

Mercy Assisi Home & Hospital Hamilton Limited

CURRENT STATUS: 21-Feb-12

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

Atawhai Assisi Home and Hospital is situated in three acres of grounds on the outskirts of Hamilton city. There are views across the grounds and surrounding countryside from every aspect of the facility. The service has been developed in stages over the past forty years and offers eighty-six rest home and hospital beds with up to five beds able to be "swing" beds . Residents are accommodated in single rooms and one double room, many of which have their own or shared ensuite bathroom. It is a large spacious facility with specific areas for resident activities, a whānau room and a large consecrated chapel available to residents, families, staff and the community. The Sisters of Mercy and the pastoral care team are active in their support of both residents and staff, with quality of life of each resident seen as a core value of the service.

The organisation is part of the wider Mercy group and has embraced a journey of excellence with a longstanding commitment to quality of care through an active quality programme, including national and international benchmarking and independent accreditation. The vision is to be a leader in the provision of high quality residential care for the elderly.

AUDIT SUMMARY AS AT 21-FEB-12

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-Feb-12	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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Organisational Management	Day of Audit 21-Feb-12	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 21-Feb-12	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-Feb-12	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-Feb-12	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 21-Feb-12	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 21-FEB-12

Consumer Rights

Atawhai Assisi provides relevant information and allows time for discussion with an admission coordinator as part of the admission process. Residents and family/whānau interviewed understand their rights and are able to raise concerns and access support services. The service has a commitment to open disclosure and transparency in service provision. Residents' cultural and individual values and beliefs are assessed on admission and care planning is put in place to meet identified needs. Staff demonstrate awareness of consumer rights and ensure residents are informed and offered choices related to the care they receive.

The complaints policy is implemented and actively addressed by the Chief Executive Officer (CEO) and any concerns or complaints are seen as opportunities for improvement. Corrective actions are put in place as appropriate. Informed consent policy and processes are implemented by the service to meet contractual requirements, however an area for improvement is identified in relation to advance directives.

The policies developed by the service reflect evidence based practice and meet legislative and Health and Disability Service Standards requirements. There are some excellent examples of innovative practice which have improved care delivery and resident outcomes. This commitment to, and implementation of good practice, with ongoing service improvement, is rated beyond the full attainment level in the service.

Organisational Management

Atawhai Assisi has effective organisational systems, structures and processes implemented to ensure service delivery is planned, coordinated and appropriate to the needs of residents. The purpose, values, scope, direction and goals are identified and linked to the philosophy of

the Sisters of Mercy which underpins the service. There is a widely distributed annual business and quality plan. Key quality goals and indicators are outlined for the strategic direction of the organisation with quarterly reporting of all key performance indicators (KPIs) and progress to the directors. The organisation undertakes national and international benchmarking and has held independent accreditation since 1996. All key components of service delivery are analysed and evaluated at facility level and documentation confirms corrective action follow-up which reflects continuous quality improvement principles. Policy and procedures are in place to guide staff in reporting and recording all adverse, unplanned, or untoward events on the organisation's incident and accident forms.

The service is managed by a longstanding suitably qualified and experienced CEO with her authority, accountability and responsibilities well defined. Human resources management processes are established and consistently implemented in line with accepted good employment practice. Staff are fully supported by the organisation to undertake on-going education related to their role. The service has an implemented policy of 100% occupancy equals 100% staffing on all shifts. Records confirm appropriate appointment of staff in the rest home and hospital to ensure residents receive timely, appropriate and safe service from well trained and suitably qualified service providers.

Resident information is accurately recorded; securely stored and clinical records areas are not accessible to the public.

Continuum of Service Delivery

Residents and families are satisfied with the quality of care provided by staff. Staff are trained and qualified to perform their roles and deliver all aspects of rest home and hospital level of care. Staff provide an integrated and multidisciplinary approach to service delivery to provide care to residents assessed as rest home or hospital level care. A registered nurse develops, reviews, updates and evaluates the care plans for the residents at least six monthly, or more frequently as the needs of the resident changes. The care plans are individualised and personalised to ensure the needs of the resident are met. The service is rated beyond the expected attainment rating (a continuous improvement rating) for providing evidence based care that reflects current accepted good practices for the falls management programme.

The activities programme supports the interests, needs and strengths of residents. The diversional therapist and activities co-ordinators are employed at times where they can assist in the managing of residents with challenging behaviours. The activities programme is also rated beyond the full expected attainment (continuous improvement rating) with residents expressing high satisfaction with the programme, which is also linked into managing challenging behaviours and the reducing falls programme.

Effective medicine management systems are implemented in the rest home and hospital to comply with current legislative requirements and meet safe practice guidelines. Consistent recording of medication room and drug fridge temperatures is an area for improvement.

Food services meet the likes, preferences and needs of residents.

Safe and Appropriate Environment

The cleaning and laundry service are managed effectively to provide a clean and safe environment for the residents.

There are clear processes for the management of waste and hazardous substances in the facility, including for blood and chemical spills. Staff receive training related to healthcare waste, emergency procedures and facility security measures to keep residents and visitors safe. A sophisticated call bell system operates.

There is a comprehensive planned and reactive maintenance programme addressing a variety of regular checks of buildings, plant and equipment to maintain a safe physical environment. The facilities are fit for purpose and meet the needs of older residents.

There are several lounge areas and a large communal dining room in the rest home, plus a combined dining/lounge area in the hospital. Smaller intimate seating spaces are also available to residents and there is an additional dedicated activities room able to accommodate larger group activities.

Residents' rooms have hand basins or an ensuite or shared bathroom between two rooms. There are adequate toilets adjacent to communal areas. Staff support residents to attend to personal hygiene with consideration of their privacy. All bedrooms are furnished and personalised according to the residents' individual needs and likes. Residents can access large gardens and lawn areas on the large rural site. All resident areas have adequate light and ventilation with at least one opening window in residents' bedrooms. The facility has a variety of heating options which can be adjusted by the resident or staff. Atawhai Assisi implements a smoke free policy.

Restraint Minimisation and Safe Practice

The service has seven residents assessed as requiring the use of bed rails and one resident requiring a lap belt for safety reasons. Policies and procedures in place meet the restraint minimisation and safe practice standards. The facility has procedures and alternatives in place to reduce restraint use and all the identified restraint use documented is for the safety, comfort and at the request of the resident or their family/whānau. Staff education is appropriate and is offered during orientation/induction and is part of the mandatory care education in-service programme. The implementation, monitoring, review and evaluation is conducted to ensure the safe use of restraint.

Infection Prevention and Control

The infection prevention and control programme aims to prevent the spread of infection and reduce the risks to residents, staff and visitors. Policies and procedures are aligned with currently accepted good practice. There are adequate resources to allow for a managed environment, which minimises the risk of infection. The programme is of relevant size and scope and is monitored by the infection control nurse who reports to the opportunities for improvement committee. Monthly infection surveillance data is recorded, collated and reported on. The service utilises external benchmarking to compare results with other facilities quarterly. Analysis and evaluation of data is used to develop any corrective actions

required, which are monitored by the infection control nurse through the opportunities for improvement committee.