

## Aria Park Senior Living Limited

**CURRENT STATUS: 15-May-13**

**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

Aria Park Retirement Village is an aged care facility located in Epsom, Auckland. There are a total of 130 beds with 86 beds certified as rest home level (including 46 serviced apartments) and 44 beds certified as hospital level. During the audit there were 40 rest home residents and 42 hospital residents living hospital and rest home wings.

There are improvements required including; ensuring the complaints register includes all lodged complaints and follow-up actions taken, ensure hospital residents are in certified beds, analysing quality data, progress notes documentation, care planning interventions, transcribing of medications, management of self-administering residents, and infection control programme.

### AUDIT SUMMARY AS AT 15-MAY-13

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 fully attained with some standards exceeded
	No short falls	Standards applicable to this service fully attained
	Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity	Some standards applicable to this service partially attained and of low risk
	A number of shortfalls that require specific action to address	Some standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk

Indicator	Description	Definition
	Major shortfalls, significant action is needed to achieve the required levels of performance	Some standards applicable to this service unattained and of moderate or high risk

Consumer Rights	Day of Audit 15-May-13	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 standards applicable to this service partially attained and of low risk</b>

Organisational Management	Day of Audit 15-May-13	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 standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk</b>

Continuum of Service Delivery	Day of Audit 15-May-13	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 standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk</b>

Safe and Appropriate Environment	Day of Audit 15-May-13	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>Standards applicable to this service fully attained</b>

<b>Restraint Minimisation and Safe Practice</b>	Day of Audit 15-May-13	Assessment
Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		<b>Standards applicable to this service fully attained</b>

<b>Infection Prevention and Control</b>	Day of Audit 15-May-13	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>Some standards applicable to this service partially attained and of low risk</b>

## **AUDIT RESULTS AS AT 15-MAY-13**

### **Consumer Rights**

Aria Park Retirement Village provides information and discussion on the Code of Health and Disability Services Consumers' Rights (the Code). Residents and relatives confirm privacy is respected and that they are treated with courtesy and respect. The residents' cultural and individual values and beliefs are assessed on admission and documented in their plan of care. Employees receive education on residents' rights and supporting cultural and individual values and beliefs.

The complaints process is discussed with residents and families during the admission process. Complaints forms for lodging a complaint are readily available. There is evidence of timely communication with residents and families throughout the complaints process, until a lodged complaint is resolved. There is an improvement required around the complaints register.

### **Organisational Management**

Aria Park Retirement Village is one of three aged care facilities in Auckland that are independently owned by a couple from Christchurch. A quality and risk management system in is established with further identified improvements required analysing quality data.

The facility manager has recently been appointed to this role (April 2013). She is a registered nurse with a current annual practising certificate. She has over 20 years of experience in the health and disability sector in senior leadership and management roles. She is supported by a clinical manager. The organisation has well-developed policies, procedures, processes and systems that support the provision of clinical care and support.

An annual resident and relative satisfaction survey is completed. Residents meet as a forum regularly. Residents and families interviewed are supportive of the care provided.

Quality and key performance indicators are benchmarked across the organisation's three facilities. Health and safety policies, systems and processes are implemented to manage risk. Incidents/accidents forms identify actions to reduce risks. Discussions with families verify that they are kept informed of changes in the resident's health status.

Human resource policies are in place including a documented rationale for determining staffing levels and skill mixes. The staffing levels provide sufficient and appropriate coverage for the effective delivery of care and support.

An induction programme provides new staff with relevant information for safe work practice. The in-service education programme exceeds eight hours annually and covers relevant aspects of care and support.

Entries in the residents' files are legible and, where necessary, are signed and dated by the relevant caregiver or registered nurse, including their designation. Individual resident files demonstrate service integration.

There is an improvement required related to ensuring the hospital residents are in rooms that have been certified as hospital level.

### **Continuum of Service Delivery**

The service has a comprehensive admission policies. Service information is made available prior to entry and in the welcome pack given to the resident and family/whanau. Residents/relatives confirmed the admission process and that the agreement was discussed with them. Registered nurses are responsible for each stage of service provision. The sample of residents' records reviewed provide evidence that the provider has implemented systems to assess, plan and evaluate care needs of the residents. The residents' needs, interventions, outcomes/goals have been identified and these are reviewed on a regular basis with the resident and/or family/whanau input. Care plans are reviewed six monthly, or when there are changes in health status. Resident files include notes by the GP and allied health professionals. There is an improvement required around care planning interventions and documented continuity of care.

The activities programme is facilitated by two activity coordinators. The activities programme provides varied options and activities are enjoyed by the residents. Community activities are encouraged, van outings are arranged on a regular basis.

Medicines are managed appropriately to meet all legislative requirements. Education and medicines competencies are completed by all staff responsible for administration of medicines. The medicines records reviewed include documentation of allergies and sensitivities. There is an improvement required around transcribing of medications and self-administering management.

All food is cooked on site and residents overall spoke positive about the food service. All residents' nutritional needs are identified, documented and choices are available and provided.

## **Safe and Appropriate Environment**

Aria Park is a purpose built facility. All building and plant have been built to comply with legislation. There is a maintenance person and a reactive and preventative maintenance programme is in place. The facility is spacious and each resident has their own bedroom with either shared full ensuites or communal toilets and showers. Residents have easy access to landscaped external areas. Fixtures, fittings and flooring are made of accepted materials for the environment. Residents rooms are of an appropriate size to allow care to be provided and for the safe use and manoeuvring of mobility aids. Mobility aids can be managed in en-suites and bathroom areas. There is a number of lounges and dining rooms. Activities can occur in any of these areas. Furniture is arranged to ensure residents are able to move freely and safely.

Security and safety policies and procedures are in place to ensure a safe environment is provided. Appropriate training, information, and equipment for responding to emergencies is provided. The service is prepared for civil emergencies

A call bell system is available in all areas of the facility including residents' bedrooms and bathrooms. Responses to call bells are included in the internal audit programme.

Housekeeping and laundry services are provided on site according to policies and procedures. Regular fire drills are completed. Emergency management and first aid training is included in the education programme. There are civil defence resources in place for the facility. Call bells are evident across the facility in resident's rooms, lounge areas, and toilets/bathrooms and link to staff pages.

## **Restraint Minimisation and Safe Practice**

Restraint minimisation and safe practice policies and procedures are in place. Restraint practices are only used where it is clinically indicated and justified and other de-escalation strategies have been ineffective. The service completes restraint assessments for residents who require restraint or enabler interventions. A register of residents using restraints and enablers is regularly updated. The service actively reviews restraint as part of the internal audit and reporting cycle.

## **Infection Prevention and Control**

The infection control programme and its content and detail is appropriate for the size, complexity and degree of risk associated with the service. The infection control co-ordinator is responsible for coordinating/providing education and training for staff. The infection control manual outlines a comprehensive range of policies, standards and guidelines, training and education of staff and scope of the programme. The infection control co-ordinator uses the information obtained through surveillance to determine infection control activities, resources and education needs within the facility. This includes audits of the facility, hand hygiene and surveillance of infection control events and infections. Staff receive on-going training in infection control. There is an improvement required around surveillance and meeting minutes.