

# Oceania Care Company Limited - Eldon Rest Home

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## Introduction

This report records the results of a Surveillance Audit of a provider of aged residential care services against the Ngā Paerewa Health and Disability Services Standard (NZS8134:2021).

The audit has been conducted by The DAA Group Limited, an auditing agency designated under section 32 of the Health and Disability Services (Safety) Act 2001, for submission to the Ministry of Health.

The abbreviations used in this report are the same as those specified in section 0.4 of the Ngā Paerewa Health and Disability Services Standard (NZS8134:2021).

You can view a full copy of the standard on the Ministry of Health's website by clicking [here](#).

The specifics of this audit included:

**Legal entity:** Oceania Care Company Limited

**Premises audited:** Eldon Rest Home

**Services audited:** Hospital services - Medical services; Hospital services - Geriatric services (excl. psychogeriatric); Rest home care (excluding dementia care)

**Dates of audit:** Start date: 19 June 2023 End date: 19 June 2023

**Proposed changes to current services (if any):** None

**Total beds occupied across all premises included in the audit on the first day of the audit:** 86

# Executive summary of the audit

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## Introduction

This section contains a summary of the auditors' findings for this audit. The information is grouped into the six sections contained within the Ngā Paerewa Health and Disability Services Standard:

- ō tatou motika | our rights
- hunga mahi me te hanganga | workforce and structure
- ngā huarahi ki te oranga | pathways to wellbeing
- te aro ki te tangata me te taiao haumarū | person-centred and safe environment
- te kaupare pokenga me te kaitiakitanga patu huakita | infection prevention and antimicrobial stewardship
- here taratahi | restraint and seclusion.

As well as auditors' written summary, indicators are included that highlight the provider's attainment against the subsection in each of the sections. The following table provides a key to how the indicators are arrived at.

### Key to the indicators

Indicator	Description	Definition
	Includes commendable elements above the required levels of performance	All subsections applicable to this service fully attained with some subsections exceeded
	No short falls	Subsections 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 subsections applicable to this service partially attained and of low risk

Indicator	Description	Definition
Yellow	A number of shortfalls that require specific action to address	Some subsections applicable to this service partially attained and of medium or high risk and/or unattained and of low risk
Red	Major shortfalls, significant action is needed to achieve the required levels of performance	Some subsections applicable to this service unattained and of moderate or high risk

## General overview of the audit

Eldon Rest Home is certified to provide rest home or hospital care services for up to 103 residents. This facility is owned and operated by Oceania Healthcare, which is a developer, owner and operator of residential aged-care and retirement village facilities in New Zealand. Ten of the rooms in the facility are dual purpose (rest home and hospital) rooms, operated as care suites under aged-related residential care occupation rights agreements (ORAs).

This surveillance audit was conducted against the Ngā Paerewa Health and Disability Services Standard (NZS 8134:2021) and the service's contracts with Te Whatu Ora – Health New Zealand Capital, Coast and Hutt Valley (Te Whatu Ora Capital, Coast and Hutt Valley). It included review of policies and procedures, review of residents' and staff files, observations, and interviews with residents and family/whānau, governance representatives, staff, and allied health professionals associated with the service. Residents and family/whānau were complimentary about the care provided.

There were no areas identified as requiring improvement during this audit.

## Ō tatou motika | Our rights

Includes 10 subsections that support an outcome where people receive safe services of an appropriate standard that comply with consumer rights legislation. Services are provided in a manner that is respectful of people's rights, facilitates informed choice, minimises harm, and upholds cultural and individual values and beliefs.

Subsections applicable to this service fully attained.

Eldon Rest Home has a Māori and Pacific people health policy in place. The policy outlines Oceania's commitment to Te Tiriti o Waitangi and Te Whare Tapa Whā model of care. Staff were observed to engage with residents in a culturally safe way. The service provider is aware of the requirement to recruit and retain Māori and Pasifika in its workforce. There were residents and staff in Eldon at the time of the audit who identified as Māori and staff who identified as Pasifika.

Eldon Rest Home works collaboratively with staff to support residents in all aspects of service delivery and to support and encourage a Māori world view of health in service delivery throughout the facility.

All staff had received in-service education on Te Tiriti o Waitangi, Te Whare Tapa Whā care model, pronunciation of te reo Māori, cultural safety, and the Code of Health and Disability Services Consumers' Rights (the Code). Residents who identified as Māori were treated equitably and confirmed that their mana motuhake (self-determination) was supported. The service was socially inclusive and person-centred. Te reo Māori and tikanga Māori were incorporated in daily practices.

Residents and their family/whānau confirmed that they were treated with dignity and respect. There was no evidence of abuse, neglect, or discrimination.

Complaints were resolved promptly and effectively in collaboration with all parties involved.

## Hunga mahi me te hanganga | Workforce and structure

Includes 5 subsections that support an outcome where people receive quality services through effective governance and a supported workforce.

Subsections applicable to this service fully attained.

Oceania Healthcare Limited, as the governing body, is committed to delivering high-quality services in all its facilities, including those at Eldon Rest Home. Strategic and business planning ensures the purpose, values, direction, scope, and goals for the organisation and of the facility are defined. Suitably qualified and experienced people manage the service. Ongoing monitoring of business, health and safety, and clinical services is occurring with regular reviews according to predetermined schedules.

Well-established quality and risk management systems are focused on improving service delivery and care outcomes. Residents and family/whānau provide regular feedback and staff are involved in quality activities. Actual and potential risks are identified and mitigated. Adverse events are documented with corrective actions implemented as applicable. The service complies with statutory and regulatory reporting obligations. An integrated approach includes collection and analysis of quality improvement data, identifying trends and leading to improvements, with data benchmarked to other Oceania facilities nationwide.

Staffing levels and skill mix meet the cultural and clinical needs of residents. Staff are appointed, orientated, and managed using current good practice. An education/training programme is in place. Care staff have access to health and wellbeing education appropriate for their role.

Resident and staff information is accurately recorded, securely stored and not accessible to unauthorised people. Document control systems ensure organisational information is current and easily accessible to those who require it.

## Ngā huarahi ki te oranga | Pathways to wellbeing

Includes 8 subsections that support an outcome where people participate in the development of their pathway to wellbeing, and receive timely assessment, followed by services that are planned, coordinated, and delivered in a manner that is tailored to their needs.

Subsections applicable to this service fully attained.

When a resident is admitted to Eldon Rest Home, they received a person-centred and family/whānau-centred approach to care. Routine analysis of entry and decline rates was conducted, and this included specific data for entry and decline rates for Māori.

Residents and their families/whānau participated in the development of a pathway to wellbeing, through timely assessments that was planned, coordinated, and reviewed to address resident's needs. Care plans were individualised and demonstrated wellbeing outcomes for all. Files reviewed demonstrated that care meets the needs of residents and their families/whānau and was evaluated on a regular and timely basis.

The activity programme being offered at Eldon Rest Home facilitated opportunities for Māori and their whānau to participate in te ao Māori.

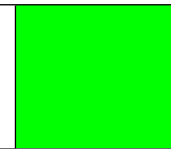
Medicines were safely managed and administered by staff who were competent to do so. All residents, including Māori residents and their whānau, were supported to understand their medications.

The food service met the nutritional needs of the residents with special cultural needs catered for. Māori and their whānau had menu options that were culturally specific to te ao Māori.

A documented transition, discharge or transfer plan was in place that had been developed in collaboration with the person and their family/whānau.

## Te aro ki te tangata me te taiao haumaruru | Person-centred and safe environment

Includes 2 subsections that support an outcome where Health and disability services are provided in a safe environment appropriate to the age and needs of the people receiving services that facilitates independence and meets the needs of people with disabilities.



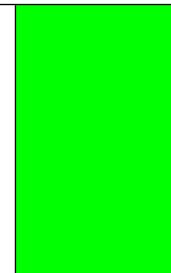
Subsections applicable to this service fully attained.

The facility meets the needs of residents and was clean and well-maintained. There is a current building warrant of fitness. Electrical and biomedical equipment have been checked and assessed as required. Internal and external areas are accessible and safe, and external areas have shade and seating provided and meet the needs of tāngata whaikaha (people with disabilities).

Staff are trained in emergency procedures, use of emergency equipment and supplies, and attend regular fire drills. Staff, residents and family/whānau understood emergency and security arrangements. Security is maintained.

## Te kaupare pokenga me te kaitiakitanga patu huakita | Infection prevention and antimicrobial stewardship

Includes 5 subsections that support an outcome where Health and disability service providers' infection prevention (IP) and antimicrobial stewardship (AMS) strategies define a clear vision and purpose, with quality of care, welfare, and safety at the centre. The IP and AMS programmes are up to date and informed by evidence and are an expression of a strategy that seeks to maximise quality of care and minimise infection risk and adverse effects from antibiotic use, such as antimicrobial resistance.



Subsections applicable to this service fully attained.

Eldon Rest Home ensures the safety of residents and staff through a planned infection prevention (IP) and antimicrobial stewardship (AMS) programme that was appropriate to the size and complexity of the service. The clinical manager coordinates the programme and engages in procurement processes. There was a pandemic plan in place which has been assessed periodically.

Surveillance of infections was undertaken, and results were monitored and shared with all staff. Action plans were implemented as and when required.

## Here taratahi | Restraint and seclusion

Includes 4 subsections that support outcomes where Services shall aim for a restraint and seclusion free environment, in which people's dignity and mana are maintained.

Subsections applicable to this service fully attained.

The service is a restraint free environment. This is supported by the governing body and policies and procedures. There were no residents using restraint at the time of audit. A comprehensive assessment, approval, and monitoring process, with regular reviews is in place should restraint use be required in the future. A suitably qualified restraint coordinator who is the clinical manager, manages the process.

Staff interviewed demonstrated a sound knowledge and understanding of providing least restrictive practice, de-escalation techniques, alternative interventions to restraint, and restraint monitoring.



## Summary of attainment

The following table summarises the number of subsections and criteria audited and the ratings they were awarded.

Attainment Rating	Continuous Improvement (CI)	Fully Attained (FA)	Partially Attained Negligible Risk (PA Negligible)	Partially Attained Low Risk (PA Low)	Partially Attained Moderate Risk (PA Moderate)	Partially Attained High Risk (PA High)	Partially Attained Critical Risk (PA Critical)
Subsection	0	22	0	0	0	0	0
Criteria	0	54	0	0	0	0	0

Attainment Rating	Unattained Negligible Risk (UA Negligible)	Unattained Low Risk (UA Low)	Unattained Moderate Risk (UA Moderate)	Unattained High Risk (UA High)	Unattained Critical Risk (UA Critical)
Subsection	0	0	0	0	0
Criteria	0	0	0	0	0

# Attainment against the Ngā Paerewa Health and Disability Services Standard

The following table contains the results of all the subsections assessed by the auditors at this audit. Depending on the services they provide, not all subsections are relevant to all providers and not all subsections are assessed at every audit.

There may be subsections in this audit report with an attainment rating of ‘not applicable’ which relate to new requirements in Ngā Paerewa that the provider is working towards. The provider will be expected to meet these requirements at their next audit.

For more information on the standard, please click [here](#).

For more information on the different types of audits and what they cover please click [here](#).

Subsection with desired outcome	Attainment Rating	Audit Evidence
<p>Subsection 1.1: Pae ora healthy futures</p> <p>Te Tiriti: Māori flourish and thrive in an environment that enables good health and wellbeing.</p> <p>As service providers: We work collaboratively to embrace, support, and encourage a Māori worldview of health and provide high-quality, equitable, and effective services for Māori framed by Te Tiriti o Waitangi.</p>	FA	<p>Oceania Healthcare (Oceania) has a culturally competent services policy in place. The service supports increasing Māori capacity by employing more Māori staff members across differing levels of the organisation as vacancies and applications for employment permit. Ethnicity data is gathered when staff are employed, and this data is analysed at a management and organisational level. There were staff in the service who identified as Māori at the time of audit.</p>
<p>Subsection 1.2: Ola manuia of Pacific peoples in Aotearoa</p> <p>The people: Pacific peoples in Aotearoa are entitled to live and enjoy good health and wellbeing.</p> <p>Te Tiriti: Pacific peoples acknowledge the mana whenua of Aotearoa as tuakana and commit to supporting them to achieve tino rangatiratanga.</p> <p>As service providers: We provide comprehensive and equitable</p>	FA	<p>The service provider has a policy on Māori and Pacific people’s health. This describes how the organisation will generally respond to the cultural needs of Pasifika residents. The document notes the Pasifika worldviews, and the need to embrace cultural and spiritual beliefs, but does not yet have a specific Pasifika model of care outlined.</p>

<p>health and disability services underpinned by Pacific worldviews and developed in collaboration with Pacific peoples for improved health outcomes.</p>		
<p>Subsection 1.3: My rights during service delivery</p> <p>The People: My rights have meaningful effect through the actions and behaviours of others.</p> <p>Te Tiriti: Service providers recognise Māori mana motuhake (self-determination).</p> <p>As service providers: We provide services and support to people in a way that upholds their rights and complies with legal requirements.</p>	<p>FA</p>	<p>The Code of Health and Disability Service Consumers' Rights (the Code) was available and on display at Eldon Rest Home (Eldon) in English, and in te reo Māori. There was a range of signage in te reo Māori throughout the facility, which included a range of Māori art. Residents who identified as Māori were evidenced to have their mana motuhake (self-determination) recognised and respected.</p>
<p>Subsection 1.4: I am treated with respect</p> <p>The People: I can be who I am when I am treated with dignity and respect.</p> <p>Te Tiriti: Service providers commit to Māori mana motuhake.</p> <p>As service providers: We provide services and support to people in a way that is inclusive and respects their identity and their experiences.</p>	<p>FA</p>	<p>Records reviewed confirmed that each resident's individual cultural, religious, and social needs, values, and beliefs had been identified, documented, and incorporated into their care plan.</p> <p>Staff at Eldon have completed training on Te Tiriti o Waitangi, and this was reflected in their practice. Interviews verified staff understood what Te Tiriti o Waitangi meant to their practice, with te reo Māori and tikanga Māori being promoted. The organisation had acknowledged tikanga practices in the policies and procedures reviewed and in the Māori care planning process. Residents and family/whānau reported that their values, beliefs, and language was respected in the care planning process. The service was evidenced to respond to tāngata whaikaha needs. There had been formal specific engagement with tāngata whaikaha to enable their participation in te ao Māori if residents required this.</p>
<p>Subsection 1.5: I am protected from abuse</p> <p>The People: I feel safe and protected from abuse.</p> <p>Te Tiriti: Service providers provide culturally and clinically safe services for Māori, so they feel safe and are protected from</p>	<p>FA</p>	<p>Policies and procedure outlined Eldon's commitment to promoting an environment that does not support institutional and systemic racism. Cultural training included discussion on institutional and systemic racism, institutional bias, and the ability to question its existence at</p>

<p>abuse. As service providers: We ensure the people using our services are safe and protected from abuse.</p>		<p>Eldon if it was thought to exist.</p> <p>The business and care manager (BCM) and clinical manager (CM) interviewed stated that any observed or reported racism, abuse, or exploitation at Eldon would be addressed promptly, and that they were guided by a code of conduct. Residents expressed that they had not witnessed any abuse or neglect, they were treated fairly, they felt safe, and protected from abuse and neglect.</p> <p>During interview, the BCM and CM stated that a holistic model of health at Eldon was promoted, that encompassed an individualised approach and that ensured best outcomes for all.</p>
<p>Subsection 1.7: I am informed and able to make choices</p> <p>The people: I know I will be asked for my views. My choices will be respected when making decisions about my wellbeing. If my choices cannot be upheld, I will be provided with information that supports me to understand why.</p> <p>Te Tiriti: High-quality services are provided that are easy to access and navigate. Providers give clear and relevant messages so that individuals and whānau can effectively manage their own health, keep well, and live well.</p> <p>As service providers: We provide people using our services or their legal representatives with the information necessary to make informed decisions in accordance with their rights and their ability to exercise independence, choice, and control.</p>	<p>FA</p>	<p>Appropriate best practice tikanga guidelines around informed consent were in place to guide staff. Four staff members who identified as Māori, and residents' whānau assisted staff to support residents with informed consent. Evidence was sighted of supported decision making, being fully informed, the opportunity to choose, and cultural support when a resident had a choice of treatment options available to them. Staff had received training on cultural safety and tikanga best practice.</p>
<p>Subsection 1.8: I have the right to complain</p> <p>The people: I feel it is easy to make a complaint. When I complain I am taken seriously and receive a timely response.</p> <p>Te Tiriti: Māori and whānau are at the centre of the health and disability system, as active partners in improving the system and their care and support.</p> <p>As service providers: We have a fair, transparent, and equitable</p>	<p>FA</p>	<p>A fair, transparent, and equitable system is in place to receive and resolve complaints that leads to improvements. This meets the requirements of consumer rights legislation. All residents and their families/whānau are provided with information on entry regarding the complaints process and advocacy services. Information regarding the complaints process is displayed in the facility along with advocacy information. Residents and family/whānau interviewed understood their</p>

<p>system in place to easily receive and resolve or escalate complaints in a manner that leads to quality improvement.</p>		<p>right to make a complaint and knew how to do so.</p> <p>There have been 12 complaints received from residents and/or their whānau/family member in the last 12 months. Documentation sighted showed that the complaints had been addressed, and that the complainant had been informed of findings following investigation. There has been one complaint received from the office of the Health and Disability Commissioner (HDC) in 2022. The complaint remains open, but Eldon has responded appropriately to the HDC's request for information related to the matter. There have been no other complaints received from an external source.</p> <p>The BCM and CM were able to describe the processes the service has in place in policy to ensure complaints from Māori will be treated in a culturally appropriate and equitable fashion. This included the use of an interpreter (if required) and engagement with the resident and their whānau in a way culturally appropriate for them (e.g., with the use of hui and tikanga).</p>
<p>Subsection 2.1: Governance</p> <p>The people: I trust the people governing the service to have the knowledge, integrity, and ability to empower the communities they serve.</p> <p>Te Tiriti: Honouring Te Tiriti, Māori participate in governance in partnership, experiencing meaningful inclusion on all governance bodies and having substantive input into organisational operational policies.</p> <p>As service providers: Our governance body is accountable for delivering a highquality service that is responsive, inclusive, and sensitive to the cultural diversity of communities we serve.</p>	<p>FA</p>	<p>The governing body of Oceania assumes accountability for delivering a high-quality service through culturally appropriate policy and procedure formed with culturally appropriate groups (e.g., Māori and Pasifika) as required. The governing body honours Te Tiriti o Waitangi, and are focused on improving outcomes for Māori, Pasifika, and tāngata whaikaha. The leadership structure at Eldon is appropriate to the size and complexity of the organisation. Board members have access to cultural training, te reo Māori and opportunities to upskill in Te Tiriti o Waitangi via other community roles and employment, although the specific expertise of the board has not yet been documented.</p> <p>The strategic plan outlines the purpose, values, scope, direction, and goals of the organisation with regular reporting to the board. Documented quality and risk management plans are in place reflecting good practice standards.</p> <p>There is a Māori health plan in place that guides care for Māori. There was no evidence of infrastructural, financial, physical, or other barriers to equitable service delivery for Māori. This was supported by interviews with Māori residents and their whānau, and with staff. The</p>

		<p>needs of tāngata whaikaha (people with disabilities) are reflected in organisational documents, including the Person with a Disability Policy.</p> <p>The service holds contracts with Te Whatu Ora Capital, Coast and Hutt Valley for aged-related rest home and hospital services, long term support-chronic health conditions (LTS-CHC), short-term care (respite), care for young people with a disability (YPD), and flexi-funding for palliative care. The service also has a contract with the Accident Compensation Corporation (ACC) to provide support services. On the day of audit, 26 residents were receiving rest home services, 53 hospital level services, two LTS-CHC, one respite, one YPD, and three on ACC. There were no residents receiving flexi-funding for palliative care services.</p>
<p>Subsection 2.2: Quality and risk</p> <p>The people: I trust there are systems in place that keep me safe, are responsive, and are focused on improving my experience and outcomes of care.</p> <p>Te Tiriti: Service providers allocate appropriate resources to specifically address continuous quality improvement with a focus on achieving Māori health equity.</p> <p>As service providers: We have effective and organisation-wide governance systems in place relating to continuous quality improvement that take a risk-based approach, and these systems meet the needs of people using the services and our health care and support workers.</p>	<p>FA</p>	<p>The directors are responsible for identifying the purpose, values, direction, scope, and goals for the organisation, and monitoring and reviewing performance at planned intervals. There is a documented and implemented quality and risk management system which includes processes to meet health and safety requirements. This includes a risk management plan and policies and procedures which clearly describe all potential internal and external risks and corresponding mitigation strategies in line with the National Adverse Event Reporting Policy.</p> <p>Leadership commitment to quality and risk management was evident in quality and risk documentation and board reporting documents. Ethnicity data is being gathered for residents. High-quality care for Māori is embedded in organisational practices and the efficacy of this was confirmed by Māori residents and their whānau.</p> <p>Quality data includes incidents/accidents, infection and outbreak events, complaints/compliments, and internal audits, all of which are analysed to identify and manage issues and trends. A sample of quality and risk and other documentation showed that where monitoring activities identify a need for improvement, corrective actions are implemented until improvement occurs.</p> <p>The service has complied with section 31 notifications. There have been six section 31 notifications completed in the last year related to medication error (one), pressure injury (three), a pharmacy error (one)</p>

		<p>and a resident missing for more than three hours (one). All section 31 notifications were followed by a root cause analysis related to the issue to reflect on underlying cause in an effort to avoid the issue recurring.</p>
<p>Subsection 2.3: Service management</p> <p>The people: Skilled, caring health care and support workers listen to me, provide personalised care, and treat me as a whole person.</p> <p>Te Tiriti: The delivery of high-quality health care that is culturally responsive to the needs and aspirations of Māori is achieved through the use of health equity and quality improvement tools.</p> <p>As service providers: We ensure our day-to-day operation is managed to deliver effective person-centred and whānau-centred services.</p>	<p>FA</p>	<p>There is a documented and implemented process for determining staffing levels and skill mix to provide culturally and clinically safe care, 24 hours a day, seven days a week (24/7). The facility adjusts staffing levels to meet the changing needs of residents. Staff reported that staff numbers were adequate to allow them to complete the work allocated to them. Residents and whānau interviewed supported this.</p> <p>Continuous improvement was noted in the certification audit undertaken in May 2021. This related to a quality project following residents' concerns relating to staff being rushed, and data showing the percentage of sick leave being taken resulting in care staff on duty not being able to complete their cares in a timely way. A plan was put in place to try and reduce the high amount of sick leave some staff were taking. Evaluation evidenced residents are happy with their care, including timeframes, and documentation showed that sick leave taken had been reduced. Discussion with the BCM advised that this had not been able to be maintained, primarily due to the nationwide impact of COVID-19 and the shortage of care staff available to the facility. The facility continues to monitor and ameliorate shortages as they occur.</p> <p>Rosters reviewed confirmed staffing in the facility comprises of 24/7 RN cover. The RNs were supported by health care assistants (HCAs): sixteen in the morning, ten in the afternoon and five on night shift. Where staff are away, shifts are covered in most instances. Where staff have been unable to fully cover the facility's 'normal' staffing levels, staffing has been maintained at safe staffing levels through 'backfilling' shifts and management of resident acuity/resident numbers. Activities staff are available to provide the recreation programme five days per week. Domestic (cleaning and laundry) and food services are conducted by dedicated staff seven days per week. At least one staff member on duty had a current first aid certificate.</p> <p>Continuing education is planned on an annual basis and includes mandatory training requirements. Education includes mandatory</p>

		<p>training on topics such as medication management, infection control (including management of COVID-19, hand hygiene and donning and doffing of personal protective equipment), management of emergencies and civil defence response, manual handling and safe transfer, resident cares, and residents' rights. The service has also embedded cultural values in their training programmes, including information on cultural safety and institutional bias, Te Tiriti o Waitangi, te reo Māori, tikanga Māori, and Māori models of care. All staff who administer medicines are regularly competency-assessed to ensure compliance with known best practice and safe procedures in medicine management. Nine of the of the eighteen RNs employed maintain interRAI competency.</p> <p>Māori-related information is shared in the organisation through policy and procedure, the care planning process, and through communication with residents and their whānau.</p>
<p>Subsection 2.4: Health care and support workers</p> <p>The people: People providing my support have knowledge, skills, values, and attitudes that align with my needs. A diverse mix of people in adequate numbers meet my needs.</p> <p>Te Tiriti: Service providers actively recruit and retain a Māori health workforce and invest in building and maintaining their capacity and capability to deliver health care that meets the needs of Māori.</p> <p>As service providers: We have sufficient health care and support workers who are skilled and qualified to provide clinically and culturally safe, respectful, quality care and services.</p>	FA	<p>Human resources management policies and processes are based on good employment practice and relevant legislation. Professional qualifications for health care professionals had been validated and then checked and documented annually. Job descriptions for all roles are in place. They described the skills and knowledge required of each position, and identified the outcomes, accountability, responsibilities, authority, and functions to be achieved. A sample of staff records reviewed (six) showed that orientation for new staff was completed and documented. Staff interviewed confirmed that orientation does take place, and staff described it as useful in preparing them for their role.</p> <p>Information held about staff is accurate, relevant, secure, and stored confidentially. Ethnicity data is being recorded for staff and used in line with health information standards.</p>
<p>Subsection 3.1: Entry and declining entry</p> <p>The people: Service providers clearly communicate access, timeframes, and costs of accessing services, so that I can choose the most appropriate service provider to meet my needs.</p> <p>Te Tiriti: Service providers work proactively to eliminate inequities</p>	FA	<p>Eldon conducts routine analysis of entry and decline rates, which included specific data for entry and decline rates for Māori.</p> <p>Eldon has commenced the process of developing meaningful partnerships with the local Māori community organisations to benefit Māori individuals and whānau. Contact has been made with the local</p>



<p>between Māori and non-Māori by ensuring fair access to quality care.</p> <p>As service providers: When people enter our service, we adopt a person-centred and whānau-centred approach to their care. We focus on their needs and goals and encourage input from whānau. Where we are unable to meet these needs, adequate information about the reasons for this decision is documented and communicated to the person and whānau.</p>		<p>Waikanae Marae, and their input and that of residents' whānau are used if a resident requests input from traditional Māori healers.</p>
<p>Subsection 3.2: My pathway to wellbeing</p> <p>The people: I work together with my service providers so they know what matters to me, and we can decide what best supports my wellbeing.</p> <p>Te Tiriti: Service providers work in partnership with Māori and whānau, and support their aspirations, mana motuhake, and whānau rangatiratanga.</p> <p>As service providers: We work in partnership with people and whānau to support wellbeing.</p>	<p>FA</p>	<p>The multidisciplinary team at Eldon worked in partnership with the resident and their family/whānau to support the resident's wellbeing. Six residents' files were reviewed, four from the hospital and two from the rest home. Files included residents under 65 years, on an LTS-CHC contract, residents under 65 years on a YPD contract, residents receiving respite care, and residents being cared for under the Aged Related Residential Care (ARRC) contract. File reviews included residents who identified as Māori, residents with a pressure injury, residents with behaviours that challenge, residents who had had a recent transfer to an acute facility, residents who self-administer medications, and residents who had experienced a recent fall. Files reviewed verified the care plans were developed by the RN following a comprehensive assessment, including consideration of the person's lived experience, cultural needs, values, and beliefs, and considers wider service integration, where required.</p> <p>Assessment was based on a range of clinical assessments and included resident and family/whānau input (as applicable). Timeframes for the initial assessment, medical assessment, initial care plan, long-term care plan, short-term care plans and review/evaluation timeframes met contractual requirements. Staff at Eldon understood the Māori constructs of oranga and implemented a process to support Māori and whānau to identify their own pae ora outcomes in their care or support plan. The support required to achieve these was clearly documented, communicated, and understood. This was verified by sampling residents' records, from interviews, including with the general</p>

		<p>practitioner (GP), and from observations.</p> <p>Management of any specific medical conditions was well documented with evidence of systematic monitoring and regular evaluation of responses to planned care. Where progress was different to that expected, changes were made to the care provided in collaboration with the resident and their family/whānau. Residents and their family/whānau confirmed active involvement in the process, including residents with a disability.</p>
<p>Subsection 3.3: Individualised activities</p> <p>The people: I participate in what matters to me in a way that I like. Te Tiriti: Service providers support Māori community initiatives and activities that promote whanaungatanga. As service providers: We support the people using our services to maintain and develop their interests and participate in meaningful community and social activities, planned and unplanned, which are suitable for their age and stage and are satisfying to them.</p>	FA	<p>A diversional therapist, and an artistic therapist provide an activities programme at Eldon five days a week. Eldon had no evidence to verify they encouraged their workforce to support community initiatives that met the health needs and aspirations of Māori and their whānau.</p> <p>Opportunities for Māori residents, whānau and staff to participate in te ao Māori were facilitated. Matariki, Māori language week, and Waitangi Day had been celebrated. Māori entertainers visited and sang Māori songs. Māori art was displayed around the facility and discussion encouraged. Orientation calendars included the months and days in te reo Māori. The kitchen provided foods relevant to te ao Māori during the Māori weeks of celebrations.</p>
<p>Subsection 3.4: My medication</p> <p>The people: I receive my medication and blood products in a safe and timely manner. Te Tiriti: Service providers shall support and advocate for Māori to access appropriate medication and blood products. As service providers: We ensure people receive their medication and blood products in a safe and timely manner that complies with current legislative requirements and safe practice guidelines.</p>	FA	<p>The medication management policy was current and in line with the Medicines Care Guide for Residential Aged Care. A safe system for medicine management using an electronic system was observed on the day of audit. All staff who administered medicines were competence assessed to perform the function they manage.</p> <p>Medications were supplied to the facility from a contracted pharmacy. Medication reconciliation occurred. All medications sighted were within current use-by dates. There was a process in place to identify, record, and communicate residents' medicine related allergies or sensitivities.</p> <p>Medicines were stored safely, including controlled drugs. The required stock checks had been completed. Medicines stored were within the recommended temperature range. Prescribing practices met requirements. The required three-monthly GP review was consistently</p>

		<p>recorded on the medicine chart.</p> <p>Self-administration of medication was facilitated and managed safely. Residents, including Māori residents and their whānau, were supported to understand their medications.</p> <p>Over-the-counter medication and supplements were considered by the prescriber as part of the person's medication.</p> <p>Standing orders were not used at Eldon.</p>
<p>Subsection 3.5: Nutrition to support wellbeing</p> <p>The people: Service providers meet my nutritional needs and consider my food preferences.</p> <p>Te Tiriti: Menu development respects and supports cultural beliefs, values, and protocols around food and access to traditional foods.</p> <p>As service providers: We ensure people's nutrition and hydration needs are met to promote and maintain their health and wellbeing.</p>	FA	<p>Each resident had a nutritional assessment on admission to the facility. The Māori health plan in place included cultural values, beliefs, and protocols around food. The personal food preferences, any special diets and modified texture requirements were accommodated in the daily meal plan. All residents had opportunities to request meals of their choice and the kitchen would address this, including providing options of culturally specific food to te ao Māori.</p> <p>Eldon had implemented a cultural theme menu that included fry bread, boil up with dough boys, kai moana chowder, raw fish, oven hangi, sweetcorn, and mussel chowder, rewena bread, and steamed pudding.</p> <p>Families and whānau were welcome to bring culturally specific food for their relatives. The interviewed residents and families/whānau expressed satisfaction with the food options available.</p>
<p>Subsection 3.6: Transition, transfer, and discharge</p> <p>The people: I work together with my service provider so they know what matters to me, and we can decide what best supports my wellbeing when I leave the service.</p> <p>Te Tiriti: Service providers advocate for Māori to ensure they and whānau receive the necessary support during their transition, transfer, and discharge.</p> <p>As service providers: We ensure the people using our service experience consistency and continuity when leaving our services. We work alongside each person and whānau to provide and</p>	FA	<p>Any need for a resident to be transferred or discharged from Eldon was planned and managed safely with coordination between services and in collaboration with the resident and their family/whānau. An interview was undertaken with a resident and their family/whānau following a recent transfer to an acute facility. They reported that they were kept well informed during the transfer of their relative.</p>

coordinate a supported transition of care or support.		
<p>Subsection 4.1: The facility</p> <p>The people: I feel the environment is designed in a way that is safe and is sensitive to my needs. I am able to enter, exit, and move around the environment freely and safely.</p> <p>Te Tiriti: The environment and setting are designed to be Māori-centred and culturally safe for Māori and whānau.</p> <p>As service providers: Our physical environment is safe, well maintained, tidy, and comfortable and accessible, and the people we deliver services to can move independently and freely throughout. The physical environment optimises people's sense of belonging, independence, interaction, and function.</p>	FA	<p>Appropriate systems are in place to ensure the residents' physical environment and facilities (internal and external) are fit for their purpose, well-maintained and that they meet legislative requirements. Ten rooms are operated as dual-purpose (rest home and hospital) care suites under occupation rights agreements.</p> <p>A planned maintenance schedule includes electrical testing and tagging, resident equipment checks, calibrations of weigh scales, and clinical equipment. Monthly hot water tests are completed for resident areas; these were sighted and were all within normal limits. Processes are in place to manage inconsistencies should they occur.</p> <p>Residents and family/whānau interviewed were happy with the environment, including heating and ventilation, privacy, and maintenance. Care staff interviewed stated they have adequate equipment to safely deliver care for residents but would like an additional hoist to assist them. Information received from the BCM showed that two further hoists for use in the facility were included in the next budget round.</p> <p>The building has a warrant of fitness which expires on 27 April 2024. There were no plans for further building projects requiring consultation, but Oceania directors were aware of the requirement to consult and co-design with Māori if this was envisaged.</p>
<p>Subsection 4.2: Security of people and workforce</p> <p>The people: I trust that if there is an emergency, my service provider will ensure I am safe.</p> <p>Te Tiriti: Service providers provide quality information on emergency and security arrangements to Māori and whānau.</p> <p>As service providers: We deliver care and support in a planned and safe way, including during an emergency or unexpected event.</p>	FA	<p>Disaster and civil defence plans and policies direct the facility in their preparation for disasters and described the procedures to be followed. Staff have been trained in fire and emergency management and knew what to do in an emergency. Twenty-six (26) staff have current first aid certification and there was a first aid certified staff member on duty 24/7 on the rosters sighted. Information on emergency and security arrangements is provided to residents and their family/whānau on entry to the service. The facility has overnight 'lock-up' procedures which allow for emergency egress. All staff were noted to be wearing uniforms</p>

		<p>and name badges during the audit.</p> <p>The fire evacuation plan was approved by Fire and Emergency New Zealand (FENZ) on 21 September 2006. The requirements of the fire and emergency scheme are reflected in the facility's fire and emergency management plan. Adequate supplies for use in the event of a civil defence emergency meet the National Emergency Management Agency recommendations for the region.</p> <p>Call bells alert staff to residents requiring assistance, and residents and family/whānau reported that staff were responsive to call bells.</p>
<p>Subsection 5.2: The infection prevention programme and implementation</p> <p>The people: I trust my provider is committed to implementing policies, systems, and processes to manage my risk of infection. Te Tiriti: The infection prevention programme is culturally safe. Communication about the programme is easy to access and navigate and messages are clear and relevant. As service providers: We develop and implement an infection prevention programme that is appropriate to the needs, size, and scope of our services.</p>	FA	<p>A pandemic preparedness plan was in place, and this was reviewed at regular intervals. The plan was evaluated during several COVID-19 outbreaks in March and July 2022, and in April and June 2023. Sufficient infection prevention (IP) resources including personal protective equipment (PPE) were sighted. The IP resources were readily accessible to support the pandemic preparedness plan if required.</p> <p>Eldon had no educational resources available in te reo Māori that were accessible to Māori. Partnerships with Māori had not yet been established to enable the protection of culturally safe IP practices and acknowledge the spirit of Te Tiriti o Waitangi.</p>
<p>Subsection 5.4: Surveillance of health care-associated infection (HAI)</p> <p>The people: My health and progress are monitored as part of the surveillance programme. Te Tiriti: Surveillance is culturally safe and monitored by ethnicity. As service providers: We carry out surveillance of HAIs and multi-drug-resistant organisms in accordance with national and regional surveillance programmes, agreed objectives, priorities, and methods specified in the infection prevention programme, and with an equity focus.</p>	FA	<p>Surveillance of healthcare-associated infections (HAIs) at Eldon was appropriate to that recommended for long-term care facilities and was in line with priorities defined in the infection control programme. Surveillance data is collected, including ethnicity data.</p> <p>There were culturally safe processes for communicating between service providers and people receiving services who developed an HAI.</p>

<p>Subsection 6.1: A process of restraint</p> <p>The people: I trust the service provider is committed to improving policies, systems, and processes to ensure I am free from restrictions.</p> <p>Te Tiriti: Service providers work in partnership with Māori to ensure services are mana enhancing and use least restrictive practices.</p> <p>As service providers: We demonstrate the rationale for the use of restraint in the context of aiming for elimination.</p>	<p>FA</p>	<p>Oceania Healthcare has a restraint elimination focus for all its care facilities. The board is fully supportive of this approach and confirmed a full report on restraint use from all facilities, including Eldon (if it were to use restraint), is provided to the board. At the time of audit, no residents were using a restraint, and there has been no restraint in use at Eldon since 2019.</p> <p>The restraint coordinator (RC) is a defined role undertaken by the CM who is an RN. The RC would provide support and oversight should restraint be required in the future. There is a job description that outlines the role, and the RC has had specific education around restraint and its use.</p>
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## Specific results for criterion where corrective actions are required

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Where a subsection is rated partially attained (PA) or unattained (UA) specific corrective actions are recorded under the relevant criteria for the subsection. The following table contains the criterion where corrective actions have been recorded.

Criterion can be linked to the relevant subsection by looking at the code. For example, Criterion 1.1.1 My service provider shall embed and enact Te Tiriti o Waitangi within all its work, recognising Māori, and supporting Māori in their aspirations, whatever they are (that is, recognising mana motuhake) relates to subsection 1.1: Pae ora healthy futures in Section 1 Our rights.

If there is a message “no data to display” instead of a table, then no corrective actions were required as a result of this audit.

No data to display
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## Specific results for criterion where a continuous improvement has been recorded

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As well as whole subsections, individual criterion within a subsection can also be rated as having a continuous improvement. A continuous improvement means that the provider can demonstrate achievement beyond the level required for full attainment. The following table contains the criterion where the provider has been rated as having made corrective actions have been recorded.

As above, criterion can be linked to the relevant subsection by looking at the code. For example, Criterion 1.1.1 relates to subsection 1.1: Pae ora healthy futures in Section 1: Our rights.

If, instead of a table, there is a message “no data to display” then no continuous improvements were recorded as part of this of this audit.

No data to display
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End of the report.