

Moana House Trust Board

CURRENT STATUS: 24-May-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

No changes have been made to the facility or the services offered since the certification audit in February 2010. Good standards of care and services have been maintained. Residents and families interviewed say they are very happy with the care they receive. Since the certification audit improvements have been made relating to staff education, information for and communication with residents and families, resident weight management, discharge planning, medication records, management of restraint, and infection control. Areas still requiring some improvement relate to consistent application of care management policies, assessment of residents specific health problems, short term care planning, staff training for fire safety, handling chemicals, medication competency, and management of disturbed behaviour. Improvements required following this audit relate to having 24 hour registered nurse cover on site, care plan reviews and evaluations, weekly progress reports, medication processes, dietician review of the menu, and surveillance of infections.

AUDIT SUMMARY AS AT 24-MAY-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
	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 24-May-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 24-May-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 24-May-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 24-May-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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Restraint Minimisation and Safe Practice	Day of Audit 24-May-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		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 24-May-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		A number of shortfalls that require specific action to address

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.		

Date of audit: 25-Feb-10 – Certification Audit

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.

Moana House management and personnel demonstrated understanding and awareness of resident rights. There is respect for cultural and individual values and beliefs. Informed choice is ensured routinely and informed consent gained and recorded wherever appropriate. Systems for advocacy and support and for handling complaints are robust. Staff training is indicated for advocacy and support services.

There is an established structure of governance for monitoring operational management performance. Moana House has maintained its quality and risk management system. Staff members support the system for reporting opportunities for corrective action and improvement. Staff rostering ensures there are sufficient numbers of skilled personnel for each shift. Information and records management is orderly and secure. Human resource management is comprehensive and includes systems for recruiting, orientation and induction and credential checks for clinical personnel. A training and education plan is needed for 2010.

Detailed up to date information about Moana House services, and the criteria and processes for entry, are made available to enquirers and referrers. Admission is arranged to suit the prospective resident and their carer as beds become available. Appropriate and timely processes are used to manage referrals where entry to services is declined. Services are planned and delivered by staff with knowledge and experience in aged residential care. Residents and families are encouraged to be involved in care and life style decisions together. In general an initial assessment and plan of care is developed with the resident and family on admission. The assessment includes identification and documentation of the resident's physical, psycho-social, spiritual and cultural health status and initial care requirements. All residents have individual care plans that reflect their identified needs and preferences. The plans are developed with the resident and the family where possible.

The care and services provided are appropriate for the aged residents. Treatments and interventions are based on assessed needs and delivered in accord with good practice guidelines. A variety of both group and individual recreational activities are provided for residents, both in-house and in the community. Individual activity plans take account of the resident's individual capabilities and interests. The programs are flexible and well resourced. Individual care and services are monitored and progress evaluated at appropriate intervals. Activity plans are updated as required to achieve good health outcomes for the resident.

Residents are appropriately referred for specialist assessment and treatment as needed. Appropriate arrangements are made for the safety and comfort of the resident when going to an external facility for appointments.

The medication system is clearly documented, training is provided and processes are safe.

Food services - Moana House has a purpose built kitchen facility. Meals for residents meet nutritional guidelines including special needs of residents where necessary. Food preferences are ascertained and met. The kitchen facility is orderly and kept extremely clean.

Moana House is a modern and purpose-built facility in an exceptionally tranquil and attractive setting. Residents have their own rooms and there are a number of areas in various parts of the facility dedicated to recreation and activities. The setting is warm and ambient and the physical environment is safe for elderly and frail residents. Corridors are wide to permit ready transport and transfer and freedom of movement of residents. There are adequate numbers of toilet and bathing facilities for residents with additional facilities for staff members and visitors. The external gardens and grounds are extensive and exceptionally attractive and well maintained. Kitchen is purpose-built and fitted and clean and orderly with menus reviewed by a qualified dietitian. Laundry is in a dedicated area and laundry practices are safe and hygienic. There is sound management of waste and hazardous substances and of essential, emergency and security systems.

Moana House does not use restraint in caring for residents. Enablers may be used voluntarily to protect the safety of a resident in specified circumstances. Disturbed behaviour is managed without the use of restraint in any form.

There are documented and implemented processes in place to minimise the risk of infection. Infection control policies and procedures are appropriate for a residential aged care facility, reflect current good practice principles, and are relevant for the Moana House environment. The infection control team are representative of all areas in the facility and have access to adequate advice and resources to ensure that the programme is implemented. Infection control training and education is provided to all staff, and also to residents, where appropriate.

There is a simple surveillance program in place that is appropriate for monitoring infections in an aged care residential facility

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

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

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

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

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	Standards applicable to this service attained with some criteria partially achieved

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.

