

Bima Health Limited

CURRENT STATUS: 23-Aug-11

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

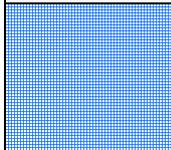
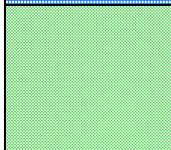
Sunhaven Rest Home continues to provide hospital (psychogeriatric care), and dementia care to a maximum capacity of 37 beds. On the day of this spot surveillance audit there were 26 residents being cared for (11 dementia and 15 psychogeriatric). There has been no change to the type, scope or complexity of the service provided since the previous audit.

There is evidence to support that ten of the twelve required areas for improvement from the previous audit have been implemented and are now resolved. Two areas still require improvements; the open disclosure policy does not adequately describe the principles or practices of open disclosure and residents' care plans do not clearly identify and describe clinical and behavioural risks or interventions to minimise these.

AUDIT SUMMARY AS AT 23-AUG-11

Standards have been assessed and summarised below:

Key

Indicator	Description	Definition
	Includes commendable elements above the required levels of performance	All standards applicable to this service attained with some criteria exceeded
	No short falls	Standards applicable to this service attained with all criteria achieved
	Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity	Standards applicable to this service attained but with some criteria partially achieved and of negligible or low risk
	A number of shortfalls that require specific action to address	Standards applicable to this service attained but with some criteria partially achieved and of medium, high or critical risk and/or some criteria unattained

Indicator	Description	Definition
	Major shortfalls, significant action is needed to achieve the required levels of performance	Some standards applicable to this service unattained

Consumer Rights	Day of Audit 23-Aug-11	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.		No short falls

Organisational Management	Day of Audit 23-Aug-11	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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Continuum of Service Delivery	Day of Audit 23-Aug-11	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.		A number of shortfalls that require specific action to address

Safe and Appropriate Environment	Day of Audit 23-Aug-11	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.		No short falls

Restraint Minimisation and Safe Practice	Day of Audit 23-Aug-11	Assessment
Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		No short falls

Infection Prevention and Control	Day of Audit 23-Aug-11	Assessment
Includes 6 standards that support an outcome which minimises the risk of infection to consumers, service providers and visitors. Infection control policies and procedures are practical, safe and appropriate for the type of service provided and reflect current accepted good practice and legislative requirements. The organisation provides relevant education on infection control to all service providers and consumers. Surveillance for infection is carried out as specified in the infection control programme.		No short falls

Bima Health Limited

Date of audit: 07-Dec-09

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.

Sunhaven Rest Home and Hospital is a purpose built facility located just outside of New Plymouth city centre in a suburban area. The service provides hospital and rest home level care, specialising in care of residents with dementia and those requiring psychogeriatric care. The home does not have a stand alone or designated secure dementia unit, they use an open plan care model for all residents and the home itself is fully secure. Parts of the home are older with a newer annex addition. There is a large lounge and a separate dining room, as well as a number of other seating areas that can safely accommodate all residents. The annex has a dedicated whanau/family lounge area. All of the rooms are single. The residents rooms vary in size; the rooms in the newer wing are quite spacious and are used for residents requiring more assistance. Stable bedroom doors are used in the older part of the home, this allows residents to lock their doors from the inside, the top part of the door is left open when not occupied, and this has reduced the incident of residents wandering into other peoples rooms. Communal areas for toileting and showering are spacious, with disabled access and allow for residents privacy. There is one large bathroom that can accommodate a shower bed. The new owner has undertaken a number of upgrades to the building and refurbishment of furnishings, fittings and equipment, and maintains the ongoing improvement of the home. The annex wing of eight beds is being totally refurbished. The external areas are fully fenced for residents safety and are well maintained. The home has a current building warrant of fitness and the fire evacuation scheme is approved by

the NZ Fire Service. The facility is well maintained and provides a pleasant and safe environment for the residents.

Resident's rights, freedom of choice and participation of families is supported and facilitated by the service. Processes are implemented to ensure resident's cultural and spiritual values and beliefs are respected by staff. Staffing levels as sighted appear sufficient for the service level. The service is managed by an experienced Registered Nurse Care Manager and Operations Manager, and has twenty four hour RN cover. The Owner / Director is fully involved in the running of the home. There is an implemented orientation and education programme and care giving staff are supported in participating in a nationally recognised education programme. Service delivery is planned to ensure appropriate and timely provision of care. Care and activity of daily living assessments are conducted with the residents and relatives at the time of admission. These are used to develop individual care plans which identify residents' goals, treatment interventions and support requirements. Staff were observed during the audit responding to residents with challenging behaviour using good practice methodology and a calming and patient approach.

There is a varied activities programme for residents to participate in if they wish, and residents are supported in maintaining their own interests and community links. Special activities are provided for residents with dementia in the early evening to assist in calming and settling the residents. Food, nutritional and laundry services are provided to meet the needs of the older person with dietician menu reviews being conducted.

Implementation and management of the quality and risk management and adverse reporting systems are monitored by the continuous quality improvement team. There is evidence of analysis, monitoring and follow up of corrective actions and recommendations in order to improve service delivery. Fire, civil defence, emergency management and security systems are implemented and staff training conducted. Infection control processes are implemented to reduce and manage the risks of infections to residents, relatives and staff. Restraint policies and processes are implemented and restraint is only used as a safety precaution and as clinically indicated. Restraint used includes bedrails and lap belts.

Residents and relatives interviewed stated they were happy with the care and services provided. They confirmed that staff are respectful of their privacy, dignity and rights and that they are consulted on their care. There is an open visitor's policy and relatives confirmed they are able to visit at times suitable to them.

There were twelve areas for improvement identified during the audit. These were all rated as a low risk and related to: safe storage of records, policy deficits, timeliness of the completion of care plans and evaluations, and insufficient clinical documentation, one incident of incorrect medication management, inefficient staff use of protective clothing, i.e. plastic aprons, and documentation in two areas relating to the infection control policies.

Standards have been assessed and summarised below:

Key

Four point scale	Description
Standards applicable to this service	Includes commendable elements above

attained with some criteria exceeded	the required levels of performance
Standards applicable to this service attained with all criteria achieved	No short falls
Standards applicable to this service attained with some criteria partially achieved or unachieved	Some minor shortfalls, no major deficiencies and required levels of performance seem achievable without extensive extra activity
Some standards or this standard unattained that are applicable to this service	Major shortfalls, significant action is needed to achieve the required levels of performance

Consumer Rights	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.	Standards applicable to this service attained with all criteria achieved

Organisational Management	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.	Standards applicable to this service attained with some criteria partially achieved

Continuum of Service Delivery	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.	Standards applicable to this service attained with some criteria partially achieved

Safe and Appropriate Environment	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.	Standards applicable to this service attained with some criteria partially achieved

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

<p>manner</p> <ul style="list-style-type: none"> - Consumers requiring seclusion receive services in the least restrictive manner 	<p>criteria achieved</p>
--	---------------------------------

Infection Prevention and Control	Assessment
<p>Includes 6 standards which require:</p> <ul style="list-style-type: none"> - 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. - There are adequate human, physical and information resources to implement the infection control programme and meet the needs of the organisation. - 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. - The organisation provides relevant education on infection control to all service providers, support staff and consumers. - Surveillance for infection is carried out in accordance with agreed objectives, priorities and methods that have been specified in the infection control programme. - 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. 	<p>Standards applicable to this service attained with some criteria partially achieved</p>