

## 22 May 2019, updated 27 September 2019 (point 1.b included)

(approved by the Joint ARC Steering Group: DHBs, NZACA, CANZ, NZCCSS, MoH)

# Guidelines for Planned Closure or Downsizing of Aged Residential Care Facilities

## Introduction

These Guidelines are for situations when the owner of an aged residential care (ARC) facility makes the decision to close or to downsize beyond a small number of beds. The latter usually occurs due to a refurbishment or rebuild and can either be temporary or permanent.

## Principles

It is acknowledged that making the decision to close/downsize is significant and has serious implications for all parties: owner; residents and their families/ whānau; facility staff; unions and District Health Boards (DHBs). The following principles apply in these situations:

- residents continue to receive quality care as specified under the facility's Age Related Residential Care (ARRC) Agreement
- there is transparent, timely and precise communication to all parties
- employment legislation is met at all stages of the process
- a collaborative process between the facility and DHB works in the best interest of residents.

## Guidelines for closure

The Guidelines below comprise the steps to follow when a facility is closing.

### 1. Notification:

- a. the facility owner (or delegate) is responsible for formally notifying their DHB health of older people (HoP) programme manager of the closure with a confirmed date for the closure as per the ARRC Agreement. This should occur prior to notifying residents and their families/ whānau and staff
- b. *(added 27 September 2019)* the facility will advise the Residential Subsidy Unit of the Ministry of Social Development of the planned date of closure. 0800 999 727 or [rsuppliers@msd.govt.nz](mailto:rsuppliers@msd.govt.nz)
- c. the facility owner (or delegate) will supply the DHB programme manager with an action plan for managing the closure (resident list; key contact/coordinator; meeting dates; copies of resident/family/staff communication)
- d. the recommended timeframe between notice to residents and their families/ whānau and closure is 12 weeks
- e. the facility will stop taking new admissions when notification is given (or earlier)
- f. the facility owner (or delegate) will identify any residents under other non-DHB contracts e.g. DSS, ACC and also notify these funders of the closure.

**2. Communication:**

- a. the facility owner (or delegate) is responsible for communicating the decision to residents and their families/ whānau and staff via written communication and meetings, and liaising with unions where appropriate
- b. the HoP programme manager is responsible for communicating the decision internally at the DHB and working with the Needs Assessment Service Coordination (NASC) service to agree the support arrangement with the facility
- c. NASC will provide contact details (e.g. direct phone number) to be included in facility communication so there is an easy/direct route for residents and families/ whānau to contact NASC
- d. NASC and the facility will ensure options are clearly communicated to residents and their families/ whānau e.g. the ability to transfer to facilities outside the DHB if this suits their situation
- e. the HoP programme manager will inform DHB communication personnel who may be required to respond to media requests; any request will be coordinated with the facility.

**3. DHB support:**

- a. NASC will support residents and families/ whānau with finding and transferring to new facilities, and will manage the paper work requirements for facility transfer and funding
- b. the facility will identify those residents who do not have family/whānau or support people as a priority for NASC support
- c. the facility will identify meetings where DHB or other funder attendance would provide additional support; the HoP programme manager and/or NASC staff (or other DHB staff) will attend where appropriate.

**4. Monitoring :**

- a. the facility, HoP programme manager and NASC will agree a monitoring/tracking process to record confirmed resident transfers and keep the DHB abreast of progress
- b. the facility will ensure care is delivered according to the ARRC Agreement to all remaining residents throughout the period it takes for all residents to transfer to new facilities.

**5. Termination:**

- a. The HoP programme manager and facility owner (or delegate) will complete the paper work for termination of the ARRC Agreement when all residents have left the facility and will inform HealthCERT.

## **Guidelines for downsizing / reducing bed numbers**

The Guidelines below comprise the steps to follow when a facility is downsizing, either temporarily or permanently.

**1. Notification:**

- a. the facility owner (or delegate) is responsible for formally notifying their DHB health of older people (HoP) programme manager of their intention to reduce the number of beds in the facility

- b. *(added 27 September 2019)* the facility will advise the Residential Subsidy Unit of the Ministry of Social Development of their intention to reduce the number of beds in the facility - 0800 999 727 or rsuppliers@msd.govt.nz
- c. the facility will stop taking new admissions over a sufficient time period with the expectation that no existing resident will be required to transfer to a new facility unless it is their choice. The required timeframe for this to occur will be agreed with the HoP programme manager
- d. the facility owner (or delegate) will identify any residents at the facility under other non-DHB contracts e.g. DSS and ACC and also notify these funders of the decision to downsize.

**2. Communication:**

- a. the facility owner (or delegate) is responsible for communicating the plan to residents and their families/ whānau and staff via written communication and/or meetings, and liaising with unions where appropriate
- b. the facility is responsible for informing the NASC that they are no longer taking new admissions
- c. the HoP programme manager will inform DHB communication personnel in case there are any media queries; any request will be coordinated with the facility.

**3. Monitoring:**

- a. the facility and the HoP programme manager will agree a process for regular updates to enable any issues to be addressed.

### **Additional considerations**

These guidelines are also appropriate when a facility owner makes the decision to reconfigure their service to no longer provide an existing level of care. For example when a facility owner decides to no longer provide a dual service (rest home/hospital) and reconfigures to provide hospital care only; in this situation the guidelines would apply to managing existing rest home residents.

Initially the facility owner may not be able to provide a comprehensive action plan for a closure and it will need to be a living document agreed with the DHB.

Although the guidelines refer to the HoP programme manager and NASC as the key contacts throughout a facility closure, the DHB may appoint a specific person to work with the facility during a closure.

The facility owner (or delegate) will be responsible for maintaining appropriate staffing levels and site security as the number of residents/staff decline.

The facility owner (or delegate) is responsible for the appropriate management and storage of resident and other records that don't go with the residents transferring to new facilities.