

Standard of respite care of elderly man with multiple health problems
16HDC00099, 18 September 2018

*Rest home ~ Registered nurse ~ Clinical nurse manager ~
Psychogeriatric unit ~ Respite care ~ EPA ~
Consent ~ Restraint ~ Documentation ~ Rights 4(1), 7(1)*

An 80-year-old man who suffered from multiple health problems, including Alzheimer's dementia with delirium, was admitted to the psychogeriatric unit of a rest home for a two-week period of respite care. The man's stay involved periods of unsettledness, which included challenging behaviour, agitation, and refusing medication and cares. The facility manager and the clinical nurse manager were both off site for much of the man's stay.

Findings

It was held that the rest home had the ultimate responsibility to ensure that the man received care that was of an appropriate standard and complied with the Code. It was considered that the following deficiencies are apparent in the care the man received:

- The man was restrained with a lap belt for several hours on ten occasions over nine days by different rest-home staff. Documentation of the restraint and consent was not completed adequately or in accordance with rest-home policy;
- The man's medication regimen was not reviewed in light of his deteriorating condition or prescription;
- The man's diabetes was not monitored during his admission;
- An evaluation of the reasons for the man not eating was not undertaken;
- Personal cares, particularly regarding oral care and showering, were lacking;
- The man had appointed his wife as his enduring power of attorney (EPA), but this had not been activated. The man's legal status (re his EPA) was not clarified; and
- The man's wife was asked to sign a "do not resuscitate" order on his behalf.

Overall, it was considered that the care provided was not adequate. Accordingly, it was found that the rest home did not provide services to the man with reasonable care and skill, and breached Right 4(1). The rest home was referred to the Director of Proceedings, who decided to issue HRRT proceedings.

The restraint coordinator, a registered nurse, allowed restraint to be applied to the man in a manner that did not comply with policy, and allowed an invasive procedure (manual assistance to make a bowel motion) to be performed by a healthcare assistant without clinical indication. It was found that the registered nurse did not provide services to the man with reasonable care and skill and, accordingly, breached Right 4(1). The Deputy Commissioner was not satisfied that the man gave informed consent to the use of restraint or to an anal massage/manual evacuation, or, if he was not competent to consent and in the absence of anyone being available

to consent on his behalf, that his family were not consulted. Accordingly, it was found that the registered nurse breached Right 7(1).

The facility manager had a responsibility to provide an appropriate standard of care to the man, even though she was not physically on site for much of his stay. It was found that the admission process for the man was suboptimal, and there was inadequate senior staffing oversight during the respite period. Accordingly, it was found that the facility manager did not provide services to the man with reasonable care and skill, and breached Right 4(1).

Other comment was made about the care provided to the man by the clinical nurse manager.

Recommendations

It was recommended that the rest home provide further training for all staff on the NZS 8134.2.2008 Health and Disability Service Standard (restraint and minimisation and safe practice standards); undertake an audit of the restraint use consent forms; undertake a review of its processes in relation to respite assessment and care planning, documentation, medication management, and management of complex conditions; undertake a review of the staffing levels and skill base; update the client-initiated resuscitation form; update the resident register documentation; provide an update on the work that has been undertaken with the district health board to ensure that service provision requirements have been met; and provide a written apology to the man's family.

It was recommended that the registered nurse undertake training on informed consent and restraint minimisation and safe practice standards, and provide a written apology to the man's family. It was recommended that the facility manager provide a written apology to the man's family.