# The Lady Bug 2019 Limited - The Lady Bug

## 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:** The Lady Bug 2019 Limited

**Premises audited:** The Lady Bug

**Services audited:** Dementia care

**Dates of audit:** Start date: 7 May 2020 End date: 7 May 2020

**Proposed changes to current services (if any):** Virtual Partial Provisional Audit in respect of a new 15 bed secure dementia service associated with Kumeu Retirement Village for female residents with dementia.

**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.

As well as auditors’ written summary, indicators are included that highlight the provider’s attainment against the standards in each of the outcome areas. The following table provides a key to how the indicators are arrived at.

**Key to the indicators**

| **Indicator** | **Description** | **Definition** |
| --- | --- | --- |
|  | Includes commendable elements above the required levels of performance | All standards applicable to this service fully attained with some standards exceeded |
|  | No short falls | Standards applicable to this service fully attained |
|  | Some minor shortfalls but no major deficiencies and required levels of performance seem achievable without extensive extra activity | Some standards applicable to this service partially attained and of low risk |
|  | A number of shortfalls that require specific action to address | Some standards applicable to this service partially attained and of medium or high risk and/or unattained and of low risk |
|  | Major shortfalls, significant action is needed to achieve the required levels of performance | Some standards applicable to this service unattained and of moderate or high risk |

## General overview of the audit

The Lady Bug is a new facility under construction which has been designed as a standalone secure dementia care service for women only. The facility has 15 bedrooms to provide secure dementia care for 15 women as an extension of the secure dementia care service run by Kumeu Village Retirement Home. The Lady Bug is operated by Kumeu Village Retirement Home and managed by a team of their managers including a clinical services manager, quality manager, operations manager, and the owner operator. The Lady Bug is physically distanced from Kumeu Village Retirement Home by a seven minute drive.

This virtual partial provisional audit was conducted against the Health and Disability Services Standards and the service’s contract with the district health board. The virtual audit process was guided by the Ministry of Health final draft Designated Auditing Agency guidelines: virtual partial provisional audits April 2020 and the standard DAA handbook. The audit was undertaken during the Covid-19 Level 3 alert period preventing onsite audit activity. The audit included review of relevant documents, policies and procedures, a virtual tour of the new premises and interviews with the owner operator and managers. All areas were assessed as suitable for the provision of secure dementia care services during this audit.

This audit has identified eight areas requiring improvement to meet the requirements of the standard prior to occupancy. These related to orientation, medication (storage), nutrition, emergency equipment, facility specifications, toilet facilities, chemical storage, and emergency supplies.

## Consumer rights

|  |  |  |
| --- | --- | --- |
| Includes 13 standards that support an outcome where consumers receive safe services of an appropriate standard that comply with consumer rights legislation. Services are provided in a manner that is respectful of consumer rights, facilities, informed choice, minimises harm and acknowledges cultural and individual values and beliefs. |  | Standards applicable to this service fully attained. |

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## Organisational management

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| Includes 9 standards that support an outcome where consumers receive services that comply with legislation and are managed in a safe, efficient and effective manner. |  | Some standards applicable to this service partially attained and of low risk. |

The owner operator and management team described the direction, values and goals of the organisation, which include their attainment of the Eden Alternative principles and a desire to offer people dementia care with dignity in small groups of 15 people. An experienced and suitably qualified person has been appointed to manage the facility. Monitoring systems have been set up to provide the owner operator with immediate, regular and effective communication.

The appointment, orientation and management of the organisation’s staff is based on current good practice. A systematic approach to identify and deliver ongoing training supports safe service delivery. Plans are in place to ensure staffing levels and skill mix meet the changing needs of residents.

## Continuum of service delivery

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| Includes 13 standards that support an outcome where consumers participate in and receive timely assessment, followed by services that are planned, coordinated, and delivered in a timely and appropriate manner, consistent with current legislation. |  | Some standards applicable to this service partially attained and of low risk. |

There is a planned activity programme to provide residents with a variety of individual and group activities and maintain their links with the community.

A comprehensive medication system including regular training for staff, used by the organisation is in place to ensure safe management and administration of medications at The Lady Bug by staff who are competent to do so.

Meals will be provided onsite with the support of a sector relevant Food Control Plan and dementia friendly food service. Plans are in place to manage food safely and to meet the nutritional needs of the residents including catering for those with special needs.

## Safe and appropriate environment

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| Includes 8 standards that support an outcome where services are provided in a clean, safe environment that is appropriate to the age/needs of the consumer, ensure physical privacy is maintained, has adequate space and amenities to facilitate independence, is in a setting appropriate to the consumer group and meets the needs of people with disabilities. |  | Some standards applicable to this service partially attained and of low risk. |

The Lady Bug has been designed to meet the needs of residents using the Ministry of Health (MoH) Secure Dementia Care Home design guide.

A system for the management of waste and hazardous substances is in place, and protective equipment and clothing will be made available for staff use.

Civil defence emergency supplies will be made available and emergency management plans are in place. Current Kumeu Village Retirement Home staff who will be transitioned to work in The Lady Bug, are trained in emergency procedures, use of emergency equipment and supplies and attend regular fire drills. Call bells are situated throughout The Lady Bug and security systems are in place.

The heating provided will ensure communal and individual spaces are maintained at a comfortable temperature. External areas are accessible, safe and provide shade and seating.

Laundry will be initially undertaken offsite however there is a laundry under construction on The Lady Bug site.

## Restraint minimisation and safe practice

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| Includes 3 standards that support outcomes where consumers receive and experience services in the least restrictive and safe manner through restraint minimisation. |  | Standards applicable to this service fully attained. |

The Lady Bug is a locked secure dementia service run as an extension of Kumeu Village Retirement Home which has implemented policies and procedures that support the minimisation of restraint.

## 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 Lady Bug infection prevention and control programme will be managed as a part of the Kumeu Village Retirement Home infection prevention and control programme. The Kumeu Village Retirement Home infection prevention and control programme, led by an experienced and trained infection control coordinator, aims to prevent and manage infections. The programme is reviewed annually. Specialist infection prevention and control advice is accessed when needed.

## 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 | 9 | 0 | 8 | 0 | 0 | 0 |
| **Criteria** | 0 | 27 | 0 | 8 | 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).

|  |  |  |
| --- | --- | --- |
| **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 | The owner operator of Kumeu Retirement Village is experienced in the sector and suitably qualified to run an aged residential care facility. This will be the third facility she has built in the past 13 years. She described the planning for The Lady Bug as being over a period of two and a half years and as a response to an identified need. The decision to have a women only facility was made in response to requests from husbands of women currently resident in the secure dementia floor at Kumeu Retirement Village Home. The Lady Bug is considered to be an extension of Kumeu Retirement Village Home and has been built based on the organisation’s experience of creating the 15 room ‘Villa’ secure dementia service at Kumeu Retirement Village Home.  The organisation’s participation in the Eden Alternative and attainment of seven of the ten principles indicates the passion the management team has for dementia care. The owner operator says full registration to the programme has been postponed due to the current Covid-19 situation, however her vision for dementia care with dignity drives her passion to create a memory assisted lifestyle for residents. The operations manager is related to the owner operator and they described themselves as a family business.  The management team report they meet at least weekly, and minutes of the meetings verified this. During the Covid-19 crisis management they have had meetings at least daily as the situation has unfolded and updated requirements have come through from the MoH and the aged residential care sector. |
| 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 | When the owner operator is absent from Kumeu Retirement Village, the management team carries out all the required duties under delegated authority. During absences of key clinical staff, the clinical management is overseen by either the clinical nurse manager (CNM) or the quality manager (QM) who are RNs experienced in the sector and able to take responsibility for any clinical issues that may arise. The managers reported the current arrangements work well for Kumeu Retirement Village and the same practice will be used for The Lady Bug.  It is planned that for the first eight months one of the management team will be onsite at The Lady Bug every day to support staff on duty. Clinical oversight for The Lady Bug will be provided by the CNM and QM initially and a dedicated RN once capacity is reached and training for that person completed. |
| 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. | PA Low | Kumeu Retirement Village comprehensive human resources management policies and processes are based on good employment practice and relevant legislation. Managers described the recruitment process they follow which reflected the requirements of the organisation’s policies and procedures including referee checks, police vetting and validation of qualifications and practising certificates (APCs), where required.  The managers stated care partners identified as possible Lady Bug staff are those who have completed a New Zealand Qualification Authority (NZQA) education programme to meet the requirements of the organisation’s agreement with the DHB. These senior care partners are experienced staff currently working in the Kumeu Retirement Village dementia care area known as the ‘Villa’. They have completed the organisation’s orientation but are yet to have The Lady Bug site specific staff orientation to practices such as the fire evacuation or security procedures. New staff were employed as replacement care partners for Kumeu Village Retirement Home prior to the Covid-19 lockdown. These staff allow for the transitioning of senior care partners over to The Lady Bug, with minimal disruption to residents and staffing at Kumeu Village Retirement Home.  Kumeu Village Retirement Home has a comprehensive continuing education programme which is planned on a biannual, annual and biennial basis, including mandatory training requirements. The Lady Bug staff will receive the same Kumeu Village Retirement Home staff education programme online and onsite at The Lady Bug.  There are sufficient trained and competent registered nurses who are maintaining their annual competency requirements to undertake interRAI assessments as required for the organisation.  Following the MoH virtual audit guidance a sample of staff records were not reviewed for this audit. |
| Standard 1.2.8: Service Provider Availability  Consumers receive timely, appropriate, and safe service from suitably qualified/skilled and/or experienced service providers. | FA | The organization has a documented and implemented process for determining staffing levels and skill mixes to provide safe service delivery, 24 hours a day, seven days a week (24/7).  The Lady Bug staffing transition plan indicates there will be a stepped approach to staffing levels once the facility is occupied. As more residents are admitted more staff will be added following the organisation’s safe staffing guidelines with a one to five ratio of staff to residents. Initially there will be one care partner or activities person rostered each shift that is; morning, afternoon and night with a manager onsite all day, a cook working over breakfast, lunchtime and setting up for dinner and an on-call person sleeping over in the staff bedroom on the top floor. The activities person is trained to do cares and has their medication competency.  The managers described that they will be able to adjust staffing levels to meet the changing needs of residents, with the ability to access the organisation’s staffing pool. The organisation has an afterhours on call roster in place, with managers reporting that they are available to provide advice when needed. Online observation and review of a four-week roster cycle confirmed adequate staff cover has been provided at Kumeu Retirement Village home, with staff replaced in any unplanned absence. The Lady Bug will have at least one staff member on duty who has a current first aid certificate and there is 24/7 on-call RN coverage. |
| 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 organisation’s medication management policies identified all aspects of medicine management in line with the Medicines Care Guide for Residential Aged Care.  A safe system for medicine management using an electronic system has been implemented in the organisation and will be used at The Lady Bug. The staff identified as appropriate to work at The Lady Bug are all medication competent and all future staff will also be required to be medication competent. The new electronic client management system described by the managers will provide alerts to the QM when individual staff are due to be have their medication competency updated.  The QM reported that all staff who administer medicines are competent to perform the function they manage. There is a six page competency test and the QM observes two medication rounds before staff are deemed competent. The local pharmacist provides an annual education session for all relevant staff on the use of the electronic system and The Lady Bug staff will receive this training also.  The organisation’s policy describes that medications are supplied to the facility in a pre-packaged format from a contracted pharmacy that the RN checks medications against the prescription and that clinical pharmacist input is provided. There were no medications onsite on the day of audit and no provision for the storage of controlled drugs.  The medication trolley will be stored in a locked cupboard under the stairs and the medication refrigerator is to be stored in a locked space in the staff only offices on the top floor of the building. Residents and visitors will not have access to the staff space on the first floor.  The QM described the need for recording of temperatures for the medicine fridge and the medication cupboard and that air conditioning will be added to the medication cupboard if the temperature in the space is not within the recommended range.  Given the nature of The Lady Bug service no residents will be self-administering medications.  The organisation has an implemented process for comprehensive analysis of any medication errors and The Lady Bug will be included in this process. |
| 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. | PA Low | There is a large modern kitchen space and butler’s pantry built into The Lady Bug in an open plan space which will enable residents to take part in baking and food preparation as they might at home. Managers described the safety procedures that are used in Kumeu Retirement Village Home secure Dementia Villa that will be followed at The Lady Bug also. At The Lady Bug the safety precautions include an oven isolation switch for use when residents have access to the kitchen to prevent accidents and ensure their safety when they are involved in kitchen activities. Managers said this system works well in the Kumeu Village Retirement Home.  The Lady Bug food service will be provided on site by a cook from Kumeu Retirement Village Home following recognised nutritional guidelines for older people. The managers say the menu is one used at Kumeu Retirement Village Home secure Dementia Villa which has been reviewed by the organisation’s consultant qualified dietitian and follows summer and winter patterns.  Managers are conversant with the Food Safety Plan (FSP) requirements as Kumeu Retirement Village Home has a FSP which expires on 22 November 2020. This certified Food safety plan will be used in the interim for The Lady Bug whilst the application process for The Lady Bug FSP is undertaken. The need to ensure food temperatures, including for high risk items, are monitored appropriately and recorded, was clearly understood by the managers.  The same nutritional assessment undertaken for each resident on admission to the Kumeu Village Retirement Home will be done to develop a dietary profile for The Lady Bug residents. The personal food preferences, any special diets and modified texture requirements will be made known to the cook and accommodated in the daily meal plan. There will be access to food and fluids for residents in the central homelike kitchen to meet their nutritional needs at all times. Special equipment, to meet resident’s nutritional needs, will be available, as it is at Kumeu Village Retirement Home. |
| Standard 1.3.7: Planned Activities  Where specified as part of the service delivery plan for a consumer, activity requirements are appropriate to their needs, age, culture, and the setting of the service. | FA | The managers say The Lady Bug activities programme is planned to be provided by a trained diversional therapist currently working as one of the activities team at Kumeu Village Retirement Home.  Activities for The Lady Bug residents will be specific to the needs and abilities of the women as they are currently within the Kumeu Village Retirement home secure Dementia Villa. Activities such as baking and food preparation are planned to be offered at times when residents are most physically active and/or restless. Other planned activities include the use of the onsite tennis court, access to farm animals, and use of the onsite piano.  The Kumeu Village Retirement Home social assessment and history process will be used on admission to ascertain residents’ needs, interests, abilities and social requirements. |
| 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. | PA Low | Documented processes for the management of waste and infectious and hazardous substances in line with the procedures used at the Kumeu Retirement Village Home are available for The Lady Bug staff. An external company is contracted to supply and manage all chemicals and cleaning products to The Lady Bug and they also provide relevant training for staff.  Safe storage is available for waste for collection and an external waste management company has been contracted as evidenced by the waste bins sighted during the virtual tour.  Personal protective equipment, appropriate signage and safety data sheets, are not yet available onsite at The Lady Bug. |
| Standard 1.4.2: Facility Specifications  Consumers are provided with an appropriate, accessible physical environment and facilities that are fit for their purpose. | PA Low | Documents reviewed and a virtual tour of The Lady Bug indicate appropriate systems are in place to ensure the residents’ physical environment and facilities are fit for their purpose. The facility has two levels, the ground floor is for residents and there is a much smaller top floor, staff only area accessible by stairs at the rear of the building. The home is secure, floor coverings, furniture and light fittings, are in place, the kitchen cabinetry, oven and most bathroom facilities are installed (see CAR 1.4.3) bedroom doors are in place with handles and locks. Padded headboards are attached to the bedroom walls for use with electric beds. Fittings throughout the property provide a homely modern décor and environment.  Equipment such as a hoist (for use if a resident falls), electric beds, pulse oximeter, and oxygen regulator are available onsite at The Lady Bug already or are being stored at Kumeu Village Retirement Home until occupancy or have been ordered. An external contractor is booked to provide the required electrical testing and tagging.  The new external areas provide decking, lawns, attractive outdoor seating, a tennis court and a rural setting which are appropriate to the proposed resident group, to promote an active lifestyle.  Managers confirmed prospective residents’ family members were happy with the environment.  The certificate of public use is not yet available. |
| 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. | PA Low | The Lady Bug has an adequate number of accessible bathroom and toilet facilities throughout the facility. This includes four resident bathrooms with a toilet and shower each in close proximity to bedrooms. Appropriately secured and approved handrails are provided in three of the four toilet/shower areas, and other equipment/accessories are available to promote residents’ independence. |
| 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 | Adequate personal space is provided within The Lady Bug to allow residents and staff to move around within their bedrooms safely. There is a range of room sizes with some very spacious rooms and all bedrooms provide single accommodation. Managers described that the rooms are able to be personalised with furnishings, photos and other personal items displayed. Rooms are also able to be provided furnished with quality furniture as seen during the virtual tour of the premises. The door width and room sizes are adequate for a secure dementia service and for the movement of equipment into and out of the room. There is room to store mobility aids, wheelchairs and mobility scooters onsite. |
| 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 | The Lady Bug communal areas are available for residents to engage in activities. The dining and lounge areas are spacious and enable easy access for residents and staff. Residents can access areas for privacy, if required. Furniture seen on the virtual tour is appropriate to the setting and residents’ needs. |
| 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. | PA Low | Personal and general laundry is planned to initially be undertaken off site by a contracted provider already used by Kumeu Village Retirement Home. An onsite dedicated laundry is currently under construction in a separate building with external access. The transition plan indicates the onsite laundry will be in use and a housekeeper employed when there are eight to twelve residents living in The Lady Bug. Initially the Care partners will manage the personal and general laundry processes, dirty/clean flow and handling of soiled linen as described in the policies and procedures.  Cleaning trolleys, equipment, chemicals, laundry equipment and products including incontinence products are planned to be stored in the new laundry building. Chemicals are planned to be stored in a lockable cupboard within the laundry building. Chemicals seen on the virtual tour were in appropriately labelled containers.  Cleaning and laundry processes are planned to be monitored through internal audit programme as described in the audit calendar and schedule reviewed. |
| Standard 1.4.7: Essential, Emergency, And Security Systems  Consumers receive an appropriate and timely response during emergency and security situations. | PA Low | The Lady Bug policies and guidelines for emergency planning, preparation and response, consider the special needs of people with dementia, are displayed and will be part of the site specific orientation for new staff, see CAR 1.2.7.4. Disaster and civil defence planning guides direct the facility in their preparation for disasters and describe the procedures to be followed in the event of a fire or other emergencies. Supplies for use in an emergency are yet to be brought onsite.  The current Lady Bug fire evacuation plan was approved by the New Zealand Fire Service on the 12 April 2020. The organisation policy requires a trial evacuation to take place six-monthly and this is included in the biannual training programme. A trial evacuation is planned prior to occupancy as part of the staff orientation.  Five water storage tanks are located in and above the ground, and there is a generator on site stored in the laundry building. Food supplies are available at Kumeu and these will be brought onsite prior to occupancy. This will provide the Civil Defence and Emergency Management recommended quantities of food and water stocks onsite. Emergency lighting is in the ceiling and there are bedroom floor lights.  Functional call bells are situated throughout The Lady Bug and in each bedroom. The mattresses purchased for The Lady Bug have sensors to alert staff to residents requiring assistance. Call system audits are included in the audit schedule to be completed annually.  The Lady Bug has appropriate security arrangements in place, such as CCTV cameras accessed from the manager’s office at Kumeu Village Retirement Home, whilst promoting a homelike therapeutic environment. Residents will have a person specific wristband that will enable access to their own room at any time and prevent other residents accessing another resident’s room without invitation. The front door is locked with key pad access for staff and a door bell for visitors with a bird call bell to provide a low level stimuli. The large rural property is bounded by appropriate perimeter fencing, which provides views across neighbouring fields. |
| 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 | All residents’ bedrooms and communal areas are heated and ventilated appropriately. Rooms have natural light, opening external windows and twelve of the fifteen bedrooms have doors that open outside onto enclosed decks. Communal areas open out onto communal decks and out into the parklike expanse of lawn and gardens including a residents’ tennis court. Heating is provided by heat pumps in residents’ rooms and in the communal areas. |
| 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 | The Lady Bug service will follow the Kumeu Village Retirement Home infection prevention and control (IPC) programme to minimise the risk of infection to residents, staff and visitors. The programme is guided by a comprehensive and current infection control manual, with input from local and national experts such as the local DHB and MoH. The DHB Covid-19 updates for aged residential care providers is a recent resource being used by the organisation. Staff attend the DHB Forums run by the Gerontologist Nurse Specialist that include IPC topics for local aged residential care providers. The Kumeu Village Retirement Home infection control programme and manual are reviewed annually.  The clinical nurse manager is the designated IPC coordinator, whose authority and responsibilities are defined within the infection control manual. Infection control matters, including surveillance results, are reported monthly to the staff meeting. This meeting is open to all staff and managers including the owner operator, clinical nurse manager / IPC coordinator, quality manager, operations manager, and representatives from food services and household management. IPC data is collated, analysed and monitored using an external benchmarking system.  The managers interviewed clearly understood the current Covid-19 requirements and the need to be constantly updated with the changing rules and regulations. Kumeu Village Retirement Home policies and procedures guide staff regarding signage at the main entrance to the facility declining access at this time or requesting anyone who is, or has been unwell in the past 48 hours, not to enter the facility. The infection control manual provides guidance for staff about how long they must stay away from work if they have been unwell.  The CNM in her role as IPC coordinator has ensured IPC considerations have been included in the design of The Lady Bug. |
| Standard 2.1.1: Restraint minimisation  Services demonstrate that the use of restraint is actively minimised. | FA | The Lady Bug has been designed as a secure dementia service with no restraint use other than the environmental restraints. The facility is located in a rural setting with security perimeter fences and a locked front door. The Lady Bug policies and procedures meet the requirements of the restraint minimisation and safe practice standards and provide guidance on the safe use, approval and monitoring of both restraints and enablers.  The QM performs the role of restraint coordinator and provides support and oversight for enabler and restraint management in the organisation. The QM described a sound understanding of the organisation’s policies, procedures and practice and her role and responsibilities.  The Lady Bug policy describes a commitment to restraint minimisation and the use of behaviour management and de-escalation techniques.  Related restraint minimisation topics are included in the regular education and audit programmes. |

# 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 1.2.7.4  New service providers receive an orientation/induction programme that covers the essential components of the service provided. | PA Low | The organisation has a robust orientation /induction programme and the managers have described The Lady Bug specific orientation that will occur, and that senior experienced staff will transition to work at The Lady Bug. However the orientation package is yet to be created and the staff (care partners, cook, activities coordinator and RN) proposed to work at The Lady Bug are yet to be oriented to the specific requirements of the new service. | The Lady Bug site specific orientation is yet to be created and implemented for staff proposed to work there. | Provide site specific orientation to The Lady Bug staff with all necessary components relevant to their roles.  Prior to occupancy days |
| Criterion 1.3.12.1  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. | PA Low | The organisation has implemented an electronic system, and has comprehensive medication policies and procedures available to staff. The staff proposed to work in The Lady Bug all have medication competency. A medication trolley with a locking mechanism and a medication fridge have been purchased and are onsite ready for use for The Lady Bug. However there is no lock on the cupboard under the stairs designated to store the medication trolley, and this storage area has not yet been tested to ensure the temperature is within the recommended range i.e. below 25 degrees C. The medication fridge is not yet in place behind a suitably locked door. | The safe and appropriate storage of medications within the designated medication trolley and the medication fridge is yet to be implemented. | Provide appropriate door locks on the cupboard designated to store the medication trolley and the room or cupboard designated to store the medication refrigerator. Ensure the temperature in the designated medication trolley area is within the recommended range.  Prior to occupancy days |
| Criterion 1.3.13.5  All aspects of food procurement, production, preparation, storage, transportation, delivery, and disposal comply with current legislation, and guidelines. | PA Low | The organisation has a current Food Control Plan and Food safety certificate for Kumeu Village retirement home and managers indicate a clear understanding of the requirements of this. Planning has commenced towards attaining a Food Control Plan and Food safety certificate for The Lady Bug once MOH certification has been obtained. | The Lady Bug is in the process of developing a Food Control Plan and applying for a Food safety certificate so is currently unable to evidence compliance with the requirements for food procurement, production, preparation, storage, transportation, delivery and disposal. | Develop a Food Control Plan and provide a Food safety certificate as planned, to show compliance with this criterion.  90 days |
| Criterion 1.4.1.6  Protective equipment and clothing appropriate to the risks involved when handling waste or hazardous substances is provided and used by service providers. | PA Low | The organisation has abundant supplies of PPE such as gowns, goggles, face shields, masks, gloves, hand sanitiser gel, ready for use at The Lady Bug. Safety data sheets are supplied by the external chemical provider as seen on the virtual tour however these are not yet onsite at The Lady Bug. | Personal protective equipment (PPE) relevant signage and safety data sheets are not yet installed or available for use on The Lady Bug property. | Complete the installation of PPE, signage and safety data sheets to ensure the safety of staff working at The Lady Bug.  Prior to occupancy days |
| Criterion 1.4.2.1  All buildings, plant, and equipment comply with legislation. | PA Low | The Lady Bug has been outfitted, electrical and security systems are functioning and many items of equipment are installed. As the Covid-19 alert levels enable more access to the site the managers expect the certificate of public use to be available within a fortnight of the day of audit, however it is not yet available. | There is no certificate of public use available on the day of audit. | Provide a certificate of public use.  Prior to occupancy days |
| Criterion 1.4.3.1  There are adequate numbers of accessible toilets/showers/bathing facilities conveniently located and in close proximity to each service area to meet the needs of consumers. This excludes any toilets/showers/bathing facilities designated for service providers or visitor use. | PA Low | The Lady Bug’s construction was interrupted by the Covid-19 lockdown and only three of the four toilets have had handrails installed as required for the safety of residents. | One resident toilet is yet to have a rail installed. | Install the toilet handrail as required.  Prior to occupancy days |
| Criterion 1.4.6.3  Service providers have access to designated areas for the safe and hygienic storage of cleaning/laundry equipment and chemicals. | PA Low | The dedicated laundry is currently under construction in what was a barn several metres from The Lady Bug entrance. The laundry and storage building currently houses some equipment for cleaning and laundry. Industrial washing and drying machines, a folding table, a chemical dispenser system and bottles, incontinence products and a cleaners trolley will all eventually be secured within the space. | The designated area for cleaning and laundry equipment and chemical storage is incomplete. | Complete the construction of the onsite laundry to ensure there is a safe and hygienic storage space for cleaning and laundry equipment and chemicals.  Prior to occupancy days |
| Criterion 1.4.7.1  Service providers receive appropriate information, training, and equipment to respond to identified emergency and security situations. This shall include fire safety and emergency procedures. | PA Low | The Lady Bug emergency guidance for staff provide appropriate information for emergencies such as fire, earthquake, bomb threat, volcanic eruption, power failure, robbery and evacuation. The fire evacuation scheme has been approved however a trial evacuation is yet to be occur. There is civil defence kit check list which describes the items required in the kit and a process to check the box monthly however The Lady Bug civil defence kit is yet to be provided onsite. The managers understand the need to inform people CCTV cameras are in use in communal areas in The Lady Bug however the signs have not yet been installed. | There is a description of what is required for the civil defence and emergency supplies and managers are aware of the need for CCTV notices however these are not yet available onsite. The approved fire evacuation scheme is yet to be trialled by staff. | Stock the civil defence and emergencies kit, perform a trial evacuation and install CCTV notices  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.