

## Royal Heights Care Limited

**CURRENT STATUS: 21-Jun-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

Royal Heights Care Limited continues to provide excellent rest home level care to a maximum of 45 residents. Changes in the services being delivered since last year's surveillance audit are on-going improvements to the environment, the services on offer and the quality of care. There were no improvements required at the previous audit and no areas for improvement (non-compliance with standards) as a result of this audit.

There are eight areas rated as continuous improvement. Three of these are in quality and risk, two in the environment (cleaning and emergency preparedness), one in evidence based good practice, one in activities and one in infection prevention and control. Feedback from all residents, relatives and external service providers interviewed demonstrates a very high level of satisfaction.

### AUDIT SUMMARY AS AT 21-JUN-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
	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

Indicator	Description	Definition
	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 21-Jun-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>Includes commendable elements above the required levels of performance</b>

Organisational Management	Day of Audit 21-Jun-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>Includes commendable elements above the required levels of performance</b>

Continuum of Service Delivery	Day of Audit 21-Jun-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>Includes commendable elements above the required levels of performance</b>

Safe and Appropriate Environment	Day of Audit 21-Jun-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>Includes commendable elements above the required levels of performance</b>

Restraint Minimisation and Safe Practice	Day of Audit 21-Jun-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>

Infection Prevention and Control	Day of Audit 21-Jun-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>Includes commendable elements above the required levels of performance</b>

## AUDIT RESULTS AS AT 21-JUN-12

### Consumer Rights

Residents interviewed express satisfaction with the level of care they are receiving and declare they feel supported and safe at Royal Heights. Family members interviewed report great satisfaction with the quality of care, information provided and the meeting of consumer rights. There is a continuous improvement rating for the evidence provided of best practice policies and implementation in nursing practice. There is evidence that staff and management communicate well and regularly with residents and their families. Informed consent policies and procedures are implemented. Advocacy and community support involvement are encouraged. There is a clearly described complaints process which residents are notified of and state they are aware of. There is an open disclosure policy and adverse events are notified as required by policy.

### Organisational Management

Quality, risk and human resource systems are well maintained by a dedicated quality assurance manager and the management team. Results of quality monitoring are shared with staff, residents and other stakeholders regularly.

The quality and risk management system is effective in minimising risks and clearly contributes to improvements in the quality of service delivery. There are three continuous improvement ratings in this standard. One for the extent to which the service ensures consumers participate in service delivery, another for the way service delivery data is shared with residents and their families which has had a direct result in reducing the number of incidents and infections as residents are looking out for each other and implementing preventative strategies. The third continuous improvement rating is for the way the service continues to upgrade and improve its emergency contingency plans based on learning from the sector.

There is clear evidence that adverse event reporting is planned and co-ordinated and that all matters and processes related to an adverse event are reported, investigated, documented and signed off as complete within appropriate timeframes.

The human resources management system provides for the implementation of appropriate employment of staff and on-going training processes. There is a clearly documented rationale for determining service provider levels and skill mix in order to provide safe service delivery. Rosters and interviews demonstrate that staff are allocated according to contract requirement. There is a low staff turnover. Interviews with staff reveal they are informed about systems, policy and processes. Staff report they are well supported with their professional development. All care staff have completed or are engaged in completing age care education.

There are effective systems in place for managing consumer information.

### **Continuum of Service Delivery**

Residents receive timely, competent and appropriate services to meet assessed needs and desired goals. There is evidence of family involvement in all aspects of service delivery. Best practice guidelines are implemented in the provision of service delivery. The GP interviewed has a high level of confidence in the quality of service provided by Royal Heights rest home. There is a high level of satisfaction from the residents and family members interviewed with all aspects of service delivery which is delivered with respect.

Care plans are current, evaluated and report progress toward meeting documented goals. Activities are delivered which are appropriate for residents and day patients and the activities programme is considered to be of the best standard by referrers to the service. There are a wide range of activities incorporated and resident input is evidenced. A continued improvement rating is awarded for on-going enhancements to the extensive activities programme offered to residents and day patients. External health services are accessed as required. Transfer and exit processes are documented. Medicines are managed in a safe and timely manner which complies with legislation and safe practice guidelines. Menus are overseen by a dietician and residents express satisfaction with food and nutritional services. Safe food management complies with regulations.

### **Safe and Appropriate Environment**

The facility has a current Building Warrant of Fitness and there are on-going improvements to the facility to improve resident comfort and safety.

There are two ratings of continuous improvement. The service initiated an improvement to cleaning services by dedicating a staff member for an additional two hours a day to 'deep clean' rooms. This means each residents room is thoroughly spring cleaned every 5-6 weeks and includes every inch of surfaces including windows, cupboards, light fittings, deep cleaning floors and supporting the resident to maintain a clutter free room. There were no issues about cleaning previously this was an improvement initiated by the owners to support residents. Individual staff are designated for laundry and cleaning services for a more than adequate amount of hours, seven days a week.

The other continued improvement is for on-going enhancements to emergency systems and civil defence preparedness. The owners have incorporated learning from the Christchurch earthquakes and other stories from the sector and purchased additional resources to ensure continuity of service in the event of a civil defence emergency. The facility maintains ample

supplies of food and water stores, is very well prepared and could function independently for many days without mains water or electricity supply.

All communal areas and individual bedrooms are spacious, warm, have natural light and are suitably furnished. The home is heated with electricity and gas. There are individual panel heaters fixed to the wall in bedrooms allowing for control of heat settings.

Fire evacuations and education sessions are held six monthly. All fire equipment and emergency egress is checked monthly by staff and external contractors.

### **Restraint Minimisation and Safe Practice**

There have never been any restraint events and the service has a philosophy and practice of no restraint. There is regular staff training on prevention of restraint, de-escalation and managing challenging behaviours.

### **Infection Prevention and Control**

Royal Heights has a managed environment for infection prevention and control. Responsibilities are defined and expert assistance is available and used as required. Documented policies and procedures are in place. Regular education for staff is documented. A continuous improvement rating is given to resident education on the types of infection within the rest home and strategies to avoid spread and keep residents safe occurs at fortnightly resident meetings and they are highly appreciative of this.

Infection prevention and control policies record surveillance requirements. There is evidence of the rest home conducting surveillance on multi resistant organisms associated with antimicrobial use. Antibiotic usage is also monitored and reported as part of the quality programme. Staff and management take responsibility for surveillance activities. Results are acted upon, evaluated with the GP and reported to management and staff.