with family, management, staff, and the general practitioner.

The care home manager has been in the role for over two years and has over 20 years of previous experience in aged care and as a care home manager in other organisations. The care home manager is supported by a clinical manager (registered nurse) who has been in the role for six months with previous experience as a unit coordinator.

The residents and relatives spoke positively about the staff and the care provided at Bupa David Lange.

This audit identified no areas identified for improvement.

This audit awarded two continuous improvements for ensuring that residents and family receive culturally safe services which recognise and respect their ethnic, cultural and spiritual values and beliefs and for the restraint free environment provided at the service.

## Health and Disability Sector Standards

**Consumer Rights** - Policies and procedures that adhere with the requirements of the Health and Disability Commissioner (HDC) Code of Health and Disability Services Consumers' Rights (the Code) are in place. The welcome/information pack includes information about the Code. Residents and families are informed regarding the Code and staff receive ongoing training about the Code.

The personal privacy and values of residents are respected. There is an established Māori health plan in place. Bupa David Lange has a large number of residents who identify as being from a range of Pacific Islands, Indians, Māori and European. The individual care plans reference the cultural needs of residents and residents and family described a high level of satisfaction with the management, staff and care provided. Discussions with residents and relatives confirmed that residents and where appropriate, their families are involved in care decisions. Regular contact is maintained with families including if a resident is involved in an incident or has a change in their current health. Families and friends are able to visit residents at times that meet their needs.

There is an established system for the management of complaints, which meets timeframes determined by the Code of Health and Disability Services Consumer Rights (The Health and Disability Commissioner (HDC) Code of Health and Disability Services Consumers' Rights (the Code).

**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 the day-to-day operations of the facility. Goals are documented for the service with evidence of regular reviews.

Bupa David Lange is implementing the Bupa organisational quality and risk management system that supports the provision of clinical care. Key components of the quality management system link to staff meetings. Quality and risk performance are reported across the facility meetings and to the organisation's management team. Interviews with staff and review of meeting minutes reflected a culture of continuous quality improvements. An annual resident/relative satisfaction survey is completed and there are regular resident/relative newsletters.

Human resources are managed in accordance with good employment practice. An orientation programme is in place for new staff that is specific to the role and responsibilities of the position. Ongoing education and training for staff is being implemented.

The staffing levels meet contractual requirements. Registered nursing cover is provided 24 hours a day, seven days a week.

**Continum of Service Delivery** - The registered nurses are responsible for each stage of service provision. Residents' records reviewed, provided evidence that the registered nurses utilise the interRAI assessment to assess, plan and evaluate care needs of the residents. These are then reviewed and discussed with the resident and/or family/whānau input. Care plans viewed demonstrate service integration and are reviewed at least sixmonthly. Resident files include medical notes by the contracted general practitioner (GP), and visiting allied health professionals.

Medication policies reflect legislative requirements and guidelines. All staff responsible for the administration of medicines complete education and medication competencies. The electronic medication charts (1chart) are reviewed three-monthly by the general practitioner.

The activities coordinator (diversional therapist) and the team of activities coordinators implement the activity programme to meet the individual needs, preferences, and abilities of the residents. Residents are encouraged to maintain community links. There are regular entertainers, outings, and themed celebrations. Residents and families reported satisfaction with the activities programme.

All meals are cooked on site. Residents' food preferences, dislikes and dietary requirements are identified at admission and accommodated. There are nutritious snacks available at all times. The organisational dietitian reviews the Bupa menu plans.

**Safe and Appropriate Environment** - The building holds a current warrant of fitness. All internal and external areas are safe and well maintained. Fixtures, fittings, and flooring are appropriate and toilet/shower facilities are constructed for ease of cleaning. Chemicals are stored securely throughout the facility. Staff receive training and education to ensure safe and appropriate handling of waste and hazardous substances. Electrical equipment has been tested and tagged.

All medical equipment and all hoists have been serviced and calibrated. Residents can freely mobilise within the communal areas with safe access to the outdoors, seating, and shade. Cleaning and laundry services are well monitored through the internal auditing system.

Appropriate training, information, and equipment for responding to emergencies are provided. There is an emergency management plan in place and adequate civil defence supplies in the event of an emergency. There is an approved evacuation scheme and emergency supplies for at least three days. At least one first aid trained staff member is on duty at all times.

## **Restraint Minimisation and Safe Practice**

Restraint minimisation and safe practice policies and procedures are in place. Staff receive training in restraint minimisation and challenging behaviour management. On the day of audit there were no residents using restraints and five using an enabler. Restraint management processes are available if restraint is used.

## 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 (RN) is responsible for coordinating education and training for staff. The infection control coordinator has completed annual training provided by Bupa head office. There is a suite of infection control policies and guidelines available electronically to support practice. The infection control obtained through surveillance to determine infection control activities, resources and education needs within the facility. The service engages in benchmarking with other Bupa facilities. There has been one influenza outbreak in the previous year which was appropriately managed.

Total out of 101	CI	FA	ΡΑ	UA	NA
HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here)	2	91	0	0	8

**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)