

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

**CURRENT STATUS: 10-Jan-12**

**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**

Avondale rest home and hospital is part of the Bupa care facilities and provides hospital, rest home and dementia level care for up to 67 residents. On the day of the surveillance audit there were 22 hospital residents, 28 rest home residents and 14 residents in the secure dementia unit.

The service has continued to implement a comprehensive quality and risk management system since previous audit. The service provides regular training sessions and competencies are completed by staff.

The service has addressed the corrective actions required from their previous certification audit around staffing rosters, quality meeting minutes and management, staff files and orientation.

This surveillance audit has identified improvements required around village call-outs, medication management and aspects of care planning documentation.

### **AUDIT SUMMARY AS AT 10-JAN-12**

Standards have been assessed and summarised below:

#### **Key**

<b>Indicator</b>	<b>Description</b>	<b>Definition</b>
	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

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

<b>Consumer Rights</b>	Day of Audit 10-Jan-12	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>No short falls</b>

<b>Organisational Management</b>	Day of Audit 10-Jan-12	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>A number of shortfalls that require specific action to address</b>

<b>Continuum of Service Delivery</b>	Day of Audit 10-Jan-12	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>A number of shortfalls that require specific action to address</b>

<b>Safe and Appropriate Environment</b>	Day of Audit 10-Jan-12	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>No short falls</b>

<b>Restraint Minimisation and Safe Practice</b>	Day of Audit 10-Jan-12	Assessment
Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		<b>No short falls</b>

<b>Infection Prevention and Control</b>	Day of Audit 10-Jan-12	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.		<b>No short falls</b>

### **Bupa Care Services (GHC) Limited - Avondale Lodge Rest Home and Hospital**

**Date of audit: 12-Mar-10**

**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.**

#### **General Overview**

Avondale Lodge Rest Home and Hospital provides residential care for 67 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, 15 dementia level care consumers, and 28 rest home level care consumers. Bupa Care Services (GHC) Limited is the governing body and the facility is managed by a Facility Manager who reports to the Bupa corporate office on a weekly and monthly basis. The Facility Manager is not a registered nurse, but she is supported by a Clinical Manager, who is a Registered Nurse and who is responsible for oversight of the clinical care provided at Avondale Lodge Rest Home and Hospital.

#### **General Environment**

Avondale Lodge provides accommodation for up to 67 consumers in single bedrooms in three separate areas. All bedrooms are single and have wash hand basins, and some bedrooms also have ensuites. The dementia unit and the common areas in the rest home and hospital have been refurbished since the last surveillance audit. New equipment such as electric beds, hoists and shower trolley have been purchased. The facility is maintained to an adequate standard and the environment is appropriate for the consumer groups.

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 clean, safe and appropriate environment for consumers. Interviews of staff and review of a sample of staff files provided evidence that staff have received current training in relevant areas.

### **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 staffing is stable. Staff interviewed reported that morale amongst the staff is high and they are working well together as a Team. Twenty four hour registered nurse cover is provided and Caregiver / Health Care Assistant coverage is satisfactory. Consumers interviewed confirmed that there are adequate staff available to meet their needs. Staff interviewed confirmed adequate numbers are available to ensure safe care is being provided. A staff in-service education programme for Avondale Lodge is in place and staff are supported to complete the national caregiver training programme [National Certificate in Community Support Services] that is completed in the workplace via CareerForce. There are two workplace assessors and five verifiers for CareerForce at Avondale Lodge. All staff who are working in the dementia unit have commenced or completed the Dementia specific modules.

### **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 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 and the meals are a highlight for them. The consumers said they appreciate the home baking for morning and afternoon tea, and they described the meals as being colourful, tasty and are appetising. 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. Avondale Lodge Rest Home and Hospital has an established, documented, and maintained quality and risk management system. The Facility Manager provides a weekly and monthly report to the Governing Body. An internal audit programme for Avondale Lodge is in place.

### **Standards of service delivery**

The provider has implemented systems to accurately assess, plan and evaluate the care needs of the consumers. A sampling of 10 consumer files [3 hospital, 4 rest home and 3 secure dementia unit] evidenced that consumers needs, outcomes and/or goals have been identified using detailed risk assessment tools and undertaken by skilled staff, all with current competencies. Service plan evaluations are completed 6 monthly along with multidisciplinary team reviews. Consumer files evidenced a high level of communication and involvement with consumers and/or families during each stage of service delivery. Accordingly criterion 1.3.3.1 is rated continued improvement.

Quality and risk management systems regarding restraint usage is robust, both at Head Office / Regional Level and at Avondale Lodge. Staff, over the last year have continued to implement effective strategies to minimise the use of restraint with data evidencing a decrease in the number of consumers being restrained from 2009 to 2010. Accordingly criterion RMSP 2.5.1 is rated continued improvement.

The activity programme in place meets the needs of the differing service groups i.e. rest home, hospital and secure dementia unit. There are three separate activities programmes for each service area. Both the activities coordinator and care givers with designated hours implement the programme along with two volunteers who work in the weekend. New initiatives in the secure dementia unit includes the implementation of a consumer's 'Map Life' which are displayed in each bedroom and sensory boards along the corridors. Accordingly criterion 1.3.7.1 is rated continued improvement. There was positive feedback from the consumers at the audit re the activities programme.

An appropriate medicine management system is implemented with the Robotic dispensing system being used. Policies and procedures clearly detail service provider's responsibilities. Staff responsible for medicine management have current medication competency updates and in-service education for medication management. Medication files sighted evidenced; documentation of consumers' allergies/sensitivities and 3 monthly medication reviews by the general practitioner. Appropriate systems are in place for consumers who are self medicating. A visual inspection of the medication systems evidenced compliance with respective legislation, regulations and guidelines.

### **Areas for Improvement**

Five criteria were identified as being partially attained during this audit - four are rated low risk, and one is rated moderate risk. The subsequent corrective actions and time frames for completion of these corrective actions have been agreed to by the service provider. Post audit documentation provided by the service provider evidences that 2 of these partial attainments have already been actioned.

Standards have been assessed and summarised below:

### **Key**

Five 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>	Complies with standards
<b>Standards applicable to this service attained with some criteria of low risk partially achieved</b>	Some minor shortfalls, no major deficiencies and required levels of performance seem achievable without extensive extra activity
<b>Standards applicable to this service attained with some criteria of moderate or high risk partially achieved or unachieved</b>	A moderate number of shortfalls that require specific action planning to address
<b>Some standards or this standard unattained that are applicable to this service</b>	Major shortfalls, significant action is needed to achieve the required levels of performance

<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 attained with some criteria of moderate or high risk partially achieved or unachieved</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 attained with all criteria achieved</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 all criteria achieved</b>
<b>Restraint Minimisation and Safe Practice</b>	Assessment
Includes 3 standards with outcomes where: Consumers receive and experience services in the least restrictive manner through restraint minimisation Consumers requiring restraint receive services in a safe manner Consumers requiring seclusion receive services in the least restrictive manner	<b>Standards applicable to this service attained with all criteria achieved</b>
<b>Infection Prevention and Control</b>	Assessment
Includes 6 standards which require: 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	<b>Standards applicable to this service attained with all criteria</b>

<p>implement the infection control programme and meet the needs of the organisation.</p> <p>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.</p> <p>The organisation provides relevant education on infection control to all service providers, support staff and consumers.</p> <p>Surveillance for infection is carried out in accordance with agreed objectives, priorities and methods that have been specified in the infection control programme.</p> <p>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>	achieved
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