# Ranfurly Manor Limited - Nelson Residential Care Centre

## 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](http://www.health.govt.nz/our-work/regulation-health-and-disability-system/certification-health-care-services/health-and-disability-services-standards).

The specifics of this audit included:

**Legal entity:** Ranfurly Manor Limited

**Premises audited:** Nelson Residential Care Centre

**Services audited:** Rest home care (excluding dementia care)

**Dates of audit:** Start date: 1 February 2017 End date: 1 February 2017

**Proposed changes to current services (if any):** Nelson Residential Care Centre is opening as a 49 bed facility providing rest home level care. An aged care facility previously operated on this site under a different name. The building has been completely refurbished and upgraded after being closed for the past three years.

There are currently no residents currently living at the facility.

**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

Ranfurly Manor Limited is a private organisation which currently operates two aged care facilities, one in Fielding and one in the Tararua District. Both these facilities maintain certification to the Health and Disability Services Standards. This partial provisional audit is to review their original facility at 38 Nelson Street, Fielding which has been closed for the past three years. It was known as Ranfurly Manor but was closed in order for a new and larger Ranfurly Residential Care Centre to be built and opened on the other side of Fielding.

The newly refurbished and upgraded facility will be the third facility in the Ranfurly Manor group of Residential Care Centres and is to be known as Nelson Residential Care Centre. It will provide rest home level care for up to 49 residents.

There is a small group of rest home residents who have moved into Ranfurly Residential Care Centre who wish to transfer to Nelson Residential Care Centre after it has opened. This will only occur once staff have been recruited / transferred, and have completed orientation and induction training, as is planned.

There is one area which needs to be addressed prior to occupation: the Certificate of Public Use needs to be issued for the facility.

## Consumer rights

Not applicable to this audit.

## Organisational management

Ranfurly Manor Limited is in private ownership. A general manager has oversight of the Residential Care Centres in the group and is based at Ranfurly Residential Care Centre on the other side of Fielding. The organisation has documented their quality management system and this includes their direction, purpose, values and goals. These have been reviewed recently and are included in the strategic documents prepared for the new facility.

The general manager is an experienced nurse and manager who maintains her practising certificate. A facility manager has been appointed who also holds a professional registration as a nurse and has experience as a nurse manager in the aged care sector. There are appropriate arrangements for a temporary absence of the facility manager.

The general manager has a project plan for the opening of the facility. This includes the recruitment and appointment of staff following the Ranfurly Manor processes for human resources management. These are consistent with current good practice and legislation. Advertising and recruitment of staff for the new facility has commenced and some positions have been filled. Review of documentation associated with these appointments confirmed that Ranfurly Manor processes have been followed. Included in the organisation’s system is a policy for safe staffing of the new facility.

## Continuum of service delivery

Medicines will be managed according to the Ranfurly Manor policies and procedures. These are based on good practice and there is oversight by a care manager based at the larger Ranfurly Manor facility in Fielding. The ‘MediMap’ electronic medicine management record keeping system will be used at Nelson Residential Care Centre and is used at both other facilities. Existing staff members and the newly appointed facility manager have experience with this system. There are systems for the competency assessment for all staff who will be involved in the administration of medicines.

Appropriate systems are in place to guide the provision of safe food services at the new facility. An experienced chef has been offered the role of cook at the facility. The kitchen team leader from the larger facility has oversight of the Nelson Resident Care Centre food services. She was interviewed during the audit and has a documented plan for the new kitchen and chef.

## Safe and appropriate environment

Nelson Residential Care Centre has been refurbished and upgraded. A maintenance plan has been developed and includes a programme of electrical and equipment checks. The environment promotes independence in its design and furnishings.

Single accommodation is provided. Adequate numbers of toilets and bathrooms are provided through a combination of ensuites and shared communal (separate) toilets and shower rooms. Bedrooms without an ensuite have a wash hand basin. The facility is surrounded by lawn and gardens and there are two internal courtyards with gardens. There is external seating with shade areas. All internal and external walkways have handrails.

An appropriate call bell system is in place, as are security and emergency systems.

Protective equipment and clothing is provided and available in locations around the facility for staff to access. There are storage cupboards and locations for chemicals which are safe and secure. Laundry will be washed on site and there are systems for the management of soiled linen and clothing. Similarly, cleaning services will be operated from the facility. There will be oversight of these services by team leaders for the laundry and housekeeping based at the larger facility in Fielding. They were interviewed and have prepared for the new staff to be appointed.

The orientation and ongoing training programme for staff at Nelson Residential Care Centre includes appropriate topics, such as fire and evacuation training, safety and security, management of waste and hazardous substances, cleaning and laundry protocols.

## Restraint minimisation and safe practice

Not applicable to this audit.

## Infection prevention and control

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| 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. |  | Standards applicable to this service fully attained. |

The Ranfurly Manor infection prevention and control programme will be implemented at Nelson Residential Care Centre. The facility manager will be trained in the programme and it will be implemented by the infection control coordinator from the other facility in Fielding. Infection prevention and control is included in the orientation and ongoing training programme for all staff appointed to work at the Nelson Residential Care Centre.

## Summary of attainment

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

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| **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 | 14 | 1 | 0 | 0 | 0 | 0 |
| **Criteria** | 0 | 33 | 0 | 1 | 0 | 0 | 0 |

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| **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](http://www.health.govt.nz/our-work/regulation-health-and-disability-system/certification-health-care-services/health-and-disability-services-standards).

For more information on the different types of audits and what they cover please click [here](http://www.health.govt.nz/your-health/services-and-support/health-care-services/services-older-people/rest-home-certification-and-audits).

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| **Standard with desired outcome** | **Attainment Rating** | **Audit Evidence** |
| Standard 1.2.1: Governance  The governing body of the organisation ensures services are planned, coordinated, and appropriate to the needs of consumers. | FA | Ranfurly Manor Ltd is a privately owned company which currently operates two aged care facilities in Manawatu and the Tararua District. This facility at 38 Nelson Street was the original Ranfurly Manor facility and operated on this sight under that name until the end of 2013. It has been completely refurbished and upgraded and is being reopened as Nelson Residential Care Centre. This partial provisional audit was completed to assess the new facility against the relevant Health and Disability Services sector standards and contract requirements.  The owner is intending to provide rest home level services for up to 49 residents. All food services, laundry, housekeeping and maintenance services will be provided by staff members based at the Nelson Street facility. There will be some oversight for these functions from team leaders based at the larger, nearby Ranfurly Residential Care Centre. Similarly some clinical oversight support will be provided to the facility from the care manager at this other facility.  The organisation has well documented policies and procedures which include the purpose, values, scope, direction and goals. These are also communicated to staff through strategic planning documents (eg, Quality Plan, Emergency Management Plan), both of which were reviewed during this audit. These documents have been reviewed recently and are current.  Present during the audit was the Ranfurly Manor general manager and the newly appointed facility manager for Nelson Residential Care Centre. Both have relevant experience in the aged care sector. The facility manager has held a dual clinical and facility management role until his recent appointment and he maintains his practising certificate, as does the general manager. |
| Standard 1.2.2: Service Management  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. | FA | The general manager described the management structure for the group. Nelson Residential Care Centre is based in Fielding where there is another facility operated by Ranfurly Manor Ltd – Ranfurly Residential Care Centre. The manager of that facility is available to assist in covering a temporary absence at the Nelson Residential Care Centre facility manager as is the Ranfurly Manor general manager. |
| 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. | FA | The general manager has developed a project plan for the opening of Nelson Residential Care Centre. This includes the recruitment and selection of staff following the Ranfurly Manor policies and procedures for human resources management. The recruitment of staff for the new facility is underway and evidence of this was reviewed in the form of the personnel file for the newly appointed facility manager, and documentation on personnel files of existing Ranfurly Manor staff who will transfer to the new facility. Transferring staff members have current competencies for the roles they hold and those they will be taking up at Nelson Residential Care Centre.  Team leaders at the existing facility in Fielding (Ranfurly Residential Care Centre) who will have an oversight role for some of the functions (laundry, housekeeping and the kitchen) were interviewed during this audit. They reported their involvement in the interviews of potential new staff members and described the process for supporting new and transferring staff members. They have set up reference folders, with task lists and guidance documents, for their new team members, and these were sighted during the audit.  A detailed programme of orientation for the existing staff who transfer, and new staff who are recruited, has been developed. This includes training in the fire evacuation plan. The facility manager has also developed the ongoing training plan for the facility. Both were reviewed with the general manager and facility manager. They demonstrated their understanding of the requirements of these standards and the contracts during the interview. The Orientation and induction programme is clearly documented to occur prior to the facility being opened.  The new facility manager’s annual practising certificate has been validated during the recruitment process, and the system for this will be implemented as other staff with professional registrations are appointed. Ranfurly Manor’s systems for recording and monitoring training attendance will be implemented at Nelson Residential Care Centre. The administration staff member to be appointed for Nelson Residential Care Centre will report directly to the administration manager who is based at Ranfurly Residential Care Centre. There is a specific orientation for the administration role which includes the tracking of training attendance. |
| Standard 1.2.8: Service Provider Availability  Consumers receive timely, appropriate, and safe service from suitably qualified/skilled and/or experienced service providers. | FA | Ranfurly Manor Ltd has a documented process for the development of rosters and allocation of care staff members, housekeeping, kitchen staff and all other staff and management required for the safe provision of care at Nelson Residential Care Centre.  The general manager interviewed described the plans for recruitment of staff for Nelson Residential Care Centre. A small number of staff are transferring from the other facility in Fielding. The majority of positions will be filled through new appointments, either before the facility opens or as resident numbers increase. For example, a caregiver was interviewed who currently works at the existing facility - Ranfurly Residential Care Centre – who will transfer to the night shift at Nelson Residential Care Centre.  The general manager has developed a roster for the first weeks after opening based on the organisation’s safe staffing procedure. The roster is based on having up to 20 residents in the service. Registered nursing hours will initially be provided by the facility manager and a senior registered nurse from Ranfurly Residential Care Centre who will work two eight hour shifts a week at Nelson Residential Care Centre. Once resident numbers increase and registered nurses can be recruited, the facility manager will decrease his hours as a registered nurse, other than being part of the ‘on-call’ roster after hours.  Recruitment for staff members is well underway and this was confirmed through interviews with the general manager and the team leaders (see standard 1.2.7), and the project plan. On the day of the audit the facility was not yet open and no residents were receiving services. |
| Standard 1.3.12: Medicine Management  Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines. | FA | Ranfurly Manor Limited has a medicine management system in its documented policies and procedures which complies with legislation. This system will be implemented at Nelson Residential Care Centre. Once appointed, all staff who will be involved in the administration of medicines will be trained and their competency assessed using the existing process for this. The Ranfurly Residential Care Centre care manager was interviewed during the audit and described the system for medication management and medication competency assessment. The system was reviewed at the Ranfurly facility and will be implemented at Nelson Residential Care Centre. During the review of this system the competency for transferring staff members was checked and confirmed.  Self-administration of medicines by residents is included in the organisation’s policies and procedures. The MediMap electronic medicine record keeping system is to be used at the Nelson Street facility, as it is at the other two Ranfurly Manor facilities. The care manager will provide clinical oversight and support to Nelson Residential Care Centre. The new facility manager has used the MediMap system in his previous role as nurse manager at an aged care facility of a similar size to Nelson Street. |
| Standard 1.3.13: Nutrition, Safe Food, And Fluid Management  A consumer's individual food, fluids and nutritional needs are met where this service is a component of service delivery. | FA | Residents will have their individual nutritional needs met following the Ranfurly Manor processes. The Kitchen team leader from Ranfurly Residential Care Centre was interviewed during the audit. She is an experienced chef and understands the organisation’s systems, these standards and the contract requirements. The Food Control Plans for both Fielding facilities have been submitted and approved by the local council and the team leader was involved in this process.  Menu plans were available for review and these are consistent with those approved by the dietitian in May 2015. The next review is already scheduled for May 2017. During the interview the kitchen team leader outlined the orientation programme she has set up for the newly appointed chef at Nelson Residential Care Centre and support and oversight she will be providing to them. This has been documented in a formal plan (sighted). As noted previously there will be formal management monitoring of all services at the new facility when it first opens.  The kitchen is completely new and this includes the food storage (chiller, fridge, freezer and pantry/storage). The kitchen team leader reported that she was involved in the design and that she is satisfied with the result. |
| Standard 1.4.1: Management Of Waste And Hazardous Substances  Consumers, visitors, and service providers are protected from harm as a result of exposure to waste, infectious or hazardous substances, generated during service delivery. | FA | Ranfurly Manor Ltd has the required policies and procedures for the management of waste and hazardous substances. These policies and procedures were current at the time of the audit.  A detailed orientation and on-going training programme has been developed for all staff of Nelson Residential Care Centre. This includes procedures for waste / hazardous substance management.  The team leaders for the laundry and housekeeping have prepared task lists, reference material and guidance documents for their new team members and relevant information is included to direct them to the organisation’s procedures. This was sighted during the tour of the new facility and during interview with the team leaders. |
| Standard 1.4.2: Facility Specifications  Consumers are provided with an appropriate, accessible physical environment and facilities that are fit for their purpose. | PA Negligible | Nelson Residential Care Centre has been completely refurbished. All floorings and furnishings have been renewed throughout. The décor is contemporary and the design is purpose specific.  The facility promotes safety and independence of residents with an accessible physical environment. Corridors are wide and there are handrails throughout. Internally the facility is on one level. Communal areas are spacious and inviting and can accommodate large numbers of residents. Furnishings used in the refit are stain and odour resistant (furniture and carpets), non-slip (linoleum in all bathrooms, toilets, kitchen and laundry) and there is low rolling resistance flooring of various types.  External areas are accessible with ramps of an appropriate gradient and adjacent handrails. There is shaded outside seating outside and shade sails/ shaded areas around the facility and gardens. |
| 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 toilets / showers / bathing facilities within the facility.  Twelve bedrooms share a bathroom ensuite between two bedrooms and one bedroom has a bathroom ensuite which is not shared. There are six additional showers throughout the facility for the use of residents in the other 36 bedrooms.  The residents in these 36 bedrooms have a combination of ensuite toilets (19 bedrooms) with the remaining 17 using the six additional toilets throughout the facility.  There are two toilets, one for the staff members (adjacent to the meeting room) and one for the visitors (disability access). |
| 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 | All bedrooms have been completely refurbished and are of differing configurations and orientation depending on their location in the facility. Some rooms have doors which open directly onto the garden courtyards, which are secure and have no access to the outside of the facility.  Each bedroom has a built in wardrobe and vanity unit. Those bedrooms which do not have an ensuite (toilet or bathroom) have a wash hand basin in the vanity unit.  Rooms are appropriate for the provision of rest home level care and of a sufficient size to allow the resident to move freely about their room. |
| 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 | A range of communal areas for entertainment, recreation and dining are provided. There are two large and spacious lounge rooms, one of which can be used for activities and events. Both have easy access to external areas and can be used in warmer weather to extend these communal areas if desired.  There are several other small alcoves / recesses around the facility where chairs will be placed so that one or two residents can sit and read or talk quietly if they choose. These areas are adjacent to larger windows, areas of morning or afternoon sun / shade and provide additional choice for people to use them as they wish to. |
| 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 | The team leaders from for the laundry and housekeeping were interviewed during the audit. They are involved in the recruitment of the staff who will be working at Nelson Residential Care Centre. One of the two laundry staff members has been appointed and there is an interviewed scheduled for a housekeeping team member.  The two team leaders described the oversight they will provide in addition to the orientation programme new staff will attend. This will comprise working alongside the new staff members for a minimum of three days when Nelson Residential Care Centre first opens or until they are comfortable in their role, weekly meetings, and completion of the monthly quality check forms which are part of the Ranfurly Manor policies and procedures.  Both team leaders have prepared a folder with tasks lists and other reference information for the new staff members (see standard 1.4.1). These were sighted in place during the tour of the new facility, and reviewed with the team leaders during the interview. |
| Standard 1.4.7: Essential, Emergency, And Security Systems  Consumers receive an appropriate and timely response during emergency and security situations. | FA | The Ranfurly Manor Emergency Response Plan template has been used to create the plan for Nelson Residential Care Centre. The document is complete and other than staff training the plan has been completed. Food supplies will be purchased immediately before residents move in. The chef and team leader – kitchen services who is based at Ranfurly Residential Care Centre described her responsibilities for arranging this prior to opening.  The Fire Evacuation Plan has been approved by the Fire Service on 17 January 2017 and this was sighted during the audit. Fire suppression equipment has been installed and is operational.  There are alternative utilities in the event of main supplies failing. This includes a 2000 litre water storage tank and alternative arrangements for cooking and lighting.  The call bell system has been installed and is operational. It was being trialled during the onsite audit and is functional. Security arrangements for the facility are appropriate for the services being provided. |
| Standard 1.4.8: Natural Light, Ventilation, And Heating  Consumers are provided with adequate natural light, safe ventilation, and an environment that is maintained at a safe and comfortable temperature. | FA | The refurbishment of the facility has maximised the light and sunshine given the aspect of the site. All rooms, particularly bedrooms and communal rooms have large windows, at a normal height which allow natural light and a view of the gardens and outside environment.  Each bedroom has at least one opening window. All windows have new curtains which cover the windows generously and provide shade when needed.  There is gas central heating system throughout the facility provided by large wall mounted heaters which disperse the heat safely. |
| Standard 3.1: Infection control management  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. | FA | Nelson Residential Care Centre will implement their own infection prevention and control programme which is based on the Ranfurly Manor Infection Control policies and procedures. The policies and programme clearly describe the roles and responsibilities for all staff and for the infection control coordinator. It has been reviewed within the last 12 months and was current at the time of this audit.  Staff members will be provided with training in infection prevention and control and this is included in the orientation and the ongoing training programme reviewed with the general manager and facility manager during this audit. The team leaders and the care manager interviewed demonstrated their understanding of these practices.  The infection control coordinator from Ranfurly Residential Care Centre will provide oversight of the programme as part of her role. She will initially be based at the facility for two days a week as a registered nurse. The management and reporting structure described by the general manager will enable monitoring of the infection prevention and control programme. |

# 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.

|  |  |  |  |  |
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| **Criterion with desired outcome** | **Attainment Rating** | **Audit Evidence** | **Audit Finding** | **Corrective action required and timeframe for completion (days)** |
| Criterion 1.4.2.1  All buildings, plant, and equipment comply with legislation. | PA Low | Nelson Residential Care Centre has been refurbished and upgraded. The facility has been relined and repainted throughout. New furniture which is appropriate for proposed residents has been purchased. Bedrooms have built in wardrobes and new beds and mattresses. | Some minor building details are yet to be finalised before the Certificate of Public Use (CPU) can be issued. | A CPU is issued prior to occupation of the building.  Prior to occupancy days |

# 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, these 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.