Executive Summary of Certification – Accadia Manor

18 - 19 October 2018

3 Years' Certification



General Overview: -

Bupa Accadia Manor rest home provides rest home level care for up to 29 residents. During the audit, there were 28 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 residents and staff files, observations, and interviews with residents, relatives, management, staff and the general practitioner.

The care home manager has been in the role two months and has had 12 years' experience in aged care as an owner/operator. She is supported by an experienced clinical manager/registered nurse.

The residents, family and general practitioner commented positively on the services received at Accadia Manor rest home.

This certification audit identified that improvements are required in relation to reporting of quality data and meetings, incident reporting, and training.

Health and Disability Sector Standards

Consumer Rights - Bupa Accadia Manor Rest Home endeavours to ensure that care is provided in a way that focuses on the individual, values residents' quality of life and maintains their privacy and choice. Staff demonstrated an understanding of residents' rights and obligations. 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 needs are identified. 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 the complaint viewed was actively managed and well documented.

Organisational Management - Services are planned and coordinated and are appropriate to the needs of the residents. A newly appointed experienced care home manager and clinical manager are responsible for day-to-day operations. Goals are documented for the service. A quality and risk management programme is documented. 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 and ongoing education and training plan are in place.

Rosters and interviews indicated sufficient staff that are appropriately skilled with flexibility of staffing around clients' needs. The integrated residents' files are appropriate to the service type.

Continum of Service Delivery - There is an admission package available prior to or on entry to the service. 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. Care plans are evaluated at least six monthly. Resident files included medical notes by the general practitioner and visiting allied health professionals.

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

An activity coordinator implements the rest home activity programme. The programmes include community visitors, outings, entertainment and activities that meet the individual recreational, physical, cultural and cognitive abilities of the residents.

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. Residents commented positively on the meals provided.

Safe and Appropriate Environment - There are documented processes for the management of waste and hazardous substances in place, and incidents are reported in a timely manner. Chemicals are stored safely. The building holds a current building warrant of fitness. Residents can freely mobilise within the communal areas with safe access to the outdoors, seating and shade. Resident bedrooms have ensuites. Documented policies and procedures for the cleaning and laundry services are implemented with appropriate monitoring systems in place to evaluate the effectiveness of these services. Systems and training are in place for emergency procedures. There is a first aider on duty at all times.

Restraint Minimisation and Safe Practice

The clinical manager is the restraint coordinator. There were no residents using enablers. The service is restraint free.

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 officer (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 officer 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.

Total out of 101	CI	FA	PA	UA	NA
HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here)	0	90	3	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)