

## **Hilda Ross Retirement Village Limited**

**Date of audit: 30-Mar-11 – Surveillance audit**

**The following summary has been accepted by the Ministry of Health as being an accurate reflection of the Surveillance 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**

Hilda Ross Retirement Village is part of the wider Ryman Healthcare facilities. The home provides rest home level care for up to 70 residents and the current occupancy is 67 residents. The home can also provide rest home care for up to 20 residents in the serviced apartments and there are currently five rest home residents in the apartments.

Hilda Ross continues to implement their quality and risk management programme. This could be described through interviews with staff and evidenced through documented corrective action reports and ongoing quality initiatives/plans.

The facility manager is an experienced enrolled nurse. She has been working in aged care for the last 20 years, and with Ryman since 2001. She is supported by a rest home coordinator (enrolled nurse) and three registered nurses across seven days.

Staff education and training includes the career-force programme for caregivers and in addition there is an implemented, planned annual in-service programme for all staff that includes monthly in-services.

The service has addressed all the improvements required from the previous report including (but not limited to); updating care plans to include required care and support needed, evaluation of care plans, security of files and infection control.

This audit only identified one further improvement required for the service around short term care plans.

**Date of audit: 1 & 2 September 2009 – Certification audit**

**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.**

Hilda Ross Retirement Village is a large modern retirement village situated in Hamilton. The home is modern and spacious and provides rest home level care for up to 71 residents. The home also includes 30 serviced apartments surrounding an angelic atrium that is utilised by both rest home and serviced apartment residents. The home/serviced apartments are surrounded by 167 town houses within large well kept grounds.

Hilda Ross is part of the wider Ryman Healthcare group. Ryman Healthcare have national annual quality objectives that include a number of identified objectives under the headings of a) provision of comprehensive resident services, b) being a good employer, and c) to manage quality, compliance and risk effectively. The organisation wide objectives are translated at each Ryman service by way of the Ryman Accreditation Programme (RAP) that includes a schedule across the year for the following areas: a) RAP Head Office, b) General management, c) Staff Development, d) Administration, e) Audits / Infection Control / Quality / Compliance / Health & Safety, and f) Triple A / Activities. Each service also has their own specific RAP objectives and for Hilda Ross in 2009 this includes objectives to improve Laundry services and Housekeeping.

The service has policies and procedures and associated implementation systems to provide a good level of assurance that it is meeting accepted good practice and adhering to relevant standards - including those standards relating to the Health and Disability Services (Safety) Act 2001.

The manager is an experienced Enrolled Nurse. She has been working in aged care for the last 19 years and with Ryman since 2001. She is supported by a regional North Island Manager (RN) and 4 registered nurses (that cover 7 days a week).

Hilda Ross has a well established quality and risk system, known as the Ryman Accreditation programme (RAP), that includes analysis of incidents, infections and complaints, internal audits and feedback from the residents and family. The service has continued implementing their quality and risk management system since previous certification and there is evidence of quality improvement and ongoing improvements that involve all staff. The service is proactive in evaluating service delivery and actioning new quality initiatives. Actions were identified through meetings and are followed through in each meeting until a resolution is documented.

Ryman has achieved WSMP tertiary level with ACC. Resident meetings are held two monthly and families have 6 monthly meetings. Annual resident and relative surveys are also completed. Relative satisfaction survey 2008 identified an overall satisfaction of 92%. A QI plan was initiated for areas identified for improvement and the service included ongoing evaluation of action undertaken. The Rest Home resident satisfaction Sept 08 - overall satisfaction of 94% (an increase of 3% since 2007 survey).

Residents and relatives spoke very positively about the excellent care provided by staff, the approachability of management and the activities available at Hilda Ross.

An annual training plan is implemented with staff training records maintained along with performance appraisals. Staff education and training includes the ACE programme for caregivers and there is an implemented planned annual monthly in-service with all staff. Registered Nurse's are supported to maintain their professional competency. Staff training records are maintained.

10 resident files were reviewed across the rest home and including the file of a resident in the serviced apartments that has been reassessed as requiring rest home care. All Nursing care plans reviewed were computerised, individualised, accurate and up to date. Residents and relatives confirmed they were well involved in the planning of the care plan. There is a House GP that visits 2x weekly or more frequently as needed. Activities are provided across 6 days. Residents are able to participate in community activities as well as activities in the service itself. There are a number of clubs running at the serviced apartments. The triple A (Active, Ageless, Awareness) exercise programme is an initiative at Ryman and includes an

active exercise programme (different levels) for rest home residents and serviced apartments.

The menu is designed and reviewed by a Registered Dietician at an organisational level. There is a 4 week rotating menu. Changes to residents' dietary needs are communicated to the kitchen. Two monthly resident meetings are held and meals are discussed. Residents stated that the food was wonderful and they were well fed.

Legislation and regulatory requirements appear to be met for local authorities and the MoH, as do applicable legislation codes, standards, and regulations. Building maintenance appears to be carried out when necessary and records maintained. There is access to necessary and essential equipment. The service is divided in three areas. Resident rooms are of sufficient space to ensure care and support to rest home level residents and for the safe use of mobility aids. Each room has an en-suite with a shower and toilet with disabled access. Residents are able to bring their own possessions into the home and are able to adorn their room as desired. The maintenance schedule includes checking of resident equipment such as heaters.

The service implements a comprehensive infection control programme that is directed via the Ryman Accreditation Programmes annual calendar. The IC officer implements the surveillance, organises training and implements and reviews internal audits as evident in documentation reviewed.

There is a Restraint Minimisation Manual 2009 applicable to the type and size of the service. Restraint practices are only used where it is clinically indicated and justified and other de-escalation strategies have been ineffective. Hilda Ross remains restraint free.

The audit identified some low risk criteria for corrective actions and these were generally related to improving some areas of documentation. The service is commended for its achievement of 5 Continuous Improvement (CI) ratings for: a) implementation and regular review of organisational and facility quality objectives, b) implementation of the quality system with evidence of ongoing quality improvements, c) staff education and training exceeding expectations and contractual requirements for caregivers and registered nurses, and d) implementing a comprehensive activities programme.

Interview discussions with a range of staff, review of resident plans and other discussions with residents/family provided supporting evidence that, based on the information and evidence available for this audit, Hilda Ross Retirement Village is meeting the sector standards.

It is the view of the audit team that:

1. The Health and Disability Services Standards 8134:2008 (Core) are met.
2. The Restraint Minimisation and Safe Practice Standard are met (NZS 8134.2:2008).
3. The Infection Prevention and Control Standard are met (NZS 8134.3:2008).

Standards have been assessed and summarised below:

Key

Four point scale	Description
<b>Standards applicable to this service attained with some criteria exceeded</b>	Includes commendable elements above the required levels of performance
<b>Standards applicable to this service attained with all criteria achieved</b>	No short falls

<b>Standards applicable to this service attained with some criteria partially achieved or unachieved</b>	Some minor shortfalls, no major deficiencies and required levels of performance seem achievable without extensive extra activity
<b>Some standards or this standard unattained that are applicable to this service</b>	Major shortfalls, significant action is needed to achieve the required levels of performance

<b>Consumer Rights</b>	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.	<b>Standards applicable to this service attained with all criteria achieved</b>

<b>Organisational Management</b>	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.	<b>Standards applicable to this service attained with some criteria partially achieved or unachieved</b>

<b>Continuum of Service Delivery</b>	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.	<b>Standards applicable to this service attained with some criteria partially achieved or unachieved</b>

<b>Safe and Appropriate Environment</b>	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.	<b>Standards applicable to this service attained with all criteria achieved</b>

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

Infection Prevention and Control	Assessment
<p>Includes 6 standards which require:</p> <ul style="list-style-type: none"> <li>- 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.</li> <li>- There are adequate human, physical and information resources to implement the infection control programme and meet the needs of the organisation.</li> <li>- 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.</li> <li>- The organisation provides relevant education on infection control to all service providers, support staff and consumers.</li> <li>- Surveillance for infection is carried out in accordance with agreed objectives, priorities and methods that have been specified in the infection control programme.</li> <li>- 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.</li> </ul>	<p><b>Standards applicable to this service attained with some criteria partially achieved or unachieved</b></p>