

Summerset Care Limited - Summerset at the Course

Introduction

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

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

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

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

The specifics of this audit included:

Legal entity: Summerset Care Limited

Premises audited: Summerset at the Course

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

Dates of audit: Start date: 10 August 2018 End date: 10 August 2018

Proposed changes to current services (if any): The service has built 20 new serviced apartments (LTO), assessed as suitable to provide rest home level care. The number of residents that the service can provide rest home level care for in serviced apartments does not change (up to 20 rest home residents). However, the total number of serviced apartment beds suitable for rest home level will be 40 (across the two 20 bed serviced apartment buildings). Opening of the additional serviced apartments is scheduled for 1

September 2018. One sunroom in the care centre has been renovated and was verified as suitable as a dual-purpose resident room. This brings the total of dual-purpose care centre rooms to 43.

Total beds occupied across all premises included in the audit on the first day of the audit: 46

Executive summary of the audit

Introduction

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

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

General overview of the audit

Summerset at the Course is a retirement village complex. The care centre currently provides rest home and hospital level of care for up to 42 residents. There are currently 20 serviced apartments certified for rest home level of care.

This partial provisional audit was completed to assess a further new purpose-built apartment block of 20 serviced apartments and a lounge/dining area with a new nurses' station/base as suitable to be used for rest home level care. This audit also included verifying one extra room in the care centre (was previously a sunroom which has been renovated) as suitable for rest home or hospital level of care. This will bring the total care centre beds up to 43.

The care centre and 40 serviced apartments are all one level. The number of residents that the service can provide rest home level care for across the 40 serviced apartments will not change (up to 20 rest home residents). The service plans to open the new 20 serviced apartments on 1 September 2018.

The service has a village manager (non-clinical) who has been in the role for the last two and a half years. He is supported by an experienced care centre manager.

The previous certification audit finding regarding interventions has been addressed.

This partial provisional audit identified improvements required including completion of the building and obtain a certificate for public use, fire drill and an operational call bell system.

Consumer rights

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Organisational management

Summerset group have in place annual planning and comprehensive policies/procedures to provide rest home and hospital level care. Policies and procedures are developed by senior managers, who provide regular updates and reviews. The newly built 20-bed serviced apartments are appropriate for providing rest home services and in meeting the needs of residents.

The organisation provides documented job descriptions for all positions, which detail each position's responsibilities, accountabilities and authorities. Organisational human resource policies are implemented for recruitment, selection and appointment of staff. The organisation has an induction/orientation programme, which includes packages specifically tailored to the position such as caregivers, registered nurses and cleaners. Interviews are currently in progress for staff to fulfil the roster and orientation including a fire drill is scheduled to be completed prior to occupancy.

There is a policy for determining staffing levels and skill mixes for safe service delivery. This defines staffing ratios to residents and a draft roster has been developed and adjustable depending on resident numbers. There is a planned transition around the opening of the serviced apartments.

Continuum of service delivery

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

The facility has a workable kitchen located in the care centre. Food is to be transported in hotbox food carriers to the serviced apartment dining room. The service has an organisational process whereby all residents have a nutritional profile completed on admission, and this is provided to the kitchen. All aspects of the food service are provided by a contracted company.

Safe and appropriate environment

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

The provider has purchased all necessary furniture and equipment. Fixtures, fittings and floor and wall surfaces in bathrooms and toilets are made of accepted materials for this environment. Serviced apartment bedrooms are of sufficient space to ensure care and support to all residents and for the safe use of mobility aids.

Communal areas are well designed and spacious.

Summerset has housekeeping and laundry policies and procedures in place. There is a laundry in the care centre with clean and dirty flow for the delivery of dirty linen from the serviced apartments and receiving of clean linen. There is a domestic laundry in the serviced apartments for independent residents. The facility has secure areas for the storage of cleaning and laundry chemicals. Laundry and cleaning processes will be monitored for effectiveness.

The emergency and disaster management policies include (but not limited to); dealing with emergencies, fire, flood, civil defence and disasters. Communal areas and serviced apartments are appropriately heated and ventilated with adequate natural light.

Restraint minimisation and safe practice

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Infection prevention and control

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

Summary of attainment

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

Attainment Rating	Continuous Improvement (CI)	Fully Attained (FA)	Partially Attained Negligible Risk (PA Negligible)	Partially Attained Low Risk (PA Low)	Partially Attained Moderate Risk (PA Moderate)	Partially Attained High Risk (PA High)	Partially Attained Critical Risk (PA Critical)
Standards	0	13	0	3	0	0	0
Criteria	0	32	0	4	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
<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>FA</p>	<p>Summerset at the Course provides rest home and hospital level of care in the care centre for up to 42 residents and up to 20 rest home level of care in existing 20-bed serviced apartment block. On the day of audit there were 46 residents. There were 17 rest home residents (including two village respite care residents) and 26 hospital level of care residents (including one under 65 years of age, one under ACC and one under palliative respite care). There were three rest home level of care residents in the exiting serviced apartments.</p> <p>This partial provisional audit was completed to assess a further new purpose-built apartment block of 20 serviced apartments and a lounge/dining area with a new nurses' station/base as suitable to be used for rest home level care. Four premium apartments would be suitable for couples should they be required. This audit also included verifying one extra room in the care centre (was previously a sunroom in wing A which has been renovated) as suitable for rest home or hospital level of care. This will bring the total care centre beds up to 43 beds. HealthCERT has previously approved room 44 for conversion to a dual-purpose respite care for up to 48 hours (July 2017). The service advises this room is no longer being used.</p> <p>The care centre and 40 serviced apartments are all one level. The number of</p>

		<p>residents that the service can provide rest home level care for across the 40 serviced apartments will not change (up to 20 rest home residents). The service plans to open the new 20 serviced apartments on 1 September 2018.</p> <p>The service has a village manager (non-clinical) who has been in the role for the last two and a half years. The village manager has a background in finance management. A nurse manager with aged care experience was appointed nine months ago (away on the day of audit). The nurse manager is supported by a clinical nurse leader who has been in the role three years.</p> <p>Summerset group has a well-established organisational structure, which includes a board, chief executive officer, operations managers, national clinical/quality manager (present on the day of audit) and a national quality assurance manager. Each of the Summerset facilities throughout New Zealand is supported by this structure. The Summerset group has a comprehensive suite of policies and procedures, which guide staff in the provision of care and services.</p> <p>The 2018 Trentham business plan includes quality objectives and quality initiatives which are reviewed regularly. There is a transition plan with goals, actions, timeframes and responsibility around opening of the serviced apartments.</p> <p>Village managers and care centre managers attend annual organisational forums and regional forums over two days. The village manager has attended at least eight hours of leadership professional development relevant to the role.</p>
<p>Standard 1.2.2: Service Management</p> <p>The organisation ensures the day-to-day operation of the service is managed in an efficient and effective manner which ensures the provision of timely, appropriate, and safe services to consumers.</p>	<p>FA</p>	<p>During a temporary absence, the care centre manager will cover the village manager's role. The regional operations manager and regional quality manager provide oversight and support. The audit confirmed the service has operational management strategies and a quality improvement programme to minimise risk of unwanted events.</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</p>	<p>FA</p>	<p>Summerset has organisational documented job descriptions for all positions, which detail each position's responsibilities, accountabilities and authorities. Additional role descriptions are in place for infection control officer, restraint coordinator and health and safety officer. There are human resources policies</p>

<p>the requirements of legislation.</p>		<p>to support recruitment practices. The service has an orientation programme in place that provides new staff with relevant information for safe work practice. The orientation programme includes documented competencies and induction checklists.</p> <p>The service has policy around competencies and requirements for validating professional competencies. The village manager advised that copies of practising certificates will be obtained from newly employed qualified staff.</p> <p>The national clinical/quality manager advised that initially shifts in the serviced apartments will be worked by existing staff while newly appointed staff complete orientation in the care centre under the supervision of a mentor. The service has advertised for three caregivers, one RN and one housekeeper to fulfil the serviced apartment roster and commence interviews within the next week. All new employees will be required to complete an orientation to the care centre and serviced apartments. There are currently 10 RNs employed with four interRAI competent.</p> <p>There is a 2018 training plan being implemented which new staff will be required to attend. Advised that further training around equipment, safe chemical handling, emergency and fire training will be implemented as part of the orientation before opening.</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>FA</p>	<p>Human resource policies include documented rationale for determining staffing levels and skill mixes for safe service delivery. Summerset has a safe staffing policy which determines staffing ratios to residents and rosters have been developed and are adjustable depending on resident numbers and increase in occupancy. The draft roster (sighted) includes one caregiver on each shift for 24 hours. There will be one RN on duty 9.00 am to 5.00 pm across the serviced apartments. The care centre RN will oversee the serviced apartments after 5.00 pm – 9.00 am. The care centre and serviced apartments are all on the ground level with indoor corridors linking the areas.</p> <p>The national clinical/quality manager advised that initially shifts in the serviced apartments will be worked by existing staff while newly appointed staff complete orientation in the care centre under the supervision of a mentor. There are currently sufficient staff to cover the roster on opening. The service has advertised for additional staff to cover the 24-hour roster for the new 20 serviced apartment block. Additional staff being employed are three caregivers, one RN</p>

		<p>and housekeeping staff. Staffing numbers will increase as occupancy increases.</p> <p>There is a full-time care centre manager and clinical nurse leader who share the on-call.</p>
<p>Standard 1.3.12: Medicine Management</p> <p>Consumers receive medicines in a safe and timely manner that complies with current legislative requirements and safe practice guidelines.</p>	PA Low	<p>There is a range of medication policies that align with the MOH medication standards and guidelines for residential aged care. The service currently uses robotic sachets for the care centre and existing serviced apartment residents. An electronic medication system is being implemented in the care centre and current serviced apartments and this will continue in the new block. There is a locked medication room in the new serviced apartment building located near the nurses' station. The medication trolley has been ordered for the medication room. The treatment room in the care centre includes a drug safe and fridge.</p> <p>Medication training and competencies are to be completed at orientation for the newly employed staff for the serviced apartments. Not all current caregivers are medication competent that will initially staff the block. Locked drawers are available for those that choose to self-medicate.</p>
<p>Standard 1.3.13: Nutrition, Safe Food, And Fluid Management</p> <p>A consumer's individual food, fluids and nutritional needs are met where this service is a component of service delivery.</p>	FA	<p>Summerset has comprehensive nutritional management policies and procedures for the provision of food services for residents. The provision of meals at Summerset are contracted out to an external food company who currently provides the care centre and existing serviced apartment meals. The contracted company is responsible for kitchen staff recruitment, food service, food handling, menu, dishwashing, sanitation, and personal hygiene. The chef manager (interviewed) is supported by kitchenhands. The menu has been reviewed by the contracted company dietitian. The kitchen has recently been renovated with new shelving units and flooring. The kitchen is well equipped to cater for additional resident numbers. All meals will be plated and delivered by scan box to the serviced apartment dining room. Residents at rest home level of care may also choose to dine in their rooms or the care centre dining room. A scan box for the serviced apartments has been ordered as sighted on the equipment list and scheduled to arrive 20 August 2018 (link 1.4.2.1).</p> <p>The food control plan expires 10 April 2019. As part of the food safety programme, kitchen fridge/freezer temperatures and food temperatures are</p>

		recorded and documented. Food safety training for food services staff has been completed.
<p>Standard 1.3.6: Service Delivery/Interventions</p> <p>Consumers receive adequate and appropriate services in order to meet their assessed needs and desired outcomes.</p>	FA	<p>When a resident's condition changes, the RN initiates a review and if required a GP or nurse specialist consultation. There was documented evidence in the resident files of family notification of any changes to health including infections, accidents/incidents, and medication changes. Five files of long-term residents were reviewed (two at high risk of pressure injury, one with weight loss, one with high risk of falls and weight loss and one with identified pain). All interventions to manage the risk had been identified and documented in the long-term care plans or short-term care plans. The previous finding around interventions has been addressed.</p> <p>Adequate dressing supplies were sighted. Initial wound assessments with ongoing wound evaluations and treatment plans were in place for nine residents with wounds. There was evidence of wound nurse involvement in the management of chronic ulcers. There were no pressure injuries on the day of audit.</p> <p>Continence products are available and resident files include a urinary continence assessment, bowel management, and continence products identified for day use, night use, and other management. Specialist continence advice is available as needed.</p> <p>There are a number of monitoring forms and charts available for use including (but not limited to) pain monitoring, blood sugar levels, weight, wound evaluations, food and hydration, behaviour monitoring and bowel monitoring.</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>	FA	<p>There are documented policies and procedures for waste disposal and chemical storage. The policies document procedures for the safe and appropriate storage, management, use and control and disposal of waste and hazardous substances. There is a locked cleaner's cupboard and a separate locked sluice room in the new serviced apartments building yet to be completed (link 1.4.2.1). The chemical provider supplies chemicals, safety datasheets and products sheets and completes chemical effectiveness audits monthly in the care centre service areas.</p>

		<p>Waste management is part of the environment and equipment audit, conducted as part of the quality-assurance audit programme.</p> <p>During induction, all staff are required to complete training regarding the management of waste. Chemical safety training is a component of the compulsory two yearly training and orientation training. All new staff will complete waste management training at orientation through the employee induction programme.</p> <p>Gloves, aprons, and goggles are available to be installed in the sluice room and cleaner's cupboard in the serviced apartments. Infection control policies state specific tasks and duties for which protective equipment is to be worn.</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>PA Low</p>	<p>The care centre and existing 20 bed serviced apartments are on the ground level. The new 20 bed serviced apartments are on the ground floor and link into the care centre through two internal corridors (yet to be completed). The staff only areas are on the first level in the care centre. The 20 new serviced apartments have been verified as suitable to provide rest home level care. Four premium apartments (of the 20 new apartments) would be suitable for couples should they be required. One previous sunroom (wing A) in the care centre was verified as suitable for rest home or hospital level of care.</p> <p>The serviced apartments are in three wings: one wing of six apartments, one central wing of four apartments and one wing of ten apartments. There is an open plan lounge/dining area designed for rest home level residents in the serviced apartments at the central junction of the three wings. There is also a nurse's station in this area. There is an egress at the end of the 10 serviced apartments corridor. Each apartment has egress from their patio doors and there is a main entrance off the communal areas. The communal areas are accessible for all residents in serviced apartments and there is a caregiver on duty 24 hours to assist those who require support to attend activities in the lounge, and meals in the dining room.</p> <p>The handover date from the site foreman will be 31 August 2018 with an opening date on the 1 September 2018. All serviced apartments are spacious with one-bedroom, full ensuite, open plan lounge/dining with fully functional kitchen. There are sliding doors that open out onto a private patio. Installation of floor coverings and soft furnishing in communal areas, lounge and dining room and in the serviced apartments are not yet completed. Installation of</p>

		<p>equipment has not yet been completed for the sluice room, cleaner's cupboard, domestic laundry, nurses' station and scan box (for delivery of meals). The building is near completion and therefore a certificate of public use (or code of compliance) has not yet been obtained. All building and plant have been built to comply with legislation.</p> <p>Serviced apartment residents provide their own furnishings. Clinical equipment such as weigh scales will be accessed from the care centre. The service has a list of equipment purchased and awaiting installation. The maintenance schedule includes checking of equipment and testing and tagging of electrical equipment.</p> <p>External landscaping including a courtyard and patio gardens have been completed.</p>
<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	<p>There are 20 one-bedroom serviced apartments, each with a full spacious ensuite. Flooring is nonslip and the material used meets infection control standards and is easily cleaned. The one sunroom at the end of wing (assessed as suitable for dual-purpose level of care resident) has a separate shower room and toilet located midway down the wing. The clinical nurse leader advised a commode is also available at night if required. There is a sluice room nearby.</p>
<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	<p>Serviced apartments are spacious and allow for the safe mobility of residents with the use of mobility aids. Four premium apartments (of the 20 new apartments) would be suitable for couples should they be required. Mobility aids can be managed in the ensuites. The previous sunroom verified as suitable for dual purpose level of care has sufficient space for the use of mobility aids including a hoist.</p>
<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 communal dining room and lounge in the serviced apartments. There is also another dining and lounge area available to rest home residents in serviced apartments within the care centre. The corridor link fire doors will be open during the day providing free access to all communal areas within the care facility (link 1.4.2.1).</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>	<p>FA</p>	<p>There are policies for cleaning and infection prevention and linen handling and processing. These policies ensure that all cleaning and laundry services are maintained and functional at all times. The laundry is in the service area of the care centre. The laundry is large and well equipped to accommodate additional linen and personal clothing of residents at rest home level of care in the serviced apartments. Dirty laundry will be transported in linen skips via an external pathway to the main laundry external door. Clean laundry will be returned through the internal corridor to the serviced apartments. There is a central domestic laundry for serviced apartment residents use. Will have a commercial washing machine and dryer. An external company is contracted to provide chemicals for the service and monitor the effectiveness of the laundry and cleaning processes. There is a separate locked cleaners' cupboard in the serviced apartments. Equipment is yet to be installed including a chemical mixing dispenser for cleaning products (link 1.4.2.1).</p> <p>Material safety datasheets will be provided by the contracted company and to be displayed in the cleaning cupboards, laundry and sluices in each area. The laundry and cleaning areas have hand-washing facilities.</p>
<p>Standard 1.4.7: Essential, Emergency, And Security Systems</p> <p>Consumers receive an appropriate and timely response during emergency and security situations.</p>	<p>PA Low</p>	<p>The site-specific emergency manual for Summerset at the Course contains the emergency and disaster policies and procedures including (but not limited to) fire and evacuation and dealing with emergencies and disasters. The fire evacuation scheme for the new serviced apartments has been approved by the fire service 18 June 2018. A fire drill has not been conducted.</p> <p>The service has cooking facilities (gas cooker/BBQ) available in the event of a power failure. The service has generator on-site in the event of a power failure for emergency power supply. Battery operated emergency lighting is in place. There are adequate civil defence requirements. The kitchen holds at least three days of food supply. There is a 2,000 litre pump driven water tank and each serviced apartment has a hot water cylinder.</p> <p>A new call bell system has been installed throughout the facility; however, this is yet to be activated through to the care centre call bell panel. The call system involves a pager system whereby staff are alerted to a resident's call bell via the personal pagers held by each care staff member. There are call bells in each</p>

		<p>serviced apartment bedroom, ensuite and communal areas. There is a call bell (with a long cord) in the sunroom assessed as a dual-purpose bed to ensure the resident has access to the bell while in bed or up in a chair.</p> <p>The whole retirement village is secured after hours with security gates at the entrance accessible by residents/relatives and staff only. The external automatic doors to the main external entrance of the serviced apartments is auto-timed to open and close at specific times and connected to the fire alarm system. There is external sensor lighting in place.</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>There is adequate natural light in the serviced apartments and communal areas. Each serviced apartment has sliding doors that open allowing access to a private patio area. There are large windows that open for ventilation. Heat pumps in the communal area are thermostat controlled from the nurse station. There is also underfloor heating. In the serviced apartment there are thermostat controlled wall panel heaters in the lounge/dining area and bedroom. There are bathroom heaters in place. The communal areas and serviced apartments have been pre-plumbed for the installation of air conditioning units if/when required.</p> <p>The one sunroom assessed as a dual-purpose room has opening windows and heated appropriately.</p>
<p>Standard 3.1: Infection control management</p> <p>There is a managed environment, which minimises the risk of infection to consumers, service providers, and visitors. This shall be appropriate to the size and scope of the service.</p>	FA	<p>There are comprehensive infection control policies that meet the Infection Control Standard SNZ HB 8134.3.1.2008. The infection control coordinator for the care centre is an RN supported by an infection control committee (representative of each area) who meet monthly. Meeting minutes and infection control graphs are displayed. Monthly benchmarking of infections is conducted for all Summerset facilities. Infection control is an agenda item on facility meetings. There are clear lines of accountability to report to the IC team on any infection control issues including a reporting and notification to care centre manager. All staff complete infection control education on orientation and annually as part of the education planner. The 2017 infection control programme has been reviewed and there are infection control goals in place for 2018.</p> <p>Adequate supplies of personal protective equipment and appropriately placed sanitisers were in place throughout the care centre and will be in place in the</p>

		serviced apartments when the interior building is complete. Residents and staff are offered influenza vaccines. There have been no outbreaks in the care centre.
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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)
Criterion 1.3.12.3 Service providers responsible for medicine management are competent to perform the function for each stage they manage.	PA Low	Medication training and competencies are to be completed at orientation for the newly employed staff for the serviced apartments. Not all current caregivers are medication competent that will initially staff the block.	Staff that are rostered to work initially are not all medication competent and this is currently being addressed	Ensure there a medication competent staff member available on all shifts in the serviced apartments. Prior to occupancy days
Criterion 1.4.2.1 All buildings, plant, and equipment comply with legislation.	PA Low	The building is near completion and therefore a certificate of public use has not yet been obtained. All building and plant have been built to comply with legislation.	(i)The interior of the building is not yet completed including connecting corridors installation of furnishing, flooring and equipment. A CPU or (code of compliance) has not yet been issued. (ii) Installation of equipment has not yet been completed for the sluice room, cleaner’s cupboard, domestic laundry, nurses’	(i)Ensure a CPU or code of compliance is obtained for the new wing. (ii) Ensure all equipment is installed and ready for use

			station and scan box (for delivery of meals).	Prior to occupancy days
<p>Criterion 1.4.7.1</p> <p>Service providers receive appropriate information, training, and equipment to respond to identified emergency and security situations. This shall include fire safety and emergency procedures.</p>	PA Low	<p>The service provides emergency and disaster training for all staff. The orientation programme for newly employed staff includes induction to the layout of the facility and fire safety. New staff will require first aid training to ensure there is a staff member on duty 24 hours with a current first aid certificate.</p>	<p>All staff including newly employed staff will be required to be orientated to the new serviced apartment building. This includes attending fire safety training and a fire drill, which is scheduled for 31 August 2018 at 9.30 am (email sighted). First aid training (including CPR) is scheduled for 28 August 2018.</p>	<p>Ensure all staff attend fire safety training, fire drill and first aid training.</p> <p>Prior to occupancy days</p>
<p>Criterion 1.4.7.5</p> <p>An appropriate 'call system' is available to summon assistance when required.</p>	PA Low	<p>A new call bell system has been installed into the individual serviced apartment bedroom and ensuite and communal areas, however the call bell system is not yet operational.</p>	<p>The call bell system is not yet operational and not linked to the care facility.</p>	<p>Ensure the call bell system is fully operational.</p> <p>Prior to occupancy days</p>

Specific results for criterion where a continuous improvement has been recorded

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

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

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

No data to display

End of the report.