



## **General Overview: -**

Bupa The Gardens Rest Home and Hospital provides rest home and hospital levels of care for up to 55 residents. During the audit, there were 50 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 and a general practitioner.

The Bupa quality and risk management programme is well embedded at The Gardens. Quality initiatives are implemented which provide evidence of improved services for residents. There have been a number of indoor and outdoor environmental improvements and refurbishments.

The care home manager is appropriately qualified and experienced and is supported by a clinical manager and a unit coordinator.

This certification audit identified one area for improvement around implementation of monitoring charts.

## **Health and Disability Sector Standards**

**Consumer Rights** - Staff demonstrated an understanding of residents' rights and obligations. This knowledge is incorporated into their daily work duties and caring for the residents. Residents receive services in a manner that considers their dignity, privacy and independence. Written information regarding consumers' rights is provided to residents and families. Cultural diversity is inherent and celebrated. Evidence-based practice is evident, promoting and encouraging good practice. There is evidence that residents and family are kept informed. The rights of the resident and/or their family to make a complaint is understood, respected and upheld by the service. Complaints processes are implemented, and complaints and concerns are actively managed and well documented.

**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 day-to-day operations. Goals are documented for the service with evidence of regular reviews. A quality and risk management programme is embedded in practice. Corrective actions are implemented and evaluated where opportunities for improvements are identified.

Residents receive appropriate services from suitably qualified staff. Human resources are managed in accordance with good employment practice. An orientation programme is in place for new staff. An education and training plan is being implemented and includes in-service education and competency assessments.

Registered nursing cover is provided 24 hours a day, seven days a week. The integrated residents' files are appropriate to the service type.

**Continuum of Service Delivery** - Registered nurses are responsible for the provision of care and documentation at every stage of service delivery. There is a comprehensive admission package available prior to or on entry to the service. The residents and family interviewed confirmed their input into care planning and access to a typical range of life experiences and choices. A sample of residents' files validated the service delivery to the residents. Where progress is different from expected, the service responds by initiating changes to the care plan or recording the changes on a short-term care plan. Resident files included medical notes by the general practitioner and visiting allied health professionals.

Planned activities are appropriate to the resident groups. The programme includes community visitors, outings, entertainment and activities that meet the individual recreational, physical, cultural and cognitive abilities and preferences for each consumer group. The residents and family interviewed confirmed satisfaction with the activities programme.

Staff responsible for medication management have current medication competencies. Medication policies reflect legislative requirements and guidelines. The medicine charts reviewed met legislative prescribing requirements.

All meals and baking are done on site. Food, fluid, and nutritional needs of residents are provided in line with recognised nutritional guidelines and additional requirements/modified needs were being met where required. The menu is reviewed annually by the Bupa dietitian. Residents commented positively on the meals provided.

**Safe and Appropriate Environment** - The building holds a current warrant of fitness. Resident rooms are single, spacious and personalised. Communal areas within each area are easily accessed with appropriate seating and furniture to accommodate the needs of the residents. External areas are safe and well maintained. 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. Chemicals are stored securely throughout the facility. Appropriate training, information and equipment for responding to emergencies is provided. There is an

approved evacuation scheme and emergency supplies for at least three days. A first aider is on duty at all times. The facility temperature is comfortable and constant. Electrical equipment has been tested and tagged. All medical equipment and all hoists have been serviced and calibrated. Hot water temperatures are monitored.

**Restraint Minimisation and Safe Practice**

Staff receive training around restraint minimisation and the management of challenging behaviour. The service has appropriate procedures for the safe assessment and review of restraint and enabler use. During the audit, there was one resident using restraint and nine residents voluntarily using enablers.

**Infection Prevention and Control**

The infection control management system is appropriate for the size and complexity of the service. The infection control coordinator (registered nurse) working together with the clinical manager, is responsible for coordinating and providing education and training for staff. The infection control manual outlined the scope of the programme and included a comprehensive range of policies and guidelines. The infection control coordinator uses the information obtained through surveillance to determine infection control activities, resources and education needs within the facility. This included audits of the facility, hand hygiene and surveillance of infection control events and infections.

Total out of 101 HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here)	CI	FA	PA	UA	NA
	0	100	1	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)**