

Knox Home Trust Board

CURRENT STATUS: 14-Mar-12

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

Elizabeth Knox Home and Hospital presently provides care for up to 134 residents. Services are provided for hospital, rest home and younger disabled persons. Additionally, the services holds a contract for the post-acute interim care scheme for up to six weeks following hospital admission for an acute episode of care. The facility is in progress with an extensive rebuilding and refurbishment which, when completed, will provide residents with a pleasant living environment.

The service has adopted the Eden Alternative of person directed care as its care delivery model and underpinning philosophy. This focuses on the development of communities in which the challenges of loneliness, helplessness and boredom are addressed through an environment in which animals, children and plants all have a part to play in creating meaningful and positive experiences. The service has implemented principle two and ten to date and plans to address the remaining eight principles in full by 2014.

Areas identified for improvement include privacy for newly refurbished ensuites, the risk management system, consistent inclusion of staff designation in progress notes, short term and lifestyle care planning and evaluation, some deferred maintenance in relation to older parts of the facility designated for future refurbishment and documentation of some aspects of restraint assessment and evaluation.

AUDIT SUMMARY AS AT 14-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
	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 14-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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Organisational Management	Day of Audit 14-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.		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 14-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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Safe and Appropriate Environment	Day of Audit 14-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.		A number of shortfalls that require specific action to address

Restraint Minimisation and Safe Practice	Day of Audit 14-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.		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 14-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.		No short falls

AUDIT RESULTS AS AT 14-MAR-12

Consumer Rights

Elizabeth Knox Home and Hospital provides relevant information and allows time for discussion as part of the admission process. Residents and their family/whānau understand their rights and are able to raise concerns and access support services if they wish. The service has a commitment to open disclosure and transparency in service provision. Residents' cultural and individual values and beliefs are assessed on admission and care planning is put in place to meet identified needs. Consumer rights are intrinsically linked to the implementation of a person directed care philosophy as outlined in the principles of the Eden Alternative.

There are policies and procedures developed and implemented by the service which reflect evidence based practice and meet legislative and Health and Disability Service Standards. The implemented informed consent processes meet contractual requirements and staff demonstrate awareness of consumer rights by providing full information and choices related to the care being provided.

There are clear policies and procedures to guide practice when a complaint is made. Complaints are dealt with in timeframes to meet the code. All complaint issues are investigated and where appropriate action is taken to resolve the complaint.

Organisational Management

Elizabeth Knox Home and Hospital has a well-developed strategic plan with key goals. The Board members to monitor services and objectives and have responsibility for quality and risk management, investment and planning. The organisation is managed by a CEO who has a nursing background, has had many years in management and has management qualifications.

The quality system has been documented into policies and procedures to guide practices. A quality manager has oversight of the quality system and works closely with the CEO to monitor key quality activities including internal audits, annual satisfaction surveys and projects for improvement. Annual review of the quality plan occurs by the sub-committee of the Board responsible for quality and risk management. Continuous Quality Improvement (CQI) projects are managed through a comprehensive process. There are approximately eighty projects currently in the programme. The CQI projects are monitored actively. Additionally, incident reporting includes actions to improve practice.

The risk management system has been established with high level risk identified on a risk register. These risks are categorised and actions taken to minimise risks have been identified, however risks are only reviewed annually. Improvement needs to occur in the system to evaluate risk based on the level of risk identified and the likelihood of the risk changing.

Resident and relative interviews confirm participation. Family members provided examples of consultation that are appropriate. There are weekly residents' meetings and 2-monthly resident family meetings that contribute to management decisions about running of the facility.

Procedures for health and safety including adverse event reporting are in place. These are reviewed by management, investigated and appropriate action taken. The CEO undertakes a final review prior to the incident being signed off. Incidents are reviewed monthly at health and safety committee meetings. Data is collated monthly and reported in graph form by month and year. This information is reviewed by the quality committee and quality subcommittee of the Board.

Policies and procedures are in place for human resources management. There is a recruitment process that ensures safe appointment of staff through reference and police checking and validating qualifications. A detailed orientation is in place for care staff and a specific orientation for registered nurses ensures competencies in core areas relevant to the position. In-service training includes an annual training for core areas and education that

staff request, relevant to residents conditions or things happening in the facility. DVDs are available for use for night staff, such as for challenging behaviour. Aged Care Education (ACE) training is encouraged for caregivers. Elizabeth Knox Home and Hospital ran an English course for six months, which is reported to have improved communication. Following all in-service training there is an evaluation. Consequently some changes are being planned in courses for pain management, wound care, and pressure area care. Annual performance appraisals occur.

The staffing rationale is set at one staff member for five Hospital and Younger Persons with a Disability (YPD) Hospital services on the am shift and less on the PM. Night is covered for the whole facility with a carer in each area and RN's who circulate. For Rest Home level residents a lower ratio of caregiver to resident is in place however continuous re-assessment of needs levels and staffing adjustments is reporting to occur as required. Staff and residents interviewed reported adequate staffing levels.

Records are managed to meet standards however one area for improvement identified was that the designation of the service provider is not identifiable on each entry in the progress notes.

Continuum of Service Delivery

Residents receive timely, competent service delivery from staff who receive training appropriate to their role as evidenced in the detailed review of care for three residents and supported by resident, family/whānau and staff interviews. Care is delivered in line with the Eden Alternative principles of resident directed care created within a community like setting. Staff are trained and qualified to perform their roles and deliver all aspects of the rest home, hospital and younger disabled persons services. Staff have an integrated and multidisciplinary approach to service delivery to provide care to residents. All clinical care is overseen by a registered nurse on each shift, the team leaders and the nursing services manager and there is additional input from the allied health team. Medical support is provided to residents by four general practitioners who have provided services to Elizabeth Knox Home and Hospital for many years. Residents and families are satisfied with the quality of care provided by staff with the Eden Alternative philosophy integrated into all aspects of service delivery.

The care plans are individualised and personalised to ensure the needs of resident's are met. Plans of care are reviewed at a minimum of six monthly and more often as indicated should the resident's condition change. There is an annual multidisciplinary team review for residents of the rest home, hospital and younger disabled persons services. Areas for improvement relate to aspects of care planning for lifestyle plans for younger disabled persons, short term plans, evaluation of progress towards meeting resident goals and transfer detail for residents returning to the service following hospitalisation.

The Eden Alternative philosophy de-emphasises planned activities and incorporates spontaneous and meaningful activities into the residents lives. There is currently an activities programme that supports the interests, needs and strengths of the elder persons and younger people living with a disability.

Medication management systems are established and implemented across the service in accordance with organisation policy, procedures and legislative requirements. Safe practice guidelines are followed.

All aspects of the nutritional needs of each resident are met. There is evidence of dietitian input and particular care is taken to ensure residents' food and fluid needs are safely managed, including their specific cultural needs. Residents who wish to do so are encouraged to make their own meals in the communal kitchens located in the facility.

Safe and Appropriate Environment

The service is in the process of redevelopment, renovation and upgrading of the facility which will incorporate the Eden Alternative philosophy of making smaller communities within the service. There is a current Building Warrant of Fitness and approved Evacuation Plan. Trial fire evacuations are held three monthly in all wings and staff attend on-going education and training in emergency management. Fire equipment is checked regularly by an appropriate external service provider. The service has a fully equipped civil defence kit and sufficient stored water. There are designated external smoking areas available.

Areas identified for improvement were raised. Two of these are due to deferred maintenance and the deterioration of some surfaces. The third area is in relation to cleaning bottles being stored in areas that can be reached by children.

Restraint Minimisation and Safe Practice

There are policies and procedures to guide staff on the safe use of restraint and enablers at Elizabeth Knox Home and Hospital. Enablers are clearly described in accordance with Health and Disability Services Standards requirements. Restraint may be implemented following multidisciplinary assessment for safety reasons. Audits of restraint and enabler use are undertaken, in-service education has occurred and the multidisciplinary team oversee and review any restraint or enabler use. Areas for improvement relate to documentation of aspects of assessment and evaluation of restraint use.

Infection Prevention and Control

The facility has appropriate infection prevention and control policies, procedures, education and provides a safe environment for residents, staff and visitors. Staff receive on-going education on infection prevention and control. Infection surveillance data is analysed and reported monthly to the infection control committee, chief executive officer and the Board of Trustees. Surveillance data is provided to the Auckland District Health Board for benchmarking with other aged care facilities.