

## Jane Mander Retirement Village Limited

**CURRENT STATUS: 09-Mar-12**

**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

Jane Mander Retirement Village is certified to provide hospital, medical, rest home, dementia care and psychogeriatric level care. On the day of audit there were 114 residents; 52 hospital, 27 rest home including four rest home residents in the serviced apartments. There are also 31 residents in the secure dementia unit including two residents assessed as hospital level (psychogeriatric).

The service currently has 10 serviced apartments assessed as suitable to provide rest home level care. This surveillance audit also verified a further 20 serviced apartments and accompanying roster as being suitable for providing rest home level care.

Jane Mander continues to be managed by an experienced manager and clinical manager and supported by a team of registered nurses.

Ryman Healthcare has an organisational total quality management plan and key operations quality initiatives that are implemented at Jane Mander. Residents and relatives interviewed spoke positively about the care and support provided by staff and management.

The service has addressed two of the three shortfalls from their previous audit including advance directive documentation, and availability of call bells. Further improvements are still required around aspects of medication management/documentation.

This surveillance audit has also identified improvements required around complaints documentation, dementia training and staffing, and care plan documentation.

### AUDIT SUMMARY AS AT 09-MAR-12

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

Indicator	Description	Definition
	No short falls	Standards applicable to this service attained with all criteria achieved
	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 09-Mar-12	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>Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity</b>

Organisational Management	Day of Audit 09-Mar-12	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>Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity</b>

Continuum of Service Delivery	Day of Audit 09-Mar-12	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>A number of shortfalls that require specific action to address</b>

<b>Safe and Appropriate Environment</b>	Day of Audit 09-Mar-12	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>No short falls</b>

<b>Restraint Minimisation and Safe Practice</b>	Day of Audit 09-Mar-12	Assessment
Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		<b>No short falls</b>

<b>Infection Prevention and Control</b>	Day of Audit 09-Mar-12	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.		<b>No short falls</b>

## **Jane Mander Retirement Village Limited**

**Date of audit: 26-Apr-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**

The Jane Mander Retirement Village is owned and operated by the Ryman Group. The facility is purpose built and divided into hospital, rest home, serviced apartment and a secure dementia unit. Construction continues on the village site; however the rest home, hospital, serviced apartments and dementia unit are now complete. The service has capacity to provide 40 rest home beds, 10 certified serviced apartments, 40 hospital beds, 20 dementia beds and 12 psycho geriatric beds. Current occupied beds include 20 rest home, 20 hospital, 12 dementia and 10 serviced apartments. Despite being a relatively new facility the Jane Mander Retirement Village has achieved a high level of attainment to the sector standards.

## **Consumer Rights**

Residents at the Jane Mander Retirement Village receive services in accordance to consumer rights legislation. Staff, residents and family members interviewed knew where the information was and felt that it was well displayed and easy to access. Resident's physical, visual, auditory and personal privacy is respected. Residents have access to the spiritual care of their choice. Cultural needs are respected and management has made valuable contacts with the local Maori community. There is a documented complaints procedure which complies with the Health and Disability Code. The Ryman Group implements policies and procedures on informed choice and consent. There is an opportunity to review the process for advanced directives to ensure consistency.

## **Organisational Management**

The Ryman Group develops national quality objectives annually. These are in line with the identified purpose and goals of the organisation. All Ryman services report and monitor achievement towards the organisational goals through the implementation of the Ryman Accreditation Programme (RAP). RAP activities are locally implemented and results reported to the governing body. This includes resident satisfaction and there have been two resident meetings since opening. Annual resident and next of kin surveys are also scheduled. The service is managed by a business manager and clinical oversight is managed by a Nurse Manager. There is a documented rationale for determining staffing levels and skill mixes for safe service delivery. There are currently 60 staff employed and this includes 8 Registered Nurses. There is a system in place for the continued recruitment of staff as resident numbers increase. The Ryman group implements a robust training and competency framework.

## **Continuum of Service Delivery**

Registered nurse is responsible for each stage of service provision. Assessments and support plans are well written and include input from allied health. Formal assessments are documented and accurate. Multidisciplinary assessment includes input from team members and evidence of communication with families. Families and residents interviewed are very supportive of the care provided. Activities are conducted by enthusiastic activities officers. They are committed and provide a varied and interesting activities programme with a range of activities offered. The service medication management system (Medico Douglas) follows recognised standards and guidelines for safe medicine management practice. Nutrition is appropriately managed. There is a summer and winter menu which has been reviewed by a dietician; food services are managed within legislative guidelines. There is an improvement identified for the medication system.

## **Safe and Appropriate Environment**

The facility is warm and inviting, with lounges, dining rooms and small lounges around the facility. Grounds are well kept and there are 2 secure areas for the dementia unit residents. The laundry at Jane Mander is appropriate for the size and services provided. Corridors have hand rails and residents can move freely throughout the facility. Rooms have en suites and there are adequate communal toilets for the needs of the residents, visitors and staff. The service provides appropriate information, training and equipment to respond to emergency situations.

## Restraint Minimisation and Safe Practice

The service promotes a restraint free environment and there are currently no residents using restraint. There is a Restraint Minimisation Manual applicable to the type and size of the service. Policies and procedures are comprehensive and include definitions, processes and the use of enablers. There are adequate processes for gaining consent for the use of enablers; The Restraint Minimisation Manual also includes comprehensive procedures to meet NZS 8134.2 if restraint is required. These procedures include assessment of the least restrictive option, consent, monitoring and evaluation. Staffs receive adequate training on restraint minimisation, enablers and managing challenging behaviours.

## Infection Prevention and Control

There is an effective infection control programme at Jane Mander that is appropriate for the size and type of facility. Policies and procedures have been developed at Ryman organisational level with external input from experts in infection control and the programme is reviewed annually. There is an infection control programme in place for residents and staff that is supported by comprehensive orientation and planned regular staff training. The infection control programme is managed by the infection control officer (Registered Nurse). Surveillance of infections is carried out appropriately.

### Standards have been assessed and summarised below:

Key

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

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.	<b>Standards applicable to this service attained with some criteria of low risk partially 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 all criteria achieved</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 of moderate or high risk 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 some criteria of moderate or high risk partially achieved or unachieved</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>

<b>Infection Prevention and Control</b>	Assessment
Includes 6 standards which require: <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</li> </ul>	<b>Standards applicable to this service attained with all criteria achieved</b>

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.