Senior Care Investment Limited - Fraser Manor Rest Home

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 The DAA Group 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:

Legal entity: Senior Care Investments Limited

Premises audited: Fraser Manor Rest Home

Services audited: Rest home care (excluding dementia care)

Dates of audit: Start date: 1 October 2019 End date: 1 October 2019

Proposed changes to current services (if any): To include the three units collectively called 'Bellbird' into the rest homes approved beds. This will increase the number of certified beds by eight to a total of 40 beds. Bellbird is a standalone building (adjacent to the main care home wing), that contains three suites. Suite A has two bedrooms, Suite B has two bedrooms and Suite C has three bedrooms. Suite A has one bedroom that could be used for single or twin occupancy. The management team advise the twin occupancy bedroom would only be used for residents requiring rest home level care, who have a spousal relationship. Suite A may be occupied by residents who have an occupational rights agreement (ORA), and require rest home level of care.

| Total beds occupied across all premises included in the audit on the first day of the audit: 32 | | | | |
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Executive summary of the audit

Introduction

This section contains a summary of the auditors' findings for this audit. The information is grouped into the six outcome areas contained within the Health and Disability Services Standards:

- consumer rights
- organisational management
- continuum of service delivery (the provision of services)
- safe and appropriate environment
- restraint minimisation and safe practice
- infection prevention and control.

General overview of the audit

Senior Care Investments Limited - Fraser Manor Rest Home (Fraser Manor) can provide rest home level care for up to 40 residents. There were 32 residents on the day of this audit. The service is privately operated by a husband and wife team; one is the facility manager (FM) and the other is the chief executive officer (CEO). There are two other members of the management team. One of the new managers is responsible for maintaining the environment / maintenance (facility services) and has been working at Fraser Manor for approximately twelve months. The previous clinical manager resigned in May 2019. A registered nurse employed in March 2019 has subsequently been appointed to the charge nurse role.

This partial provisional audit was conducted against the Health and Disability Services Standards and the service's contract with the District Health Board to verify that the seven bedrooms, located in the three Bellbird Suites called 'A', 'B' and 'C', and located on the same property as the existing rest home services, were suitable and appropriate for the provision of rest home level care. The audit also included verification that other appropriate services to support an increase in resident numbers is in place. The audit process included review of specific policies and procedures, review of staff files, observations and interviews with, managers, staff

and the two residents that are currently living in Bellbird (Suite B) as well as their family members. The residents and families spoke positively about the care provided.

At the last audit an area for improvement was raised in relation to the management of controlled drugs. This has been addressed. At this audit four areas in three criteria have been identified as requiring improvement related to staffing of Bellbird, ensuring there is a staff member always on duty who has a current first aid certificate, addressing the walkway between Bellbird and the main rest home building, and installing heating in the two bedrooms located in Bellbird Suite A.

Consumer rights

Not applicable to this audit.

Organisational management

The business plan includes the scope, direction, goals and vision of the organisation. The facility manager works full time at the facility and is responsible for the day to day care home management. The chief executive officer is on site at least two days a week. Each have specific responsibilities. The charge nurse and the person responsible for maintenance/facility services support the owner/directors. This is a family owned and managed rest home.

The appointment, orientation and management of staff is based on current good practice. Staff are provided with an orientation and regular ongoing education relevant to their roles. Staffing levels and skill mix meet the changing needs of residents. New staff have been recruited to provide the services in Bellbird suites and the staffing policy and the rostering framework has been updated.

Continuum of service delivery

Processes are in place to identify and meet individual residents' dietary needs. The kitchen has a registered food control plan. The menu has been reviewed by a dietitian. Food services are overseen by an executive chef. Bellbird Suite A has a kitchen and Suite B has a kitchenette facility although residents' meals will be provided from the rest home kitchen.

An electronic medicine management system is in use and practices align with current standards and legislative requirements. Medicines are stored securely. There are processes in place to assess applicable staff competency for medicine management and to ensure residents self-administering medicines are safe to do so.

The existing medicine management and nutrition processes will be used for new residents living in Bellbird suites.

Safe and appropriate environment

The three suites comprising 'Bellbird' have been on this site for many years and have historically been used for the provision of residential care services under occupied rights agreements (ORAs). The three suites each have a bathroom, lounge and bedroom facilities, and have been refurbished. Suite C has three bedrooms and the other two Suites (A and B) have two bedrooms each. One bedroom in Suite 'A' may be used for the care of two residents. The units are furbished ready for occupancy.

The Bellbird suites are included in the existing building warrant of fitness and the existing fire evacuation plan.

Call bells are present at each bed space and by the toilets and showers. These are linked to the main call bell system in the main rest home building.

There are security cameras operating in the grounds and monitoring the entrance area in each suite. A covered courtyard area is located outside the front of each suite.

Laundry services are provided on site and there is capacity to provide laundry services for the new residents in Bellbird Suites. Cleaning services are provided by employed staff.

Chemicals are stored securely in the main rest home building, and waste is safely segregated and disposed of.

Staff are provided with training on emergency events including most recently the fire evacuation procedures which included Bellbird Suites. There are documented emergency procedures available for staff, and appropriate supplies and utilities including water, food, clinical consumables, blankets for at least 40 residents. The CEO advised there are emergency generators available for use in emergency. These are currently stored off site.

Restraint minimisation and safe practice

Not applicable to this audit.

Infection prevention and control

There is an infection control plan that is appropriate to the service setting and is reviewed annually. The charge nurse is responsible for infection prevention and control activities. The existing infection prevention and control programme will include residents in Bellbird Suites.

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 | 2 | 1 | 0 | 0 |
| Criteria | 0 | 32 | 0 | 2 | 1 | 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 <u>here</u>.

For more information on the different types of audits and what they cover please click here.

| Standard with desired outcome | Attainment Rating | Audit Evidence |
|--|----------------------|--|
| Standard 1.2.1: Governance The governing body of the organisation ensures services are planned, coordinated, and appropriate to the needs of consumers. | FA | The strategic and business plans, which are reviewed annually, outline the purpose, values, scope, direction and goals of the organisation. The documents described annual and longer term objectives and the associated operational plans. The facility manager (FM) works full time at the facility and monitors services and operational issues daily. The chief executive officer (CEO) monitors financial performance and marketing. Both have been involved with the development of Bellbird suites. The service has a management team consisting of the FM, CEO, charge nurse (who is a registered nurse) and the person responsible for maintaining the facility / environment (facility services). The FM and CEO have been in their roles since before the last certification audit. They are appropriately experienced. The facility manager has worked in management roles in other aged care services in recent years and the CEO has owned other businesses over many years. The charge nurse has worked at the facility since March 2019 initially as a registered nurse. She was appointed to the charge nurse role when the previous clinical manager resigned. The charge nurse holds a current annual practising certificate. Responsibilities and accountabilities are defined in a job description and individual employment agreement. The FM confirmed knowledge of the |

| | | sector, regulatory and reporting requirements and maintains currency through attendance at management and clinical education, forums and conferences. The service holds contracts with the Bay of Plenty District Health Board (BOPDHB) for rest home level care including respite care. Thirty-two residents were receiving services under the Age Related Residential Care contract at the time of audit. Two of these residents were already living in Bellbird Suite B. The residents have been in Bellbird Suite B for several months, and staff at the DHB are reported to be aware of this. The facility has two beds vacant in the main area of the rest home to keep within their current certified beds numbers. There are two bedrooms in Suite A and B and three bedrooms in Suite C. There is one bedroom in Suite A that can potentially be used for single or dual occupancy. The increase of eight beds across the three Bellbird Suites, would bring the potential occupancy number to 40 residents. The FM advised there are residents awaiting placement and most of the rooms are expected to be occupied as soon as approval to use these beds is granted. The FM advised the resident admission agreements (excluding ORA services) does not include a guarantee that the residents can stay in Bellbird Suites permanently. Rather, the resident would be relocated to the main rest home if this is deemed clinically appropriate for the resident's ongoing long term care. Short episodes of unwellness will be managed by the RNs with the residents staying in their Bellbird Suite. A resident currently living in Bellbird Suite, and a family member confirmed these arrangements have been communicated with them from the very beginning. The healthcare assistant (HCA) interviewed confirmed that HCA's are required to alert the RN or charge nurse if there was any change in any of the residents' conditions. |
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| Standard 1.2.2: Service Management 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. | FA | In the facility manager's absence, the charge nurse is responsible for services delivered with the assistance of the CEO or the other registered nurse. The FM advised she stays contactable via phone. The charge nurse confirmed appropriate support and advice is available. |
| Standard 1.2.7: Human Resource Management Human resource management processes are conducted in accordance with good employment practice and meet the requirements of legislation. | FA | Human resources management policies and processes are based on good employment practice and relevant legislation. The recruitment process includes referee checks, police vetting and validation of qualifications and practising certificates (APCs), where required. All employed and contracted registered health professionals (RHP's) providing services have a current annual practising |

| | | certificate. A sample of staff records reviewed confirmed the organisation's policies are being implemented and records are maintained. Staff orientation includes all necessary components relevant to the role. Staff records sampled showed documentation of completed orientation or the staff member's orientation is in progress. Annual performance appraisals are currently in progress for applicable staff. The FM has recently reviewed and amended the appraisal documentation. The documents have been given to staff to complete the self-reflection component and are in the process of being returned. The FM is training two senior caregivers to assist with completing the appraisals. Continuing education is planned on an annual basis, including mandatory training requirements. Records of attendance are maintained. Care staff have either completed or commenced a New Zealand Qualification Authority education programme to meet the requirements of the provider's agreement with the DHB. Recent employees have at least level two of an industry approved qualification on employment. The charge nurse is a trained and competent registered nurse who is maintaining her annual competency requirements to undertake interRAI assessments. Records reviewed demonstrated completion of the required training and completion of annual interRAI competency. |
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| Standard 1.2.8: Service Provider Availability Consumers receive timely, appropriate, and safe service from suitably qualified/skilled and/or experienced service providers. | PA Moderate | There is a documented process for determining staffing levels and skill mixes to provide safe service delivery, 24 hours a day, seven days a week (24/7). The staffing policy has been updated to reflect the new Bellbird Suites. As Bellbird Suites are in a 'stand-a-lone' building they require 24 hour seven day a week staffing cover, with staff that are suitably trained to deliver resident care. Due to recent changes in rostering, there is no longer a staff member on duty in the weekend afternoons with a current first aid certificate. These are areas requiring improvement. |
| Standard 1.3.12: Medicine Management Consumers receive medicines in a safe and timely | FA | The medication management policy was current and identified all aspects of medicine management in line with the Medicines Care Guide for Residential Aged |

| manner that complies with current legislative | | Care. |
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| requirements and safe practice guidelines. | | A safe system for medicine management using an electronic system was observed on the day of audit. The charge nurse observed demonstrated good knowledge and had a clear understanding of her role and responsibilities related to each stage of medicine management. The existing medicine management systems will be implemented in Bellbird Suites. |
| | | All staff who administer medicines are competent to perform the function they manage. There is always a staff member on duty with a current competency for medicine management. |
| | | Medications are supplied to the facility in a pre-packaged format from a contracted pharmacy. The charge nurse checks medications against the medicine orders. Clinical pharmacist input is provided on request. The pharmacist was present on the day of audit undertaking the weekly check of the controlled drugs (CDs) register balance. The pharmacist visits weekly and assists the charge nurse with this when delivering the new weekly supply of CDs. Controlled drugs are now stored securely in accordance with requirements and checked by two staff for accuracy just prior to administering. The shortfall from the last audit has been addressed. |
| | | Good prescribing practices noted include the prescriber's signature and date recorded on the commencement and discontinuation of medicines and all requirements for pro re nata (PRN) medicines met. The required three-monthly GP review was consistently recorded on the medicine charts sampled. The electronic record alerts staff as to the timeframe when each residents' medicines are due for routine review. |
| | | Standing orders are not used. Vaccines are not stored on site. There were three residents self-administering medications at the time of audit. Appropriate processes are in place to ensure this is managed in a safe manner. Lock boxes are provided to these residents to enable safe storage. |
| | | Medication errors are required to be reported via the incident management system. |
| Standard 1.3.13: Nutrition, Safe Food, And Fluid Management | FA | The food service is provided on site by an executive chef and supported by three cooks and kitchen team and is in line with recognised nutritional guidelines for older people. The menu is a five week rotating menu and follows summer and |

| A consumer's individual food, fluids and nutritional needs are met where this service is a component of service delivery. | | winter patterns and was reviewed by a qualified dietitian in January 2019. The report stated that the kitchen provided 'a high standard of nutritional care'. No recommendations were made. |
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| | | All aspects of food procurement, production, preparation, storage, transportation, delivery and disposal comply with current legislation and guidelines. The service operates with an approved food safety plan and registration issued by the Tauranga City Council and expires 16 March 2020. A verification audit of the kitchen was completed on the 4 February 2019 by the Tauranga City Council. |
| | | Food temperatures, including for high risk items, are monitored appropriately and recorded as part of the plan. The executive chef is qualified, and kitchen staff have completed relevant food handling training. The executive chef is qualified to provide food safety training. |
| | | A nutritional assessment is undertaken for each resident on admission to the facility and a dietary profile developed. The personal food preferences, any special diets and modified texture requirements are made known to kitchen staff and accommodated in the daily meal plan. This was observed during audit. The existing processes will be used for new residents in Bellbird suites. There are sufficient supplies of emergency food and water available on site for the planned increased number of resident beds. |
| | | Residents were seen to be given sufficient time to eat their meal in an unhurried fashion and those requiring assistance had this provided. |
| | | The two residents in Bellbird confirmed they can eat in the main dining room if they want or meals are delivered to their suite. This was verified by family members interviewed and observed on the day of audit when a resident did not want to leave the unit for meals. In this event, staff deliver the meal to the unit, covered with a thermal lid to ensure the temperature is maintained. The two residents in Bellbird Suite interviewed confirmed food services are timely and meet their needs. Morning and afternoon tea and supper are also delivered to residents in Bellbird Suite. |
| Standard 1.4.1: Management Of Waste And Hazardous Substances Consumers, visitors, and service providers are protected from harm as a result of exposure to waste, infectious or | FA | Staff follow documented processes for the management of waste and infectious and hazardous substances. All chemicals will be stored in the existing storeroom in the main rest home building. Appropriate signage is displayed. An external company is contracted to supply and manage all chemicals and cleaning products |

| hazardous substances, generated during service delivery. | | and they also provide relevant training for staff. Material safety data sheets were sighted where chemicals are stored and staff interviewed knew what to do should any chemical spill/event occur. There are appropriate waste containers in the bathrooms in each Bellbird Suite. There are appropriate supplies of personal protective clothing and equipment and staff were observed using this. |
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| Standard 1.4.2: Facility Specifications Consumers are provided with an appropriate, accessible physical environment and facilities that are fit for their purpose. | PA Low | The three Bellbird Suites are adjoining with separate external access to each suite. Bellbird Suites run parallel to the main rest home corridor. The walkway between these buildings is uncovered. This is an area requiring improvement. A current building warrant of fitness with an expiry date of 23 June 2020 is publicly displayed. Documentation was sighted from the company who issued the building warrant of fitness confirming that the Bellbird Suites are included in the existing building warrant of fitness certification. A Certificate of Public Use or Code of Compliance was not required for the refurbishments undertaken. The temperature of the hot water in Bellbird Suites has been tested. Remedial activities have occurred to ensure the hot water temperature is within the required temperature range. The residual current devices in Bellbird Suites were checked in May 2019 and verified as compliant. Appropriate bio medical equipment is available. Equipment sampled at random had current performance monitoring and clinical calibration. There is a covered courtyard area at the front of each Bellbird Suite. The external areas are safely maintained and are appropriate for the residents. Residents currently living in Bellbird Suite confirmed they were happy with their environment and can safely mobilise inside and outside including with mobility devices. One resident noted that since living in Bellbird, the resident had regained some 'quality of life' and was no longer as dependent on staff. The residents confirmed staff were readily available for assistance if required. |
| Standard 1.4.3: Toilet, Shower, And Bathing Facilities Consumers are provided with adequate toilet/shower/bathing facilities. Consumers are assured privacy when attending to personal hygiene requirements | FA | Each of the Bellbird Suites has a bathroom with toilet, hand basin and shower. There is non-slip flooring and a privacy lock on the doors. A grab rail was present on the bathroom wall. The over toilet seat/frames also contained rails that residents can use if required. There is also waterless hand gel present on the wall |

| or receiving assistance with personal hygiene requirements. | | in the corridor of each suite. |
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| Standard 1.4.4: Personal Space/Bed Areas Consumers are provided with adequate personal space/bed areas appropriate to the consumer group and setting. | FA | The bedrooms in each Bellbird Suite is furnished appropriate to the service setting, with adequate space. The managers advised the potential double occupancy room in Bellbird Suite A will only be used for residents in a spousal relationship, otherwise will be single occupancy. The current Bellbird Suite residents and their family members interviewed confirmed there is enough space for residents to mobilise internally and externally including when using a mobility device and this was observed. |
| Standard 1.4.5: Communal Areas For Entertainment, Recreation, And Dining Consumers are provided with safe, adequate, age appropriate, and accessible areas to meet their relaxation, activity, and dining needs. | FA | There is a lounge in each Bellbird Suite. Bellbird Suite B also contains a kitchenette and Bellbird Suite A has a kitchen (refer to 1.3.13). Residents can eat in the main dining room or be provided with meals in the suites if required. This was observed during audit. The Bellbird Suites are furnished appropriate to the service setting. Residents can have direct dial personal phone lines in their bedroom if they choose. This was also observed during audit. |
| Standard 1.4.6: Cleaning And Laundry Services Consumers are provided with safe and hygienic cleaning and laundry services appropriate to the setting in which the service is being provided. | FA | Laundry is undertaken on site in a dedicated laundry with a laundry assistant rostered on duty daily including weekends from 9.15 am to 1 pm. A washing machine and drier is also present in Bellbird Suite A if required by occupants. The FM advised this would only be used if the residents were occupying the suite under an occupational rights agreement (ORA) and wanted to oversee their own laundry. |
| | | Staff interviewed confirmed there is sufficient capacity to provide laundry services to residents in Bellbird Suite. Residents in Bellbird Suite and their family members interviewed reported the |
| | | laundry is managed well and their clothes are returned in a timely manner, normally the same or next day. There is a designated cleaning team who are on site daily from 9.30 am to between 3 pm and 4 pm weekdays and 9 am to 11 am weekends. Applicable staff have received appropriate training as confirmed during intention. |
| | | have received appropriate training as confirmed during interview. Monitoring of cleaning and laundry services occurs as a component of the internal audit |

| | | programme. Chemicals were stored securely and were in appropriately labelled containers. All chemicals will continue to be stored in the existing dedicated room in the main care home building. |
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| Standard 1.4.7: Essential, Emergency, And Security Systems Consumers receive an appropriate and timely response during emergency and security situations. | FA | Policies and guidelines for emergency planning, preparation and response are displayed and known to staff. Disaster and civil defence planning guides direct the facility in their preparation for disasters and described the procedures to be followed in the event of a fire or other emergency. This document is dated April 2019. The emergency contact details of key suppliers are detailed. The CEO and FM have previously worked in an emergency response role for an international agency following a natural disaster and have a philosophy of being well prepared. There are supplies for use in the event of a civil defence emergency, including food, water, blankets, mobile phones, a variety of portable lights, emergency food utensils, and gas BBQ's were sighted. The management team advised they require a minimum emergency supply to meet the care needs for 50 people for 10 days. There is a water storage tank located on the grounds of the facility. The water is treated in line with World Health Organisation requirements. The water tank has anti-tamper mechanism installed. Additional bottled water is available. The CEO advised they have generators available stored nearby at an offsite location. There were sufficient supplies of clinical consumables, including continence products for residents for up to two months on site. Call bells are present at each bed space and bathroom facility in each Bellbird Suite. These alert to the central panel in the main rest home and to mobile phones carried by designated staff. These are tested by the management team to ensure timely response. The call bell tested during audit was answered promptly. Appropriate security arrangements are in place. There are security cameras monitoring the external areas and access / entrance area into each Bellbird Suite and includes the internal lounge areas. Some areas of the grounds are also alarmed afterhours for security. Signage alerts residents and visitors that security cameras are in use. The residents and family interviewed confirmed they are aware o |
| | | The current fire evacuation plan was approved by the New Zealand Fire Service |

| | | on the 23 August 2005. Documentation was sighted dated July 2019 from the company with oversight of the fire evacuation systems that the service did not require a new fire evacuation plan. The evacuation procedures specific to Bellbird Suites are displayed in each Suite. There is also a wall mounted fire extinguisher in each suite. Fire safety systems in Bellbird Suites alerts to the dining room / lounge in the main rest home area. The facility services staff member demonstrated how this system works including the inbuilt self-tests of fire safety systems in Bellbird Suite that occurs at scheduled intervals. Staff were provided with training including fire evacuation procedures of all Bellbird Suites at the September 2019 staff meeting. The orientation programme includes fire and security training. Staff confirmed their awareness of the emergency procedures. A fire evacuation drill occurred in July 2019 and staff training related to other emergencies also occurred in July 2019. With recent changes to rostering there is no longer a staff member on duty all shifts with a current first aid certificate (refer to 1.2.8.1). There is a first aid kit present in Bellbird Suite B where the night porter will be located. |
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| Standard 1.4.8: Natural Light, Ventilation, And Heating Consumers are provided with adequate natural light, safe ventilation, and an environment that is maintained at a safe and comfortable temperature. | PA Low | Each bedroom in Bellbird Suites have windows with adequate natural light. Window stays are installed on windows. The main entrance to each unit is via a ranch slider door. The two bedrooms in Bellbird Suite A have yet to have heating installed. This is an area requiring improvement. |
| Standard 3.1: Infection control management 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. | FA | There is a documented infection prevention and control programme appropriate to the service setting. The infection prevention and control programme and associated systems has been reviewed in 2019 and will be implemented for new residents in Bellbird Suites. The charge nurse is responsible for facilitating the infection prevention and control programme and responsibilities are detailed in a signed job description. Appropriate personal protective equipment is located on site. Signage on the front door to the rest home alerts visitors to not enter if they are unwell. There have been no outbreaks since the last audit. Staff and residents are offered annual influenza vaccinations. |

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) |
|--|----------------------|---|--|---|
| Criterion 1.2.8.1 There is a clearly documented and implemented process which determines service provider levels and skill mixes in order to provide safe service delivery. | PA Moderate | The facility adjusts staffing levels to meet the changing needs of residents. With the planned increase in occupancy with Bellbird Suites, new healthcare assistants (HCA) shifts have been created working 7 am to 10 am and from 6 pm to 9 pm each day in Bellbird. Healthcare assistants have been employed to cover these hours with the newest HCA scheduled to commence employment the day after this audit. In addition, a 'night porter' role has been created. The night porter will work 10 pm to 6 am each night and will be based in Bellbird Suite B. The night porter will be responsible for rest home security, undertaking regular nightly checks of every Bellbird Suite resident and to initially respond to any call bells in Bellbird Suites. The night porter may also undertake some administration tasks, as well as light cleaning. Two night porters have been employed and will start when the Bellbird Suite rooms have been certified for occupancy. As Bellbird Suites are in a | Due to recent changes in rostering, the service is unable to demonstrate that a staff member with a current first aid certificate is always rostered on duty. A staff member that is trained to provide resident care is not rostered on duty in Bellbird 24/7. | Ensure a staff member with a current first aid certificate is always rostered on duty. Ensure suitably trained care staff are rostered on duty in Bellbird Suites at all times. Prior to occupancy days |

'stand-a-lone building', a staff member that has been suitably trained to provide resident care must be on duty 24/7 in Bellbird.

Currently caregivers on duty in the main rest home wings provide oversight of the two residents in Bellbird Suite and this includes regular (hourly) checking overnight. The residents and family members confirmed that staff are designated to provide their care and in addition, a staff member visits to undertake routine checks of their wellbeing throughout the day and night.

An afterhours on call roster is in place, with staff reporting that good access to advice is available when needed. Care staff interviewed reported there were adequate staff available to complete the work allocated to them.

Observations and review of a current-week roster cycle confirmed adequate staff cover has been provided, with staff replaced in any unplanned absence. However, with recent changes to rostering patterns, the service is unable to demonstrate there is at least one staff member on duty who has a current first aid certificate.

There is seven days a week, morning shift, registered nurse coverage, shared between the charge nurse and another RN. The two registered nurses share the on-call component of the role. The RN on duty provides oversight of clinical care for residents in Bellbird and will also do so for any new residents. The caregivers are required to inform the RN of any changes in residents' condition. The residents and family members interviewed confirmed this communication is timely. The charge nurse was sighted visiting the Bellbird residents during audit.

There are dedicated kitchen staff seven days a week. The executive chef interviewed confirmed that the

| | | existing staff can provide meal services to all prospective residents in Bellbird Suites. Cleaning staff currently provide cleaning services to Bellbird B daily. Appropriate arrangements are in place for the Bellbird Suites for when all suites are occupied. The staff member employed in the laundry also confirmed there is capacity to undertake laundry services for the new residents. Activities are undertaken by an activities coordinator who works weekdays between four and five and a half hours each day. A fitness specialist works nine hours per week over three days including Saturday. The residents in Bellbird Suites will be encouraged to participate in the existing activity programme. One Bellbird Suite resident interviewed confirmed participating in activities of her choice, however on other occasions preferred to stay in the suite undertaking puzzles and other activities. The resident and family member noted that since living in Bellbird Suite, the resident had improved independence and quality of life. The resident was observed to safely and independently mobilise from Bellbird around the grounds and to the rest home with a mobility frame. Another resident is always accompanied by staff when mobilising to the main rest home building. The FM works Monday to Friday and is on call when not on site. The CEO hours are more flexible. The facility services employee responsible for facility and maintenance is also on-site weekdays. | | |
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| Criterion 1.4.2.4 The physical environment minimises risk of harm, promotes safe mobility, aids independence and is | PA Low | The three Bellbird Suites are adjoining with separate external access to each suite. Bellbird Suites run parallel to the main rest home corridor. There is not a covered walkway between Bellbird Suites and the main rest home building. | The walkway between Bellbird Suites and the main rest home facility is uncovered. | Provide a covered walkway between Bellbird Suites and the main rest home building. |

| appropriate to the needs of the consumer/group. | | The Bellbird Suites have been refurbished and are ready for occupancy. Appropriate equipment is present including shower chairs and 'over the toilet seats / frame' for each Bellbird bathroom. | | Prior to occupancy days |
|---|--------|---|---|--|
| | | The testing and tagging of electrical equipment is undertaken by an employee who is competent to complete this task, and the competency record sighted. | | |
| | | There are small ramps leading to the entrance of each Bellbird Suite. The environment was hazard free. The two residents in Bellbird Suite confirmed they felt safe and supported. | | |
| Criterion 1.4.8.1 Areas used by consumers and service providers are ventilated and heated appropriately. | PA Low | There are heating units installed in the lounge in each Suite and the bedrooms of Bellbird Suite B and C. Heaters were ordered for the bedrooms in Suite A on the day of the partial provisional audit, however have yet to be installed. The windows in each bedroom can be opened. The residents in bellbird Suite B and their family members confirmed heating and ventilation is appropriate and comfortable. | Wall mounted heaters have been ordered for the two bedrooms in Bellbird Suite 'A'; however, have yet to be installed. | Install heating in the 'Bellbird A' bedrooms. 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, these is a message "no data to display" then no continuous improvements were recorded as part of this audit.

Date of Audit: 1 October 2019

No data to display

End of the report.