

Oceania Care Company (No2) Limited - Elmwood

Date of audit: 13 September 2010-10-06

Addendum

This 'Spot Unannounced Surveillance' audit has been undertaken to establish compliance with the Health and Disability Sector Standards[HDSS], as identified in the DAA Handbook, and with the Aged Related Residential Services Agreement [ARC] contractual requirements that overlap with HDSS standards. Elmwood provides residential care for up to 159 consumers at two service levels - Hospital [114 beds] and rest home [45 beds]. Fifty of these 159 beds are 'swing' beds and are used by either hospital or rest home consumers. The 'swing' beds are located in the Tui-Robin Wing [25 beds], and in the 25 bed assisted living suites. Consumers in the assisted living suites can be either rest home level or hospital level care and have an 'Occupational Rights Agreement'. On the day of this audit there were 69 hospital level consumers and 71 rest home level consumers.

The facility is operated by Oceania Care Company (No 2) Limited. The 14 partial attainments from the previous certification audit in September 2009 have been reviewed at this audit and the service provider has addressed some of these issues. Five of these criteria remain partially attained. These partially attained criteria relate to: consumers awareness of access to independent advocate; all consumers do not have signed admission agreements; medication charts; kitchenette fridge temperatures are outside the recommended range for safe storage of food; and hot water temperatures are above the recommended maximum in some areas.

Additional issues were identified during this surveillance audit relating to quality risk management, staff manner when dealing with consumers, consumers care plans and reviews, no qualified diversional therapist, medicine management, the temperature of food, and restraint education and competency of clinical staff.

Oceania Care Company (No2) Limited - Elmwood

Date of audit: 21-Sep-09

The following summary has been accepted by the Ministry of Health as being an accurate reflection of the certification audit conducted against the Health and Disability Services Standards – NZS8134.1:2008;NZS8134.2:2008 & NZS8134.3:2008 on the audit date(s) specified.

Elmwood provides residential care for 159 consumers at two service levels - Hospital [114 medical/geriatric beds] and rest home [45 beds]. Occupancy on the day of the audit was at 133.

General Environment

Elmwood is a large site and visual inspection of the facility evidenced a clean, safe and appropriate environment for consumers. All buildings, plant and equipment comply with legislation. Service provider documentation evidenced planned and reactive maintenance systems are established and well maintained. Essential, emergency and security systems are appropriate and staff receive appropriate training to respond to identified emergency and security situations.

Documented policies and procedures for the cleaning and laundry services are implemented with appropriate monitoring systems in place to evaluate the effectiveness of these services. Staff have completed appropriate training in chemical safety. Elmwood contract the bulk of their laundry to an external contractor - Taylors, and do personal items only in the facility, they also process personal clothing for 2 other Oceania Group facilities.

Documented processes for the management of waste and hazardous substances are in place. Any incidents are reported on in a timely manner. Service providers have received training and education to ensure safe and appropriate handling.

Staffing Levels

The service has a clearly documented rationale for determining service provider levels and skill mixes to provide safe service delivery. There is currently a restructuring process being undertaken for the service which has involved union input. The registered nurse coverage is fully compliant with the Facility Manager, Clinical Coordinator and two Team Leaders [registered nurses] being in addition to the 'on floor' registered nurse cover. Bureau registered nurse coverage is used for approximately 20 - 25 shifts but recent successful recruitment of 2 registered nurses will see a reduction in this Bureau usage. Health Care Assistant coverage is satisfactory with no current vacancies and a staffing ratio is used for critical and non critical shifts.

Resident Satisfaction

Services were found to be provided in a manner that was respectful of consumer rights, facilitated informed choice, minimized harm, and acknowledged cultural and individual values and beliefs. Resident and family members interviewed stated their satisfaction with the service and that staff are providing appropriate care and treatment. A sampling of consumer files evidenced that informed consent processes are managed well. Visual inspection evidenced the Code of Rights information is readily displayed along with complaint forms.

Quality Assurance & Risk Management

Systems are established and maintained by the governing body which clearly defines the scope, direction and goals of the facility and monitoring and reporting processes against these. The facility is managed by a suitably experienced Facility Manager who is supported in this role by a Clinical Coordinator. Documented evidence sighted demonstrated the service provider complies with legislation and the service is managed in a safe, efficient, and timely manner.

Elmwood facility has an established, documented, and maintained quality and risk management system that reflects continuous quality improvement principles. Quality improvement meetings are held monthly which report on all quality and risk issues and the Facility Manager provides a detailed monthly report to the Governing Body. An internal audit programme for 2009 is in place.

The human resource management system demonstrated implementation of processes both at the commencement of employment and ongoing in relation to training. Detailed orientation/induction and in-service education programmes are in place. Nine Health Care Assistants are currently attending the Wellcare National Certificate in Support of the Older Adult course.

Standards of service delivery

The provider has implemented integrated systems to accurately assess, plan and evaluate the care needs of the consumers. A sampling of consumer files [6 hospital and 5 rest home] evidenced that consumers' needs, outcomes and/or goals have been identified and these are reviewed on a regular basis with the consumer and/or family member's input. There is a varied activities programme that is individualised for each consumer where possible. The monthly programme is displayed throughout the facility and every consumer receives a copy.

Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines.

The food service is run by Alliance Catering [a subsidiary of Spotless] and has 14 staff working in the kitchen. Over 200 meals are provided for which includes the rest home, hospital, some apartment clients and day care service clients. Menus evidence a current review by the Dietitian and provide a seasonal variance. The rest home and hospital consumers have their main meal in the evening and feedback from the consumers regarding their meal service is generally positive. A visual inspection of the kitchen and kitchenettes in each wing evidenced general compliance against aspects of food procurement, production, preparation, storage, transportation, delivery, and disposal, however, there are some issues noted and commented on more fully in the body of the report.

Areas for Improvement

Fourteen partial attainments were identified at this audit - 10 are rated low risk and 4 are rated moderate risk. The subsequent corrective actions and time frames for completion have been agreed to by the service provider. Post audit documentation received from the service provider evidences that some of the partial attainments have already been actioned following the audit.

Standards have been assessed and summarised below:

Key

| Four point scale | Description |
|---|--|
| Standards applicable to this service attained with some criteria exceeded | Includes commendable elements above the required levels of performance |
| Standards applicable to this service attained with all criteria achieved | No short falls |
| Standards applicable to this service attained with some criteria partially | Some minor shortfalls, no major deficiencies and required levels of |

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| achieved or unachieved | performance seem achievable without extensive extra activity |
| Some standards or this standard unattained that are applicable to this service | Major shortfalls, significant action is needed to achieve the required levels of performance |

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| Consumer Rights | Assessment |
| Includes 13 standards that support an outcome where consumers receive safe services of an appropriate standard that comply with consumer rights legislation. Services are provided in a manner that is respectful of consumer rights, facilities, informed choice, minimises harm and acknowledges cultural and individual values and beliefs. | Standards applicable to this service attained with some criteria partially achieved or unachieved |

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| Organisational Management | Assessment |
| Includes 9 standards that support an outcome where consumers receive services that comply with legislation and are managed in a safe, efficient and effective manner. | Standards applicable to this service attained with some criteria partially achieved or unachieved |

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| Continuum of Service Delivery | Assessment |
| Includes 13 standards that support an outcome where consumers participate in and receive timely assessment, followed by services that are planned, coordinated, and delivered in a timely and appropriate manner, consistent with current legislation. | Standards applicable to this service attained with some criteria partially achieved or unachieved |

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| Safe and Appropriate Environment | Assessment |
| Includes 8 standards that support an outcome where services are provided in a clean, safe environment that is appropriate to the age/needs of the consumer, ensure physical privacy is maintained, has adequate space and amenities to facilitate independence, is in a setting appropriate to the consumer group and meets the needs of people with disabilities. | Standards applicable to this service attained with some criteria partially achieved or unachieved |

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| Restraint Minimisation and Safe Practice | Assessment |
| Includes 3 standards with outcomes where: <ul style="list-style-type: none"> - Consumers receive and experience services in the least restrictive manner through restraint minimisation - Consumers requiring restraint receive services in a safe manner | Standards applicable to this service attained with all criteria |

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| - Consumers requiring seclusion receive services in the least restrictive manner | achieved |
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| Infection Prevention and Control | Assessment |
|---|---|
| <p>Includes 6 standards which require:</p> <ul style="list-style-type: none"> - There is a managed environment, which minimises the risk of infection to consumers, service providers and visitors appropriate to the size and scope of the service. - There are adequate human, physical and information resources to implement the infection control programme and meet the needs of the organisation. - Documented policies and procedures for the prevention and control of infection reflect current accepted good practice and relevant legislation requirements and are readily available and are implemented in the organisation. These policies and procedures are practical, safe and appropriate/suitable for the type of service provided. - The organisation provides relevant education on infection control to all service providers, support staff and consumers. - Surveillance for infection is carried out in accordance with agreed objectives, priorities and methods that have been specified in the infection control programme. - Acute care and surgical hospitals will have established and implemented policies and procedures for the use of antibiotics to promote the appropriate prudent prescribing in line with accepted guidelines. The service can seek guidance from clinical microbiologists or infectious disease physicians. | <p>Standards applicable to this service attained with some criteria partially achieved or unachieved</p> |