

Summerset Care Limited - Summerset Mountain View

Introduction

This report records the results of a Partial Provisional Audit of a provider of aged residential care services against the Health and Disability Services Standards (NZS8134.1:2008; NZS8134.2:2008 and NZS8134.3:2008).

The audit has been conducted by Health and Disability Auditing New Zealand Limited, an auditing agency designated under section 32 of the Health and Disability Services (Safety) Act 2001, for submission to the Ministry of Health.

The abbreviations used in this report are the same as those specified in section 10 of the Health and Disability Services (General) Standards (NZS8134.0:2008).

You can view a full copy of the standards on the Ministry of Health's website by clicking [here](#).

The specifics of this audit included:

Legal entity: Summerset Care Limited

Premises audited: Summerset Mountain View

Services audited: Rest home care (excluding dementia care)

Dates of audit: Start date: 27 October 2015 End date: 27 October 2015

Proposed changes to current services (if any): New care centre – part of Summerset at Mountain View Retirement Village which includes eight serviced care apartments being assessed for rest home level care on the ground floor and 28 hospital/rest home rooms on level 1 (all dual purpose). The total number of beds on opening is 36. Opening is scheduled for 14 December 2015.

Total beds occupied across all premises included in the audit on the first day of the audit: 0

Executive summary of the audit

Introduction

This section contains a summary of the auditors' findings for this audit. The information is grouped into the six outcome areas contained within the Health and Disability Services Standards:

- consumer rights
- organisational management
- continuum of service delivery (the provision of services)
- safe and appropriate environment
- restraint minimisation and safe practice
- infection prevention and control.

General overview of the audit

Summerset Mountain View is a new retirement village complex. A staged building project has been underway for the past year, which includes retirement villas and facilities, and a nearly completed care centre. The care centre is a two level facility. The ground floor includes the service areas and eight serviced care apartments being certified to provide rest home level care. There are 28 (rest home and hospital level) rooms on the first floor (all dual purpose) across two wings. The service plans to open 14 December 2015.

This partial provisional audit was conducted to assess the facility for preparedness to provide rest home and hospital level care in the new facility. The service will end up with a total of 36 resident beds.

The service has a village manager who has been in the role for the last 12 months with the opening of the village. The village manager has a background in finance management. A nurse manager has been appointed.

Summerset group has a well-established organisational structure, which includes a board, chief executive officer, operations managers, clinical/quality manager and a clinical education manager. Each of the Summerset facilities throughout New Zealand is supported by this structure. Summerset group has a comprehensive suite of policies and procedures, which will guide staff in the provision of care and services.

The audit identified the new facility, staff roster and equipment requirements and processes are appropriate for providing rest home and hospital level care and in meeting the needs of the residents. Summerset has a documented plan in place for the opening of the facility and there are clear procedures and responsibilities for the safe and smooth transition of residents into the new facility. The improvements required by the service are related to the aged care experience of the clinical manager and completion of the building project, staff training/orientation, staffing and implementation of the new service.

Consumer rights

Not applicable to this partial provisional audit.

Organisational management

Summerset group have in place annual planning and comprehensive policies/procedures to provide rest home and hospital level care. Policies and procedures are developed by senior managers, who provide regular updates and reviews. The newly built facility is appropriate for providing these services and in meeting the needs of residents.

The organisation provides documented job descriptions for all positions, which detail each position's responsibilities, accountabilities and authorities. Organisational human resource policies are implemented for recruitment, selection and appointment of staff. The organisation has an induction/orientation programme, which includes packages specifically tailored to the position such as cook, cleaners, kitchen hands, caregivers, registered nurses, and nurse manager.

There is a 2015 and 2016 training plan developed, to be implemented at Summerset at Mountain View. A week-long orientation is planned for all new staff.

There is a policy for determining staffing levels and skill mixes for safe service delivery. This defines staffing ratios to residents and rosters are in place and are adjustable depending on resident numbers. There is a planned transition around opening each of the areas and this is reflected in the draft rosters and processes around employment of new staff.

Continuum of service delivery

The medication management system includes medication management policies and associated procedures that follow recognised standards and guidelines for safe medicine management practice in accordance with the 2011 guideline: Medicine Care Guides for residential aged care. The service plans to implement a safe implementation of the medication system including ensuring registered nurses and care staff have completed medication training and competencies.

The facility has a large workable (almost completed) kitchen in a service area situated on ground floor adjacent to the serviced care apartments. A registered dietitian has designed and reviewed the menu. Food is to be transported in hotbox food carriers, via a lift, to the kitchenette in the care centre. The service has an organisational process whereby all residents have a nutritional profile completed on admission, and this is provided to the kitchen. All aspects of the food service will be provided by a contracted company and is yet to be fully established.

Safe and appropriate environment

The service has waste management policies and procedures for the safe disposal and management of waste and hazardous substances. There will be appropriate protective equipment and clothing for staff.

There are handrails in ensuites and communal bathrooms. There is a lift between the floors, which is large enough for mobility equipment including a stretcher. The provider has purchased all necessary furniture and equipment. Fixtures, fittings and floor and wall surfaces in bathrooms and toilets are made of accepted materials for this environment.

Resident rooms are of sufficient space to ensure care and support to all residents and for the safe use of mobility aids.

Communal areas are well designed and spacious and allow for a number of activities. Activities are to occur in either of the lounge areas and they are large enough to not impact on other residents not involved in activities.

Summerset has housekeeping and laundry policies and procedures in place. There is a large laundry in the service area of the ground floor with clean and dirty flow. The facility will have secure areas for the storage of cleaning and laundry chemicals. Laundry and cleaning processes will be monitored for effectiveness.

The emergency and disaster management policies includes (but not limited to) dealing with emergencies, fire, flood, civil defence and disasters. General living areas and resident rooms are appropriately heated and ventilated. All rooms have windows.

Restraint minimisation and safe practice

Not applicable to this audit.

Infection prevention and control

There are clear lines of accountability that are recorded in the infection control policy. A designated registered nurse will be the infection control officer. Monthly collation of infection rates will be forwarded to the nurse manager for analysis. Infection control is to be an agenda item in the monthly staff meeting. Summerset group undertakes monthly benchmarking of infections.

Summary of attainment

The following table summarises the number of standards and criteria audited and the ratings they were awarded.

Attainment Rating	Continuous Improvement (CI)	Fully Attained (FA)	Partially Attained Negligible Risk (PA Negligible)	Partially Attained Low Risk (PA Low)	Partially Attained Moderate Risk (PA Moderate)	Partially Attained High Risk (PA High)	Partially Attained Critical Risk (PA Critical)
Standards	0	7	0	7	1	0	0
Criteria	0	23	0	11	1	0	0

Attainment Rating	Unattained Negligible Risk (UA Negligible)	Unattained Low Risk (UA Low)	Unattained Moderate Risk (UA Moderate)	Unattained High Risk (UA High)	Unattained Critical Risk (UA Critical)
Standards	0	0	0	0	0
Criteria	0	0	0	0	0

Attainment against the Health and Disability Services Standards

The following table contains the results of all the standards assessed by the auditors at this audit. Depending on the services they provide, not all standards are relevant to all providers and not all standards are assessed at every audit.

Please note that Standard 1.3.3: Service Provision Requirements has been removed from this report, as it includes information specific to the healthcare of individual residents. Any corrective actions required relating to this standard, as a result of this audit, are retained and displayed in the next section.

For more information on the standards, please click [here](#).

For more information on the different types of audits and what they cover please click [here](#).

Standard with desired outcome	Attainment Rating	Audit Evidence
<p>Standard 1.2.1: Governance</p> <p>The governing body of the organisation ensures services are planned, coordinated, and appropriate to the needs of consumers.</p>	<p>PA Moderate</p>	<p>Summerset Mountain View is a new retirement village complex. A staged building project has been underway for the past year, which includes retirement villas and facilities, and a nearly completed care centre. The care centre is a two level facility. The ground floor includes the service areas, and eight serviced care apartments being certified to provide rest home level care. There are 28 (rest home and hospital level) rooms on the first floor (all dual purpose), across two wings. The service plans to open 14 December 2015.</p> <p>The service has a village manager who has been in the role for the last 12 months with the opening of the village. The village manager has a background in finance management. A nurse manager has been appointed to support the village manager. The nurse manager has oversees experience in dementia care but no New Zealand experience and no recent rest home or hospital level care experience.</p> <p>Summerset group has a well-established organisational structure, which includes a board, chief executive officer, operations managers, national clinical/quality manager and a national clinical education manager. Each of the Summerset facilities throughout New Zealand is supported by this structure. The Summerset group has a comprehensive suite of policies and procedures, which will guide</p>

		<p>staff in the provision of care and services.</p> <p>Summerset group have a quality assurance and risk management programme and an operational business plan for the project. Quality objectives and quality initiatives are set annually. The organisation-wide objectives cover risk management, staff recruitment and development, resident care, and the quality programme.</p> <p>The operational business plan includes governance structure, financial management and budgets.</p> <p>There is a transition plan with key tasks around opening of the care centre (Main Building Opening Operations Programme).</p> <p>There is a village manager's and nurse manager's job description that includes authority, accountability and responsibility including reporting requirements. Both positions completed orientations at other Summerset villages.</p>
<p>Standard 1.2.2: Service Management</p> <p>The organisation ensures the day-to-day operation of the service is managed in an efficient and effective manner which ensures the provision of timely, appropriate, and safe services to consumers.</p>	FA	<p>The nurse manager (link 1.2.1.3) will fulfil the village manager's role during a temporary absence with support from the national clinical education manager and the clinical/quality manager. The organisation completes annual planning and has comprehensive policies/procedures to provide rest home and hospital level care. The appointment of staff and building of the facility are appropriate for providing rest home and hospital (geriatric and medical) level care and in meeting the needs of residents.</p>
<p>Standard 1.2.7: Human Resource Management</p> <p>Human resource management processes are conducted in accordance with good employment practice and meet the requirements of legislation.</p>	PA Low	<p>Summerset has organisational documented job descriptions for all positions, which detail each position's responsibilities, accountabilities and authorities. Additional role descriptions are in place for infection control officer, restraint coordinator, health and safety officer, fire officer and quality coordinator.</p> <p>A contract has been signed with a local pharmacy, general practitioners and a podiatrist. Physiotherapy services have been contracted to be provided on an as required basis. A dietitian is available through the contracted food service.</p> <p>The service has policy around competencies and requirements for validating professional competencies. The village manager advised that copies of practising certificates will be obtained from newly employed staff.</p>

		<p>There are human resource policies and procedures, which includes the requirements of skill mix, staffing ratios, and rostering.</p> <p>The clinical/quality manager advised that they are currently in the process of employing registered nurses and caregivers. To date they have offered positions to a full complement of staff. Advised that the majority of caregivers offered positions, come with a recognised aged care certificate.</p> <p>There is a 2015 training plan developed for the organisation, which will be implemented. There are a list of topics that must be completed at least two yearly and this is reported on. Advised that further training around equipment, safe chemical handling, emergency and fire training will be implemented as part of the orientation weeks being held before opening (one full week for caregivers and two full weeks for registered nurses). Advised that at least three registered nurses who have been offered employment are InterRAI trained.</p>
<p>Standard 1.2.8: Service Provider Availability</p> <p>Consumers receive timely, appropriate, and safe service from suitably qualified/skilled and/or experienced service providers.</p>	<p>PA Low</p>	<p>Human resource policies include documented rationale for determining staffing levels and skill mixes for safe service delivery. This defines staffing ratios to residents and rosters have been developed and are adjustable depending on resident numbers. There is also a document 'guidelines for management of fluctuating occupancy'. Draft rosters were sighted for various resident numbers and levels.</p> <p>The service has developed an initial draft roster (for up to 10 residents), which includes one registered nurse and two caregivers rostered on morning shift and one registered nurse and one caregiver on other shifts. Additionally there will be a caregiver based on the ground floor for serviced apartment residents. This will be adjusted as residents are admitted with general ratios of 1:5 for hospital level residents and 1:10 for rest home residents or a combination as resident needs dictate. The roster is designed for the increase in residents. There will be 24-hour RN cover provided at Summerset Mountain View. Registered nurses have been interviewed with offers of employment extended to potential staff.</p> <p>Proposed rosters were sighted for care apartments and the care centre. There is one caregiver rostered specifically across the three shifts in the serviced apartments. Other staff includes the village manager, maintenance person, activities staff, and housekeeping.</p> <p>Contracts have also been offered to cleaning and laundry staff and the service is</p>

		<p>actively recruiting a diversional therapist.</p> <p>The company contracted to provide the food service, will provide the kitchen staff.</p>
<p>Standard 1.3.12: Medicine Management</p> <p>Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines.</p>	PA Low	<p>The nursing manual includes a range of medication policies. The service is planning to use a four weekly pre-packed sachet medication system, with a contract in place from a local pharmacy, for the provision of this service. There is one large medication room in the care centre on level one where all medications will be stored, including medication trolleys for the care apartment residents on the ground floor. The medication room is not yet secure. A self-medicating resident policy and procedure is available if required. The medication administration policies identify that medication errors are treated as an incident, and are captured as part of the incident management system and a medication error analysis is to be completed. Medication training and competencies are to be completed at orientation.</p> <p>Policies and procedures reflect medication legislation and reference the medicines care guides for residential aged care. Advised, that only registered nurses deemed competent, will be responsible for administration of medications. A competency policy and competency assessment is available. Caregivers will also receive education and training and complete competencies as they may be required to check medications. The service is intending to roll out Medi-map at the time of opening. Training is to be booked around the implementation of Medi-map.</p> <p>The medication system is yet to be fully established at Summerset Mountain View.</p>
<p>Standard 1.3.13: Nutrition, Safe Food, And Fluid Management</p> <p>A consumer's individual food, fluids and nutritional needs are met where this service is a component of service delivery.</p>	PA Low	<p>Summerset has comprehensive nutritional management policies and procedures for the provision of food services for residents. The provision of meals at Summerset Mountain View will be contracted out to an external food company who will provide all aspects of the food service. The contracted company is responsible for kitchen staff recruitment, food service, food handling, menu, dishwashing, sanitation, and personal hygiene.</p> <p>The facility has a large, purpose built kitchen on the ground floor adjacent to the</p>

		<p>café and dining area of the care apartments. This area is not yet fully completed. There is a walk-in chiller and pantry and a large upright freezer. A registered dietitian has designed and reviewed the menu. Food is to be transported in hotbox food carriers to the satellite kitchen in the main dining room of the care centre on level one. Meals are to be served to residents from a bain marie in the satellite kitchen by the contracted food service staff. There is a lift near the service area, that will transport food carriers to the first level and dishes back to the kitchen. There is a dining room on the ground floor for rest home residents in serviced apartments. Food will be served from a hotbox. Crockery, cutlery and resident food equipment has been purchased.</p> <p>All residents will have a nutritional profile completed on admission, which will be provided to the kitchen. There is access to a community dietitian.</p> <p>As part of the food safety programme, regular audits of the kitchen fridge/freezer temperatures and food temperatures will be undertaken and documented. Food safety in-service training will be conducted.</p> <p>The food service is yet to be fully established at Summerset Mountain View.</p>
<p>Standard 1.4.1: Management Of Waste And Hazardous Substances</p> <p>Consumers, visitors, and service providers are protected from harm as a result of exposure to waste, infectious or hazardous substances, generated during service delivery.</p>	<p>PA Low</p>	<p>There are documented policies and procedures for waste disposal and chemical storage. The policies document procedures for the safe and appropriate storage, management, use and control and disposal of waste and hazardous substances. There is a locked cleaner's cupboard in each level of the care centre. Chemicals will be automatically dispensed in the laundry. The chemical storage areas are not secure.</p> <p>Waste management is part of the environment and equipment audit, conducted as part of the quality-assurance audit programme.</p> <p>During induction, all staff are required to complete training regarding the management of waste. Chemical safety training is a component of the compulsory two yearly training and orientation training. All new staff will complete waste management training and PPE at orientation through the employees induction programme (link #1.2.7.4).</p> <p>Gloves, aprons, and goggles have been purchased and to be installed in the two sluice rooms in the care centre, cleaners cupboards and laundry. Infection control policies state specific tasks and duties for which protective equipment is</p>

		to be worn.
<p>Standard 1.4.2: Facility Specifications</p> <p>Consumers are provided with an appropriate, accessible physical environment and facilities that are fit for their purpose.</p>	PA Low	<p>A staged building project has been underway which includes retirement villas and facilities, and a care centre. The care centre is a two-level facility, which includes service areas and serviced care apartments on the ground floor. Eight serviced apartments have been assessed as suitable to provide rest home level care. On level one, the care centre includes 28 rest home and hospital level care beds (all dual purpose).</p> <p>The service plans to open on 14 December 2015, receiving residents across either level. All resident rooms have windows, call bell system and lighting. Installation of floor coverings and soft furnishing has not yet been completed. The building is near completion and therefore a certificate of public use has not yet been obtained. All building and plant have been built to comply with legislation.</p> <p>There are two large lifts between floors. These lifts are to be used to transport food trolleys from the kitchen and to be used by staff, visitors and residents. Advised that they have a contract with the installer of the lift to maintain service (including emergency service) when needed. The lift is large enough for mobility equipment including a stretcher. There is a stair well at either end of the building.</p> <p>On level one, there is a nurses' station, medication/treatment room, doctor's room and nurse manager's office.</p> <p>Residents are able to bring their own possessions into the home and are able to adorn their room as desired. The maintenance schedule includes checking of equipment.</p> <p>All electrical equipment and other machinery are to be checked as part of the annual maintenance and verification checks. The service has an extensive list of medical and nursing equipment purchased and awaiting installation. The new furniture and equipment is appropriate for this type of setting and for the needs of the residents.</p> <p>A new call bell system has been installed throughout the facility; however, this is yet to be commissioned. The call system is installed in all bedrooms, bathrooms, dining and lounge areas. The system is connected to an individual staff pager system, which all care staff will carry.</p>

		External areas are to be paved and seating and outdoor furniture is to be provided for residents. There are handrails in ensuites and bathrooms. All rooms and communal areas allow for safe use of mobility equipment. There is adequate space for storage of mobility equipment in each of the two wings on level one. There is adequate equipment for both wings, so equipment such as hoists will not need to be borrowed.
Standard 1.4.3: Toilet, Shower, And Bathing Facilities Consumers are provided with adequate toilet/shower/bathing facilities. Consumers are assured privacy when attending to personal hygiene requirements or receiving assistance with personal hygiene requirements.	FA	There are adequate numbers of toilets and showers with access to a hand basin and paper towels. There are eight care apartments on the ground floor, which each include a bathroom, kitchen and dining/lounge area. On level one care centre there are 28 rooms, 22 have full ensuite facilities. There are six single rooms in one wing. There are two communal mobility bathrooms available in this wing and two more toilets close to lounge/communal areas.
Standard 1.4.4: Personal Space/Bed Areas Consumers are provided with adequate personal space/bed areas appropriate to the consumer group and setting.	FA	Residents rooms are spacious and allow care to be provided and for the safe use and manoeuvring of mobility aids. Mobility aids can be managed in ensuites and communal toilets and bathrooms.
Standard 1.4.5: Communal Areas For Entertainment, Recreation, And Dining Consumers are provided with safe, adequate, age appropriate, and accessible areas to meet their relaxation, activity, and dining needs.	FA	There is a café, dining room and large lounge area adjacent to the care apartments on the ground floor. There is also another dining and lounge area for rest home residents in serviced apartments on the ground floor. On level one, there is a kitchenette, large dining area and large lounge areas. There are other areas available for sitting and resting.
Standard 1.4.6: Cleaning And Laundry Services Consumers are provided with safe and hygienic cleaning and laundry services appropriate to the setting in which the service is being provided.	FA	There are policies for cleaning and infection prevention and linen handling and processing. These policies ensure that all cleaning and laundry services are maintained and functional at all times. The laundry is in the service area on the ground floor and has an entrance for dirty laundry and an exit for clean. The laundry is large and will have a commercial washing machine and dryer. An external company have been contracted to provide chemicals for the service. Dirty linen is to be transported to the ground floor via a laundry chute and then moved to the laundry for processing. Linen trolleys have been purchased. Care

		<p>staff will initially manage laundry. Laundry staff will be employed as resident numbers increase.</p> <p>There are documented systems for monitoring the effectiveness and compliance with the service policies and procedures. Laundry and cleaning audits are to be commenced as per the quality assurance programme.</p> <p>The service will have a secure area for the storage of cleaning and laundry chemicals and a cleaning cupboard on each level. Laundry chemicals are within a closed system to the washing machine. Material safety data sheets will be provided by the contracted company and to be displayed in the cleaning cupboards, laundry and sluices in each area. The laundry and cleaning areas have hand-washing facilities.</p>
<p>Standard 1.4.7: Essential, Emergency, And Security Systems</p> <p>Consumers receive an appropriate and timely response during emergency and security situations.</p>	<p>PA Low</p>	<p>The site-specific emergency manual for Summerset Mountain View contains the emergency and disaster policies and procedures including (but not limited to) fire and evacuation and dealing with emergencies and disasters. Emergencies, first aid and CPR are included in the mandatory in-services programme every two years and the annual training plan includes emergency training. Orientation includes emergency preparedness. Fire drills are scheduled for staff during induction, the week before opening. All registered nurses will have current first aid certificates.</p> <p>The service has cooking facilities (gas cooker) available in the event of a power failure. The service has access to a diesel generator in the event of a power failure for emergency power supply. Battery operated emergency lighting is in place for two hours. There are also extra blankets available. There is a civil defence storage room on the ground floor, which will include all necessary civil defence requirements. Water for emergency supplies will be stored there also. Water tanks are also available.</p> <p>A new call bell system has been installed throughout the facility; however, this is yet to be activated throughout the care centre. The call system involves a pager system whereby staff are alerted to a resident's call bell via the personal pagers held by each care staff member.</p> <p>As the facility has not yet opened and staff are yet to be employed, a fire drill or training around the fire evacuation procedure has not occurred. A trial run through of the fire drill is planned for the orientation week prior to opening. The</p>

		fire evacuation scheme has not yet been approved by the NZFS.
<p>Standard 1.4.8: Natural Light, Ventilation, And Heating</p> <p>Consumers are provided with adequate natural light, safe ventilation, and an environment that is maintained at a safe and comfortable temperature.</p>	FA	<p>General living areas and resident rooms are appropriately heated and ventilated. Resident's rooms are heated via under floor heating; communal living areas are heated and cooled via ceiling heating/cooling systems. General living areas and resident rooms are appropriately heated and ventilated. All rooms have external windows with plenty of natural sunlight. All windows are double-glazed and all areas have good lighting.</p>
<p>Standard 3.1: Infection control management</p> <p>There is a managed environment, which minimises the risk of infection to consumers, service providers, and visitors. This shall be appropriate to the size and scope of the service.</p>	FA	<p>There are comprehensive infection control policies that meet the Infection Control Standard SNZ HB 8134.3.1.2008. There are policies including (but not limited to); a) Infection control coordination, b) hand hygiene, c) surveillance, d) standard precautions, e) additional precautions, f) standard definitions of infections. The infection control team will include an IC officer (registered nurse), nurse manager and various care staff. There are clear lines of accountability to report to the IC team on any infection control issues including a reporting and notification to nurse manager. There are documented IC responsibilities that include reporting processes and an IC officer's job description.</p> <p>Infection control will be an agenda item on staff meetings and quality meetings. Annual review of the infection control programme will be conducted. Monthly benchmarking of infections is conducted for all Summerset facilities.</p>

Specific results for criterion where corrective actions are required

Where a standard is rated partially attained (PA) or unattained (UA) specific corrective actions are recorded under the relevant criteria for the standard. The following table contains the criterion where corrective actions have been recorded.

Criterion can be linked to the relevant standard by looking at the code. For example, a Criterion 1.1.1.1: Service providers demonstrate knowledge and understanding of consumer rights and obligations, and incorporate them as part of their everyday practice relates to Standard 1.1.1: Consumer Rights During Service Delivery in Outcome 1.1: Consumer Rights.

If there is a message “no data to display” instead of a table, then no corrective actions were required as a result of this audit.

Criterion with desired outcome	Attainment Rating	Audit Evidence	Audit Finding	Corrective action required and timeframe for completion (days)
<p>Criterion 1.2.1.3</p> <p>The organisation is managed by a suitably qualified and/or experienced person with authority, accountability, and responsibility for the provision of services.</p>	<p>PA Moderate</p>	<p>The appointed nurse manager (who is yet to commence) is an overseas registered nurse who has obtained New Zealand registration. She has significant experience and postgraduate qualifications in dementia care and mental health. She completed one year working in a care home (aged care) environment in 2006 and 2007 in England. The village manager does not have a health background and does not provide clinical support.</p>	<p>The appointed nurse manager does not have recent experience in providing rest home and hospital level care.</p>	<p>Ensure that clinical aspects of the service are managed by a person with appropriate qualifications and experience in aged care.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.2.7.4</p> <p>New service providers receive an orientation/induction programme that covers the</p>	<p>PA Low</p>	<p>All new staff are required to complete an induction and orientation. The organisation has an induction/orientation programme,</p>	<p>Orientation for staff is yet to be provided. Advised, that the newly employed staff commencing, will all receive one-week</p>	<p>Ensure that all new staff are provided with a complete orientation programme.</p>

<p>essential components of the service provided.</p>		<p>which includes packages specifically tailored to the position such as nurse manager, registered nurses, caregivers, activities staff, and housekeeping staff.</p> <p>Human resource management policies are in place for the recruitment of staff including the selection process, including police and reference checking.</p> <p>Staff orientation policy provides guidelines regarding the orientation programme for all new staff and includes general orientation and specific orientation for registered and enrolled nurses. At the end of September, prior to opening, all new staff will complete a weeklong orientation, which will include health and safety, fire safety training, infection control, medication management, use of medical equipment and supplies, continence products and manual handling. The registered nurses are scheduled for a week's clinical training as part of their orientation. Competencies such as medication administration will also be completed at this time (link #1.3.12.3).</p> <p>All newly employed caregivers are required to complete competencies as part of the CareerForce orientation for caregivers.</p>	<p>orientation/training at the facility prior to opening (two weeks for registered nurses). The all-employee orientation packages will be completed. Onsite specific training (such as fire drill/safety) is to be provided before opening. Registered nurses are to complete an extra week orientation week, specific to their role.</p>	<p>Prior to occupancy days</p>
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<p>Criterion 1.2.8.1</p> <p>There is a clearly documented and implemented process which determines service provider levels and skill mixes in order to provide safe service delivery.</p>	<p>PA Low</p>	<p>The service has offered contracts to staff to fully cover the roster including sufficient caregivers, registered nurses, domestic staff and maintenance staff. A diversional therapist is being actively recruited.</p>	<p>Ensure that sufficient staff are employed to meet the requirements of the rosters.</p>	<p>Ensure that sufficient staff are employed to meet the requirements of the rosters.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.3.12.1</p> <p>A medicines management system is implemented to manage the safe and appropriate prescribing, dispensing, administration, review, storage, disposal, and medicine reconciliation in order to comply with legislation, protocols, and guidelines.</p>	<p>PA Low</p>	<p>The nursing manual includes a range of medication policies. The service is planning to use a four weekly pre-packed sachet medication system. They have a contract in place with a local pharmacy for the provision of this service. There is one large medication room in the care centre on level one where all medications will be stored, including medication trolleys for the care apartment residents on the ground floor. Two medication trolleys will be available. The medication room is not yet secure. A medication fridge will be available in the medication room. Medical equipment has been purchased for the new facility.</p>	<p>The medication room is not fully ready for use or secure.</p>	<p>Ensure that the medication management system is implemented safely and securely.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.3.12.3</p> <p>Service providers responsible for medicine management are competent to perform the function for each stage they manage.</p>	<p>PA Low</p>	<p>All registered nurses and senior caregivers responsible for administering and/or checking medication will complete medication training and competency. This is to be completed at commencement of employment and annually.</p>	<p>Registered nurses will be employed to manage and administer medications. Advised that medication competencies will be completed during induction and annually.</p>	<p>Ensure that all new staff who will have medication administration responsibilities, complete medication competencies.</p> <p>Prior to occupancy days</p>

<p>Criterion 1.3.13.5</p> <p>All aspects of food procurement, production, preparation, storage, transportation, delivery, and disposal comply with current legislation, and guidelines.</p>	<p>PA Low</p>	<p>Summerset has comprehensive nutritional management policies and procedures for the provision of food services for residents. The provision of meals at Summerset Mountain View will be contracted out to the Medirest food company who provide all aspects of the food service. The contracted company is responsible for kitchen staff recruitment, food service, food handling, menu, dishwashing, sanitation, and personal hygiene. The kitchen is not yet equipped with kitchen equipment. There is access to a community dietitian.</p> <p>As part of the food safety programme, regular audits of the kitchen fridge/freezer temperatures and food temperatures will be undertaken and documented. Food safety in-service training will be conducted.</p> <p>The food service is yet to be fully established at Summerset Mountain View</p>	<p>The kitchen is not yet fully completed or equipped with kitchen equipment. The food service has not yet commenced.</p>	<p>Kitchen service to be fully established and operational, including checking of temperatures, menu planning, delivery and storage.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.4.1.1</p> <p>Service providers follow a documented process for the safe and appropriate storage and disposal of waste, infectious or hazardous substances that complies with current legislation and territorial</p>	<p>PA Low</p>	<p>The policies document procedures for the safe and appropriate storage, management, use and control and disposal of waste and hazardous substances. There is a locked cleaner's cupboard on each floor. Chemicals will be automatically dispensed in the laundry. The chemical storage areas do not have</p>	<p>The chemical storage areas do not have locks to ensure chemicals are safely and securely stored.</p>	<p>Ensure all areas where chemicals are stored are secure.</p> <p>Prior to occupancy days</p>

authority requirements.		locks to ensure chemicals are safe.		
<p>Criterion 1.4.2.1</p> <p>All buildings, plant, and equipment comply with legislation.</p>	PA Low	<p>As the building is not yet completed, a certificate of public use has not been issued. Heating, lighting and the hot water system is not yet fully functioning. All electrical equipment and other machinery are to be checked as part of the annual maintenance and verification checks. The service has an extensive list of medical and nursing equipment purchased and awaiting installation. The new furniture and equipment is appropriate for this type of setting and for the needs of the residents.</p>	<p>a) The build including internal fit out is not yet completed and therefore the Certificate of Public Use has not yet been signed off; b) hot water is not yet available, therefore monitoring of safe hot water temperatures has not occurred</p>	<p>a) A Certificate of Public Use must be sighted by DHB/HealthCERT prior to opening; b) provide evidence that hot water temperatures in resident areas are within the required limits.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.4.2.6</p> <p>Consumers are provided with safe and accessible external areas that meet their needs.</p>	PA Low	<p>Areas around the outside of the building are in the process of being completed. There is an outdoor courtyard on the first floor that is yet to be completed with furniture and ramped for ease of access.</p>	<p>There is an outdoor courtyard on the first floor that is yet to be completed with furniture and ramped for ease of access. External gardens, paths and seating areas required completion.</p>	<p>Provide evidence that the external areas and surfaces are safe and accessible for residents.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.4.7.1</p> <p>Service providers receive appropriate information, training, and equipment to respond to identified emergency and security situations. This shall include fire safety and emergency procedures.</p>	PA Low	<p>The site-specific Summerset emergency manual contains the emergency and disaster policies and procedures including (but not limited to) fire and evacuation and dealing with emergencies and disasters. Emergencies, first aid and CPR are included in the mandatory in-services programme every two years and the annual training plan includes</p>	<p>As the facility has not yet opened, staff have not completed a fire drill or training around the fire evacuation procedure.</p>	<p>Implement fire drills for all staff at Summerset Mountain View.</p> <p>Prior to occupancy days</p>

		<p>emergency training. Orientation includes emergency preparedness. Fire drills and first aid training are scheduled for staff during induction, the week before opening. All registered nurses will have current first aid certificates (link 1.2.7.4). As the facility has not yet opened and staff are yet to be employed, a fire drill or training around the fire evacuation procedure has not occurred</p>		
<p>Criterion 1.4.7.3 Where required by legislation there is an approved evacuation plan.</p>	PA Low	<p>Fire and emergency management is detailed in the Summerset Mountain View emergency manual. Fire drills and training are scheduled to take place during orientation week prior to opening. The New Zealand Fire Service has not yet approved the Fire Evacuation scheme.</p>	<p>The New Zealand Fire Service has not yet approved the fire evacuation scheme.</p>	<p>Provide evidence that the NZFS has approved a fire evacuation scheme for Summerset Mountain View care centre.</p> <p>30 days</p>
<p>Criterion 1.4.7.5 An appropriate 'call system' is available to summon assistance when required.</p>	PA Low	<p>A new call bell system has been installed throughout the facility. The call system involves an individual pager system, which alerts staff when a resident activates a call bell. Call bells are situated in resident rooms, ensuites, dining/lounge rooms in care apartments, in the communal dining and lounge areas of level one and level two. The call bell system is yet to be activated.</p>	<p>Call bell system is in place throughout the care centre however, this is yet to be activated.</p>	<p>Ensure that the call bell system is fully functioning throughout the care centre.</p> <p>Prior to occupancy days</p>

Specific results for criterion where a continuous improvement has been recorded

As well as whole standards, individual criterion within a standard can also be rated as having a continuous improvement. A continuous improvement means that the provider can demonstrate achievement beyond the level required for full attainment. The following table contains the criterion where the provider has been rated as having made corrective actions have been recorded.

As above, criterion can be linked to the relevant standard by looking at the code. For example, a Criterion 1.1.1.1 relates to Standard 1.1.1: Consumer Rights During Service Delivery in Outcome 1.1: Consumer Rights

If, instead of a table, there is a message “no data to display” then no continuous improvements were recorded as part of this of this audit.

No data to display

End of the report.