Wattle Downs Holdings Limited

Date of audit: 20-Oct-10

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.

GENERAL OVERVIEW

This Unannounced Surveillance' audit has been undertaken to establish compliance with the HDSS surveillance standards/criteria detailed in the Designated Auditing Agency Handbook - August 2010 and related ARRC contractual requirements. Wattle Downs rest home provides specialist dementia care for 33. Occupancy on the day of the audit was at 25. The facility is operated by Birchwood Group Limited. There were five partial attainments noted at the previous audit of which three have been fully actioned. There are an additional 20 partial attainments resulting from this surveillance audit. There have been no major building alterations or additions undertaken since the last audit.

Summary **Date of audit: 12-Nov-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.

Wattle Downs Rest Home provides residential care for 33 consumers who have been assessed as requiring dementia level rest home care. On the day of the audit there were 28 dementia level care consumers. Wattle Downs Holdings Limited is the governing body and the facility is managed by a Manager who reports to the General Manager on monthly basis. The Manager is not a registered nurse, and she is supported by a registered nurse who is responsible for oversight of the clinical care provided at Wattle Downs Rest Home.

General Environment

Wattle Downs Rest Home provides accommodation for up to 33 consumers in single and double bedrooms. All bedrooms have wash hand basins. Service provider documentation reviewed provided evidence that appropriate systems are in place to ensure the service provides a clean and safe environment for consumers. Visual inspection of the facility provided evidence of a clean, safe and appropriate environment for consumers that is maintained to an adequate standard. Interviews of staff and review of a sample of staff files provided evidence that staff have received current training in relevant areas.

Staffing Levels

There is a clearly documented and implemented process which determines service provider levels and skills mixes in order to provide safe service delivery. The Manager reported that there has been some turnover of staff lately but staffing is now stable. Staff interviewed reported that morale amongst the staff is high and they are working well together as a Team.

Care giver coverage is satisfactory and family members interviewed confirmed that there are adequate staff available to meet the consumers needs. Staff interviewed confirmed adequate numbers are available to ensure safe care is being provided. A staff in-service education programme is in place and staff are supported to complete the Health Education Trust ACE programme. All staff who are working in the dementia unit have commenced or completed the ACE Dementia specific modules.

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. Family members interviewed stated their satisfaction with the service and reported that staff are providing appropriate care and treatment. Family members interviewed confirmed the care needs of their relatives are being met and the meals are a highlight for them. The family members described the meals as being colourful, tasty, appetising, and said their relatives enjoy the home baking.

A sampling of consumer files provided evidence that informed consent processes are managed well. Visual inspection of the premises provided evidence the Code of Rights information is displayed, along with information on accessing the advocacy service, and complaint forms.

Quality Assurance & Risk Management

Documented evidence sighted during this audit demonstrated the service provider complies with legislation and the service is managed in a safe, efficient, and timely manner. Wattle Downs has a documented, and maintained quality and risk management system that reflects continuous quality improvement principles. Team Leader / Quality improvement meetings are held monthly which report on all quality and risk issues and the Manager provides a monthly report to the Governing Body. An internal audit programme for Wattle Downs Rest Home is in place.

Standards of service delivery

The service provider has implemented systems to assess, plan and evaluate the care needs of the consumers. Seven consumer files reviewed provided evidence 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 family members receive a copy. There was positive feedback from family members during the audit concerning the activities programme.

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

Areas for Improvement

Six criteria were identified as being partially attained during this audit - five are rated low risk and one is rated moderate risk. The subsequent corrective actions and time frames for completion of these corrective actions have been agreed to by the service provider. The service provider has provided additional documentation following the audit which provides evidence that three of these partial attainments have 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 achieved or unachieved	Some minor shortfalls, no major deficiencies and required levels of 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

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**
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**
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**
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 all criteria achieved**

Restraint Minimisation and Safe Practice	Assessment
Includes 3 standards with outcomes where: Consumers receive and experience services in the least restrictive manner through restraint minimisation Consumers requiring restraint receive services in a safe manner Consumers requiring seclusion receive services in the least restrictive manner	**Standards applicable to this service attained with all criteria achieved**
Infection Prevention and Control	Assessment
Includes 6 standards which require: 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.	**Standards applicable to this service attained with all criteria achieved**