

# Avon Lifecare Limited - Avon Life Care

---

## Introduction

This report records the results of a Partial Provisional Audit of a provider of aged residential care services against the Health and Disability Services Standards (NZS8134.1:2008; NZS8134.2:2008 and NZS8134.3:2008).

The audit has been conducted by Health and Disability Auditing New Zealand Limited, an auditing agency designated under section 32 of the Health and Disability Services (Safety) Act 2001, for submission to the Ministry of Health.

The abbreviations used in this report are the same as those specified in section 10 of the Health and Disability Services (General) Standards (NZS8134.0:2008).

You can view a full copy of the standards on the Ministry of Health's website by clicking [here](#).

The specifics of this audit included:

<b>Legal entity:</b>	Avon Lifecare Limited
<b>Premises audited:</b>	Avon Life Care
<b>Services audited:</b>	Hospital services - Medical services; Hospital services - Geriatric services (excl. psychogeriatric); Rest home care (excluding dementia care); Dementia care
<b>Dates of audit:</b>	Start date: 22 July 2020    End date: 22 July 2020

**Proposed changes to current services (if any):** This partial provisional audit was completed in respect to; (i) Adding a further resident room in Avon House. This increases bed numbers from 39 dual-purpose beds to 40 beds. (ii) The audit also included verifying three further rooms in Holdsworth House. These rooms are in the process of being renovated to being dual-purpose rooms ( two single rooms and one double room). Previously they were a hair salon, a staff room and a storeroom. (iii) A further 16

current studio rooms in Holdsworth House were also verified as suitable to be used as double rooms for couples where needed. This potentially would increase bed numbers in Holdsworth House from 31 dual-purpose beds to 51 dual-purpose beds.

**Total beds occupied across all premises included in the audit on the first day of the audit: 90**

## General overview of the audit

Avon Lifecare has been privately owned since January 2019. The owner/director also operates another two local aged care facilities. Avon Lifecare currently provides care for up to 90 residents across rest home, hospital and dementia level care. On the day of audit, there were 90 residents. There are two stand-alone facilities with a walkway between. Holdsworth House includes 39 beds (all dual purpose), but currently only providing rest home level care. Avon House (31 dual purpose beds) and Dean House (20-bed dementia unit) make up the other building.

This partial provisional audit was completed in respect of; (i) Adding a further resident room in Avon House. This increases bed numbers from 39 dual-purpose beds to 40 beds. (ii) The audit also included verifying three further rooms in Holdsworth House. These rooms are in the process of being renovated to becoming dual-purpose rooms (two single rooms and one double room). (iii) A further 16 current studio rooms in Holdsworth House were also verified as suitable to be used as double rooms for couples where needed. This potentially would increase bed numbers in Holdsworth House from 31 dual-purpose beds to 51 dual-purpose beds.

This audit included a tour of the environment, review of documentation and interviews with the management team.

The facility manager is a registered nurse with many years of management experience in the aged care sector. The manager is supported by a clinical manager and two-unit coordinators.

Improvements that are required are related to the completion of the renovations and employment of further staff to manage the increase in residents.

## Summary of attainment

The following table summarises the number of standards and criteria audited and the ratings they were awarded.

Attainment Rating	Continuous Improvement (CI)	Fully Attained (FA)	Partially Attained Negligible Risk (PA Negligible)	Partially Attained Low Risk (PA Low)	Partially Attained Moderate Risk (PA Moderate)	Partially Attained High Risk (PA High)	Partially Attained Critical Risk (PA Critical)
Standards	0	12	0	3	0	0	0
Criteria	0	32	0	3	0	0	0

Attainment Rating	Unattained Negligible Risk (UA Negligible)	Unattained Low Risk (UA Low)	Unattained Moderate Risk (UA Moderate)	Unattained High Risk (UA High)	Unattained Critical Risk (UA Critical)
Standards	0	0	0	0	0
Criteria	0	0	0	0	0

# Attainment against the Health and Disability Services Standards

The following table contains the results of all the standards assessed by the auditors at this audit. Depending on the services they provide, not all standards are relevant to all providers and not all standards are assessed at every audit.

Please note that Standard 1.3.3: Service Provision Requirements has been removed from this report, as it includes information specific to the healthcare of individual residents. Any corrective actions required relating to this standard, as a result of this audit, are retained and displayed in the next section.

For more information on the standards, please click [here](#).

For more information on the different types of audits and what they cover please click [here](#).

Standard with desired outcome	Attainment Rating	Audit Evidence
<p>Standard 1.2.1: Governance</p> <p>The governing body of the organisation ensures services are planned, coordinated, and appropriate to the needs of consumers.</p>	FA	<p>Avon Lifecare currently provides rest home, hospital (geriatric and medical) and secure dementia levels of care for up to 90 residents. There are 20 dementia beds in the secure Deans House, 31 dual-purpose beds in Holdsworth House (currently only rest home residents) and 39 hospital level beds in Avon House (all dual-purpose beds).</p> <p>On the day of the audit there were 90 residents. This included 36 hospital and 3 rest home residents in Avon House including one YPD resident. There were 20 residents assessed at dementia level care in Deans House including one funded through mental health services. There are 31 rest home residents in Holdsworth House including a resident on an LTS-CHC contract.</p> <p>To support medical level care there are two GP practices that work with the service. Both visit the services weekly and as needed. There is a contracted physiotherapist contracted for 3 hours a week currently and this will be increased as needed. There is a contracted dietitian and link to a local hospice for support.</p> <p>This partial provisional audit was completed in respect to; (i) Adding a further resident room in Avon House. This increases bed numbers from 39 dual-purpose beds to 40 beds. (ii) The audit also included verifying three further</p>

		<p>rooms in Holdsworth House. These rooms are in the process of being renovated to being dual-purpose rooms ( two single rooms and one double room). Previously they were a hair salon, a staff room and a storeroom. (iii) A further 16 current studio rooms in Holdsworth House were also verified as suitable to be used as double rooms for couples where needed. This potentially would increase bed numbers in Holdsworth House from 31 dual-purpose beds to 51 dual-purpose beds. This audit verified the four newly renovated rooms as suitable to provide dual-purpose level care and the 16 studio rooms as suitable to provide dual-purpose level care for couples as needed.</p> <p>The business operations plan for 2018-2020 includes operational objectives. The monthly quality meetings sighted identified that the annual quality improvement and business plan progress is reviewed monthly through the meeting. The owner visits daily and is very supportive of the management team. There are daily management meetings that the owner attends where able.</p> <p>The facility manager is an RN with many years of management experience in the aged care sector. She has maintained a minimum of eight hours of professional development per year relating to the management of an aged care facility. There is a clinical manager (CM) that has been in the role for 10 months. The CM has many years' experience in the role and in aged care. The service is currently advertising for a weekend manager.</p>
<p><b>Standard 1.2.2: Service Management</b></p> <p>The organisation ensures the day-to-day operation of the service is managed in an efficient and effective manner which ensures the provision of timely, appropriate, and safe services to consumers.</p>	<p>FA</p>	<p>There is a clinical manager who is responsible for clinical operations in the absence of the facility manager. The owner assumes administrative responsibilities in the absence of the facility manager.</p>
<p><b>Standard 1.2.7: Human Resource Management</b></p> <p>Human resource management processes are conducted in accordance with good employment practice and meet the requirements of legislation.</p>	<p>PA Low</p>	<p>Human resources policies are in place, including recruitment, selection, orientation and staff training and development.</p> <p>The orientation programme provides new staff with relevant information for safe work practice that is specific to the job role. There is a competencies and orientation register that monitors that all orientation documentation and annual competencies are up to date. The register identified the following (but not limited to) annual competencies are up to date (restraint, moving &amp; handling, medication, infection control, syringe driver(RN), infection control).</p>

		<p>Competencies are monitored and up to date.</p> <p>The facility manager advised that they currently have enough overall staff to manage an increase in a further hospital resident in Avon House. Further staff will be employed as numbers increase across the service.</p> <p>Ongoing training is offered to all staff that meets contractual obligations. The service uses a combination of on-line training, guest speakers, and in-service training. The 2020 education plan was reviewed. Online training was maintained during lockdown. A register of current practising certificates for health professionals is maintained. There is a staff educator 4 days a week that support staff through Careerforce. There are 88% of their HCAs with a qualification (23 with level 4, 16 with level 3 and one with level 1)</p> <p>There are 12 RNs in total at the service including the facility and clinical manager, and nine are interRAI trained.</p>
<p>Standard 1.2.8: Service Provider Availability</p> <p>Consumers receive timely, appropriate, and safe service from suitably qualified/skilled and/or experienced service providers.</p>	<p>FA</p>	<p>The staffing policy aligns with contractual requirements. The facility manager (RN) and clinical manager are on site five days a week and on-call when not available on site 24/7. A business manager is available on call for non-clinical related issues.</p> <p>There is currently one-unit coordinator/RN (oversees Avon House) and a newly appointed unit coordinator who starts next week (oversee Holdsworth House and Deans House). The newly appointed unit coordinator has a background in aged care and is replacing a recently resigned unit coordinator. One-unit coordinator is rostered Tuesday to Saturday and the other works Sunday to Thursday. Staffing is flexible to meet the acuity and needs of the residents.</p> <p>The current roster for the service includes:</p> <p>Avon Hospital: (36 hospital level residents' and 3 rest home on the day of audit). AM; unit coordinator (RN) and two RNs and eight HCAs (four long and four short shifts). PM; one RN and six HCAs (three long and three short shifts). Night; one RN and three HCAs. There will be no change to roster unless acuity levels change with the increase in one bed.</p> <p>Rest home: Holdsworth House (31 rest home residents). AM; one RN and two HCAs, (one long shift and one short shift HCA), PM shift:</p>

		<p>One RN and two HCAs; Night; one HCA and one from the hospital that works between the two.</p> <p>An initial draft roster has been developed for up to (5 hospital and 25 rest home) in Holdsworth House.</p> <p>An RN is rostered across each shift (link 1.2.7.3).</p> <p>The RNs are supported by three HCAs on a morning shift; two HCAs on the PM shift and two HCAs at night.</p> <p>There is a DT across seven days in Holdsworth House. Two other DTs are rostered across the other two houses.</p> <p>The roster can be adjusted to support resident acuity levels.</p> <p>There is also a draft roster for increase in rest home beds only (increase in 5 beds, increase in 10 beds and increase in 15 beds).</p> <p>For an increase in 5 rest home beds (36 rest home in Holdsworth House)</p> <p>A further HCA will be rostered on morning shift and afternoon shift and night shift.</p>
<p>Standard 1.3.12: Medicine Management</p> <p>Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines.</p>	<p>FA</p>	<p>There are policies and procedures in place for safe medicine management that meet legislative requirements. There is a treatment room in each of the three areas. The treatment room in Avon House includes impress stock. The treatment room in Holdsworth House is smaller, is key padded and a hand basin is currently being installed.</p> <p>Medication room and fridges temperatures are monitored daily (records sited). The service implements an electronic medication system (medimap). Clinical staff who administer medications (RNs and senior healthcare assistants) have been assessed for competency on an annual basis. Education around safe medication administration has been provided. Medimap training was last completed 5 March 2020.</p> <p>The RN checks incoming medication blister packs monthly against the electronic medication chart. A medication verification form is signed when the packs have been checked. Standing orders are not used. Processes are in place to support self-medicating where the resident is deemed competent. The pharmacist visits weekly and is readily available for any advice or support. Medication internal</p>

		<p>audits monitor implemented processes. Last completed 25 June 2020 in Holdsworth House and Avon House; no corrective actions were required. There are two trolleys in Avon House and one in Holdsworth House. A further trolley has been purchased for Holdsworth House.</p> <p>There are two GP practices that work with the service. Both visit the services weekly and as needed. Both practices are happy with the increase in resident numbers.</p>
<p>Standard 1.3.13: Nutrition, Safe Food, And Fluid Management</p> <p>A consumer's individual food, fluids and nutritional needs are met where this service is a component of service delivery.</p>	<p>FA</p>	<p>The main kitchen where food is prepared is in Holdsworth House. Meals are transported to the satellite kitchens in Avon House via hot boxes. The main kitchen is adjacent to the dining room in Holdsworth House and meals are served from the kitchen bain marie to the residents. The kitchen was renovated and upgraded in 2019 and 2020. The kitchen and staff can manage the increase in resident numbers. There is a Food Control Plan in place which was verified April 2019.</p> <p>The service employs two cooks and four kitchenhands to prepare and cook all meals on site. All have completed food safety certificates. There is a summer and winter menu that has been reviewed by a registered dietitian (20 June 2019) who also provides dietetic input around the provision of special menus and diets where required.</p> <p>The cook receives a resident dietary assessment completed by the RN for all residents and is notified of any dietary changes or weight loss. Dislikes, food allergies and cultural requirements are accommodated.</p> <p>Specialised utensils and lip plates are available to assist residents with independence at mealtimes.</p> <p>The chiller, fridge and freezer temperatures are taken and recorded daily. End-cooked food temperatures and serving temperatures are taken and recorded at each meal including at satellite kitchen.</p> <p>Food service internal audit last Nov 2019. Corrective actions required and completed. Feedback on satisfaction with meals is obtained from residents through resident meetings and satisfaction surveys.</p>

<p>Standard 1.4.1: Management Of Waste And Hazardous Substances</p> <p>Consumers, visitors, and service providers are protected from harm as a result of exposure to waste, infectious or hazardous substances, generated during service delivery.</p>	<p>FA</p>	<p>Documented processes for the management of waste and hazardous substances are in place. There is a locked sluice room in Holdsworth House that includes a sanitiser. There are two sluice rooms in Avon House. One has a sanitiser. Chemical bottles sighted have correct manufacturer labels. There are secure cleaners' rooms. Safety data sheets and product information is readily available. Personal protective clothing is available for staff in the sluice room. Staff have completed chemical safety training. There is a chemical spills kit available. There is a Covid-19 policy/procedure in place and sufficient supplies of PPE.</p>
<p>Standard 1.4.2: Facility Specifications</p> <p>Consumers are provided with an appropriate, accessible physical environment and facilities that are fit for their purpose.</p>	<p>PA Low</p>	<p>There are two separate buildings. Holdsworth House is currently a 31-bed rest home facility. The 39-bed hospital unit (Avon House) and 20 bed dementia unit (Deans House) are in one building. The buildings are connected by an external walkway (not currently covered). The owner/director advised they intend to close-in the covered walkway in the near future so there will be a corridor between the two buildings.</p> <p>Both buildings have a current building warrant of fitness that expires 1 April 2021. The 2020 BWOFF check included corrective actions which have been completed. The business manager oversees property and maintenance. There is a full-time maintenance person (qualified builder) who is responsible for the daily maintenance and planned maintenance across both buildings. Hot water testing records sighted were below 45 degrees. Monthly call bell audits are completed.</p> <p>There is a reactive and preventative maintenance plan. The planned maintenance schedule has been completed to date and includes indoor, outdoor and equipment (wheelchairs, hoists, electric beds) maintenance. There are essential contractors available 24 hours. Electrical equipment has been tested and tagged (sighted).</p> <p>This partial provisional audit was completed in respect to; (i) Adding a further resident room in Avon House. This room was a previous treatment room. The room has been gutted and is currently being renovated with new carpet, lighting and call bells. The keypad on the door and the automatic hydraulic buffer is yet to be removed. (ii) The audit also included verifying three further rooms in Holdsworth House (prior to renovation, these rooms were a hair salon, a staff room and a storeroom). These rooms are in the process of being renovated to</p>

		<p>being dual-purpose rooms ( two single rooms and one double room). Each room has a newly built full ensuite. (iii) A further 16 current studio rooms in Holdsworth House were also verified as suitable to be used as double rooms for couples where needed. Each studio has a kitchenette and two call bells in the living area and in the ensuite.</p> <p>Each resident room had an external window, is spacious enough to provide an increased level of care and had appropriately located call bells.</p> <p>In Avon and Holdsworth House, there are wide enough corridors with handrails. There is sufficient space for residents to safely mobilise using mobility aids. There is a nursing station and staff rooms. Each house surrounds an internal courtyard and gardens. Seating and shade is provided in the outdoor courtyard.</p> <p>There is an equipment list developed for the increase in beds . Equipment such as (but not limited to) hospital beds, hoists and slings, pressure care mattresses, lazyboy chairs, scales, have been purchased for increase in resident numbers. Further equipment will be purchased as needed.</p>
<p>Standard 1.4.3: Toilet, Shower, And Bathing Facilities</p> <p>Consumers are provided with adequate toilet/shower/bathing facilities. Consumers are assured privacy when attending to personal hygiene requirements or receiving assistance with personal hygiene requirements.</p>	<p>FA</p>	<p>Toilet and shower facilities including ensuites are of an appropriate design to meet the needs of the residents. In Avon House the majority of rooms have full ensuites. The new room in Avon House is in walking distance to the communal toilet/shower. A handbasin is in the process of being installed in this room (link 1.4.2.1). There is a large mobility bathroom with shower bed available if needed.</p> <p>In Holdsworth House there are 16 rooms have full ensuites. One wing of 15 rooms have handbasins only. In that wing, there are two mobility communal bathrooms (showers/toilets) and two stand-alone toilets. All are suitable for mobility equipment and have locks for privacy. Communal toilets are located near the dining area.</p> <p>In Holdsworth House, the three newly renovated rooms all with full ensuites. The 16 rooms that have been verified as suitable to be used as double rooms for couples have full ensuites. All have handrails and enough room for mobility equipment such as shower chairs.</p>
<p>Standard 1.4.4: Personal Space/Bed Areas</p>	<p>FA</p>	<p>Residents have personalised their rooms. The four renovated rooms (one in Avon House and three in Holdsworth House) have adequate space to safely</p>

<p>Consumers are provided with adequate personal space/bed areas appropriate to the consumer group and setting.</p>		<p>manoeuvre mobility aids and transferring equipment such as hoists in the resident bedrooms. The 16 studio rooms in Holdsworth House have adequate space for two beds and lazy boys and the ability for staff, residents and equipment to safely move around the room.</p>
<p>Standard 1.4.5: Communal Areas For Entertainment, Recreation, And Dining</p> <p>Consumers are provided with safe, adequate, age appropriate, and accessible areas to meet their relaxation, activity, and dining needs.</p>	<p>FA</p>	<p>Holdsworth House has a large open plan lounge and two smaller lounges including a library area. There are a number of sitting alcoves. There is a separate dining room adjacent to the kitchen. While the dining room is not large enough for an increase of a potential 19 residents. The manager advised that the dining experience could be managed across two shifts if needed. The lounges are spacious enough for increase in resident numbers and increased mobility equipment such as lazy boy chairs.</p> <p>There is easy access to the internal courtyard/garden from the lounge. The dining room in Avon House is large enough for an increase of one resident.</p>
<p>Standard 1.4.6: Cleaning And Laundry Services</p> <p>Consumers are provided with safe and hygienic cleaning and laundry services appropriate to the setting in which the service is being provided.</p>	<p>FA</p>	<p>There is a laundry room in Holdsworth House where all laundry is completed for the residents in that house. There is an entry and exit door and defined clean/dirty area within the laundry. There is adequate ventilation and external windows and good workflow within the laundry. HCAs do the laundry at Holdsworth House, there is plans to employ a dedicated laundry person if numbers increase. There is a laundry at Avon House with an entry and exit flow. The laundry in Avon House has a dedicated laundry person daily. There is a commercial washing machine and dryer in Avon House and Holdsworth House.</p> <p>There is a dedicated cleaner on duty in Holdsworth House daily and one in Avon House across seven days. Cleaning trolleys in each unit are well equipped and kept in locked cleaners' cupboards when not in use. There is another cleaner employed 10 hours a week for wetbacks and carpets. Advised that cleaning hours will increase as resident numbers increase.</p> <p>All staff have completed chemical safety training (last February 2020).</p> <p>The service conducts regular reviews and internal audits of cleaning and laundry services to ensure these are safe and effective. The chemical provider monitors the effectiveness of laundry and cleaning processes. Cleaning/laundry audit last completed Feb 20 with no required corrective actions.</p>

<p>Standard 1.4.7: Essential, Emergency, And Security Systems</p> <p>Consumers receive an appropriate and timely response during emergency and security situations.</p>	<p>PA Low</p>	<p>Emergency and disaster policies and procedures and a civil defence plan are documented for the service. Fire drills occur every six months (at a minimum) with the last fire drill taking place on November 2019. The fire drill was due during lockdown and has been postponed until September. However, fire training was last completed 28 May 20. There is a New Zealand Fire Service approved evacuation scheme that was approved 2006. A smoke detector and sprinkler has been deactivated in the four rooms being renovated as resident rooms. These will be reactivated following renovations. No other fire compliance requirements are required.</p> <p>There have been no changes to the current Holdsworth House building and therefore no changes required to the evacuation procedure. The orientation programme and annual education and training programme includes fire and security training. Required fire equipment was sighted in various areas of the facility. Fire equipment has been checked within required timeframes as part of the requirements of the BWOFF.</p> <p>A civil defence plan is documented for the service and monitored/checked six monthly. There are adequate supplies available in the event of a civil defence emergency including food, water and blankets. There is a 3-month supply in a container (purchased before lockdown) which is sufficient for increase resident numbers. There are water tanks attached to the building which are changed weekly. Two gas barbeques are available and a civil defence book in each area of the facility. There is an onsite generator available.</p> <p>A call bell system is in place. Call bells are checked monthly by maintenance. All call bells ring through to staff pagers. In larger resident rooms there is access to longer call bell cords. Three of the four newly renovated rooms are in the process of being completed and call bells installed. In the 16 double rooms a second call bell has been installed.</p> <p>There is always at least one staff available 24 hours a day, seven days a week with a current first aid/CPR certificate. All staff are required to complete their first aid training. Doors are secured at dusk. Security procedures are in place and security cameras are installed in public areas and hallways. Security guards visit during the night.</p>

<p>Standard 1.4.8: Natural Light, Ventilation, And Heating</p> <p>Consumers are provided with adequate natural light, safe ventilation, and an environment that is maintained at a safe and comfortable temperature.</p>	<p>FA</p>	<p>Holdsworth House and Avon House has adequate heating. There are heat pumps in the lounge and scope/wall heaters in resident rooms. Facility environmental temperature monitoring is recorded daily (sighted). The maintenance person ensures the heating systems are running smoothly and that appropriate checks are performed. All newly renovated rooms have external windows.</p> <p>The new rooms will have electric scope heaters on the wall, these have been purchased and being installed as renovations are completed (link 1.4.2.1). Currently scope heaters are on the wall in the 16 double rooms where the second bed will go. These will be removed and replaced as rooms are needed for a couple.</p>
<p>Standard 3.1: Infection control management</p> <p>There is a managed environment, which minimises the risk of infection to consumers, service providers, and visitors. This shall be appropriate to the size and scope of the service.</p>	<p>FA</p>	<p>Avon Life Care has an established infection control programme. The infection control programme has been reviewed last pre lockdown and further measures implemented. The infection control programme, its content and detail, is appropriate for the size, complexity and degree of risk associated with the service. The clinical manager is currently the IC coordinator. The infection control coordinator has support from all staff including the GP. Internal audits have been conducted and include hand hygiene and infection control practices. Education is provided for all new staff on orientation. There was a gastric outbreak February 2020, that was maintained to the one house. Infection control internal audit last completed April 20. Corrective actions implemented as a result.</p> <p>Monthly quality meetings reviewed identified regular review of Covid-19 preparation and prevention.</p>

## Specific results for criterion where corrective actions are required

Where a standard is rated partially attained (PA) or unattained (UA) specific corrective actions are recorded under the relevant criteria for the standard. The following table contains the criterion where corrective actions have been recorded.

Criterion can be linked to the relevant standard by looking at the code. For example, a Criterion 1.1.1.1: Service providers demonstrate knowledge and understanding of consumer rights and obligations, and incorporate them as part of their everyday practice relates to Standard 1.1.1: Consumer Rights During Service Delivery in Outcome 1.1: Consumer Rights.

If there is a message “no data to display” instead of a table, then no corrective actions were required as a result of this audit.

Criterion with desired outcome	Attainment Rating	Audit Evidence	Audit Finding	Corrective action required and timeframe for completion (days)
<p>Criterion 1.2.7.3</p> <p>The appointment of appropriate service providers to safely meet the needs of consumers.</p>	PA Low	<p>The facility manager advised that they are planning to increase cleaning hours and more caregivers as resident numbers increase. The service is currently employing a further RN to have second one on afternoon shift at Holdsworth House. Advised that as soon as hospital residents are in Holdsworth House the service would need to employ a further two RNs. HCAs are only rostered a total of 32 hours a week which gives them the ability to also pick up an extra shift if needed. As resident numbers increase a further laundry person will be employed in Holdsworth House.</p>	<p>Holdsworth House is certified as dual-purpose and is stand alone. The facility is separated by the other facility by a short external walkway. There are currently no hospital residents in Holdsworth House and therefore the service has not rostered 24/7 registered nurses.</p>	<p>Ensure Holdsworth House has 24/7 RNs rostered prior to occupancy of hospital residents. Ensure there are sufficient RNs employed to cover the increase in hospital residents.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.4.2.1</p> <p>All buildings, plant, and equipment comply with</p>	PA Low	<p>Both buildings have a current BWOFF. Renovations are currently underway to upgrade the four rooms being converted into resident rooms. One in Avon House and three</p>	<p>Three of the four new rooms are in the process of being renovated.</p>	<p>Ensure the rooms and ensuites are fully completed, refurbished and handrails appropriately placed in</p>

legislation.		in Holdsworth House (two single and one double). One of the rooms has been completed and is fully furnished. Ensuites have been built in the room in Avon House and two of the three rooms in Holdsworth House.		ensuites.  Prior to occupancy days
Criterion 1.4.7.5 An appropriate 'call system' is available to summon assistance when required.	PA Low	A call bell system is in place. Call bells are checked monthly by maintenance. All call bells ring through to staff pagers. In larger resident rooms, there is easy access to longer call bell cords. Three of the four newly renovated rooms are in the process of being completed and call bells installed. In the 16 double rooms a second call bell has been installed.	Three of the four newly renovated rooms are in the process of being completed and call bells installed	Ensure all call bells are in place and operational in newly renovated rooms and ensuites  Prior to occupancy days

## Specific results for criterion where a continuous improvement has been recorded

---

As well as whole standards, individual criterion within a standard can also be rated as having a continuous improvement. A continuous improvement means that the provider can demonstrate achievement beyond the level required for full attainment. The following table contains the criterion where the provider has been rated as having made corrective actions have been recorded.

As above, criterion can be linked to the relevant standard by looking at the code. For example, a Criterion 1.1.1.1 relates to Standard 1.1.1: Consumer Rights During Service Delivery in Outcome 1.1: Consumer Rights

If, instead of a table, there is a message “no data to display” then no continuous improvements were recorded as part of this of this audit.

No data to display
--------------------

End of the report.