

Surveillance Audit

Definition:

- Close observation of a person or group
- The collection, collation, analysis and dissemination of data.

On-going monitoring of Quality Post-Certification

- DAA's are required to monitor corrective programmes, agreed with the provider.
- Progress reports – condition of certification.
 - Must be completed by the date specified on the certificate. Written report submitted to the Ministry.
- Surveillance – requirement on certificate $\geq 2-3$ years.
 - Must be monitored at the half way point – visit on site 2-3 hours, includes lead auditor and consumer auditor.

MoH Surveillance Requirements

- The visit will include a specific focus on:
 - HDSS 1.2 Recognition of Maori values and beliefs.
 - HDSS 2.2 Quality and Risk Management Systems
 - One randomly selected outcome of Part 4 or 5
 - Review of completion or progress on addressing all partially attained or unattained criteria.
- Must be submitted to the MoH online.

1.2 Recognition of Maori Values & Beliefs

- Maturanga/Knowledge
 - Treaty of Waitangi
 - Te Reo Maori
 - Knowledge of Te Whare Tapa Wha
- Pukenga/Skills
 - Ability to communicate
 - Understanding of Maori communities
 - Karakia
- Whakawhaungatanga/Relationships
 - Relationship building
 - Links with Iwi – Hapu Whanau
- Manawanui/Commitment
 - Organisational commitment
 - Statements in Policy
 - Shared governance/planning

2.2 Quality and Risk Management

- Documented quality plan clearly identifying management commitment.
- Appropriate standards identified (e.g. internal audit system)
- Policies and procedures regularly reviewed as part of Quality and Risk Management process.
- Quality improvement data is analysed – trends, variances
 - Communicated to staff, service users and families.
- Corrective action plans – implemented and measured for effectiveness.
- Consumers, staff and visitors are protected from harm
 - OSH, infection control.
- Risks are identified, analysed and evaluated. Processes are put in place to minimise risk.

HDSS

Good Business Practice



Infection Control Standard

- Awareness of policy amongst staff.
- Training on policy and procedures.
- Linkage of Infection Control Programme (IFP) to the working of the Infection Control Committee (ICC).
- Reporting process through to the Governing Body of the organisation.
 - Linked to the wider quality and risk management process of the organisation.
- Evidence of surveillance occurring.
 - Developed by the ICC
 - Data Analysis
 - Audits of Practice.

Restraint Minimisation Standard

- Awareness of policy amongst staff.
- Each member has an individual record of education and competency in relation to the standard.
 - De-escalation techniques, knowledge of what to do in an emergency, breakaway techniques.
- Regular review of plans incorporating restraint.
- Restraint register providing an auditable record of restraint.
- Processes for debriefing clients/staff.
- Evidence of evaluation of restraint.
- Quality and Review
 - Comprehensive review of restraint practice at set intervals, linked to the Quality Risk management process of the provider.