

## **Metlifecare Limited - Palmerston North**

**CURRENT STATUS: 22-May-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**

Metlifecare Palmerston North is a joint venture company whose shareholders are Metlifecare Limited and the New Zealand Guardian Trust Company Limited who are the trustees for the Palmerston North Maori Reserve. The Palmerston North Maori Reserve Trust is an Ahu Whenua Trust constituted by the Maori Land Court under section 244 of Te Ture Whenua Maori Act 1993. Managing Trustees have a statutory duty to represent and preserve the interests of beneficial owners. The facility is operated in accordance with Metlifecare Limited policies and procedures. It offers hospital and rest home level care for up to 43 residents. Five rest home beds are offered as part of the assisted living area which is part of the attached village apartments. Eight beds located in the care facility can be used for either rest home or hospital level care. On the day of audit there were 30 hospital and nine rest home residents. There is a village on site which offers independent living which is not included in this audit.

The nurse manager, who is a registered nurse, looks after all clinical staff and the manager who works in the village is responsible for all non-clinical areas. Their responsibilities and accountabilities are clearly defined. At organisational level there is a management team who are available as required.

There are nine areas identified for improvement related to ensuring that: all complaints are documented in the complaints register; incident and accident forms are completed to comply with policy; all entries in residents' notes are legible and that the name and designation of the service provider is identifiable; human resources management processes meet Metlifecare policy requirements; chemicals are being safely stored; medication fridge temperatures are recorded; services are co-ordinated to promote continuity of care; and that all residents' needs are identified through the assessment process.

## AUDIT SUMMARY AS AT 22-MAY-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
	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 22-May-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>A number of shortfalls that require specific action to address</b>

<b>Organisational Management</b>	Day of Audit 22-May-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>

<b>Continuum of Service Delivery</b>	Day of Audit 22-May-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 22-May-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>A number of shortfalls that require specific action to address</b>

<b>Restraint Minimisation and Safe Practice</b>	Day of Audit 22-May-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>

Infection Prevention and Control	Day of Audit 22-May-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 22-MAY-12

### Consumer Rights

Metlifecare Palmerston North provides relevant information and allows time for discussion as part of the admission process to ensure residents and family/whanau understand their rights and contractual requirements. Communication methods include family/whanau meetings, an open door policy by management, and high visibility of staff that are always available to talk to residents and family/whanau at any time. This ensures full and frank information and open disclosure is maintained. Residents and family/whanau members are able to raise concerns and access support services as required. Residents' cultural and individual values and beliefs are assessed on admission and care planning is put in place to meet identified needs.

Policies and procedure implemented by the service are developed and updated at Metlifecare organisational level. Policy, procedure and educational planning and presentation provides an environment that reflects good practice standards and meets legislative and Health and Disability Services Standards.

The complaints register sighted identifies that at the time of audit there are no outstanding complaints. The service only identifies complaints that are of a serious nature in the complaints register; other matters are followed up by the nurse manager but not documented in the register. This is an area that requires improvement.

Informed consent policy and processes are implemented by the service to meet contractual requirements. Staff demonstrate awareness of ensuring residents are informed and have choices related to the cares they receive.

### Organisational Management

Organisational structures and processes are monitored by Metlifecare via a computer system known as Am risk. Facility service performance is directly aligned with organisational performance and is monitored at governance level. Service planning is appropriate to meet the needs of consumers. Key components of service delivery are explicitly linked to the quality management system and are monitored to measure achievement. There is an up to date risk register which outlines controls that are in place to minimise known and potential

risks. The organisation is part of ACC Workplace Safety Management Practices (WMSP) Programme at tertiary level, which includes Metlifecare Palmerston North.

All incidents, accidents and untoward events are reported, recorded, evaluated and benchmarked. Family/whanau are informed of all incidents and accidents. Not all incident and accident forms reviewed are completed to meet policy requirements as there is not always documented evidence of how the incident is used as an opportunity to improve service delivery. This is an area identified for improvement.

The service implements safe staffing levels and skill mixes that are identified as being best practice by the organisation. Staffing levels are monitored at organisational level to ensure all requirements of policy are met. Human resources management processes in place meet legislative requirements but not Metlifecare policy in regard to post employment three monthly appraisals being completed; an improvement is required in relation to this.

There is a system in place to identify, plan and facilitate on-going education for staff at all levels. Staff are fully supported by the organisation to maintain and improve their knowledge and skills through on-going education.

The nurse manager is suitably qualified and experienced, with delegated authority, accountability and responsibility for the provision of service.

Residents' information is accurately recorded, securely stored and clinical records areas are not accessible to the public.

### **Continuum of Service Delivery**

Residents' entering the care facility at Metlifecare Palmerston North have been assessed as requiring rest home or hospital level care. Residents receive service delivery from well trained staff in an environment that is well equipped to meet the needs of its residents. Residents are able to use the services of their own doctor or request service from one of MetLife care's visiting doctors. Lifestyle plans are developed by registered nurses using a multidisciplinary approach in relation to assessment, planning, intervention and evaluation. However there are gaps in the assessment and intervention process, these are areas identified for improvement. Clinical notes are integrated, resident focussed and completed within identified time frames. Group and individual activities plan are developed that recognise individual interests and needs. Medicine management systems meet requirements with the exception of storage of medicines in fridges. Fridge temperatures are not being monitored and documented to ensure the required temperature is maintained.

Residents' nutritional needs are provided for by a menu which has been reviewed by a dietitian and meets the nutritional guidelines for older adults.

Residents exiting or transferring from the service are assisted to do so in a planned co-ordinated manner.

### **Safe and Appropriate Environment**

Metlifecare Palmerston North care facility is located across the road from the retirement village that offers independent villas. The care complex does include an area of serviced apartments and an internal sunny courtyard garden area. Residents are provided with

facilities that are well maintained and can accommodate the needs of residents requiring hospital and rest home level care. All bedrooms are single and spacious, able to accommodate residents' belongings, have a toilet and hand basin, a call bell, should assistance be needed, and a large external opening bay window. The home has under floor heating with individual controls in each room and the building has a sprinkler system for fire protection. Safe and hygienic kitchen, cleaning and laundry services are provided. An improvement is required to ensure that chemicals in the kitchen, utility and shower room areas are stored safely.

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

The organisation recognises that restraint is only used as a last resort for residents' safety. Policy states that the organisation is actively seeking ways to reduce the amount of restraint that is used. Approved restraints are lap belts and beside rails. Organisational policies and procedures are implemented to ensure all Health and Disability Service Standards and contractual requirements are met. Staff education is appropriate for the level of restraint that is in use. All staff are required to complete restraint education as part of the orientation process and then as on-going annual education.

The service implements policy related to approval, assessment and review of restraints. Monitoring process are understood by staff and monitoring frequency is identified on the resident's care plan. The resident and family/whanau are involved in the approval and on-going review of restraint use.

### **Infection Prevention and Control**

The Metlifecare organisational wide infection and prevention programme is implemented on-site by the infection control nurse. There are adequate resources to allow for a managed environment which minimises the risk of infection to residents, visitors and staff. The infection control nurse has responsibility to ensure surveillance methods are adhered to and that monthly infection surveillance data is recorded, collated, reported to management and the national quality and risk manager. Analysis and evaluation of benchmarked data is undertaken by the service and corrective actions required put in place to assist in lowering infection rates.