



## **General Overview: -**

Harbourview is part of the Bupa group. The service is certified to provide rest home and hospital level care for up to 58 residents. On the day of audit there were 51 residents.

This surveillance audit was conducted against a subset of the 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, family, management and staff.

The care home manager has been in the role for a year. She is a non-clinical manager and experienced in elderly care and management. The care home manager is supported by a senior registered nurse. Staff spoke positively about the support/direction and management of the current management team.

The service has addressed five of the seven previous audit shortfalls around complaint follow up, implementation of the quality system, training, care plan evaluation, and call bell audits. Care plan documentation and implementation of care are continued shortfalls.

This audit identified the following additional shortfalls requiring improvement; medication documentation and timeliness of documentation.

## **Health and Disability Sector Standards**

**Consumer Rights** - The rights of the resident and/or their family to make a complaint is understood, respected and upheld by the service. Care plans accommodate the choices of residents and/or their family/whānau. Complaints processes are documented.

**Organisational Management** - Services are planned, coordinated, and are appropriate to the needs of the residents. A care home manager and senior registered nurse are responsible for the day-to-day operations of the facility. Goals are documented for the service with evidence of annual reviews. 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. A process for ongoing education and training for staff is documented and being implemented. The staffing levels meets contractual requirements. Registered nursing cover is provided 24 hours a day, 7 days a week.

**Continuum 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 are 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 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 throughout the facility. 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. Systems and training are in place for emergency procedures. There is always a first aider on duty.

## **Restraint Minimisation and Safe Practice**

Restraint minimisation and safe practice policies and procedures are in place. Enablers are voluntary and the least restrictive option. There were six residents with restraints and three residents who required an enabler during the audit. Appropriate assessments, and evaluations were in place around restraint and enabler use.

## **Infection Prevention and Control**

Harbourview has an infection control programme that complies with current best practice. The infection control manual outlines a range of policies, standards and guidelines and defines roles, responsibilities and oversight, the infection control team, training and education of staff and scope of the programme. There is a dedicated infection control nurse who has a role description with clearly defined guidelines. The infection control programme is reviewed annually at organisational level.

The infection control programme is designed to link to the quality and risk management system. Infection control education is provided at orientation and incorporated into the annual training programme. Records of all infections are kept and provided to head office for benchmarking.

| <b>Total out of 101 HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here)</b> | <b>CI</b> | <b>FA</b> | <b>PA</b> | <b>UA</b> | <b>NA</b> |
|---|-----------|-----------|-----------|-----------|-----------|
|   | 0         | 44        | 4         | 0         | 53        |

**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)**