

Radius Residential Care Limited - Radius Windsor Court Rest Home

CURRENT STATUS: 23-Jul-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

Windsor Court rest home is part of the Radius residential care group. The service provides rest home and dementia level care for up to 61 residents. On the day of the audit there were 56 residents including 17 residents in the secure dementia unit and 39 residents in the rest home.

The philosophy of the service also includes providing safe and therapeutic care for residents with dementia that enhances their quality of life and minimises risks associated with their confused states.

The facility manager has many years of aged care management experience and she is supported by a registered nurse and Radius regional manager. The organisation has adopted a quality approach towards service delivery and incorporating quality into all aspects of care. There is a quality and risk management system in place at Windsor Court that is implemented and monitored and this generates improvements in practice and service delivery.

The following improvements are required by the service around aspects of care planning and medication documentation and call bells.

AUDIT SUMMARY AS AT 23-JUL-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

Indicator	Description	Definition
	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 23-Jul-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.		No short falls

Organisational Management	Day of Audit 23-Jul-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 23-Jul-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.		A number of shortfalls that require specific action to address

Safe and Appropriate Environment	Day of Audit 23-Jul-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.		Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity

Restraint Minimisation and Safe Practice	Day of Audit 23-Jul-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 23-Jul-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 23-JUL-12

Consumer Rights

Information is fully available to residents and family about services provided and the Health and Disability Commissioner Code of Health and Disability Services Consumers' Rights (the Code). There are implemented policies to support rights, such as privacy, dignity, abuse / neglect, culture, values and beliefs, complaints, advocacy and informed consent. Annual staff training reinforces a sound understanding of the rights of residents and their ability to make choices. Care planning accommodates individual choices of clients and their families. Interviews with residents and relatives were positive about the service considering and meeting their values and beliefs.

There is a Maori Health Plan and a range of supporting policies that acknowledge the Treaty of Waitangi, provide recognition of Maori values and beliefs and identify culturally safe practices for Maori. The policies for Maori identify the importance of whanau.

There is a strong commitment to staff development through education and in-service training. The service complaints review processes are implemented and complaints and concerns are actively managed and well documented.

Organisational Management

Radius Windsor Court has a quality and risk management system that supports the provision of clinical care and support. Policies and procedures are reviewed regularly and are updated to reflect appropriate application of standards to practice. Discussions with staff and a review of meeting minutes demonstrate a culture of quality improvements. An annual resident and

relative satisfaction survey is completed and there are regular resident and relative meetings.

The service is active in capturing data that is analysed at head office and benchmarked against other Radius Care facilities. Data analysis is reported to staff at staff meetings. There are comprehensive human resources policies including recruitment, selection, orientation and staff training and development. The service has in place an orientation programme that provides new staff with relevant information for safe work practice. Discussion with staff and management confirmed that there is a comprehensive in-service training programme covering relevant aspects of care and support that meets requirements. There is evidence of clinical development and review of practice at Radius Windsor Court.

There is a policy for determining staffing and skill mix for safe service delivery. Interviews with the facility manager, the registered nurse and health care assistants identified that staffing levels were good and interviews with residents and relatives demonstrated that they have adequate access to staff.

Continuum of Service Delivery

The service has a well-developed assessment process and resident's needs are assessed prior to entry. There is an information pack available for residents/families/whānau at entry. Assessments, care plans and evaluations are completed by the registered nurse. Residents/relatives are involved in planning and evaluating care. Risk assessment tools and monitoring forms are available and implemented and are used to assess the level of risk and support required for residents. Service delivery plans demonstrate service integration. Short term care plans are in use for changes in health status. Care plans are evaluated six monthly or more frequently when clinically indicated. There are improvements required around aspects of care plan documentations. The service facilitates access to other medical and non-medical services. Referral documentation is maintained on resident files.

Residents and relatives interviewed all spoke positively about the care and support provided by staff at Windsor Court.

The activities team provide an activities programme that involves the wider community. Each resident has an individualised plan and activities are scheduled across the week.

The service medication management system follows recognised standards and guidelines for safe medicine management practice. Controlled medication balances are checked weekly. Staff complete competencies. There are improvements required around aspects of medication documentation.

Meals are prepared on site. Food and fridge temperatures are recorded. Individual and special dietary needs are catered for. Residents interviewed responded favourably to the food that was provided.

Safe and Appropriate Environment

Chemical safety is maintained. The physical environment minimises risk of harm, the two areas are spacious, homely and safe. There is adequate equipment provided to ensure the needs of residents are met. The building holds a current warrant of fitness. A maintenance prevention programme is implemented with further furniture and renovation upgrades

identified for later this year. Electrical equipment is checked annually. Residents are able to bring their own possessions and are able to adorn their room as desired. There are a number of communal lounges, dining areas, communal bathrooms and one rest home wing has single en-suites. There are documented laundry services policies/procedures. There is a plentiful supply of protective equipment, gloves, and aprons. Appropriate training, information, and equipment for responding to emergencies is provided. There is an approved evacuation plan and fire drills are completed six monthly. The facility has civil defence kits and emergency management plans. There is an improvement required around the call bell system.

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. Windsor Court remains restraint-free and no residents utilise enablers. Staff are trained in restraint minimisation, de-escalation techniques and restraint competencies are completed regularly.

Infection Prevention and Control

The infection control policies are comprehensive. Infection Control activity is managed through the quality system. There is an infection control register in which all infections are documented monthly. Monthly collation tables are forwarded to Radius Care head office for analysis and benchmarking. The infection control co-ordinator implements the surveillance, organises training and implements and reviews internal audits. Infection Control is integrated as part of the monthly staff meeting. The IC manual includes definitions of common infections. IC training is provided to staff annually.