

## ANNEXURE B – HEALTHCARE SERVICES

### **HEALTHCARE SERVICES PROVIDED BY THE RETREAT HAZELDEAN CO-OWNERS**

Two basic healthcare services are provided at The Retreat, these being basic healthcare and optional healthcare.

#### **A. BASIC HEALTHCARE SERVICES**

**The following healthcare services are provided and covered by a fixed monthly medical levy payable by the homeowners to The Retreat at Hazeldean Homeowners Association.**

#### **1. PRIMARY HEALTHCARE CLINIC**

##### **1.1. Location**

The services are provided in The Retreat Clubhouse in the clinic consulting room.  
See Annexure A - 1.3

##### **1.2. Consulting Hours**

Monday, Wednesday and Friday : 09h00 to 10h30

Tuesday and Thursday : 14h00 to 15h30

Clinic hours will be changed according to the resident's needs and numbers

##### **1.3. Booking Procedure**

All residents who wish to make use of this service must make an appointment at the clubhouse reception, during the hours stated above. Appointments to be made personally or by dialing 2000 from the phone in a unit at The Retreat.

##### **1.4. Services Provided**

###### **1.4.1. Monitoring of the following:**

1.4.1.1. Vital Data: Taking of blood pressure, temperature, heart rate and respiratory rate

1.4.1.2. Testing of blood glucose levels

1.4.1.3. Basic urine testing

1.4.1.4. Early identification of medical risk factors - Where medical risk factors already prevail monthly visit to the clinic will be advised

###### **1.4.2. Health education will be given to:**

1.4.2.1. The individual according to his or her needs

1.4.2.2. The residents as a group once every 4 (four) months at the Clubhouse

1.4.2.3. Health articles to be published as need arises in The Retreater newsletter

###### **1.4.3. Conducting procedures as prescribed by a medical practitioner e.g. wound dressings and administering of medication and injections.**

(Cost of consumables required to perform the above procedures are not included in the fixed monthly medical levy and the resident will be charged for consumables being used)

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### 1.4.4. Assistance with:

1.4.4.1. Acquiring of authorisation for hospitalisation

1.4.4.2. Communication with medical aids

1.4.4.3. Communication with other members of the multidisciplinary team

1.4.5. Liaison with pathology services where necessary.

1.4.6. Four home visits per month to residents who are unable to visit the clinic. These visits will be arranged at a date and time that will suit the resident.

1.4.7. Basic footcare limited to the cutting of toenails.

## 2. EMERGENCY CARE

2.1. This is a 24 hour 7 days a week service.

2.2. In case of an emergency an immediate working communication method is in place.

2.3. Nursing personnel on duty will assist and attend to the emergency. The resident's condition will be assessed and stabilized and where necessary, an ambulance will be arranged to take the resident to the nearest hospital. The cost for the ambulance would be for the residents own account.

2.4. Relatives will be informed

2.5. Cost of consumables required to perform the above procedures are not included in the fixed monthly medical levy and the resident will be charged for consumables being used.

## B. OPTIONAL HEALTHCARE SERVICES

### Optional healthcare services are not covered by the fixed monthly medical levy

## 3. HOME CARE

There are times when the resident may need healthcare in the comfort of his/her own home, for example post-operatively.

NB. The residents are under no obligation to make use of the services of the service provider and can at any time consult with their own doctors or other members of the multidisciplinary team.

Different levels of home care are available:

3.1. **Assisted home care** where the resident needs assistance with the execution of specific physical tasks e.g. bath, dressing, feeding and mobilisation etc on a daily basis. A resident will be able to decide for him/herself which services he/she needs in liaison with the Registered nurse.

3.2. **Home care for a specific period** e.g. recuperative care after hospitalisation or when assisted care becomes more extensive.

3.2.1. To arrange home care the resident must arrange an appointment with the Registered nurse or by dialing 2000 from the phone in a unit at The Retreat, during the hours stated in 1.2.

3.2.2. The cost of this one appointment forms part of the fixed monthly medical levy

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- 3.2.3. When a resident needs home care the Registered nurse will visit the resident to assess and establish the resident's needs.
- 3.2.4. Home care can also be provided when a resident prefers to stay in the comfort of his/her own home rather than to go to frail care.
- 3.2.5. Nursing care plan:
  - 3.2.5.1. An individual nursing care plan will be planned in conjunction with the resident, his/her spouse, family and members of the multidisciplinary team.
  - 3.2.5.2. The appropriate category staff will be allocated to carry out the tasks for the resident.
  - 3.2.5.3. The Registered nurse will visit the resident to see that the nursing care plan is carried out correctly.
  - 3.2.5.4. The nursing care plan will be reviewed weekly to ensure that the changing nursing care needs of the patients are met.
- 3.2.6. Time span of care:
  - 3.2.6.1. Whenever the health services in a unit exceeds 5 (five) hours per day, a care worker will be placed with the resident or alternatively the resident will be transferred to a frail care unit at the residents own cost.
- 3.2.7. A quality assurance assessment will be done on a monthly basis by the Registered nurse on the nursing care plan to ensure that the resident receives quality nursing care.
- 3.2.8. The following tasks can be provided in the comfort of the resident's own home:
  - 3.2.8.1. Bed bath
  - 3.2.8.2. Help to dress and undress
  - 3.2.8.3. Feeding
  - 3.2.8.4. Mobilising
  - 3.2.8.5. Pressure care - if the patient is bedridden every 2 hours
  - 3.2.8.6. Catheter care
  - 3.2.8.7. Administration of oral medication
  - 3.2.8.8. Washing of hair
  - 3.2.8.9. Cutting of nails
  - 3.2.8.10. Mouth care
- 3.2.9. Costs of the services:
  - 3.2.9.1. In liaison with the Registered nurse the resident will be able to decide for him/herself which services he/she needs and be able to mark these services on a menu sheet.
  - 3.2.9.2. The cost of these services will be provided on the menu sheet.
  - 3.2.9.3. These healthcare services will be invoiced to the resident on a monthly basis
  - 3.2.9.4. The cost structure will be reviewed annually after consultation between The Retreat at Hazeldean Owners Association and The Retreat Hazeldean Co-Owners or its nominee or the designated services provider. - Annexure C
  - 3.2.9.5. Residents using the optional healthcare services only pay the tariffs as agreed upon.
  - 3.2.9.6. In the case where the resident needs post operative care, the resident's medical aid may by prior arrangement pay for the above service for a specific period of time
  - 3.2.9.7. All costs that are related to the above services must be paid directly to the Co-Owners, its nominee or the designated services provider as the case may be.

#### 4. FRAIL CARE

A resident will be admitted to the frail care unit and receive 24 hour nursing care when the resident is unable to look after him/herself and needs assistance with all physical task and continuous nursing and caring attention.

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- 4.1. The Registered nurse will do a medical assessment and recommendation so that the resident can be admitted to the frail care unit. A social worker may also form part of this assessment.
- 4.2. An application form, available at the primary health care clinic, must be completed by either the resident or his/her spouse or family.
- 4.3. Nursing care plan:
  - 4.3.1. An individual nursing care plan will be planned in conjunction with the resident, his/her spouse, family and members of the multidisciplinary team and implemented according to the needs of the resident.
  - 4.3.2. The appropriate category of staff will be allocated to carry out the tasks for the resident.
  - 4.3.3. The Registered nurse will visit the resident daily to see that the nursing care plan is carried out correctly
  - 4.3.4. The nursing care plan will be reviewed weekly to ensure that the changing nursing care needs of the patient are met.
- 4.4. Occupying of beds:
  - 4.4.1. Residents from The Retreat at Hazeldean will receive priority for admission to the frail care unit
  - 4.4.2. Clients from outside will only be admitted to The Retreat at Hazeldean if there are beds available that are not occupied by the residents of the Retreat at Hazeldean.
  - 4.4.3. If the frail care unit is full and there is no bed available for a resident, alternate arrangements will be made to accommodate the resident until such time that there is a bed available. This cost will be for the resident's own account.
- 4.5. Costs of the services:
  - 4.5.1. Residents using the optional healthcare services only pay the tariffs as published by the service provider from time to time.
  - 4.5.2. All costs that relate to the frail care unit are payable on a monthly basis directly to the Co-Owners, its nominee, or its designated service provider as the case may be

### **C. OBLIGATIONS OF THE SERVICE PROVIDER**

5. The service provider is responsible for a high quality care service by knowledgeable motivated personnel in a therapeutic environment with ample facilities and equipment.
  - 5.1. Therefore they must manage personnel to ensure:
    - 5.1.1. Respective categories of nursing staff, according to nursing need of the service as stipulated by the National norms and standards regarding the acceptable level of service to older persons and service standards for residential facilities (Older Persons Act,13/2006), are provided.
    - 5.1.2. All personnel of the service provider are subject to the security measures of The Retreat at Hazeldean Owners Association.
    - 5.1.3. Personnel comply at all times to the management and code of conduct of The Retreat at Hazeldean Owners Association.
    - 5.1.4. Personnel sustain professional ethics.
    - 5.1.5. That no overnight, and or other residential facilities or rights are to be given to personnel without consent of The Retreat at Hazeldean Owners Association.
  - 5.2. Responsible use of all capital and consumable items and will at own expense:
    - 5.2.1. Replace all consumables in time.
    - 5.2.2. Maintain all capital equipment and ensure that capital equipment are in good working order at all times and upgrade when necessary
  - 5.3. Service provider is responsible for all damage that may occur due to negligence of personnel, patients or visitors and must take responsibility for all replacements or repairs.

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- 5.4. Infection control – monitoring and control of all nursing and / or medical refuse must be disposed of at own expense as per regulations.
- 5.5. Comply with all relevant laws, regulations and rules and be registered as operator. See Annexure “E”.
- 5.6. Keeping all documentation up to date for auditing purposes.
- 5.7. Indemnity. The service provider indemnifies The Retreat at Hazeldean Owners Association of any accountability of loss, financial or otherwise, that may result during the execution of their health care duties.
- 5.8. The Service provider is obliged to collect the payments directly from the resident using optional medical services.