

## Summerset Care Limited - Summerset on Summerhill

**CURRENT STATUS: 23-Jun-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

Summerset on Summerhill is a rest home and hospital that is managed by Summerset Care Ltd. Summerset head office provides oversight and guidance on service direction. Summerset on Summerhill provides rest home and hospital care for up to 40 residents with a current occupancy of 39 residents. The manager is responsible for the overall business operation for the rest home, hospital and village. The nurse manager is responsible for the clinical operations and is an experienced registered nurse. The facility has a stable staff and turnover is low. There is a comprehensive quality and risk management process implemented at the service that is well managed. Residents and relatives interviewed spoke very positively about the care and support provided by staff. The service has addressed the corrective actions from their previous audit including, advanced directive management and end of life documentation, quality systems follow-up, use of assessment tools, general practitioner review of medication charts and chemical safety.

The surveillance audit has identified the following areas for improvements required by the service and include; documentation of care plans, activity plans, incident forms, and availability of call bells.

### AUDIT SUMMARY AS AT 23-JUN-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 23-Jun-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.		<b>A number of shortfalls that require specific action to address</b>

Organisational Management	Day of Audit 23-Jun-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.		<b>No short falls</b>

Continuum of Service Delivery	Day of Audit 23-Jun-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.		<b>A number of shortfalls that require specific action to address</b>

Safe and Appropriate Environment	Day of Audit 23-Jun-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.		<b>A number of shortfalls that require specific action to address</b>

<b>Restraint Minimisation and Safe Practice</b>	Day of Audit 23-Jun-11	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 23-Jun-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.		<b>No short falls</b>

### **Summerset Care Limited - Summerset on Summerhill**

**Date of audit: 01-Mar-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**

Summerset Palmerston North continues to meet the assessed standards.

Summerset is situated in Manawatu North East of Palmerston North City centre. The service provides Rest Home and Hospital level Care along with respite care. On the day of audit there were 21 hospital residents and 19 Rest Home. All equipment was purchased new.

The manager is experienced in elderly care and has sufficient authority to enable the effective provision of care. He is supported in his role by an RN care manager who is also very experienced and a team of RNs responsible for the Care Centre at Summerset.

The level of resources, expertise and equipment provided by the service is appropriate to meet residents care and support needs. The policies/procedures, staff and facilities are appropriate for providing geriatric, medical and rest home care services in meeting the needs of its residents.

The service has a well established quality programme. Quality improvement data is analysed to identify trends and variances at a facility and organisational level. This includes incidents, infections, hazards, audits, and complaints however there is a need to follow through on corrective actions and evaluate to close the loop.

There are comprehensive job descriptions of all positions that include key tasks, actions and outcomes. The Staff Orientation programme is in place and includes programmes/checklists for the position/role such as care givers and registered nurses. There is 24 registered nurse cover. The service also described accessing a community physiotherapist and Dietician as needed for residents.

Staff are supported to complete career force training. There are currently 27 caregivers. All caregivers are either in training or have completed NZQA qualifications in Support of the Older Person. There is a 2009/2010 training plan currently being implemented.

Long term care plans were complete and clearly documented the current support needs of the resident. Interventions and desired outcomes were not always documented. Appropriate links are maintained with other services involved in the care and support needs of the resident.

The service has an activities programme which is coordinated by diversional therapist. Activities are developed to compliment the individual needs of the residents. Activities offered reflect ordinary patterns of life and include both onsite and community activities/outings. Resident satisfaction with the activities offered is monitored.

Menus are developed in line with recognised nutritional guidelines for the older person and reviewed by a registered dietician. A nutritional profile is documented for all residents. Additional or modified meals are provided, as is special equipment, if required. Meals are prepared off site (by Medirest) and regenerated on delivery. Meals are delivered daily.

The audit identified 3 continual improvement ratings (CI) around the implementation of the quality system and ongoing review and evaluation.

The audit identified a number of corrective actions of moderate to low risk around advanced directives, care planning interventions, medications and storage of chemicals. Interview discussions with a range of staff, review of resident plans and other discussions with clients/family provided supporting evidence that, based on the information and evidence available for this audit, Summerset Palmerston North is meeting the sector standards.

It is the view of the audit team that:

1. The Health and Disability Services Standards 8134:2008 (Core) are met.
2. The Restraint Minimisation and Safe Practice Standard are met (NZS 8134.2:2008).
3. The Infection Prevention and Control Standard are met (NZS 8134.3:2008)

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

<b>Consumer Rights</b>	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 some criteria of low risk partially 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 any criteria unachieved</b>

<b>Safe and Appropriate Environment</b>	Assessment
Includes 8 standards that support an outcome where services are	<b>Standards</b>

<p>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.</p>	<p><b>applicable to this service attained with some criteria of moderate or high risk partially achieved or any criteria unachieved</b></p>
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<b>Restraint Minimisation and Safe Practice</b>	Assessment
<p>Includes 3 standards with outcomes where:</p> <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>	<p><b>Standards applicable to this service attained with some criteria of low risk partially achieved</b></p>

<b>Infection Prevention and Control</b>	Assessment
<p>Includes 6 standards which require:</p> <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 are implemented in the organisation. These policies and procedures are practical, safe and appropriate/suitable for the type of service provided.</li> <li>- The organisation provides relevant education on infection control to all service providers, support staff and consumers.</li> <li>- Surveillance for infection is carried out in accordance with agreed objectives, priorities and methods that have been specified in the infection control programme.</li> <li>- 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.</li> </ul>	<p><b>Standards applicable to this service attained with all criteria achieved</b></p>