

Roseneath Care Services Limited

CURRENT STATUS: 15-Jul-11

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

Roseneath Care Service is a purpose built facility which is privately owned. The facility and daily care provision is undertaken by a Care Manager who is a Registered Nurse and is supported by an administration Manager, the owners and seven Registered Nurses. The Care Manager has delegated authority, accountability and responsibility for the provision of services. The facility is certified for 42 beds consisting of rest home and hospital level beds. On the day of audit 16 rest home and 25 hospital level beds are occupied. One bed is not currently in use as it has been reconfigured and is being included in a new build which is being undertaken.

All bedrooms are single occupancy and have full ensuite facilities. The facility is very well maintained both inside and out.

Improvements required from the November 2009 certification audit have all been addressed by the facility.

The three areas for improvement related to Health and Disability Standards and Aged Residential Care contractual requirements identified as a result of this audit are related to staff appraisals and in-service education programme documentation not being up-to-date, not all medicine management processes reflect legislative and contractual requirements and lack of infection control surveillance data evaluation and reporting.

AUDIT SUMMARY AS AT 15-JUL-11

Standards have been assessed and summarised below:

Key

Indicator	Description	Definition
	Includes commendable elements above the required levels of performance	All standards applicable to this service attained with some criteria exceeded
	No short falls	Standards applicable to this service attained with all criteria achieved

Indicator	Description	Definition
	Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity	Standards applicable to this service attained but with some criteria partially achieved and of negligible or low risk
	A number of shortfalls that require specific action to address	Standards applicable to this service attained but with some criteria partially achieved and of medium, high or critical risk and/or some criteria unattained
	Major shortfalls, significant action is needed to achieve the required levels of performance	Some standards applicable to this service unattained

Consumer Rights	Day of Audit 15-Jul-11	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.		No short falls

Organisational Management	Day of Audit 15-Jul-11	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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Continuum of Service Delivery	Day of Audit 15-Jul-11	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.		A number of shortfalls that require specific action to address

Safe and Appropriate Environment	Day of Audit 15-Jul-11	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.		No short falls

Restraint Minimisation and Safe Practice	Day of Audit 15-Jul-11	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		No short falls

Infection Prevention and Control	Day of Audit 15-Jul-11	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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Date of audit: 25-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.

Roseneath provides residential care for 42 residents who require rest home and hospital level care. The facility is privately owned. The service employs a care manager, who is an enrolled nurse, and a clinical nurse (Registered Nurse). The facility was first built as a convalescent home has been extended over the years to accommodate hospital level residents. There are pleasant fenced grounds and to the rear the facility overlooks farm land; it is within walking distance of the town centre.

General Environment

Visual inspection of the facility evidenced a clean, safe and appropriate environment for consumers. Staff have received appropriate training in the management of waste and hazardous substances, and are able to respond to identified emergency and security events. All residents have single rooms.

Staffing Levels

There is a clearly documented and implemented process which determines service provider levels and skill mix in order to provide safe service delivery. Staffing remains stable. Registered nurse coverage is compliant with requirements and care giver coverage is satisfactory. Consumers and/or family members interviewed confirmed that there are adequate staff available to meet their needs and staff interviewed confirmed adequate numbers are available to ensure safe care is being provided. A staff in-service education programme for Roseneath is in place.

Resident Satisfaction

Services are provided in a manner that is respectful of consumer rights, facilitates informed choice, minimizes harm, and acknowledges 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 satisfactorily. There is an implemented system for managing complaints, and the code of rights information is readily displayed. The service has contacts for Age Concern, advocacy services and church groups noted in the resident information pack.

Quality Assurance and Risk Management

Evidence was sighted demonstrating that Roseneath complies with legislation, and the service is managed in a safe, efficient, and timely manner. Roseneath has an established, documented, and maintained quality and risk management system that reflects continuous quality improvement principles. Quality meetings are held monthly, and all quality and risk issues are reviewed. An internal audit programme for Roseneath is in place.

Service Delivery

Care plans are developed with the resident, and family/whanau input as appropriate, to reflect individualised needs. All residents have an integrated file that is easy to read and identifies continuity of service delivery. However whilst satisfactory care is provided, documentation requires more detail to reflect practice. Staff use the care plans to guide the

service they deliver to assist residents to reach their desired goals. Policy states care plans are to be evaluated six monthly, or sooner if there is any change to the residents' needs or wants. Not all reviews were current on the day of audit. Evaluations need to be more effectively related to the residents response to the intervention. Staff need to ensure all entries in notes are signed, dated and identify the designation of the service provider. Food services are provided in house. Residents' nutritional needs are overseen by a registered dietician. Special diets, likes and dislikes are catered for by the service.

Where residents have no known allergies this is not always recorded. Formal medical review of prescribed medication is undertaken six monthly. The contract requires that this occurs three monthly.

Staff follow organisational procedures to ensure residents experience a planned and coordinated exit, discharge or transfer from the service. Documentation relating to restraint requires some review.

Summary

The service provides professional care in a modern facility with pleasant landscaped grounds. Fourteen criteria were partially attained. All were rated low risk. On the day of audit the service was compliant with the required standards.

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
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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

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

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 some criteria partially achieved or unachieved

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	Standards applicable to this service attained with all criteria achieved

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.

