

Christian Healthcare Trust - Royal Oak

CURRENT STATUS: 29-Sep-11

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 Oak Lodge provides residential care for up to 40 residents at rest home level care. There were 38 residents on the day of the audit. The facility is operated by Christian Healthcare Trust. The service has continued to maintain a comprehensive risk management programme and is to be commended on having no improvements required from this audit. The Christian Healthcare Trust group has strong board and effective governance practices. The serviced is managed by a manager who has held management positions within the Christian Healthcare Trust for eight years. In the 2010 customer satisfaction survey Royal Oak Lodge was at the 98th percentile ranking from over 300 facilities Australasian wide. Royal Oak Court has consistently scored in the customer satisfaction survey at this level for the last three years. Resident and family feedback during the audit was very positive. A well-developed staff education programme is implemented with compulsory external (ACE programme) enrolment for new staff with 91% of staff having completed the ACE training.

AUDIT SUMMARY AS AT 29-SEP-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 29-Sep-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 29-Sep-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 29-Sep-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.		No short falls

Safe and Appropriate Environment	Day of Audit 29-Sep-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 29-Sep-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 29-Sep-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

AUDIT RESULTS AS AT 29-SEP-11

Consumer Rights

Information about services provided is readily available to residents and families. The Health and Disability Commissioner (HDC) Code of Health and Disability Services Consumers' Rights (the Code) is evident in the entrance and on notice boards. Policies are implemented to support rights such as privacy, dignity, abuse/neglect, culture, values and beliefs, complaints, advocacy and informed consent. Staff training reinforces a sound understanding of residents' rights and their ability to make choices. Care planning accommodates individual choices of residents' and/or their family/whānau. Residents and relatives interviewed spoke very positively about care provided at Royal Oak. Complaints processes are implemented and complaints and concerns are actively managed and well documented

Organisational Management

There is a comprehensive and well implemented quality and risk management system in place and this generates improvements in practice and service delivery. Key components of the quality management system link to the facility meetings including quality management, health and safety, infection control and staff meetings. The service is active in analysing data. Corrective actions are identified and implemented.

Client satisfaction surveys are completed and regular resident meetings are held. Health and safety policies, systems and processes are implemented to manage risk. Discussions with families identified that they are fully informed of changes in health status.

There is a comprehensive orientation programme that provides new staff with relevant information for safe work practice and an in-service education programme that exceeds eight hours annually and covers relevant aspects of care and support.

Continuum of Service Delivery

Residents who enter Royal Oak Court are assessed by the needs assessment and service coordination (NASC). An information pack is available for residents, their families and referral agencies. Residents' care plans are individualised, up-to-date and reflect current service delivery requirements for each resident. Residents' clinical notes are integrated to ensure service delivery reflects continuity of care, including input from all providers involved.

Residents are assessed within set timeframes and receive well planned and co-ordinated services.

There is an activities programme, which offers a variety of activities suited to the needs of the residents. Residents also participate in local community and social clubs. Medicine is administered via the robotic sachet dispensing system. Staff who dispense medicines have been assessed as competent. Medicine charts are reviewed three monthly.

Residents' nutritional needs are assessed on admission and likes, dislikes and allergies are communicated to the kitchen staff at admission. The menu was reviewed by a dietitian.

Safe and Appropriate Environment

Residents, staff and visitors are protected from harm as a result of exposure to waste, infectious or hazardous substances. The cleaning service is provided by contracted staff dedicated to these duties. Laundry is taken off site and managed by an external contractor. The building is purpose built and divided into suites of ten, with each suite having a lounge area and kitchenette and every room having a full ensuite. All rooms open onto manicured garden areas. Residents are provided with adequate natural light, safe ventilation and an environment that is maintained at a safe and comfortable temperature. All bedrooms, bathrooms and communal areas have a call bell system. There is current building warrant of fitness. Fire evacuations are conducted six monthly. There is a preventative and reactive maintenance programme.

Restraint Minimisation and Safe Practice

There is a restraint minimisation and safe practice policy that includes comprehensive restraint procedures. There is a documented definition of restraint and enablers that aligns with the definition in the standards. There is a restraint register and an enablers register, there are no residents with enablers or restraint. There is a process to ensure restraint assessments are based on information in the care plan, discussions with residents and on staff observations of residents. Restraint usage across the facility is monitored each month. Staff are trained in restraint minimisation and restraint competencies are completed regularly.

Infection Prevention and Control

The infection prevention and control programme is evaluated for its continuing effectiveness and appropriateness and is reviewed annually. The position of infection control nurse is assigned the charge nurse. The infection control policies and procedures are documented, and include all required policies. Quality, health and safety meetings are conducted six weekly and attended by all staff and discussions are recorded on all areas of the facility's environment, including infection prevention and control issues. Regular compliance audits, environmental inspections and incident monitoring of infection prevention and control practices are performed and the results are communicated to staff these meetings. All staff receive infection prevention and control education at orientation and as part of the on-going education programme.