Ons Dorp Care Centre

Information regarding Services at Ons Dorp Care Centre

The Service Capacity
The Care Centre currently facilitates 24 Hospital level care patients and 20 Rest Home level care residents. The Rest home beds are swing beds.

Swing beds
Swing beds are beds that can be used by the service as either Rest Home or Hospital beds.

What is the scope of the service?
- Rest Home Level Care
- Hospital level Care
- Palliative Care
- Respite Care (please note our med management requirements for respite care)

Does Ons Dorp render Dementia Care?
Early stage Dementia care can be rendered. However, as Dementia is a progressive illness, patients/residents with Dementia may need secure Dementia care at a later stage of their illness.

Ons Dorp does NOT have a secure unit or staff trained in Dementia Care and can therefore not provide Dementia level care to people that wander or presents with serious challenging behaviour.

Do we render care to Younger people under the age of 65? (YPD clients)
It should be specifically pointed out if the person is younger than 65, as the service needs special permission and the individual will or may need additional services.

Services
What services are being offered at the Care Centre?
- A GP visits in once a week and or when called out to see a patient/resident that may need urgent attention.
- Registered Nurse on site 24 hours a day.
- We offer the services of a private Physiotherapist by arrangement.
- Activities
- Daily Activities organised by an Activities Coordinator & Assistant
- Support and help from Volunteers
- Community involvement: e.g. Animal visits (organised by veterinarian services).
- Day Care

Clinical Services
Our service has at least one (1) Registered Nurse (RN) on duty at all times.
The RN has 24/7 access to an ‘on call’ RN, a senior RN or the Clinical Services Manager (RN).

Additional Services
Additional services are rendered at the Care Centre but at a cost to the resident/patient
- Two hairdresser
- Podiatrist services every 6/8 weeks

Decline of Entry
Do we decline entry to patients/residents?
Yes, we do decline entry for the following reasons:
- When the hospital and rest home have no beds available.
- When the patient/resident’s needs are beyond the scope of care rendered at the Care Centre, e.g. intravenous therapy, wandering patients/residents, patients with drug and alcohol dependency problems, challenging behaviour beyond the staff scope of practice
- or severe Dementia.

What happens when a patient/resident is declined entry to the service?
The resident/family of the resident will be informed regarding decline of entry- this information is currently recorded on the Care Centre Enquiry form.
The NASC assessor and or family are informed, and, where possible, the service will help to find a service provider that may be able to render suitable levels of care.

This will be recorded as notes on the Enquiry Form by the Registered Nurse/Clinical Services Manager.
Choices and Consent
What choices do patients/residents have?
Residents have choices regarding their care planning, activities, food services, cleaning and laundry services as well as medical/nursing and alternative interventions.

Family Participation
What role do family/whanau have in the care?
Residents and or their families are expected to participate in and at different levels of care, e.g. care planning, activities planning, nursing and medical reviews, and will be asked for a variety of consents e.g. to have photos taken, resuscitation, treatment etc.

Requirements for Admission
Do prospective patients/residents have to be assessed prior to entry?
Yes, all residents have to have had completed an assessment with the Needs Assessment team (NASC) in order to identify the level of care needed; Hospital or Rest Home Level Care. Needs Assessment and Service Coordinators can be contacted on: 09 4427171

Are there any contractual agreements involved?
Yes, the new resident or EPOA (Enduring Power of Attorney) will be expected to complete a contractual agreement with the service in which the role and responsibilities of the services as well as the responsibilities of the patient/resident will be specified.

Staff Training
What training do we offer staff?
We have a vigorous in-service training and education schedule that covers all the Age Related Care (ARC) contract requirements regarding training, including: Residents Rights; Infection Control; Wound Management; Fire Safety and Evacuation; Complaints; Restraint; Incidents/Accident management; Cultural Safety; Death and Dying; First Aid training; Risk Assessments (Falls/Nutrition/Skin/Restraint etc.) Chemical Use training; Abuse and neglect; Medicines management and Continence management training.

Staff Education
We offer Age Care Education for Health Care Assistants in order to ensure quality service and care to all our residents and patients.

Cultural Safety
Can we meet the specific cultural requirements of this resident / consumer?
Yes, as a culturally diverse service we are aware of the cultural sensitivities and the different cultural needs that may present themselves, (including Maori and Pacific Island needs) and strive to render the best possible care to all residents/patients regardless of their cultural background.

Access and Visiting Hours
Are there any limits on who may visit and visiting hours?
Family/whanau/friends are encouraged to visit loved ones as often as possible within reasonable hours. The Centre opens at around 0600 and the doors close at dusk - though will be opened after dark for the front door bell.