# **Executive Summary of Certification Audit – St Andrews Care Home**

Date: 7 - 8 September 2020

### 4 Years' Certification



#### General Overview: -

Bupa St Andrews rest home and hospital is part of the Bupa aged care residential group. The service provides rest home and hospital level of care for up to 40 residents. On the day of the audit there were 39 residents.

The care home manager has been in the role since the facility opened in October 2016 and has over 10 years of previous experience as a care home manager with Bupa in New Zealand and in the United Kingdom. She holds a current practising certificate in nursing. She is supported by a clinical manager/registered nurse who has been in the role for over two years.

The residents and relatives spoke positively about the staff and the care provided at Bupa St Andrews.

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.

This audit identified no areas identified for improvement.

The service has been awarded a continuous improvement rating around falls reduction.

## 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. Individual care plans reference the cultural needs of residents. 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 HDC.

**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 St Andrews 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** - Residents' records reviewed, provided evidence that the registered nurses utilise the interRAI assessment to assess, plan and evaluate care needs of the residents. Care plans are developed in consultation with the resident and/or family. Care plans demonstrate service integration and are reviewed at least six monthly. Resident files included medical notes by the contracted general practitioner and nurse practitioner and visiting allied health professionals.

Medication policies reflect legislative requirements and guidelines. All staff responsible for administration of medication complete education and medication competencies. The medication charts are reviewed at least three monthly by the general practitioner or nurse practitioner.

An activities programme is implemented that meets the needs of the residents. 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.

All food and baking is done on site. Residents' nutritional needs are identified and documented. Choices are available and are provided. The organisational dietitian reviews the Bupa menu plans.

**Safe and Appropriate Environment** - 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.

Chemicals are stored securely throughout the facility. Staff receive training and education to ensure safe and appropriate handling of waste and hazardous substances. The building holds a current warrant of fitness. 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. Fixtures fittings and flooring is appropriate and toilet/shower facilities are constructed for ease of cleaning. 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. A staff member trained in CPR and first aid 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 either restraints or enablers. 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 (registered nurse) is responsible for coordinating/providing education and training for staff. The infection control manual outlines a comprehensive range of policies, standards and guidelines, training and education of staff and scope of the programme. The infection control coordinator uses the information 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 have been no outbreaks.

| Total out of 101  | CI | FA | PA | UA | NA |
|---|----|----|----|----|----|
| HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here) | 1  | 92 | 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)