January 2013

Jelica's Link

An independent newsletter for people working in Aged Care

In this issue:	Best Wishes for 2013
 Highly relevant criteria Annual reviews and quality initiatives 2013 Census Newsletters back issues Retention of Health Information Relay for Life 	In the New Year, may your right hand always be stretched out in friendship, never in want. Each moment in a day has its own value. Morning brings HOPE, Afternoon brings FAITH, Evening brings LOVE, Night brings REST, Hope you will have all of them everyday. Cheers to a new year, and another chance, for us to get it right. HAPPY NEW YEAR
	HIGHLY RELEVANT CRITERIA
	The New Year starts promising with the introduction of the Highly Relevant Criteria (101) for Certification Audits. I thought it would be worth dedicating this newsletter to it as the new process will affect all of us.
	As a result of the trial undertaken between June and August 2012 of aged residential care certification audits completed against highly relevant criteria of the Health and Disability Services Standards (Standards New Zealand, 2008) a number of changes were made to the audit process.
	From the: Certification Audits -highly relevant criteria trial evaluation. Ministry of Health, Provider regulation, October 2012
	The trial and its evaluation aimed to determine whether a robust and reliable audit could be undertaken for certification purposes when auditing against criteria identified as being highly relevant to the aged residential care sector. As a result of the trial the following changes to the current audit process are:
jelica@woosh.co.nz www.jelicatips.com mobile: 021 311055 1/3 Price Crescent Mt Wellington Auckland 1060	Stage One audit This stage now includes a range of off-site activities including a document review of policies and procedures. This will allow the DAA sufficient verifiable information to contribute to the second stage audit. This stage may also include activities in addition to the document review consistent with ISO/IEC 17021:2011.
	The amended requirements are: The service provider will receive a findings report which can be abbreviated to a document review checklist for all re-certification audits.
	The provider should be given sufficient time to make changes to policies and procedures often associated with minor non-conformities.
	The document review checklist report should be received by the provider a minimum of one week prior to the on-site audit.

	HIGHLY RELEVANT CRITERIA cont'd
	My interpretation of this is that the document review process is an important part of the audit. It is therefore important to provide the auditors with the correct versions of up to date policies which are implemented. (practice on the floor corresponds with the policies!) Although the provider is given time to make changes to policies and procedures before the on-site audit a Partial Attainment can still be achieved in cases were there is not sufficient evidence that the changes to the policies have been implemented.
	Stage Two audit An on-site audit against the HDSS at standards and criteria level which includes contractual requirements as cross referenced to each standard.
Always remember you're unique, just like everyone else	 The amended requirements are: Auditors will put more emphasis on each standard included in the scope Auditors will audit those identified highly relevant criteria There are less repetitive criteria as these are grouped under another criterion.
	 Levels of attainment (CI, PA, FA, UA) will be awarded for standards together with a risk rating. Levels of attainment (PA, UA) will be awarded for non-conforming highly relevant criteria together with narrative evidence and a risk rating. Levels of attainment (CI) will be awarded for continuous improvements of highly relevant criteria together with narrative evidence.
	There are also changes made to the Audit Reporting Completion of all mandatory fields of a Ministry provided template.
	 The amended requirements are: Audit reporting will require sufficient evidence at standards level. Audit reporting will require narrative evidence to be reported against those highly relevant criteria only where there is a non-conformity or continuous improvement at criteria level.
	Risk ratings applied at standards level need to take into consideration the overall risk at the standard level. This means where there are multiple criteria rated with a low risk, the overall risk for a standard may be low or moderate
	Press Release: New Zealand Government, 17 Dec 2012 http://www.scoop.co.nz/stories/PA1212/S00313/streamlined-rest-home-auditing-to-be-introduced-in-2013.htm
	Hon Jo Goodhew Associate Minister of Health Associate Health Minister Jo Goodhew announced today that streamlined auditing of rest homes, saving up to six hours for each audit , will be introduced from 1 January 2013. This follows a successful trial of the new process in 23 rest homes this year. "We continue to look at ways of reducing the regulatory burden for providers while maintaining the integrity of the audit process," said Mrs Goodhew. "Regular independent checks of rest homes against clearly defined, relevant standards are vital to ensure high quality care for older New Zealanders in aged residential care. It ensures providers meet current standards and any shortcomings are quickly identified and rectified"

	ANNUAL REVIEWS AND SETTING UP QUALITY INITIATIVES FOR THE NEW YEAR
	The following is a repeat of my article last year but it might help you to have a reminder.
	I believe that the beginning of a New Year is always a good time to decide your quality initiatives for the next year and to close off and review 2012. Have you closed off and completed everything? Then you start to set up your quality programme for the coming year.
	Making it visible with delegated responsibilities helps to stay on track. You can use a wall planner on which you set out what to do when. Staff with delegated responsibilities should also have a wall planner or any other documented plan/calendar that states their responsibilities. This will also be a good contingency plan in case of holiday or sick leave.
	INFECTION CONTROL
	Review: Complete a review of your Infection control programme to monitor the effectiveness of the programme.
When everything's coming your way, you're in the wrong lane!	 Answer the following questions and put a quality improvement plan in place if required: Have we met objectives? Have we met surveillance requirement? Is our surveillance programme appropriate? Do we know how to respond to an outbreak? Do we have appropriate guidelines in place and is staff aware of these? Are staff aware and compliant with infection control programme? Have we provided training reflective of our situation? Have we been compliant with good infection control practice? Are our policies and procedures current and up to date and easily accessible to staff. Have we completed relevant audits and taken action on result to find out if we are compliant.
	Decide aim for the new year. Delegate responsibilities and authorities (IC coordinator and IC team members) Decide required training reflective of size and setting of facility and organise presenter. Set meeting dates and have IC as a standardised topic on meeting agenda.
	INCIDENTS AND ACCIDENTS Review Monthly collations have been completed, trends identified and management plans instigated and followed up and no corrective action/quality improvements plans are outstanding. Or if they are there is a plan to ensure these are followed through. Identified hazards are added to hazard register and managed appropriately and staff informed.
	Set up for the new year. Decide aim for the new year. Delegate responsibilities and authorities Decide required training reflective of size and setting of facility and organise presenter. Have incidents/accidents as a standardised topic on staff meeting agenda.

ANNUAL REVIEWS AND SETTING UP QUALITY INITIATIVES FOR THE NEW YEAR HAZARDS **Review** Have hazards been reviewed. Are there new hazards identified and are these added to the register. Are hazard management plans still up to date. Is it possible to eliminate hazards Set up for the new year: Ongoing hazard review and plans to minimise risks. Staff training Do you have "Hazards" as a standardised topic on staff meeting agenda AUDITS Review Are audits completed as per schedule/calendar? Are quality improvement plans/corrective actions completed, signed off? Is staff informed of new initiatives? Are re-audits completed when required to follow up on corrective actions? Review audits to ensure they are still relevant and are not giving you constant 100% outcomes. If they do then start auditing different areas. Set up for the new year: Do audits need to be changed to ensure they remain effective? **Don't determine** Delegate responsibilities in regard of who is completing the audits and who vour worth by analyses the data. (Ensure people never audit their own work.) comparing Set up calendar identifying when the audits are completed. (I have developed **yourself with** one for this year so if you are interested in receiving one please email me. others. it is It is electronic and allows you to personalise it to your own requirements) because we are different that each Include staff and provide appropriate training to help staff understand why you of us is special. complete audits. Have "Audits" as a standardised topic on staff meeting agenda to ensure that outcomes and action to be taken is feedback to staff. When planning the year: Have copies of all practising certificates on file. Keep a list of staff with first aid certificates and their due date and if required set date for re training. • Document due dates for appraisals/performance reviews. • What are aims for the year (refurbishing, special project etc). Set training calendar for the year. (ensuring the required topics are included and training is relevant to size and setting). Calibration records to be completed and by whom. Hot water records to be completed and by whom. Fridge and freezer temps to be recorded and by whom. • Set meeting structure. • Decide on how to inform relatives on a regular basis. (this can be through newsletters or memo's etc) Jessica

	CENSUS 2013
	2013 Census resources available Visit <u>www.census.govt.nz</u> for resources and information about the 2013 Census.
	There you will find census information leaflets in over 20 languages, census awareness posters and education resources.
	The 2013 Census forms and guide notes are now available on the <u>Statistics NZ</u> website.
	For those of you living in Canterbury, we have developed additional information to help you do the census. This includes advice on how to answer certain questions that may be difficult for people living in alternate accommodation due to the earthquake.
	For more information go to the <u>Statistics NZ website</u> . For personal assistance please contact our Information Centre. Phone: 0508 525525 (toll-free within New Zealand). Email: <u>info@stats.govt.nz</u> or <u>Census External Relations</u> .
Experience is what you get when you didn't get what you	NEWSLETTERS BACK ISSUES
didn't get what you wanted	Remember there is an alphabetical list of topics from all my newsletters available on my website which refers to the related issue. This website is available to everybody: <u>www.jelicatips.com</u> No password or membership required.
	I believe in having the data available to everybody as it is important that as many people as possible get the information and that we help each other as much as possible in this very challenging sector. I don't mind sharing this information but I don't agree anybody making financial gain from this information!
	Health (Retention of Health Information) Regulations 1996
	I have been asked if resident's information has to be retained in hard copy format
	 Form in which health information to be retained (1) Nothing in regulation 6(1) requires any health information to be retained in any particular form, and health information to which that regulation applies may be held and retained— (a) in such form as the provider thinks fit; and (b) in different forms at different times
	HANDY TIPS
	To work out any staff pay entitlements call 0800 209020.Tobuildyourownemploymentagreementvisitwww.ers.govt.nz/EmploymentAgreementBuilder.

	RELAY FOR LIFE
*Relay to *	<i>"We warmly welcome you to this unique community event.</i> Take up the challenge and the baton. Support a team and join us for this fun and special event that is Relay For Life."
	Relay For Life is not a race – it's a celebration and awareness raising event for cancer survivors, their carers, whānau and friends. Relay is a wonderful source of inspiration for thousands of people year after year. Resourced by volunteers and supported by many community-minded businesses, Relay For Life unites the community in the fight against cancer.
	 Here's How it Works Relay teams consist of ten members or more. A Team Captain is elected, sometimes with a Co-Captain working alongside them. A team name and theme is selected. Team members submit a registration fee which will vary according to where the event is being held. This registration fee helps to cover the cost of Relay T-shirts, participant kits and breakfast on Sunday morning. Teams are encouraged to set a fundraising goal and raise between \$100-\$200 per team member. Fundraising is completed prior to the event and can be achieved either individually or as a team. All funds banked are credited to the team total so that each team can track its success. At least one team member should be on the track at all times. There are no rules about how fast your baton should move around the track, just keep it moving! Participants can camp overnight and stay for the whole event or just visit and do a few laps
Some interesting we	bsites:

www.eldernet.co.nz, www.insitenewspaper.co.nz, www.moh.govt.nz; www.dementiacareaustralia.com; http://www.bpac.org.nz/Public/admin.asp?type=publication&pub=Best Please note these sites are not necessarily endorsed by Jelica nor is it responsible for the contents within them.

REMEMBER!

Send your feedback, suggestions and articles showcasing your local, regional and workforce activities for publication in future issues.

This brings me to the end of this issue. I hope you enjoyed reading it and welcome any feedback you have. With your help I hope to keep this a very informative newsletter with something for everyone.

Signing off for now.

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- · If you do not wish to continue to receive emails from me, all you need to do is e-mail me and write "Unsubscribe". I will then remove you from my contact list (though I will be sorry to lose you from my list).
- · If you know of others who you think would benefit from receiving my newsletter, please pass on my details and have them sending me an email with the subscribe request.