# Knox Home Trust Board - Elizabeth Knox Home and Hospital

## 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:** Knox Home Trust

**Premises audited:** Elizabeth Knox Home and Hospital

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

**Dates of audit:** Start date: 2 May 2019 End date: 2 May 2019

**Proposed changes to current services (if any):** The service is opening a new two storey home (Puriri) that has 21 bedrooms and capacity to care for up to 23 residents requiring either rest home or hospital level care.

**Total beds occupied across all premises included in the audit on the first day of the audit:** 180

# 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

Elizabeth Knox Home and Hospital provides rest home and hospital level care. The service is operated by the Knox Home Trust Board and managed by a chief executive officer. Puriri home, for up to 23 residents has been built as a standalone building co-located on site with the current care home facilities. It is expected all building requirements will be completed by 22 May 2019, ready for the admission of new residents in June 2019. There are further plans underway for ongoing redevelopment on site over the next five to seven years. With the addition of the new care rooms in Puriri, the service can provide care for up to 215 residents requiring either rest-home or hospital level care, including up to 25 younger people with a physical disability.

There have been changes to the personnel in the roles of human resources and people development, and the lifestyles leisure and community engagement leader. The organization practices the Eden Alternative philosophy and framework for services. Residents spoke positively about the care provided.

This partial provisional audit was conducted against the Health and Disability Services Standards and the service’s contract with the district health board. The audit process included review of policies and procedures, review of residents’ and staff files, observations and interviews with residents, management, contractors and staff, as well as a review of facilities within the new Puriri building.

The shortfalls raised at the last audit related to medicines management and service planning have been addressed. The residents’ annual multidisciplinary review process continues to be an area requiring improvement. New areas for improvement are raised in relation to the Puriri building which is nearing completion. This includes obtaining the Certificate of Public Use for the new building, obtaining approval of the fire evacuation plan and conducting a fire drill, completing the decking/access areas, minimising environmental hazards, installing handrails in the stairway, installing the controlled drug safe in each clean utility room, installing the secure area for medicines in each care-room and completing installation of drapery, appliances and the call bell system,

## Consumer rights

Not applicable to this audit.

## Organisational management

The operational and quality plans include the scope, direction, goals, values and mission statement of the organisation. There are processes in place to regularly monitor the services provided, and progress towards achieving goals and to regularly report to the board of trustees. The chief executive officer has been in the role for eleven years and is supported by an experienced management team.

The appointment, orientation and management of staff is based on current good practice. A systematic approach to identify and deliver ongoing training supports safe service delivery and includes regular individual performance review. Staffing levels and skill mix meet the changing needs of residents. The staffing requirements for Puriri home have been identified, and existing employees will be relocated to work in the new home when open. Recruitment of additional staff is underway and new staff will be placed in existing care teams to ensure an appropriate skill mix and the Eden Alternative philosophy of care continues to be implemented across all services.

## Continuum of service delivery

Electronic care plans are developed in a timely manner and reviewed at least six monthly. Care plans are individualised to reflect the resident’s needs, with appropriate inclusion of recommendations from the physiotherapy team. Short term care plans are developed where required and the resident’s progress is regularly evaluated, including progress to achieving their goals.

The planned activity programme, overseen by the leisure and lifestyle team, provides residents with a variety of individual and group activities and maintains their links with the community. A facility van is available for outings.

An electronic medicine management system is in use. Medicines are stored appropriately. There are processes in place to assess applicable staff competency for medicine management.

The food service is provided by a contracted catering company. Food services meets the nutritional needs of the residents with individual and special needs identified and provided for. The catering services has a registered food safety plan and policies to guide food service delivery.

The current care planning, lifestyle and activity, food and nutrition, and medicine management processes will be implemented in Puriri home.

## Safe and appropriate environment

The new care home (Puriri) has 21 care rooms on two floors, with stairs and a lift present for moving between floors. Two of the care rooms can be used for the care of either one or two residents. The care rooms are spacious, have ceiling mounted hoists and ensuite bathrooms. Appropriate clinical equipment and other furnishings have been purchased appropriate to the service setting and are in the process of installation. There is an open planned lounge, dining room and kitchen on each floor along with a small domestic laundry.

Radiator heating is present in residents’ care rooms and a gas fire is in both lounges. There are designated areas for the storage of waste and hazardous substances on both floors and policies and procedures available to guide staff practice.

There are documented emergency procedures available for staff, and appropriate supplies and utilities including water, solar power, and two diesel powered generators available for use in emergency.

Appropriate security arrangements are in place including security cameras.

## Restraint minimisation and safe practice

Not applicable to this audit.

## Infection prevention and control

There is an appropriate infection control programme in place that is relevant to the services provided including services in the new care home. The infection prevention and control programme is overseen by an experienced infection prevention and control advisor.

## 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 | 14 | 0 | 2 | 2 | 0 | 0 |
| **Criteria** | 0 | 32 | 0 | 4 | 2 | 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 |