

## Summerset Care Limited - Summerset in the River City

**CURRENT STATUS: 13-Apr-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

Summerset in the River City is certified to provide rest home and hospital level care for up to 49 residents. The service is owned by the Summerset Group. On the day of the audit there were 37 residents. This includes 20 at hospital level care and 17 at rest home level care. There are 12 serviced apartments, however there is currently no rest home level residents occupying them. There are currently no residents under the medical aspect of the contract. The manager has significant experience in aged care and health management roles and has been in the position for two and a half years. He is supported by a nurse manager. Staff interviewed and documentation reviewed identified that the service has implemented systems that are appropriate to meet the needs and interests of the resident group. The care services are holistic and promote the residents' individuality and independence. Family and residents interviewed all spoke positively about the care and support provided.

This audit identified improvements required in the following areas by the service; aspects of care planning documentation, medication storage and documentation, advance directives, the infection control team, activities plans, wound care documentation, orientation records and the quality management system.

### AUDIT SUMMARY AS AT 13-APR-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 13-Apr-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.		<b>Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity</b>

Organisational Management	Day of Audit 13-Apr-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.		<b>Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity</b>

Continuum of Service Delivery	Day of Audit 13-Apr-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.		<b>Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity</b>

<b>Safe and Appropriate Environment</b>	Day of Audit 13-Apr-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.		<b>No short falls</b>

<b>Restraint Minimisation and Safe Practice</b>	Day of Audit 13-Apr-12	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 13-Apr-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.		<b>No short falls</b>

## **AUDIT RESULTS AS AT 13-APR-12**

### **Consumer Rights**

Summerset in the River City strives to ensure that care is provided in a way that focuses on the individual, values residents' autonomy and maintains their privacy and choice. Residents and relatives spoke very positively about care provided at the facility.

The service functions in a way that complies with the Health and Disability Commissioner (HDC) Code of Health and Disability Services Consumers' Rights (the Code). Information about the code of rights and services is easily accessible to residents and families. Policies are implemented to support residents' rights. Annual staff training reinforces a sound understanding of residents' rights and their ability to make choices. Care plans accommodate the choices of residents and/or their family/whānau. The service has appropriate implemented policies around informed consent. Consumers and their family are provided with information and supported to make informed choices. Choices are documented and acted upon and advance directives are implemented. Complaints processes are implemented and appropriate documentation is maintained and resolution achieved. There is an improvement required around advance directives.

## **Organisational Management**

Summerset in the River City has a quality and risk management system in place that is implemented and monitored. Corrective actions are identified and implemented. Accidents and incidents are well documented and corrective actions and trends identified.

Resident/family satisfaction surveys are completed and regular resident meetings are held. Health and safety policies, systems and processes are implemented to manage risk.

Summerset in the River City has a comprehensive and up to date business plan, risk management plan and hazard register. Discussions with families identified that they are fully informed of changes in health status. Human resource processes are robust and well documented and staff receive training well in excess of minimum requirements. There is a comprehensive orientation programme that provides new staff with relevant information for safe work practice. Human resource policies are in place including a documented rationale for determining staffing levels and skill mixes. There is a roster that provides sufficient and appropriate coverage for the effective delivery of care and support.

There are improvements required around linking analysis of quality data, internal audit and survey results to meetings and ensuring documentation of staff orientation is kept on file.

## **Continuum of Service Delivery**

There is a well-developed information pack available for residents/families/whānau at entry. The registered nurses undertake the assessments on admission. The initial support plan is completed within 24 hours of admission. Within three weeks the long term care plan is completed by the registered nurses. The lifestyle care plans are completed comprehensively. The care being provided is consistent with the needs of residents. There is a short-term care plan that is used for acute or short-term changes in health status. Communication with family is documented in the progress notes and care plans. Service delivery plans demonstrate service integration with input from care givers, activities officers, GPs, specialist review and resident and family input where appropriate. Improvements are required around ensuring the care plans are signed and dated, documentation of wound care plans and restraint interventions.

Activities are planned that are appropriate to the functional capabilities of residents. Residents interviewed spoke positively about the activities programme. Activities are voluntary. An improvement is required around personalising individual recreation care plans.

The medication management system includes medication policies and procedures that follow recognised standards and guidelines for safe medicine management practice in accordance with guidelines. Staff responsible for medication administration are trained, competent and comply with policy.

Improvements are required around medication management and signing of charts.

All residents on entry to the service have a nutritional profile developed. This is reviewed six monthly as part of the care plan review. Changes to residents' dietary needs are communicated to the kitchen. The menu is designed and reviewed by a registered dietitian

at an organisational level. The service has corrected the previous finding around general kitchen management.

### **Safe and Appropriate Environment**

The service has waste management policies and procedures for the safe disposal of waste and hazardous substances. Buildings comply with legislation and regulatory requirements are met for local authorities and the Ministry of Health. Building maintenance is completed and records maintained. The facility is surrounded by well-maintained grounds. There are outside areas that are easily accessible by the residents to sit outside. Resident rooms are either en-suited or have close access to the communal facilities. The service has lounges and a separate dining room. There are other smaller sitting areas. There is a large communal lounge/dining room in the care apartments building which has numerous uses.

A fire drill is conducted monthly.

### **Restraint Minimisation and Safe Practice**

The service currently has eight residents requiring bed rails, chair vests or lap belts that are assessed as restraint. There is a further one resident using an enabler. There is a restraint register and a separate enabler register. Restraint minimisation and managing challenging behaviour training is completed each year and staff complete restraint competencies regularly. The restraint standards are being implemented and implementation is reviewed through internal audits and an annual review. There is a strong focus on interventions to minimise the use of restraint. Summerset in the River City also reviews restraint through its monthly restraint meetings and six monthly audits.

### **Infection Prevention and Control**

The infection control team is integrated as part of the monthly quality meeting and is a standing agenda item. It is a multi-disciplinary committee. Summerset infection control policies are comprehensive and support the infection control standard. The policies are reflective of and are appropriate to the service. The infection control policies link to other documentation and uses references where appropriate. There are policies for, a) infection control management, b) implementing the infection control programme, c) education, d) surveillance and e) infection control policies and procedures related to prevention of transmission of infection.

Surveillance activities and audits are the responsibility of the infection control coordinator. The infection control coordinator is directly responsible to the manager who in turn is responsible to the governing body. There is an infection control register in which all infections are documented monthly. A monthly infection control report is completed.