

Freeling Holt Trust

CURRENT STATUS: 12-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

Freeling Holt House continues to provide hospital (geriatric care), rest home care and physical disability care to a maximum capacity of 32 beds. On the day of this spot surveillance audit there were 10 rest home residents, 17 hospital residents and four young people with disabilities being cared for. There has been no change to the type, scope or complexity of the service provided since the previous audit which verified a change of scope to include hospital level care in July 2010.

There is evidence to support that one of the two required areas for improvement (regarding food services) from the previous audit has been implemented and is now resolved. The other area for improvement related to the legality of 'not for resuscitation' orders still requires full implementation. There are eight other improvements required as a result of this audit. These relate to complaint management, restraint minimisation processes, resident and relative involvement in care planning, adhering to timeframes with care planning, and medicines management.

AUDIT SUMMARY AS AT 12-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 12-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.		A number of shortfalls that require specific action to address

Organisational Management	Day of Audit 12-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.		No short falls

Continuum of Service Delivery	Day of Audit 12-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 12-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 12-Jul-11	Assessment
<p>Includes 3 standards with outcomes where:</p> <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 		A number of shortfalls that require specific action to address

Infection Prevention and Control	Day of Audit 12-Jul-11	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. 		No short falls

Freeling Holt Trust

Date of audit: 17-Nov-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.

Freeling Holt provides residential care for 32 residents. The unit caters for a mixture of rest home and physically disabled residents. The facility is owned by the Freeling Holt Trust; a registered charity. The home is situated in a residential area of Torbay. The service backs onto a public park, creating the impression of large grounds.

General Environment

Visual inspection of the facility evidenced a clean, safe and appropriate environment for consumers. Staff have received appropriate training in the management of waste and hazardous substances, and are able to respond to identified emergency and security events. All residents have single rooms.

Staffing Levels

There is a clearly documented and implemented process which determines service provider levels and skills mixes in order to provide safe service delivery. Staffing remains stable. Registered nurse coverage is significantly higher than contract requirements. Care giver coverage is satisfactory. Consumers and/or family members interviewed confirmed that there are adequate staff available to meet their needs. Staff interviewed confirmed adequate numbers are available to ensure safe care is being provided. A staff in-service education programme for Freeling Holt is in place.

Resident Satisfaction

Services were found to be provided in a manner that was respectful of consumer rights, facilitated informed choice, minimized harm, and acknowledged cultural and individual values and beliefs. Resident and family members interviewed stated their satisfaction with the service, and that staff are providing appropriate care and treatment. A sampling of consumer files evidenced that informed consent processes are managed well. There is an implemented system for managing complaints, and the code of rights information is displayed. The service has access to a local advocate from Age Concern.

Quality Assurance and Risk Management

Evidence was sighted demonstrating that Freeling Holt complies with legislation, and the service is managed in a safe, efficient, and timely manner. Freeling Holt has an established, documented, and maintained quality and risk management system that reflects continuous quality improvement principles. Management meetings are held three monthly and all quality and risk issues are reviewed. An internal audit programme for Freeling Holt is in place.

Service Delivery

Care plans are developed with the resident, and family/whanau input as appropriate, to reflect individualised needs. All residents have an integrated file that is easy to read and identifies continuity of service delivery. Staff use the care plans to guide the service they deliver to assist residents to reach their desired goals. Care plans are evaluated six monthly, or sooner if there is any change to the resident's needs or wants. Evaluations are well documented and resident focused, to ensure best possible outcomes are achieved. Food services are outsourced to a specialist provider. Residents' nutritional needs are overseen by a registered dietician. Special diets, likes and dislikes are catered for by the service.

Staff follow organisational procedures to ensure residents experience a planned and coordinated exit, discharge or transfer from the service.

Summary

The service provides professional care in a home like and pleasant environment. On the day of audit the service was compliant with the required standards. There was one partial attainment relating to informed consent. This was of a technical nature and was rated low risk. There was a second partial attainment relating to catering services. The external contracting of food services commenced the day prior to audit. The external contract manager attended the audit. She had already identified the issues raised and was developing a corrective action plan.

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 or unachieved

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 all criteria 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 or unachieved
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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 all criteria achieved

Infection Prevention and Control	Assessment
Includes 6 standards which require: <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. 	Standards applicable to this service attained with all criteria achieved