Aria Park Senior Living Limited

CURRENT STATUS: 13-Dec-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

Aria Park is certified to provide rest home and hospital level care for up to 84 residents. On the day of the audit, there were 84 residents. The service is managed by an experienced and qualified manager (registered nurse). She is supported by a clinical manager (registered nurse) and an operations manager who works across three sites. The service continues to implement a quality and risk programme and has started to benchmark with two other facilities.

The service has addressed two of four shortfalls from the previous audit around advance directives and documenting the orientation programme. One other shortfall has been partially addressed around timeliness of assessments and care plans. An improvement is still required around documenting progress towards goals.

This audit has identified improvements required around: informing families of incidents; complaints register; analysing data; documenting action plans; using quality data to improve quality; internal audit; training for registered nurses; review of policies; performance appraisals; involving residents and families; care planning and evaluation; wound care evaluation; aspects of medication management; linking restraint minimisation to the quality programme; classification of residents using enablers.

AUDIT SUMMARY AS AT 13-DEC-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 13-Dec-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.		**Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity**

Organisational Management	Day of Audit 13-Dec-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.		**A number of shortfalls that require specific action to address**

Continuum of Service Delivery	Day of Audit 13-Dec-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 13-Dec-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 13-Dec-11	Assessment
Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		**Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity**

Infection Prevention and Control	Day of Audit 13-Dec-11	Assessment
Includes 6 standards that support an outcome which minimises the risk of infection to consumers, service providers and visitors. Infection control policies and procedures are practical, safe and appropriate for the type of service provided and reflect current accepted good practice and legislative requirements. The organisation provides relevant education on infection control to all service providers and consumers. Surveillance for infection is carried out as specified in the infection control programme.		**No short falls**

Aria Park Senior Living Limited

Date of audit: 10-Jun-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

Aria Park Retirement Village is privately owned and is located in Epsom Auckland. The owners of Aria Park Retirement Village own two other facilities all of which are being rebranded with the Aria name. The facility provides service for up to eighty four residents, with forty four hospital level and forty rest home level beds.

The manager has recently resigned and the facility is being managed by the owner / general manager with support from the clinical manager who is a registered nurse. The organisation's philosophy, values, goals and mission statement clearly define the organisation's direction. There have been no complaints lodged with the office of the Health and Disability Commissioner or issue based audits since the last audit. The four corrective actions from the previous surveillance audit have been met.

Consumer Rights

Aria Park Retirement Village provides information and discussion on the Health and Disability Commissioner's (HDC) Code of health and disability Services Consumers' Rights (the Code) to ensure residents and their families understand their rights and are able to raise concerns and access support services. The management and staff have a commitment to open disclosure and transparency in all service provision. Resident's cultural and individual values and beliefs are assessed on admission and documented in their plan of care. Staff receive education on supporting cultural and individual values and beliefs at orientation and through the annual education programme with sessions on spirituality and cultural safety which includes the organisation's Maori Health Plan plus the Code. There is one area of improvement needed concerning advanced directives.

Organisational Management

Aria Park Retirement Village have a workforce of seventy three staff. Clinical staff are very experienced and educated in care of the older person. The rosters show adequate staffing levels to meet resident numbers and acuity. Residents and a relative spoken to during the audit confirmed a high level of satisfaction with the services provided. This was confirmed by results of resident / relative survey results and the low number of complaints. There is one area of improvement which needs addressing related to staff orientation records.

Continuum of Service Delivery

Aria Park Retirement Village have a manager and clinical manager who over see the service provided. Residents are assessed by needs assessors as requiring hospital level care prior to entry to the facility. Entry information is comprehensive and available for prospective residents and their families/whanau. Referral agencies are informed of the criteria for admission. A registered nurse is on duty twenty four hours a day seven days per week as required for hospital level care. The facility has clearly documented policies and procedures for assessment, planning and review of service provision. There is a corrective action around the timeliness of the initial assessment and care plan reviews. Completed assessment and care plans show evidence of meeting the residents' desired outcomes, however, there is a corrective action required to ensure evaluations relate to the identified needs, interventions and desired outcomes. There is evidence of input from other service providers and family/whanau. The activity programme runs five days a week and a variety of activities are available. Resources are available for residents to have one-to-one time for those who do not wish to join the group activity.

A robotic medicine management system is in place. Medication is administered by the registered nurse and medication competency assessment is undertaken for all staff. The general practitioner (GP) reviews drug charts three monthly and any known allergies are easily identified.

Resident's nutritional needs are overseen by the dietician. Individual needs are identified on a dietary profile completed on admission. All food safety processes meet the requirements of the standard.

Safe and Appropriate Environment

The facility is a large two level facility. All residents have a single room with a shared ensuite. There are adequate communal areas with lounges and dining rooms. The services are provided in a manner that is appropriate to the level of care required. Systems are in place to ensure a safe and clean environment is provided to residents, staff and family / whanau. Residents are protected from harm as a result of the infection control, waste management and hazardous substances programme. There is a current Building Warrant of Fitness and an approved Fire Evacuation Scheme. Fire evacuations are conducted six monthly and staff receive training in emergency requirements. The facility is heated electrically and was a comfortable temperature on the day of the audit. All residents have an individual call bell in their room and these are also available in the lounge, ensuite and communal areas. The facility has a planned and a reactive maintenance programme.

Restraint Minimisation and Safe Practice

Aria Park Retirement Village promotes and educates staff on restraint minimisation at orientation and through annual education. There is currently no restraint in use. The restraint policy and procedure has a clear definition of restraint and enablers and includes a philosophy of restraint minimisation. Twelve enablers at the residents' request were in use at the time of audit. The two previous corrective actions from the surveillance audit have been met

Infection Prevention and Control

There are comprehensive infection control policies and procedures that are based on accepted good practice. These policies and procedures cover all aspects including occupational health and safety (OSH), and service related areas, e.g. kitchen and laundry. The Infection Control Coordinator and the manager are responsible for the implementation of the programme. The staff can access external assistance and support as required. Staff orientation and education includes infection control practice. Surveillance processes are well documented and the data is collated, analysed, and trends are reported. An annual review of the programme is undertaken.

Standards have been assessed and summarised below:

Key

Five 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	Complies with standards
Standards applicable to this service attained with some criteria of low risk partially achieved	Some minor shortfalls, no major deficiencies and required levels of performance seem achievable without extensive extra activity
Standards applicable to this service attained with some criteria of moderate or high risk partially achieved or unachieved	A moderate number of shortfalls that require specific action planning to address

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 of moderate or high risk 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 of low risk partially achieved**

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 of low risk partially achieved**

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**