

## **Inspection visit to SA Aarike Hooldekeskus**

On 16 November 2015, advisers to the Chancellor of Justice made an unannounced verification visit to the SA Aarike Hooldekeskus (hereinafter: Care Centre).

The Care Centre has a total of 55 beds. Service is provided in three buildings – in the so-called main building, the lower building and the apartment building. During the verification visit, 53 clients were being provided with round-the-clock general care services and there were eight employees on duty – three caregivers, one activity leader, the manager of the centre, the senior care giver, a chef and a cleaner – who were in direct contact with the clients. There are normally three caregivers on duty during the day and one caregiver at night. The activity leader visits the institution twice a week.

During the course of the verification visit, advisers to the Chancellor of Justice visited the premises of the Care Centre together with an expert, examined the documentation of the institution, and spoke with the staff on duty and 16 of the Care Centre's clients. The advisers to the Chancellor of Justice checked how the fundamental right of freedom, right to life and health and compliance with the principle of dignity of the clients is ensured in the Care Centre.

The institution left the advisers of the Chancellor of Justice with a homey feeling during their verification visit and the caring attitude of the head of the institution and head of treatment towards the clients under their care was noted. Even so, the suspicion arose during the course of the verification visit that there may be insufficient staff working at the Care Centre, particularly at night. The passivity of clients, unpleasant stench in certain areas, lack of privacy and the living conditions were all a cause for alarm. There were problems with the handling and administration of medicinal products.

The health care expert who participated in the verification visit made the following observations:

- Greater attention should be paid to fresh air and sufficient lighting in the living quarters of the clients and improvement of mobility and privacy, which are important preconditions for the feeling as well as the state of health of the clients.
- It is recommended that greater attention be paid to a healthy diet and the use of more individualised menus, since the clients are persons of different ages, sexes and health problems.
- Taking into consideration the fact that caregivers also need lunch and rest breaks, and that there are a lot of clients suffering from mobility disability and even bedridden clients, increasing the number of caregivers should be definitely considered.
- More attention should be paid on how to direct the clients more towards leisure activities.
- Dose selectors containing medicinal products should not be stored openly in places accessible to all persons.
- More attention should be paid in the future to ensuring that the examination/health issue of each client is documented as required. For each medicinal product there should be a note in the medical records on the indication of prescription and length of treatment thereof together with the data on the physician who made the decision. Treatment schemes must be precise (active ingredient and name of pharmaceutical preparation, quantity, number of tablets, procedure of administration) and identical in all paper-based medical documents and reality.

- All treatment schemes must be confirmed with the date and the physician's name or signature. When making changes to the dosage, the correction must be made properly and should be unambiguous. Treatment schemes must conform on paper and in reality.