

Kamo Home and Village Charitable Trust - 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 The DAA Group 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: Kamo Home and Village Charitable Trust

Premises audited: Mountain View

Services audited: Rest home care (excluding dementia care)

Dates of audit: Start date: 27 January 2017 End date: 27 January 2017

Proposed changes to current services (if any): This partial provisional audit has been undertaken to establish the level of preparedness of Kamo Home and Village Charitable Trust to provide rest home level of care at Mountain View. The premise has been recently purchased and is being refurbished. There are no persons in residence. This facility will operate under the existing governance and management structure as Kamo Home and Village.

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

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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

Mountain View has recently been purchased by Kamo Home and Village Charitable Trust. Currently there are no residents as the refurbishment process has just been completed. The Trust will operate Mountain View using established processes, management and business planning and it will be a 'sister' site of Kamo Home and Village.

This partial provisional audit has been undertaken to ensure Mountain View premises are fit for purpose for rest home services. The total capacity is 20 beds.

There is one area identified that needs to be fully addressed prior to opening related to staff orientation/education.

Consumer rights

Not applicable to this audit.

Organisational management

The organisation's governance structure is identified in documentation and Mountain View will operate as an extension of Kamo Home and Village. There are eight members on the board of directors for the Kamo Home and Village Charitable Trust. Mountain View will cater for residents requiring rest home level care.

The organisation's 2016-2017 business and quality and risk plans cover all required aspects of reporting, data recording and planning processes. The mission statement, scope, direction and goals of the business are clearly identified. These documents identified how services are planned and coordinated to meet residents' needs.

The general manager is experienced in her role and is supported by a management team consisting of the clinical manager, quality and risk manager and lifestyle manager. The existing management team will oversee all services at Mountain View, and at least one management team member will be located at the facility daily (Monday to Friday). This will ensure the day to day operation of Mountain View is overseen by staff that are appropriately experienced and qualified.

The employment process has commenced for care staff. A review of human resources policy and procedures identifies that employment processes are conducted in accordance with good employment practice and meet the requirements of legislation. There is a proposed roster showing staffing levels at Mountain View will be undertaken to meet legislative and contractual requirements.

Continuum of service delivery

The existing medication management practices as performed at Kamo Home and Village will be undertaken at Mountain View. Policies and procedures sighted meet legislative and good practice requirements.

Food services meet all food safety practices. The menu to be implemented was approved by a registered dietitian in August 2015 and the service operates using a food control plan which gained an A rating in January 2017 from the Whangarei District Council. This plan includes Mountain View.

Safe and appropriate environment

The service has a documented emergency response processes which includes a fire service approved evacuation plan.

The organisational policies and procedures reflect processes to ensure residents, staff and visitors are protected from harm as a result of exposure to waste or infectious substances generated during service delivery.

The facility has a current building warrant of fitness. Plant and equipment checks have been undertaken by approved providers to meet the requirements of the standard. All interior areas of the facility have been refurbished. The call bell system is of a standard that ensures it can be used by residents or staff if they require assistance.

Furnishings sighted are suitable for aged care. All 20 bedrooms, which are single occupancy, have hand basins and two of the bedrooms also have toilet ensuites. There are adequate bathroom and toilet areas located in each wing. The dining and lounge areas are separate and both areas will also be used to meet residents' relaxation and activity needs. Residents will also be included in outings and activities undertaken at Kamo Home and Village.

All resident areas have opening windows to allow natural light and ventilation. There is electric heating throughout the building including thermostatically controlled heaters in all residents' bedrooms.

Outdoor areas are easily accessible with shaded areas on the balcony and under the existing trees in the garden.

Restraint minimisation and safe practice

Not applicable to this audit

Infection prevention and control

Policies and procedures will be implemented to ensure the environment is managed to minimise the risk of infection to residents, service providers and visitors. The infection control programme is managed by the infection control coordinator and includes monthly infection control committee meetings.

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) |
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| Standards | 0 | 14 | 0 | 1 | 0 | 0 | 0 |
| Criteria | 0 | 33 | 0 | 1 | 0 | 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 |
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| <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> | FA | <p>Mountain View will be the second facility to be owned and operated by the Kamo Home and Village Charitable Trust. Services described in the 2016-2017 business plan and quality and risk plan identify the organisation's structure, mission statement, values, scope, direction and goals. The refurbishment and opening of Mountain View is being overseen by Kamo Home and Village Trust board of directors and the general manager. Documentation identifies how services are planned and will be coordinated to meet residents' needs. Members of the Kamo Home and Village management team will have regular input into the oversight of the running of the business on a day to day basis. At least one member of the management team will be rostered on a daily basis Monday to Friday to ensure 'hands on' oversight is maintained.</p> <p>The members of the management team are suitably qualified and experienced staff who have authority, accountability and responsibility for the provision of services. All services at Mountain View will be overseen by the general manager.</p> |
| <p>Standard 1.2.2: Service Management</p> | FA | <p>The quality and risk manager confirmed during interview that when any member of the management team is on leave their role is covered by other members of</p> |

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| <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> | | <p>the team so the day to day operation of the service remains efficient and effective. The service understands the need for specific ongoing education for all staff and this was demonstrated in the education calendar sighted for existing and new staff. Members of the management team undertake appropriate education related to their roles.</p> |
| <p>Standard 1.2.7: Human Resource Management Human resource management processes are conducted in accordance with good employment practice and meet the requirements of legislation.</p> | <p>PA Low</p> | <p>Staff that require professional qualifications have them validated as part of the employment process and annually as confirmed in documentation sighted. Policies and procedures are implemented to ensure current good employment practices are met. The practice of undertaking staff annual appraisals is identified in policy and management confirmed this process is fully implemented.</p> <p>Job descriptions identify staff responsibilities and accountability. Staff ongoing education covers all areas of service provision and an individual staff record of attendance is maintained.</p> <p>Initially senior staff from Kamo Home and Village will transfer to Mountain View. The service has advertised for additional staff for Mountain View and will appoint appropriate service providers to safely meet the needs of the residents. Many of the applicants have previous aged care experience and qualifications and have worked at Mountain View prior to its closure. The organisation has a dedicated educator who is a qualified assessor for specific aged care educational papers. They will ensure that coaching and mentoring occurs for newly employed staff. The orientation/induction process is individualised for each staff member according to their role, ability and experience.</p> <p>The annual in-service education calendar sighted covers all aspects of service provision. As confirmed during management interview, if a deficit in knowledge is highlighted in any area, additional education is put in place to ensure all residents' needs can be met.</p> |
| <p>Standard 1.2.8: Service Provider Availability Consumers receive timely, appropriate, and safe service from suitably qualified/skilled and/or experienced service providers.</p> | <p>FA</p> | <p>The organisation has a clearly documented process to determine staffing requirements which meet district health board contractual requirements. The proposed roster sighted shows that staffing levels and skill mix have been incorporated into staffing levels planning.</p> <p>At full occupancy there will be a registered nurse on duty Monday to Friday five</p> |

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| | | <p>days a week, at all other times a senior care giver will be on duty who will be medication competent and hold a first aid certificate. There will be one care giver on the morning and afternoon duty for up to 10 residents. After 10 this number will increase to 2 caregivers on morning and afternoon duty. There will be one caregiver on night duty with a RN on call at all times. Until then registered nursing hours will be adjusted to occupancy and comply with safety standards. Management stated that staff from Kamo Home and Village will be used to cover sick leave, on call duties and annual leave until the service can build a casual pool of staff who will cover both facilities as required.</p> <p>Once the number of residents increases there will be dedicated kitchen and cleaning staff. All laundry will be undertaken off site. Activities will be undertaken by caregivers with oversight from the activities team at Kamo Home and Village. (An activities plan was sighted for Mountain View).</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> | FA | <p>Medications will be pre-packed by the pharmacy. Policy and procedures which reflect correct legislative requirements and current safe practice will be implemented to ensure residents receive medicines in a safe and timely manner. All medication systems are paper based. Policy and procedures cover actions to be taken to ensure any resident who is competent to self-medicate can do so safely. Locked boxes will be provided as required.</p> <p>Medication storage is in a locked room with provision for controlled medication secure storage. The service has a purpose built medication trolley.</p> <p>A contracted general practitioner will prescribe medications to meet contractual requirements. At the time of audit there are no residents therefore prescribed medications could not be sighted. Management confirm that this practice will occur as per Kamo Home and Village.</p> <p>Medication competencies will be undertaken for all staff that administer medications. Refer comments in criterion 1.2.7.4.</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</p> | FA | <p>The kitchen has been fully refurbished and is equipped to provide services for rest home level care residents. The menu has been approved for aged care by a registered dietitian in August 2015. All dietary needs will be met by the service.</p> <p>Initially, until the service has 10 residents, main meals will be transported from</p> |

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| <p>service delivery.</p> | | <p>Kamo Home and Village in a hot box system. The documented management of this process includes taking food temperatures when the food is placed in the hot box, when it arrives at the Mountain View and at the time the last meal is serviced. These processes meet food critical control point (HACCP) hazard analysis requirements. The process has been approved as part of the food control plan which gained an A rating by the Whangarei District Council in January 2017 in accordance with the Food Safe Act 2014.</p> <p>Food will be available 24 hours a day for residents and kept in the refrigerators in the kitchen which will be monitored daily. Microwaves are available to heat snack food if required. Breakfast will be provided under supervision of care staff following the catering services policy and food control plan.</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>FA</p> | <p>Areas where chemicals are to be kept are secure. Service providers will implement policy and procedures to ensure safe and appropriate disposal of waste, including hazardous substance, that complies with all legislative and authority requirements. There are yellow sharps containers for the safe disposal of needles.</p> <p>Personal protective clothing and equipment (PPE), such as disposal gloves and disposable aprons were sighted. Management confirmed the use of these items will be available to all staff.</p> |
| <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> | <p>FA</p> | <p>The facility has a current building warrant of fitness which expires on 01 November 2017. Management confirm that annual electrical safety checks will be undertaken by an approved person for all items. The electrical equipment sighted at the time of audit is new and is covered by warranty. It will be checked according to manufacturer's specifications. This also applies to medical equipment.</p> <p>The physical environment has secure flooring, wide corridors and secure hand rails to promote safe mobility and aid resident independence. There is a dedicated storage room for equipment to avoid clutter in walking areas.</p> <p>All outdoor areas have easy access. Ramps are of a gradient to allow easy walking and hand rails are secure with non slip flooring. The balcony area is fully roofed to provide shade and the grounds have large well established trees for</p> |

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| | | natural shade. Management confirmed that outdoor furnishings will include the use of umbrellas for shade when required. The site is fully fenced. |
| <p>Standard 1.4.3: Toilet, Shower, And Bathing Facilities</p> <p>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.</p> | FA | There are adequate toilet/shower/bathing facilities located in each wing. A dedicated toilet area is provided for staff and visitors. All toilet and shower areas have been refurbished to a standard that meets infection control cleaning requirements. |
| <p>Standard 1.4.4: Personal Space/Bed Areas</p> <p>Consumers are provided with adequate personal space/bed areas appropriate to the consumer group and setting.</p> | FA | All 20 bedrooms provide adequate space for residents to be assisted by staff if required. Management confirmed that residents will be able to personalise their bedroom to their likings. The bedrooms are furnished with a bed, drawers and a wardrobe for safe storage of resident's belongings. |
| <p>Standard 1.4.5: Communal Areas For Entertainment, Recreation, And Dining</p> <p>Consumers are provided with safe, adequate, age appropriate, and accessible areas to meet their relaxation, activity, and dining needs.</p> | FA | <p>There is a lounge and day room area that can be separated by closing an internal door if required. A kitchenette in one corner will be used for tea and coffee making for residents and visitors. The dining area is separate and has tables and chairs for 20 people.</p> <p>Activities will be undertaken in both these areas as appropriate. The activities timetable also shows that residents will be transported by van to some of the activities that occur at Kamo Home and Village.</p> |
| <p>Standard 1.4.6: Cleaning And Laundry Services</p> <p>Consumers are provided with safe and hygienic cleaning and laundry services appropriate to the setting in which the service is being provided.</p> | FA | <p>Upon opening the service will use cleaning staff from Kamo Home and Village two days a week to undertake a full clean and until occupancy increases caregivers will undertake hygiene cleans daily. This process will be managed by the quality and risk manager who has oversight for all cleaning staff. Once numbers of residents increase dedicated cleaning staff will be employed at Mountain View.</p> <p>Policies and procedures are in place for cleaning and laundry services to ensure infection control standards are met.</p> <p>There are secure storage areas for chemicals and cleaning trolleys. Safety data</p> |

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| | | <p>sheets are located in the office and in the cleaning room. All chemicals are premix bio-chemicals and grey water is recycled.</p> <p>All laundry will be done at Kamo Home and Village with a 24 hour turn-a-round timeframe. The programme for this was sighted. There are linen skips with lids at Mountain View.</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> | FA | <p>Service providers will receive appropriate information and training to respond to emergency and security situations as part of their orientation/induction process. This includes fire evacuation which will be undertaken at least six monthly. There are three fire cells in the facility with firefighting equipment which has been checked and approved by an off-site contractor. The fire evacuation scheme was approved by the fire service on 20 January 2017. The outdoor assembly point is clearly identified should a full evacuation be required. The building has a sprinkler system and smoke alarms. Emergency lighting is operable and fire exits are clearly labelled.</p> <p>Management confirm they will keep at least three days dry food on site and there is a 500 litre outdoor water tank for emergency water use. A fully equipped civil defence box which was last checked in August 2016 was sighted. Management confirmed that regular six monthly checks will be undertaken to ensure all product has remained in good working order.</p> <p>Policies and procedures will be implemented to ensure staff secure windows and doors as part of their afternoon shift to keep the facility secure. This is appropriate for the type of service offered.</p> <p>Resident areas have operable call bells. Some flexi-cords in resident bedrooms have yet to be plugged back in after the rooms were painted. They are all available on site.</p> |
| <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>All resident areas are provided with adequate natural light with at least one opening window in each room. There are ceiling fans in each corridor to assist with airflow. Management stated that they will put heat pumps in the lounge and dining areas if the current heating and cooling systems are inadequate for resident comfort. The facility is electrically heated throughout with wall mounted thermostatic controlled heaters in each resident's bedroom.</p> |

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| <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> | <p>FA</p> | <p>The infection control programme that is in use at Kamo Home and Village will be used for Mountain View. It is reviewed at least annually and was last updated in January 2017. The quality and risk manager reports that the current policies and procedures will apply to Mountain View.</p> <p>The infection control coordinator from Kamo Home and Village will also be responsible for Mountain View and the existing infection control committee will review all data. The job description for the infection control coordinator identifies the lines of accountability, responsibilities and reporting for infection control matters.</p> <p>Monthly data collection and infection control results will be shared across all management, staff and trustees. Data will be included in the current QPS Aged Care benchmarking programme.</p> <p>There are processes in place to prevent residents, visitors and staff spreading infections to others. Signs on doors were sighted. It is an employment condition that staff must stand-down for 48 hours if they have diarrhoea or vomiting.</p> <p>The infection control coordinator has undertaken appropriate education for the role. Staff infection control covers hand hygiene, standard precautions, transmission based infections and infection prevention.</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) |
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| <p>Criterion 1.2.7.4</p> <p>New service providers receive an orientation/induction programme that covers the essential components of the service provided.</p> | PA Low | <p>There is a well-documented orientation/induction programme in place that covers the essential components of services provided. This is undertaken by all newly employed staff. The orientation/induction includes medication competencies and emergency management processes. Existing staff who will work at the facility have completed orientation/induction but new staff to be employed are required to have this completed prior to commencement of duties.</p> | <p>No orientation/induction sighted as staff are yet to be employed.</p> | <p>Provide evidence that newly appointed staff have completed the orientation/induction programme in relation to medication management and emergency management. Including fire evacuation processes.</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.

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End of the report.