

Tairua Residential Care Limited

Current Status: 17 February 2014

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 and NZS8134.3:2008) on the audit date(s) specified.

General overview

Tairua Residential Care is certified to provide rest home and hospital level care for up to 44 residents. On the day of the audit there were 27 residents at rest home level care and nine residents at hospital level care. The service is managed by the owner who is a registered nurse. She has managed the facility since 2006 and purchased the service in 2011. She is well supported by a registered nurse who acts as 'second in charge'. 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 by the service in the following areas; training for the nurse manager, aspects of resident documentation including timeliness, signing and dating, assessments and care plans, performance appraisals, first aid and food safety training, having suitable scales, wound documentation, food storage, one maintenance issue, chemical storage, competency assessments for residents who self administer medicines, aspects of medication documentation, and annual review of the infection control programme.

Audit Summary as at 17 February 2014

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

Indicator	Description	Definition
	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
	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 as at 17 February 2014

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.		Standards applicable to this service fully attained.
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Organisational Management as at 17 February 2014

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.		Some standards applicable to this service partially attained and of low risk.
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Continuum of Service Delivery as at 17 February 2014

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 standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk.
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Safe and Appropriate Environment as at 17 February 2014

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 standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk.
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Restraint Minimisation and Safe Practice as at 17 February 2014

Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation.		Standards applicable to this service fully attained.
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Infection Prevention and Control as at 17 February 2014

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.		Some standards applicable to this service partially attained and of low risk.
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Audit Results as at 17 February 2014

Consumer Rights

Staff can demonstrate their understanding of residents' rights and obligations. This knowledge is incorporated into their daily work duties and caring for the residents. Residents are treated with respect and receive services in a manner that considers their dignity, privacy and independence. Information regarding consumers' rights, access to advocacy services and how to lodge a complaint is displayed in a visible location at the entrance.

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

The rights of the resident and/or their family to make a complaint is understood, respected and upheld by the service.

Organisational Management

Services are planned, coordinated, and are appropriate to the needs of the residents. Day-to-day operations are being managed efficiently and effectively. This ensures the provision of timely, appropriate and safe services to the residents. Quality and risk management processes are documented and maintained, reflecting the principals of continuous quality improvement. Adverse, unplanned and untoward events are recorded in a systematic fashion and are reported to those affected in an open manner.

Residents receive appropriate services from suitably qualified staff. Human resources processes are managed in accordance with good employment practice, meeting legislative requirements.

Staff undergo a comprehensive orientation to the service. Education and training programmes are in place, which include regular in-services and computer-based

learning.

Information containing personal resident information is kept confidential and cannot be viewed by other residents or members of the public.

Care plans and notes are legible, signed and dated.

There are three required improvements relating to professional development for the nurse manager, performance appraisals and documentation in residents' files.

Continuum of Service Delivery

Resident files reviewed include service coordination centre assessment forms. The facility information pack includes all relevant aspects of service, and this is provided to residents and/or family/whanau prior to entry. Care plans are developed in consultation with relevant people including residents and where appropriate family / whanau or Enduring Power of Attorney.

A registered nurse assessment, including a variety of risk assessments are intended to be completed on admission and reviewed six monthly following admission.

Residents and/or family have input into the development of care plans.

Communication with family is well documented. There are improvements required around assessments, signing and dating documents, timeliness of assessment completion, wound documentation, having suitable scales and care planning.

Planned activities are appropriate to the residents' interests. Residents interviewed confirm their satisfaction with the programme. Residents' files evidence activity care plans included in the long term care plan identify goals, and interventions and are evaluated at least six monthly. Individual activities are provided either within group settings or on a one-on-one basis. Activities are planned monthly and there are separate programmes for rest home and hospital residents.

A medicine management system is implemented. Policies and procedures detail service provider's responsibilities. Registered nurses are responsible for medicine management have attended in-service education for medication management and complete a medication competency annually. Medication charts sighted evidence three monthly medication reviews completed by general practitioners. There are six residents who are self-medicating. There are improvements required around competency assessments for residents who self administer medicines and aspects of medication documentation.

The service has transfer and discharge procedures The staff interviewed are knowledgeable of their responsibility of safe exit or discharge to another facility or hospital. A dietitian is available to provide dietetic assessment for residents and arrange special authority's as required. All food is cooked on site and kitchen staff have attained safe food handling certificates. Residents and families interviewed, all confirmed satisfaction with food services. There are improvements required around safe food training for kitchen hands and storage of food in the residents fridge.

Safe and Appropriate Environment

The service has implemented policies and procedures for fire, civil defence and other emergencies. There are staff on duty with a current first aid certificate. An improvement is required around the van driver having a first aid certificate. The building holds a current warrant of fitness. Rooms are individualised. External areas are safe and well maintained. The facility has a van available for transportation of residents. There are large spacious lounges and dining areas. There are adequate toilets and showers. Fixtures fittings and flooring is appropriate and toilet/shower facilities are constructed for ease of cleaning. Cleaning and laundry services are well monitored through the internal auditing system. Appropriate training, information and equipment for responding to emergencies is provided. There is an approved evacuation scheme and emergency supplies for at least three days. Appropriate policies around chemicals are available along with product safety charts. The temperature of the facility is comfortable and constant and able to be adjusted in residents rooms to suit individual resident preference. There are emergency plans in place and emergency drills have been held six monthly. There is a civil defence kit and evidence of supplies in the event of an emergency in line with civil defence guidelines. There are improvements required around one maintenance issue and chemical storage.

Restraint Minimisation and Safe Practice

The use of restraint is actively minimised. Restraint is regarded as the last resort. A restraint/enabler assessment process is in place. Any restraint/enabler use is recorded in an auditable format. Staff are required to attend restraint minimisation and safe practice education.

Five hospital level residents are documented on the restraint register as using an enabler.

Infection Prevention and Control

The infection control coordinator is a senior registered nurse. The service has infection control policies and an infection control manual to guide practice. Infection control education is provided annually for staff and infection control practice is monitored through the internal audit programme. The surveillance policy describes and outlines the purpose and methodology for the surveillance of infections. Infection information is collated monthly and reported through to all staff meetings. The infection control surveillance and associated activities are appropriate for the size and complexity of the service. There are improvements required around the annual review of the infection control programme.