

## **Bupa Care Services NZ Limited - Whitby Rest Home & Hospital**

**Date of audit: 07-Jun-11(Surveillance audit)**

**The following summary has been accepted by the Ministry of Health as being an accurate reflection of the Surveillance audit conducted against the Health and Disability Services Standards – NZS8134.1:2008; NZS8134.2:2008 & NZS8134.3:2008 on the audit date(s) specified.**

### **GENERAL OVERVIEW**

Whitby rest home and hospital is part of the Bupa care facilities and provides hospital, rest home and dementia level care for up to 73 residents. On the day of the surveillance audit there were 24 of 24 hospital residents, 15 of 18 rest home residents, and 29 of 31 dementia residents. The service has continued to implement a comprehensive quality and risk management system since previous audit. The service has long-standing and experienced staff and is managed by an experienced manager and clinical manager (both experienced registered nurses). They are supported by a team of registered nurses. Regular training sessions are provided and competencies are completed by staff. All staff in the dementia unit have completed or are in the process of completing dementia qualifications. The service has addressed the corrective actions required from the previous certification audit. Further improvements have been identified in this unannounced audit and required around the quality meeting, care planning, weight loss management, and infection surveillance.

## **Bupa Care Services (GHC) Limited - Whitby Rest Home & Hospital**

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**Date of audit: 01-Oct-09 (Full audit)**

**The following summary has been accepted by the Ministry of Health as being an accurate reflection of the certification audit conducted against the Health and Disability Services Standards – NZS8134.1:2008;NZS8134.2:2008 & NZS8134.3:2008 on the audit date(s) specified.**

Whitby Rest Home and Hospital provides residential care for 73 consumers who have been assessed as requiring hospital level care, dementia level care, or rest home level care. On the day of the audit there were 24 hospital level care consumers, 24 dementia level care consumers, and 15 rest home level care consumers. Bupa Care Services Limited is the governing body and the facility is managed by a Facility Manager who reports to the Operations Manager weekly, and to the Care Services Team at Bupa corporate office on a monthly basis. The Facility Manager is a registered nurse, and she is supported by a Clinical Manager / registered nurse both of whom are responsible for oversight of the clinical care provided at Whitby Rest Home and Hospital.

## General Environment

Whitby Rest Home and Hospital provides accommodation for up to 73 consumers in three separate areas. All bedrooms are single, some have wash hand basins, and some bedrooms also have full ensembles. Service provider documentation reviewed provided evidence that appropriate systems are in place to ensure the service provides a clean and safe environment for consumers. Visual inspection of the facility provided evidence of a very clean, safe, and appropriate environment for the three consumer groups that is maintained to an adequate standard. Interviews of staff and review of a sample of staff files provided evidence that staff have received current training in relevant areas. Several areas throughout the facility have been repainted and re carpeted as part of the ongoing maintenance programme in place. Four bedrooms in the dementia unit have been converted into two quiet lounges for consumers in the dementia unit.

## Staffing Levels

There is a clearly documented and implemented process which determines service provider levels and skills mixes in order to provide safe service delivery. The Facility Manager reported that there has been a minimal turnover of staff and staffing is stable. Staff interviewed reported that morale amongst the staff is very high and they are working well together as a Team. Twenty four hour registered nurse cover is provided and Care Giver coverage is satisfactory. Consumers and family interviewed confirmed that there are adequate staff available to meet the needs of the consumers. Staff interviewed confirmed adequate numbers are available to ensure safe care is being provided. A staff in-service education programme for Whitby Rest Home and Hospital is in place with care giving staff also being supported to complete national qualifications in the care and support of the elderly e.g. Dementia Unit Standards and Core Competencies. Whitby has 79% of its care giving staff enrolled in national qualifications.

## Resident Satisfaction

Services were found to be provided in a manner that was respectful of consumer rights, facilitated informed choice, minimized harm, and acknowledged cultural and individual values and beliefs. Consumers and family members interviewed stated their satisfaction with the service and reported that staff are providing appropriate care and treatment. Consumers interviewed confirmed their care needs are being met. Consumers and family members interviewed stated the consumer's nutritional needs are being met. Consumers reported the quality of the food is very high, is colourful, tasty and is appetising, and said alternatives are always available if required.

A sampling of consumer files provided evidence that informed consent processes are managed well. Visual inspection of the premises provided evidence the Code of Rights information is displayed, along with information on accessing the advocacy service, and complaint forms.

## Quality Assurance & Risk Management

Documented evidence sighted during this audit demonstrated the service provider complies with legislation and the service is managed in a safe, efficient, and timely manner. Whitby Rest Home and Hospital has an established, documented, and maintained quality and risk management system that reflects continuous quality improvement principles. Quality improvement data is comprehensively analysed to improve service delivery. Quality improvement meetings are held two monthly which report on all quality and risk issues. The Facility Manager provides a weekly report to the Operations Manager and a monthly report to the Governing Body via the Quality and Risk Team, that includes key performance indicators and other quality and risk management information. An internal audit programme is in place.

## Continued Improvements

The following continued improvements have been noted since the last audit:

- (i) Quality initiatives have been undertaken in several areas that clearly demonstrate improved outcomes for consumers. Documentation to support these improvements was available for review during this audit.
- (ii) Quality improvement data, including audit results, is being comprehensively analysed, corrective actions are being taken as a result of this analysis, and outcomes and actions are being reported on.
- (iii) Consumer care plans reviewed provided clear evidence of comprehensive care planning that was consumer centred, had clear goals that had been identified by the consumer and or their family member, and are reviewed on a regular basis with input from the consumer and family.

## Standards of service delivery

The service provider has implemented systems to accurately assess, plan and evaluate the care needs of the consumers.

A sampling of nine consumer files [three hospital, three rest home and three secure dementia unit] provided clear evidence of comprehensive care planning that was consumer centred, and had clear goals that were measurable that had been identified by the consumer and / or their family . Consumers and family members interviewed confirmed they are involved in all aspects of their care planning, and reported their care is reviewed on a regular basis.

There are two activities programmes, one for the dementia unit and one for the rest home and hospital. Both programmes are varied and are individualised for each consumer where possible. The weekly programmes are displayed throughout the facility and every consumer receives a copy. There was very positive feedback from the consumers and family members at the audit, concerning the activities programmes.

Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines.

## Areas for Improvement

Three low risk criteria were identified as being partially attained during this audit. Two of these criteria relate to corporate policies and procedures that are currently being reviewed, and the other criterion relates to minor repairs and maintenance that are needed. The subsequent corrective actions and time frames for completion of these corrective actions have been agreed to by the service provider.

Standards have been assessed and summarised below:

### Key

Four point scale	Description
<b>Standards applicable to this service attained with some criteria exceeded</b>	Includes commendable elements above the required levels of performance
<b>Standards applicable to this service attained with all criteria achieved</b>	No short falls
<b>Standards applicable to this service attained with some criteria partially achieved or unachieved</b>	Some minor shortfalls, no major deficiencies and required levels of performance seem achievable without extensive extra activity
<b>Some standards or this standard</b>	Major shortfalls, significant action is

<b>unattained that are applicable to this service</b>	needed to achieve the required levels of performance
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<b>Consumer Rights</b>	Assessment
Includes 13 standards that support an outcome where consumers receive safe services of an appropriate standard that comply with consumer rights legislation. Services are provided in a manner that is respectful of consumer rights, facilities, informed choice, minimises harm and acknowledges cultural and individual values and beliefs.	<b>Standards applicable to this service attained with all criteria achieved</b>

<b>Organisational Management</b>	Assessment
Includes 9 standards that support an outcome where consumers receive services that comply with legislation and are managed in a safe, efficient and effective manner.	<b>Standards applicable to this service fully attained with some criteria exceeded</b>

<b>Continuum of Service Delivery</b>	Assessment
Includes 13 standards that support an outcome where consumers participate in and receive timely assessment, followed by services that are planned, coordinated, and delivered in a timely and appropriate manner, consistent with current legislation.	<b>Standards applicable to this service fully attained with some criteria exceeded</b>

<b>Safe and Appropriate Environment</b>	Assessment
Includes 8 standards that support an outcome where services are provided in a clean, safe environment that is appropriate to the age/needs of the consumer, ensure physical privacy is maintained, has adequate space and amenities to facilitate independence, is in a setting appropriate to the consumer group and meets the needs of people with disabilities.	<b>Standards applicable to this service attained with some criteria partially achieved</b>

<b>Restraint Minimisation and Safe Practice</b>	Assessment
Includes 3 standards with outcomes where: <ul style="list-style-type: none"> <li>- Consumers receive and experience services in the least restrictive manner through restraint minimisation</li> <li>- Consumers requiring restraint receive services in a safe manner</li> <li>- Consumers requiring seclusion receive services in the least restrictive manner</li> </ul>	<b>Standards applicable to this service attained with all criteria achieved</b>

<b>Infection Prevention and Control</b>	Assessment
Includes 6 standards which require: <ul style="list-style-type: none"> <li>- There is a managed environment, which minimises the risk of infection to consumers, service providers and visitors appropriate to the size and scope of the service.</li> </ul>	<b>Standards applicable to this service attained with</b>

<ul style="list-style-type: none"><li>- There are adequate human, physical and information resources to implement the infection control programme and meet the needs of the organisation.</li><li>- Documented policies and procedures for the prevention and control of infection reflect current accepted good practice and relevant legislation requirements and are readily available and are implemented in the organisation. These policies and procedures are practical, safe and appropriate/suitable for the type of service provided.</li><li>- The organisation provides relevant education on infection control to all service providers, support staff and consumers.</li><li>- Surveillance for infection is carried out in accordance with agreed objectives, priorities and methods that have been specified in the infection control programme.</li><li>- Acute care and surgical hospitals will have established and implemented policies and procedures for the use of antibiotics to promote the appropriate prudent prescribing in line with accepted guidelines. The service can seek guidance from clinical microbiologists or infectious disease physicians.</li></ul>	<b>some criteria partially achieved</b>
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