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Current Status: 9 July 2014

The following summary has been accepted by the Ministry of Health as being an accurate reflection of the Certification Audit conducted against the Health and Disability Services Standards (NZS8134.1:2008; NZS8134.2:2008 and NZS8134.3:2008) on the audit date(s) specified.

General overview

An audit was conducted at the Glenbrook Rest Home. The rest home is in a rural setting and is governed by two directors/owners. The facility has the capacity to provide rest home level care for up to 23 residents. Occupancy of the day of the audit was 22.

Changes since the last audit included the addition of a new wing. The number of available beds increased from 19 beds to 23. The increase in resident numbers had been supported by the appointment of additional staff and extensions to the dining and lounge areas.

Care and support services are provided in a manner that supports the needs of the residents. Residents receive services in line with the Health and Disability Commissioner (HDC) Code of Health and Disability Services Consumer Rights (the Code). There are systems and activities in place to monitor organisational performance and sufficient numbers of adequately trained staff on duty at all times.

The audit identified two areas which require improvement. The provider is required to ensure that the admission agreement and additional fees reflect the DHB contractual agreement and standing orders are implemented in line with the current guidelines.

Audit Summary as at 9 July 2014

Standards have been assessed and summarised below:

Key

Indicator	Description	Definition
	Includes commendable elements above the required levels of performance	All standards applicable to this service fully attained with some standards exceeded

Indicator	Description	Definition
	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

Consumer Rights as at 9 July 2014

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.		Some standards applicable to this service partially attained and of low risk.
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Organisational Management as at 9 July 2014

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.		Standards applicable to this service fully attained.
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Continuum of Service Delivery as at 9 July 2014

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.
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Safe and Appropriate Environment as at 9 July 2014

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.		Standards applicable to this service fully attained.
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Restraint Minimisation and Safe Practice as at 9 July 2014

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.
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Infection Prevention and Control as at 9 July 2014

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.
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Audit Results as at 9 July 2014

Consumer Rights

Documented procedures, interviews with residents, family and staff, together with observations confirmed that residents' rights are understood and met in everyday practice. Communication channels were clearly defined and interviews and observation confirm communication is effective. Information on rights and services was provided in an appropriate manner.

Residents are free from discrimination and have access to advocacy services. Any concerns were followed up and remedied in a timely and appropriate manner. Resident meetings occurred and management had an open-door policy. Informed consent requirements were clearly defined and resident and staff interviews confirmed choice was given and informed consent was facilitated. Links with community resources were supported and facilitated. Visitors were free to come and go as requested by the resident.

Resident interviews confirmed understanding of their right to make complaints if necessary. There have been no documented complaints since the last certification audit. The policy and flow chart on complaints met the requirements of Right 10 of

the Code of Health and Disability Services Consumers' Rights. There was documented information available to staff on how to handle a complaint. Complaints forms were displayed at the entrance to the facility. Information about the complaints process was also included in information given to new residents and their family.

The provider still needs to update the admission agreement to reflect the payment requirements as per the DHB contractual agreement.

Organisational Management

Glenbrook Rest Home is owned by the nurse manager and the administration manager who operate as a partnership, trading as Glenbrook Rest Home. Both are committee members of the Care Association of New Zealand (CANZ). The nurse manager is a registered nurse with a current practising certificate, has 40 years nursing experience and has worked at the facility for the past seven years. The administration manager was responsible for administration and the maintenance of the facility.

The purpose, values, scope, direction and goals were described in the business plan and the quality manual. A range of processes were implemented to monitor the safety of staff and residents, including an annual internal audit schedule and accident, incident and infection reporting and analysis. Continuous improvement activity was discussed at regular staff meetings. Information was shared with relatives following an incident or accident involving a resident and rest home activity was discussed with residents and their family members. The outcomes of external audits were also shared on the website.

There are processes in place to ensure human resource requirements are met. All staff received sufficient training and staff performance was monitored. There are adequate numbers of trained staff on duty at all times.

Resident information is secure, private, well documented and current.

Continuum of Service Delivery

There were clearly documented processes for entry to the facility. Admissions were managed in an equitable and timely manner. Care and support was provided by a range of health professionals and clear time frames for service provision were defined and monitored. Assessments and care plans were fully documented and interventions were consistent with good practice and desired outcomes. Care plans were reviewed and updated as required.

Residents maintained access to a range of health services. Referrals and transfers were managed in the timely and appropriate manner. Records of referrals and transfers were maintained and there was evidence that family were involved.

Individual activities were planned to meet the needs of the resident. Activity goals were identified and ensured the provision of relevant and appropriate activities for each resident. Previous interests, hobbies and current ability were considered and sufficient activities and outings were provided.

There was a sufficiently documented medication management system. All medications were stored securely. Medications were monitored and administration was conducted by staff who were assessed as competent to do so. An improvement is required regarding the management of standing orders to ensure alignment with the current guidelines.

Food and nutritional needs of residents were assessed and the menu was appropriate to the nutritional needs of residents. Special needs were catered for and monitored. Food preparation and storage met food safety requirements.

Safe and Appropriate Environment

Glenbrook Rest Home provides a safe and appropriate environment to meet the needs of the residents. The building, facilities, furnishings and equipment were well maintained and suitable for the care and support of elderly residents. Applicable building regulations and requirements are met. Well-furnished lounges, dining and family areas are accessible to all residents. The facility has plenty of natural light and is maintained at a comfortable temperature for the residents. Bedrooms are of sufficient size to allow for personal possessions and to accommodate mobility aids, equipment and staff caring for the resident. Toilet, shower and bathing facilities are sufficient and appropriately equipped and furnished.

Cleaning and laundry services meet infection control requirements and are of an adequate standard. Collection, storage and disposal of waste are in accord with infection control principles. Staff comply with safe waste and hazardous substances processes.

Emergency management procedures, including emergency supplies, are in place. Emergency management was addressed at each staff training day. The organisation has appropriate stores and equipment in the event of a civil defence emergency.

Restraint Minimisation and Safe Practice

The restraint minimisation and safe practice policy defines enablers and restraint and addressed processes for consent, assessment, evaluation and review of restraint. There were no residents using restraints or enablers at the time of the audit. Staff had attended training on restraint and challenging behaviour management.

Infection Prevention and Control

The infection control programme was clearly documented and suitable for the facility and services provided. Infection control responsibilities were also clearly documented. Adequate information, resources and on-going training is provided. External expert advice was sought if required and infection control was included in health and safety, quality and risk management, and emergency systems.

An infection surveillance programme was implemented. The use of antibiotics was monitored and infection rates monitored for quality improvement purposes. In the event of an outbreak the organisation has the required resources and expertise to minimise the impact on residents and the spread.