# **Wesley Wellington Mission Incorporated**

**CURRENT STATUS: 21-Nov-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**

Wesleyhaven Village is an aged care service that provides care to rest home and hospital level residents. The village is made up of three separate homes on the one site. On the day of the audit there was 33 hospital residents and 71 rest home. The service is managed by an experienced and qualified Village Manager who is a registered nurse. The manager is supported by three unit manager's.

Wesleyhaven continues to implement a comprehensive quality and risk management system. Ongoing training programmes and competencies are completed.

Wesleyhaven has implemented improvements from their previous audit including' pain management, medication management, fridge care and control, upgrading of bathrooms, short term care plans and restraint/ enabler documentation. However, further improvements are still required around aspects of short term care plans. Improvements required from this surveillance audit include; audit follow-up, service delivery documentation and assessments.

#### **AUDIT SUMMARY AS AT 21-NOV-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 21-Nov-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 21-Nov-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 21-Nov-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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Safe and Appropriate Environment	Day of Audit 21-Nov-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 21-Nov-11	Assessment
Includes 3 standards that support outcomes where consumers receive and experience services in the		No short falls
least restrictive and safe manner through restraint minimisation.		

Infection Prevention and Control	Day of Audit 21-Nov-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

**Wesley Wellington Mission Incorporated** 

Date of audit: 14-Apr-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**

Wesleyhaven Village is owned by Wesley Community Action group formerly Wesley Wellington Mission). They are a not-for-profit organisation with roots in the Methodist church. Nestled in the hills of Naenae, the Village includes (but not limited to) a hospital unit and two separate rest home units. There are currently 31 hospital residents in Wesley Hospital, 39/54 residents in Strand unit (rest home) and 25/27 residents in Deckston (rest home). The service has a total of 33 hospital beds, and 81 rest home beds. The service has actioned all corrective actions identified in previous audits and has a comprehensive quality system in place. The service is

commended for achieving 3 CI ratings around the implementation of the quality programme, sundowning project and IC surveillance. The audit identiifed only a few partial's around documentation.

## **Consumer Rights**

The Code of Health and Disability Consumer's Rights 1996 is made available in appropriate formats. Residents and their families/whanau are informed of their right to complain and access an advocate. There are a number of Maori and Pacific Island residents at the service. Values and beliefs information is gathered on admission with family involvement and is integrated with the residents care plans. Residents receive services of an appropriate standards.

# **Organisational Management**

Wesley Community Action has 2010 Business Planning Framework and Goals in place. There is a Wesleyhaven Business plan 2010 that includes five long term objectives, goals and actions. The manager provides monthly reports to the board. There is a comprehensive monitoring system in place that includes key and relevant aspects of services delivery. The service also submits key data to an external benchmarking organisation and this data is used to align the performance of the service. The service has policies and procedures and associated implementation systems to provide a good level of assurance that it is meeting accepted good practice and adhering to relevant standards - including those standards relating to the Health and Disability Services (Safety) Act 2001. The manager is a registered nurse with extensive experience and is also supported by 3 other facility Manager's. There is also a fulltime Quality/Education Manager (RN). The service provides appropriate staffing levels across each of the 3 units and 24 hour registered nurse cover in the hospital. Discussions with staff identify that a number of staff have long-service and the turnover is low.

## **Continuum of Service Delivery**

Registered nurses are responsible for each stage of service provision. The initial assessments and care plans are completed by a Registered Nurse with input from the team leaders along with evaluations and reviews. Service delivery plans demonstrate service integration. Assessments and support plans are generally comprehensive and include input from allied health. Families and residents interviewed are very supportive of the care provided. The service provides a wide range of activities across 6 days for the residents. The resident/family/whanau as appropriate is involved in the development of the Activity Social profile and plan. Residents can join in activities on a voluntary basis. Medication is managed safely in each area with some improvements noted. Food is cooked in kitchen's in each area. The menu is designed and reviewed by a Registered Dietician. Diets are modified as required.

# **Safe and Appropriate Environment**

There are 3 stand alone buildings, maintenance is maintained. Residents are able to bring their own possessions and are able to adorn their room as desired.

Consideration is given to residents needs when purchasing new furniture/equipment. The physical environment is appropriate and safe. There is adequate space and external areas are well kept. Residents are provided with safe and hygienic cleaning and laundry services. There are adequate policies and procedures. All hotel laundry is contracted to an outside provider. Cleaning and laundry processes are monitored.

The service provides appropriate information, training and equipment to respond to emergency situations. There is an approved fire evacuation plan and fire drills are conducted. Alternative energy sources are available. Calls bells are appropriately placed throughout the facilities

## **Restraint Minimisation and Safe Practice**

There is a Restraint minimisation policy that aligns with the updated 2008 standards and the service minimises the use of restraint. The service has completed comprehensive training around restraint including restraint/enabler in-service 10/11/09. Management of Challenging behaviour in-service Feb 09. The service has comprehensive restraint policies and procedures' and related forms in place to manage restraint and alternatives to restraint. A restraint internal audit is completed 6 monthly. A restraint approval committee meets 6 monthly.

#### Infection Prevention and Control

The I.C. programme, its content and detail, is appropriate for the size, complexity, and degree of risk associated with the service. There is a monthly benchmarking system in place. There is a well established and implemented infection control programme that is linked into the quality risk management system that identifies improvements and training is regularly provided to staff.

Standards have been assessed and summarised below:

# Key

Five point scale	Description
Standards applicable to this service	Includes commendable elements above
attained with some criteria exceeded	the required levels of performance
Standards applicable to this service	Complies with standards
attained with all criteria achieved	
Standards applicable to this service	Some minor shortfalls, no major
attained with some criteria of low risk	deficiencies and required levels of
partially achieved	performance seem achievable without
	extensive extra activity
Standards applicable to this service	A moderate number of shortfalls that
attained with some criteria of moderate	require specific action planning to address
or high risk partially achieved or	
unachieved	
Some standards or this standard	Major shortfalls, significant action is
unattained that are applicable to this	needed to achieve the required levels of
service	performance

# **Consumer Rights**

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.

Assessment
Standards
applicable to
this service
attained with all
criteria
achieved

# **Organisational Management**

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.

Assessment
Standards
applicable to
this service
attained with
some criteria
exceeded

## **Continuum of Service Delivery**

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.

Assessment
Standards
applicable to
this service
attained with
some criteria of
moderate or
high risk
partially
achieved or any
criteria
unachieved

# Safe and Appropriate Environment

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.

Assessment
Standards
applicable to
this service
attained with
some criteria of
low risk
partially
achieved

## **Restraint Minimisation and Safe Practice**

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

Assessment

Standards
applicable to
this service
attained with
some criteria of
low risk
partially
achieved

#### Infection Prevention and Control

Includes 6 standards which require:

- There is a managed environment, which minimises the risk of infection to consumers, service providers and visitors

Assessment

Standards applicable to this service

- 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.

# attained with some criteria exceeded