



General Overview: -

Ascot Care Home is part of the Bupa group. The service is certified to provide rest home, hospital (medical and geriatric), dementia and residential disability (physical) level of care for up to 104 residents. On the day of audit there were 94 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 since June 2019 and is an experienced care home manager. She is supported by a clinical manager who has also been in the role since June 2019.

Residents, families and the general practitioner interviewed commented positively on the standard of care and services provided.

This audit has identified improvements required around; complaints documentation, internal audits, meetings, care plan documentation, and implementation of care.

Health and Disability Sector Standards

Consumer Rights - Ascot Care Home has a culture of open disclosure. Families are regularly updated of residents' condition including any acute changes or incidents. A complaints log is maintained, and complaints are responded to and followed up. Residents and family interviewed verified ongoing involvement with the community.

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.

There is a business plan with goals for the service that has been regularly reviewed. Quality data is collated for accident/incidents, infection control, internal audits, concerns and complaints and surveys. Incidents are appropriately managed.

There are human resources policies including recruitment, job descriptions, selection, orientation and staff training and development. The service has an orientation and training programme that provides staff with relevant information for safe work practices. The staffing policy aligns with contractual requirements and includes appropriate skill mixes to provide safe delivery of care. Registered nursing cover is provided 24 hours a day, seven days a week.

Continuum of Service Delivery - Registered nurses are responsible for care plan documentation. InterRAI assessments and care plans are completed within required timeframes. Planned activities are appropriate to the resident's assessed needs and abilities. Residents and relatives advised satisfaction with the activities programme. The service uses an electronic medication management system. Food, fluid and nutritional needs of residents are provided in line with recognised nutritional guidelines and additional requirements/modified needs were being met. Nutritional snacks were available 24 hours a day in the dementia unit.

Safe and Appropriate Environment - Chemicals are stored securely throughout the facility. The building holds a current warrant of fitness. Communal areas within each area are easily accessed with appropriate seating and furniture to accommodate the needs of the residents. External areas are safe, secure and well maintained. 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

Restraint minimisation and safe practice policies and procedures are in place. At the time of the audit, the service had three residents using restraints (lap belts) and no residents with an enabler. Staff receive training in restraint minimisation and management of challenging behaviours.

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 service engages in benchmarking with other Bupa facilities.

Total out of 101 HDSS criteria reviewed (NB: ARC contract criteria reviewed at audit are not counted here)	CI	FA	PA	UA	NA
	0	39	5	0	57

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)