

# The Village Palms Retirement Village Limited - The Village Palms

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## 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](#).

**Legal entity:** The Village Palms Retirement Village Limited

**Premises audited:** The Village Palms

**Services audited:** Hospital services - Medical services; Hospital services - Geriatric services (excl. psychogeriatric); Rest home care (excluding dementia care)

**Dates of audit:** Start date: 2 October 2017 End date: 2 October 2017

**Proposed changes to current services (if any):** This partial provisional audit was undertaken for a newly built 102 bed retirement village where aged care rest home and hospital services are to be provided.

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

# Executive summary of the audit

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## 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

The Village Palms is a new modern purpose built 102 room aged care facility in the suburb of Shirley, Christchurch. This facility replaces a previously damaged rest home facility that was demolished after the 2011 Christchurch earthquake. The 'ageing in place' philosophy sits behind the options available for prospective residents in this facility. Such options include occupancy under occupational right agreements in apartments or studio units and continuing to receive rest home and hospital level care, or subsidised rest home or hospital care, depending on needs assessment outcomes.

A partial provisional audit against the Health and Disability Services Standards was undertaken and confirms that the facility is suitable for the provision of 34 rest home (excluding dementia) and 68 dual purpose beds offering rest home and hospital services.

Verification that the standard has been met is still required for ten areas of the standard. Nine of these are required prior to occupancy and include evidence of the qualifications/registration of health professionals, the employment of suitable service providers, the orientation of new employees, a staffing transition plan, medicine management policies and procedures that reflect use of the intended system, staff demonstrating competence in medicine management, a Certificate of Public Use and Code

Compliance Certificate, an approved fire evacuation plan and evidence staff have undertaken training in emergency management and fire safety. The tenth is the need for a strategic plan that identifies the purpose, values, scope, direction and goals of the organisation.

## **Consumer rights**

Not applicable to this audit.

## **Organisational management**

The owners of The Village Palms currently own two other aged care facilities and have owned and managed other such facilities prior to these. A regional manager who is responsible for management of the owner's current facilities has been managing aspects of the setting up of The Village Palms. A replacement manager has been appointed, as has her deputy, who is to be the clinical nurse manager. Both managers are suitably qualified and experienced.

Policies and procedures have been developed by a quality consultant who is responsible for their control, their updates and their suitability for the service. These documents are aligned with current good practice. The quality consultant also provides the framework for the service provider's quality and risk management system and enables them to have access to national benchmarking data from a range of other aged care facilities.

Employment processes for new staff for the facility have commenced. Planning is underway for a three-day orientation of the new staff and a training schedule going forward to the end of 2018 has been developed.

A verbal report of how the facility will be staffed when it opens was provided. This compliments the organisation's service provider and skill mix policy and procedure.

## **Continuum of service delivery**

Each stage of service provision, including assessment, planning, evaluation, review and exit will be undertaken by registered nurses, as currently occurs within the owner's other facilities. Likewise, service delivery will be undertaken by accessing other services and organisations as is currently occurring elsewhere.

Medicine storage areas are safe and relevant policies and procedures surrounding their management have been implemented. An electronic medicine management system has been contracted for use.

Nutrition assessment tools as in the organisational documents are intended to be used to ensure residents' needs are met. A new and modern kitchen has been installed. The four-week rotating menus with seasonal variations that are to be used have been approved by a dietitian as nutritionally suitable for older persons.

## **Safe and appropriate environment**

The owners have consulted with the architects and used their previous and current experiences to contribute to the design of this purpose-built facility. Waste management, gardening and ongoing maintenance are to be undertaken by private contractors. The hard landscaping has been finished and demonstrates safety considerations have been taken into account with level surfaces, gates to service areas and a safe paved courtyard. Internal areas demonstrate the different safety needs of the prospective residents have been taken into account in the design, the materials used and the equipment provided.

Residents' bedrooms are large enough to enable mobility aids to be used within them, all have an ensuite. Bathroom areas are all wheelchair accessible. Communal areas are spacious and smaller family/whanau spaces and rooms of different configurations are available.

An on-site laundry has been installed, in addition to individual laundries in the downstairs apartment/rest home rooms. The monitoring of cleaning and laundry is noted within the documents for the internal audits of the quality system.

External and internal security systems have been installed, a sophisticated call bell system is in place and fire evacuation plans and systems established.

All residents' rooms and communal areas have windows that can be opened. Underfloor heating, with thermostats in each room and different areas of the building, has been installed.

## **Restraint minimisation and safe practice**

Not applicable to this audit.

## **Infection prevention and control**

Suitable infection prevention and control policies and procedures are available for this facility. These include details of the infection control programme and whose responsibility it will be to implement it. The manager described ways in which the potential spread of infection will be managed.

## 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)
<b>Standards</b>	0	9	0	5	1	0	0
<b>Criteria</b>	0	23	0	10	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)
<b>Standards</b>	0	0	0	0	0
<b>Criteria</b>	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 Low</p>	<p>One of the owners described the organisational structure and the intended operations of this service. The Village Palms is owned by a husband and wife couple. A Board of Directors operating as the Aria Retirement Villages Management Limited is the governance unit for this facility, plus two other aged care facilities. One of these is in Christchurch and the other in an outlying town in Canterbury. Although the purpose, values, scope, direction, and goals of the organisation were discussed throughout the audit and during interviews, a documented copy demonstrating they had been clearly identified was not available and nor was a strategic plan describing these. A quality and risk plan was sighted within the documentation provided.</p> <p>This new facility has been purpose built and information obtained from the owners' previous experiences contributed to its designs and the planning of its operations going forward. A regional manager for the owners' other two facilities has been assisting with the establishment of The Village Palms, including liaising with contractors, ordering equipment and interviewing prospective staff. One of the owners and the current manager, who will be referred to as the manager, were interviewed. The appointed future manager was not available.</p> <p>With both owner and manager having extensive past and current experience within the aged care sector, they have a good understanding of the expectations and</p>

		<p>requirements for the services to be delivered at The Village Palms and of the Aged Related Residential Care Agreement (ARRC). During interview they expressed familiarity with consumer rights, which according to the curriculum vitae of the appointed facility and clinical nurse managers, they are also familiar with. The funders have been notified and there are no known legislative compliance issues that could affect the service. Details of contracts were not available for the audit. Other comments arising from the interviews are noted throughout the report. Corrective actions have been stated as low risk as most require a response prior to occupancy.</p> <p>This was a partial provisional audit and The Village Palms has not yet opened, therefore the quality and risk systems that are described in the organisation's policies and procedure are not yet operational. The regional manager explained how the organisational policy and procedure documents are administered by a quality consultant, who is responsible, in consultation with the facility management, for ensuring they are updated as required. A document control policy and procedure confirms this. Evidence of the contract between the quality consultant and the management of The Village Palms was sighted. It describes the responsibilities of each party, including how the documents can be accessed and who may have access to them. Documents sighted were all controlled, are aligned with current good practice, meet the requirements of the Health and Disability Services standards and are applicable for aged care services. The quality plan includes schedules for internal audits.</p> <p>The Village Palms is a 102 bed facility. Downstairs, there are 32 one-bedroom apartments and two studio units that will be occupied under occupational right agreements. These apartments/units were reviewed during the audit and meet the requirements for rest home level care residents. Upstairs there are eight studio apartments and two care suites that will also be available under occupational right agreements. When assessed during the audit, these studios/care suites were considered to be of suitable size, suitably equipped and within sufficient proximity to nursing staff for the occupants to be provided with rest home or hospital level care. The remaining 48 upstairs rooms are also suitable to be used as dual purpose beds where residents requiring rest home or hospital level care may be supported. There are no dementia beds included in these numbers. The owner and manager noted that the residents requiring the more advanced care would be positioned closest to the nurses' station, which due to the size of the facility is an important consideration.</p>
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<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>	<p>FA</p>	<p>A clinical services manager has been appointed and the current manager and owner both stated that the appointee will relieve in the event of the manager being absent. The owner, who also has long-term management experience within the sector, informed she will oversee the clinical manager when this occurs. The curriculum vitae of the appointed clinical services manager are comprehensive and indicate that the person has the relevant skills and experience for her role, which is confirmed by information provided by the referees.</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>	<p>PA Moderate</p>	<p>The owner and current manager stated during interview that similar staffing systems to those being used at their other two facilities will be used for the prospective residents at The Village Palms. Caregivers and auxiliary staff will be trained and all service provision will be overseen by registered nurses, a part time physiotherapist will be available, as will other allied health, including podiatry and dietitian, for example. Local doctors have already been spoken with, as has a local pharmacist. Where necessary and applicable, service providers used by the other Christchurch facility will be shared.</p> <p>Human resources policies and procedures cover the recruitment and appointment processes for new staff, the validation of health professional registrations, induction and orientation processes and the ongoing training of staff. Progress is underway, however to date the owner and current manager have not been able to complete the appointment processes for all staff members required for the opening of the new facility, The Village Palms. The validation of professional qualifications has still to occur as have the orientation and induction processes.</p> <p>A training schedule for 2017 – 2018 was provided and covers the requirements of the Aged Related Residential Care Agreement. As the owner and current manager organising the opening of The Village Palms co-own and co-manage two other regional aged care facilities, there are strong links to suitable competent people able to provide training on the topics in the training schedule.</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>A service provider and skill mix policy and procedure was sighted. This covers the factors that will be considered when assessing the type and number of staff for the facility including acuity, occupancy, culture and availability of suitable staff, for example. The owner described the planned processes for staffing The Village Palms when it opens in late October 2017. Plans include that the additional casual staff</p>

		that have been progressively employed at the owner's other retirement village will be transferred to The Village Palms to make up staff numbers. It was reported by the manager that a named nursing agency has been advised that caregivers will be needed in the short term as the numbers of residents increase at The Village Palms. Documentation confirming these processes will ensure safe service delivery was not available on the day of the partial provisional audit.
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.	PA Low	The medicine room was sighted and demonstrates a locked medicine trolley and locked cupboards sit within a locked dedicated medicine room. This is only accessible from the nurses' station, which also has a key pad lock in situ. An order for a safe storage metal medicine cabinet was sighted. A signed agreement for an electronic medicine administration/management system was provided; however, the medicine management policies and procedures reflect a paper medicine chart system. Staff employment and orientation processes are as yet incomplete; therefore the level of staff competency was not available. These issues have therefore been raised for corrective action. As there are not yet any residents, criteria 1.3.12.5 and 1.3.12.6 relating to self-medication and medicine information were not able to be audited.
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	Policies and procedures for this facility include the nutritional assessment forms that are to be used to enable staff to ascertain the food, fluid and nutritional needs of the residents. The four-week rotating summer and winter menus, which are currently in use in another of the owners' facilities, are to be used at The Village Palms. These were sighted and have been reviewed and approved by a registered dietitian, July 2017. A qualified chef has been employed to work Monday to Thursday and a second cook for Friday to Saturday. Evidence of the employment of kitchen hands being underway was sighted.  High functioning modern commercial kitchen equipment has been installed in what is a pristine and new kitchen environment. There is not yet any food being stored on site. The kitchen is attached to the main downstairs dining room and there is a smaller kitchen upstairs where a bain-marie was sighted. Food is to be transported in a hot box from downstairs to the bain-marie upstairs. In the downstairs dining area, a hot drink dispenser is in place, as is a cold drinks fridge. Muffins, rolls and cakes will be self-service throughout the day. A separate fully equipped bar has been built for

		resident and visitor use.
<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>	FA	<p>Documented processes for the management of waste and hazardous substances were sighted and meet requirements. Records sighted confirmed a private contractor has been contracted to provide these services and skips were to be delivered on the afternoon of the audit visit. The systems to be used are the same as at another of the owners' facilities and these had been reviewed only a few weeks earlier. The site for these skips is suitable and not accessible to residents. Confirmation of the order of personal protective equipment was reported and evidence of storage of this was sighted. Modern equipment has been installed on the three sluice rooms throughout the building.</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>	PA Low	<p>Gas connections have been checked, as have fire prevention and management systems. A Code Compliance Certificate and a Certificate of Public Use have yet to be issued and electrical checks of equipment have yet to be completed. Evidence of suitable medical equipment having been purchased, including a weighing unit for a hoist and seating weighing scales, was sighted. All such items are new. A certificate of safety for the piped oxygen going into some of the hospital rooms was sighted. Electrically operated beds have been set up and equipment such as hand sanitiser units was being installed on the day of audit. Paintings have been mounted and televisions installed; however, the remaining furniture is due 12 October, therefore has yet to arrive.</p> <p>The main nurses' station is upstairs and close to where hospital level services are to be provided. This overlooks the lounge, a section of the dining area and enables staff to see people coming out of the lifts. A second nurses' station and the facility manager's office is downstairs.</p> <p>The physical environment showed consideration for staff and resident safety, had been made with non-slip surfaces, handrails in situ, switches and alarm buttons within reach, easy to clean surfaces and clean lines around the building. Non-slip vinyl and wooden floors had been installed in relevant areas, such as bathrooms and dining rooms respectively. Carpet was on the floors in the apartment/rest home areas and in lounge and hallway areas. Although not all of the landscaping had been completed by the time of audit, the external area was sufficiently finished to demonstrate it was safe. Exposed aggregate paths had been installed, metal fences</p>

		were in place and gates will prevent residents from entering service areas. There were no steps or uneven surfaces in resident accessible areas. All entries/exits to the facility have level surfaces. A paved internal courtyard with a fountain and special interest features has a sheltered barbecue area on the side.
<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	In addition to visitor toilets and to communal toilets near the communal dining and lounge areas on both floors, all residents' rooms, including apartments, have an ensuite. These are of sufficient size to enable a toilet chair to be manoeuvred within them. Ensuites of suitable size for use of a bath trolley in them were evident in two of the rooms viewed. Handrails beside toilets and showers have been installed as have sensor fans and lighting.
<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	Rooms are various sizes, however even the smaller ones throughout the facility were of a generous size. The apartments/potential rest home care bedrooms are well appointed and are of sufficient size for a queen or king bed and mobility equipment. In the upstairs areas where dual purpose beds are intended, all rooms were of suitable size for equipment that might be needed for hospital level care. Ceiling mounted hoists are in situ in 20 beds nearest the nurses' station on the first floor.
<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	Large communal areas for dining are on both floors of the building. Adjoining lounges are of sufficient size to enable television viewing in one area and relaxing environments in others. Three smaller quiet sitting areas/whanau rooms are also available to residents and their family/whanau. The communal areas are in centralised areas of each floor and close to lifts between each level. A hair salon on the ground floor has an adjoining room for use as a library or sitting room that has coffee making facilities.
<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	The downstairs apartments/potential rest home rooms have their own laundries; however, they may ask staff to assist them with their personal laundry. This is considered an additional service unless they are a subsidised resident. Personal laundry is otherwise undertaken in a modern spacious laundry behind the kitchen area on the ground floor that is equipped with new laundry equipment. The clean and

		<p>dirty flow is easy to follow, laundry detergents are dispensed directly into the machines and laundry procedures are available.</p> <p>Cleaning equipment is not yet on site; however, cleaning schedules have been developed. Rooms for storing cleaning equipment are lockable and have suitable sinks in place. Safety data sheets for cleaning chemicals are available and the chemicals are attached to dispensers.</p> <p>The effectiveness of the cleaning and laundry systems is to be monitored according to the internal audit process. Evidence of their inclusion on the schedule, and of the internal audit tool, were sighted.</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 owner and current manager informed that emergency management and fire safety will form a component of the orientation of new staff; however, service providers for The Village Palms have yet to be employed. A copy of the fire evacuation plan was sighted but this has yet to be approved by the fire service. Sprinklers and smoke alarms have been installed. The fire and smoke alarms systems were being tested on the day of the audit. Comprehensive civil defence and emergency management policies and procedures were sighted within the organisational documents.</p> <p>A civil defence kit is available, a set of emergency food has been purchased and put together and emergency water supplies are available from on-site water tanks. In addition to gas barbecues, bottled gas in the kitchen is available for cooking in the event of an emergency.</p> <p>The Vocera call and communication system has been installed and call bell alerts link directly to staff name badges and pagers. A different ring signals an emergency and the system enables staff to seek assistance from other staff when needed. There are two to three call bell buttons in each resident's room and in the ensuite bathrooms. Additional call bell buttons are in communal areas.</p> <p>Appropriate security systems are in place. All windows have safety latches, gates shut at dusk and require swipe card access after they are closed, there are security alerts attached to the perimeter fences and alarms sound when the side gate, or any external door is opened once the front doors are locked at dusk. Closed circuit cameras are operating externally at the front and back of the building and in all hallways and communal areas.</p>

<p><b>Standard 1.4.8: Natural Light, Ventilation, And Heating</b> Consumers are provided with adequate natural light, safe ventilation, and an environment that is maintained at a safe and comfortable temperature.</p>	<p>FA</p>	<p>All residents' rooms and communal areas have large windows. The smaller windows in all rooms and areas are openable and have security stays on them. A balcony above the courtyard at one end of the first floor has concertina windows and opens fully. Suitable security features have been installed.</p> <p>All areas of the facility have underfloor heating that can be thermostatically controlled room by room and area by area.</p>
<p><b>Standard 3.1: Infection control management</b> 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>Infection prevention and control policies and procedures have been supplied by a healthcare quality consultant and are relevant for this service. A national benchmarking process will be available to The Village Palms. These documents clearly describe the clear lines of accountability for infection prevention and control. The clinical nurse manager has been allocated as the person who will be ultimately responsible for implementation of the infection control programme, which is detailed in the related documents. The current manager overseeing the opening process of this facility noted that the basic principles of infection prevention and control will be used to prevent the spread of infections. Examples provided were staff education, asking visitors not to come if they are unwell, staff being discouraged from going into work when unwell, placing a sign on the door during the high-risk season or if people in the facility have specific infections, isolation techniques when indicated and ongoing monitoring and surveillance.</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 1.2.1.1</p> <p>The purpose, values, scope, direction, and goals of the organisation are clearly identified and regularly reviewed.</p>	PA Low	The owner and the current manager discussed the purpose, values, scope, direction, and goals of The Village Palms, which have strong similarities to those of their other two facilities. However, documentation about these was not available. Similarly, the strategic directions for The Village Palms were discussed; although a strategic plan was also not available.	A strategic plan was not available and nor was there documentation available that describes the purpose, values, scope, direction, and goals of the organisation.	<p>A strategic plan is available and the purpose, values, scope, direction, and goals of the organisation are clearly identified.</p> <p>60 days</p>
<p>Criterion 1.2.7.2</p> <p>Professional qualifications are validated, including evidence of registration and scope of practice</p>	PA Low	The owner and the manager responsible for the opening of The Village Palms spoke of the employment processes for registered nurses, the use of local	Validation of the scope, qualifications and current registration of health professionals who will work at The Village Palms was not	Professional qualifications, registrations and scope of practice of health professionals are validated

for service providers.		GPs, a podiatrist, a physiotherapist and of a pharmacist. There was no validation of the scope, qualifications and registrations of these health professionals.	available.	Prior to occupancy days
<p>Criterion 1.2.7.3</p> <p>The appointment of appropriate service providers to safely meet the needs of consumers.</p>	PA Low	<p>Policies and procedures on the recruitment and employment processes for the facility were sighted. The owner and current manager of The Village Palms described the advertising process for new staff and where they had got to regarding the employment processes. Such processes were evident in documentation for the future facility manager and the clinical nurse manager. Progress with the employment of other staff, including support workers, is continuing; however by the time of audit there was still insufficient evidence of sufficient and appropriate service providers being available to safely meet the needs of consumers.</p>	<p>There was a lack of evidence that appropriate service providers that will safely meet the needs of residents have been appointed.</p>	<p>Ensure that appropriate service providers that will safely meet the needs of the future residents are appointed.</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 essential components of the service provided.</p>	PA Low	<p>A policy and procedure for the ongoing orientation of new staff was sighted. The owner and the manager responsible for the opening of The Village Palms described the intention of providing a three-day orientation for prospective employees prior to the</p>	<p>Details of the planned orientation/induction for new staff at The Village Palms were unavailable and the planned orientation had not occurred prior to the audit.</p>	<p>New staff for all roles at The Village Palms Retirement Village require an orientation/induction process that covers the essential components of the services to be provided.</p>

		opening of the facility. This has not yet occurred and nor were details of its content available.		Prior to occupancy days
<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>	PA Low	<p>A service provider and skill mix policy that will apply once the service is established was sighted. Plans in place to staff The Village Palms include the use of casual staff that have been increasingly employed over the past few months in another of the owners' aged care facilities. A local nursing agency has also been asked to supply staff as required. There is no documentation to describe how this will occur, nor how staffing levels will be managed as resident numbers increase.</p>	<p>A documented process around how The Village Palms will be staffed when it opens, and a transition plan of how service provider levels will be managed as the number of residents increase, was not available at the time of this partial provisional audit.</p>	<p>Ensure there is a clearly documented process and transition plan, which details service provider levels and skill mixes that will enable safe service delivery for residents when the facility opens and as resident numbers increase.</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>	PA Low	<p>Safe storage areas for medicines were viewed and the manager and owner were fully aware of the requirements for safe medicine management. An electronic medicine management system has been contracted. Aspects of medicine management, such as reconciliation, reviews and administration for example, were not able to be assessed as there are not yet any residents. Policies and procedures relating to the wider medicine management systems for when the service is</p>	<p>The medicine management policies and procedures that were provided did not reflect the planned electronic medicine management system.</p>	<p>Medicine management policies and procedures reflect the intended practices, such as use of an electronic medication system.</p> <p>Prior to occupancy days</p>

		operational were available, although these did not reflect the electronic system.		
<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>	PA Low	<p>The employment of registered nurses and medicine competent caregivers has yet to be completed. Medicine competencies are to be a component of a three-day orientation programme that is planned for these staff. Other plans in place include the use of medicine competent staff from another facility when The Village Palms initially opens. At this partial provisional audit, it was not possible to see the records of these specific staff confirming their medicine management competencies.</p>	<p>Evidence of staff having medicine management competencies was not available for the partial provisional audit.</p>	<p>Provide evidence that service providers who will be responsible for medicine management at The Village Palms are medicine management competent.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.4.2.1</p> <p>All buildings, plant, and equipment comply with legislation.</p>	PA Low	<p>A range of checks have been completed by local city council inspectors and by other authorities including the fire-fighting system engineers. It was reported to be too early for the Certificate of Public Use, or the Code Compliance Certificate to be issued. There was no evidence that electrical appliance checks had been completed.</p>	<p>Neither a Certificate of Public Use nor a Code Compliance Certificate was available at the time of audit. Testing and tagging of electrical equipment has not been completed.</p>	<p>A Certificate of Public Use and Code Compliance Certificate is required prior to occupation. Electrical equipment requires checking by the relevant authority.</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>	<p>PA Low</p>	<p>As the future service providers for The Village Palms have not been employed there has not been any emergency management and fire safety training completed.</p>	<p>Service providers for The Village Palms have not yet undertaken training in fire safety and emergency management.</p>	<p>Service providers will receive appropriate information and training on emergency management and fire safety procedures.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.4.7.3</p> <p>Where required by legislation there is an approved evacuation plan.</p>	<p>PA Low</p>	<p>A copy of the fire evacuation plan that was developed in consultation with fire engineers and has been provided to the fire service was sighted. Fire service approval has yet to be received.</p>	<p>An approved fire evacuation plan was not available at the time of the partial provisional audit.</p>	<p>A fire evacuation plan that has been approved by the fire service is available.</p> <p>Prior to occupancy days</p>

## Specific results for criterion where a continuous improvement has been recorded

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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
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End of the report.