

Te Kauwhata Retirement Trust Board - Rest Home

CURRENT STATUS: 20-Jul-11 (Surveillance audit)

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

Aparangi Village is owned by Te Kauwhata Retirement Trust Board who trade as Aparangi Village. Aparangi Residential Care Unit is a part of the service which is a purpose built building and has had recent internal refurbishment. The facility offers care provision for 49 residents. All bedrooms are single occupancy. On the day of audit they have 10 hospital and 31 rest home level care beds occupied. The service can use 15 of the bedrooms as 'swing beds' which can accommodate either rest home or hospital residents. There is a current building project being undertaken to increase the size of bedrooms. The facility is very well maintained both inside and out.

Improvements required from the previous audit in December 2009, have all been addressed by the facility. Contractual (ARC) requirements are met for the criteria reviewed for this surveillance audit. There are three areas for improvement identified in relation to the Health and Disability Sector Standards; not all corrective actions undertaken are documented, actual and potential risks documented only relate to clinical aspects of care and medicine systems in place do not meet all required medicine protocols, procedures and guidelines.

AUDIT SUMMARY AS AT 20-JUL-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

Indicator	Description	Definition
	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 20-Jul-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 20-Jul-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 20-Jul-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 20-Jul-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 20-Jul-11	Assessment
Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		No short falls

Infection Prevention and Control	Day of Audit 20-Jul-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

Te Kauwhata Retirement Trust Board

Date of audit: 11-Dec-09 (Full 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.

Aparangi Village and residential care unit is situated in the rural township of Te Kauwahata. The home was built by the community and is managed by a Board of Trustees.

Residents are encouraged and supported in maintaining local community activities and involvement. The village community hall is also used by the community and there are combined community, village and care unit functions held. The service has implemented policies and procedures that are aligned with the Health and Disability Sector Standards, relevant legislation and current accepted best practice. There is an implemented quality and risk management system that is relevant to the service scope and complexity. Quality outcomes are monitored by the quality improvement/quality assurance committee. Infection control, restraint and health and safety are an integral part of the quality and risk management system. There is an internal audit schedule and audits conducted were sighted. All adverse, unplanned, or untoward events are recorded. There is clear documented evidence of family consultation and open disclosure re adverse events. Health and safety processes are implemented to eliminate, isolate or minimise actual or potential risks and reported through the quality committee. Clinical indicators, residents' acuity levels, safety and security, are taken into account in the services staffing rationale. All staff members have a job description which outlines their role, responsibilities, and lines of reporting and delegated authorities. Staffing levels and skill mix as sighted, is appropriate for the service level, resident numbers and acuity levels. There is a comprehensive in

service education programme, with staff attending external bi monthly seminars run by the Association Promoting Aged Care Education. Four staff have attended care giver education in palliative care and all care giving staff are enrolled in the national ACE programme.

Systems for entry, transfer/referral or discharge to and from the service are documented and implemented. All resident records reviewed (10) contain clear evidence of recent assessment, care planning and ongoing evaluation. The service is using current best practice with the methods and formats in use for assessment and care planning. Medicine management systems comply with legislative and safe practice guidelines. Resident's food and nutritional needs are met by the food services provided. Management of waste and hazardous substance is effective. There are appropriately documented processes, staff training has occurred and there are appropriate methods in place to ensure that no one is exposed to harm as a result of exposure to waste, infectious or hazardous substances.

Residents are provided with an appropriate and accessible environment in facilities that are fit for purpose. The physical environment is a purpose built single story dwelling with safety features appropriate to the consumer group. Each wing has separate lounge and dining areas and residents were observed moving safely around the home using walking frames and other mobility aids. Although all rooms have adequate space some of the older style bedrooms are smaller; residents who require more space are allocated larger rooms in the newer Fernhill wing. All rooms inspected were kept clear of obstacles. All sighted furniture and equipment is appropriate and fit for purpose. Essential, emergency and security systems are in place. The service has recently reviewed its approach to cleaning services and changes to improve outcomes have been implemented.

There is an implemented infection control programme that is relevant to the rest home service scope, size and associated risk factors. The infection control policies and procedures are based on current accepted good practice. A senior registered nurse is delegated the role of the infection control coordinator and along with the infection control team is responsible for the implementation and monitoring of the programme. Access to external specialist advice and support is available. Staff orientation and education includes infection control principles and practice. Infection rates are collated and monitored monthly. Records evidence a significant reduction in infections over the past eight months.

The service has recently reviewed its restraint policy and processes. The only interventions approved and in use are voluntary enablers (bedsides). Staff training in their safe and appropriate use, organisational policy and regulations is ongoing. Staff also attend regular training in de-escalation techniques for managing challenging behaviour.

Seven areas were identified as requiring corrective actions. Two related to policy documentation, one to full documentation of incident/accident data analysis, three related to reviews of the infection control programme and staff education and documentation of infection analysis. All were rated as a low risk.

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	No short falls

attained with all criteria achieved	
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 all criteria 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 or unachieved

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 all criteria 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: <ul style="list-style-type: none"> - 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
<p>Includes 6 standards which require:</p> <ul style="list-style-type: none"> - 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. 	<p>Standards applicable to this service attained with some criteria partially achieved or unachieved</p>