Date: 20 January 2020



## General Overview: -

Bupa Wattle Downs provides rest home and hospital (medical and geriatric) level care for up to 60 residents. On the day of audit there were 59 residents.

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

The care home manager is appropriately qualified, experienced and has been in the role four years. She is supported by two-unit coordinators.

Feedback from residents and relatives was positive about the care and services provided.

The service has achieved a continuous improvement rating around meal services and the dining experience.

## Health and Disability Sector Standards

**Consumer Rights** - Staff strive to ensure that care is provided in a way that focuses on the individual, values residents' autonomy and maintains their privacy and choice. The service functions in a way that complies with the Code of Health and Disability Consumers' Rights (the code). Cultural needs of residents are met. Policies are implemented to support residents' rights, communication and complaints management. Information on informed consent is included in the admission agreement and discussed with residents and relatives. Regular contact is maintained with families, including if a resident is involved in an incident or has a change in their current health. Care plans accommodate the choices of residents and/or their family/whānau. Complaints and concerns have been managed and a complaints register is maintainedx.

**Organisational Management** - Bupa Wattle Downs Care Home has an established quality and risk management system that supports the provision of clinical care and support. An annual resident/relative satisfaction survey is completed and there are regular resident/relative meetings. The facility is benchmarked against other Bupa facilities. Incidents documented, demonstrated immediate follow-up from a registered nurse. There are human resources policies including recruitment, selection, orientation and staff training and development. The service has in place an orientation programme that provides new staff with relevant information for safe work practice. The organisational staffing policy aligns with contractual requirements and includes skill mixes. There is a roster that provides sufficient and appropriate cover for the effective delivery of care and support.

**Continum of Service Delivery** - There is an admission package available prior to or on entry to the service. Registered nurses are responsible for each stage of service provision. A registered nurse assesses and reviews residents' needs, outcomes and goals with the resident and/or family input. Care plans viewed demonstrated service integration and are reviewed at least six monthly. Resident files include medical notes by the contracted general practitioner and visiting allied health professionals.

Medication policies reflect legislative requirements and guidelines. Registered nurses and senior medication competent caregivers are responsible for the administration of medicines. Medication charts are reviewed three monthly by the GP.

The activities staff 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 celebrations.

All meals are cooked on site. Residents' food preferences, dislikes and dietary needs are recorded. The food control plan has been verified.

**Safe and Appropriate Environment** - Chemicals are stored safely throughout the facility. Appropriate policies and product safety charts are available. The building holds a temporary warrant of fitness. All rooms are single. There is a mix of rooms with own ensuites and shared ensuites. External areas are safe and well maintained with shade and seating available. Fixtures, fittings and flooring are appropriate and toilet/shower facilities are constructed for ease of cleaning. Cleaning services are monitored through the internal auditing system. All laundry is done off site. Systems and supplies are in place for essential, emergency and security services. A first aider is on duty at all times.

# **Restraint Minimisation and Safe Practice**

There is a Bupa restraint policy that includes the definitions of restraint and enablers. Enablers are assessed as required for maintaining safety and independence and are used voluntarily by the residents. At the time of the audit, there were seven residents requiring the use of restraint and one resident using an enabler. Resident files reviewed included consents, assessment and evaluations for restraint use. Restraint minimisation and enabler education has been completed.

## 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. 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.

| Total out of 101  | CI | FA  | ΡΑ | UA | NA |
|---|----|-----|----|----|----|
| HDSS criteria<br>reviewed (NB: ARC<br>contract criteria<br>reviewed at audit are<br>not counted here) | 1  | 100 | 0  | 0  | 0  |

**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)