

Metlifecare Retirement Villages Limited - Metlifecare Coastal Villas

Introduction

This report records the results of a Certification 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:	Metlifecare Retirement Villages Limited
Premises audited:	Metlifecare Coastal Villas
Services audited:	Hospital services - Medical services; Hospital services - Geriatric services (excl. psychogeriatric); Rest home care (excluding dementia care)
Dates of audit:	Start date: 24 August 2022 End date: 25 August 2022
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:	27

Executive summary of the audit

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
	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
	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

Metlifecare Coastal Villas provides rest home and hospital level services for up to 35 residents.

This certification audit included review of policies and procedures, review of residents' and staff files, observations, and interviews with residents, family/whānau, the governance group, regional and local managers, staff, contracted allied health providers (a physiotherapist) and a general practitioner. The service maintains quality records that comply with relevant legislation, health information standards and professional guidelines.

Strengths of the service, resulting in a continuous improvement rating related to the civil defence programme. Improvement is required in the areas of the service's staff training programme.

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.
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Metlifecare Coastal Villas provides an environment that supports residents' rights and culturally safe care. Staff demonstrated an understanding of residents' rights and obligations. There are health plans, policies and processes that encapsulates care specifically directed at Māori, Pacific peoples, and other ethnicities. The service works collaboratively with internal and external Māori and Pasifika supports, to encourage a Māori/Pasifika world view of health in service delivery. Metlifecare has policies and processes in place to provide Māori with equitable and effective services based on the Te Tiriti o Waitangi and the principles of Mana Motuhake. This was confirmed by staff interviewed.

Residents receive services in a manner that respects their dignity, privacy, and independence. The service provides services and support to people in a way that is inclusive and respects their identity and their experiences. Care plans accommodate the choices of residents and/or their family/whānau. There is evidence that residents and family are kept well informed.

Residents and their family/whānau are informed of their rights according to the Code of Health and Disability Services Consumers' Rights (the Code) and these are upheld. Residents are safe from abuse.

Residents and family/whānau receive information in an easy-to-understand format and feel listened to and included when making decisions about care and treatment. Open communication is practised. Interpreter services are provided as needed. Whānau/family and legal representatives are involved in decision making that complies with the law. Advance directives are followed wherever possible.

Complaints are 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.		Some subsections applicable to this service partially attained and of low risk.
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The governing body assumes accountability for delivering a high-quality service.

Planning ensures the purpose, values, direction, scope, and goals for the organisation are defined. Performance is monitored and reviewed at planned intervals.

The quality and risk management systems are focused on improving service delivery and care. Residents and families/whānau provide regular feedback and staff are involved in quality activities. An integrated approach includes collection and analysis of quality improvement data and identifying trends to make improvements. Actual and potential risks are identified and mitigated.

Adverse events are documented with corrective actions implemented. The service complies with statutory and regulatory reporting obligations.

Staffing levels and skill mix meet the cultural and clinical needs of residents. Staff are appointed, orientated, and managed using current good practice. A systematic approach to identify and deliver ongoing learning supports safe equitable service delivery.

Residents' information is accurately recorded, securely stored and not accessible to unauthorised people.

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.
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When residents are admitted to Metlifecare Coastal Villas a person-centred and family/whānau-centred approach is adopted. Relevant information is provided to the potential resident and their family/whānau.

The service works in partnership with the residents and their family/whānau to assess, plan and evaluate care. Care plans are individualised, based on comprehensive information, and accommodate any new problems that might arise. Files reviewed demonstrated that care meets the needs of residents and their family/whānau and is evaluated on a regular and timely basis.

Residents are supported to maintain and develop their interests and participate in meaningful community and social activities suitable to their age and stage of life.

Medicines are safely managed and administered by staff who are competent to do so.

The food service meets the nutritional needs of the residents with special cultural needs catered for.

Residents are transitioned or transferred to other health services as required.

Te aro ki te tangata me te taiao haumarū | 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.
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The facility meets the needs of residents and was clean and well maintained. There is a current building warrant of fitness. Electrical equipment has been tested as required. External areas are accessible, safe and provide shade and seating, and meet the needs of people with disabilities. The environment has been enhanced by the introduction of a resident-led project to make a garden for resident use.

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; civil defence emergencies are practised, and the Coastal Villas village is a community hub for civil defence. Residents reported a timely staff response to call bells. 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.

The governing body and management staff at Metlifecare Coastal Villas ensures the safety of residents and staff through a planned infection prevention and antimicrobial stewardship programme that is appropriate to the size and complexity of the service. It is adequately resourced. An experienced and trained infection control coordinator leads the programme. An experienced and trained infection control resource nurse leads the programme and is involved in procurement processes.

A suite of infection prevention and control and antimicrobial stewardship policies and procedures are in place. The senior management team have approved the infection control and pandemic plan. Staff demonstrated good principles and practice around infection control. Staff, residents and family/whānau were familiar with the pandemic/infectious diseases response plan.

Aged care specific infection surveillance is undertaken with follow-up action taken as required.

The environment supports prevention and transmission of infections. Waste and hazardous substances are well managed. There are safe and effective cleaning and laundry services.

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, monitoring process, with regular reviews is in place should this be required. Staff demonstrated a sound knowledge and understanding of the restraint process, including least restrictive practices, de-escalation techniques, and alternative intervention.

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	26	0	1	0	0	0
Criteria	1	164	0	1	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>	<p>FA</p>	<p>Metlifecare (MLC) Coastal Villas (Coastal Villas) has developed policies, procedures, and processes to embed and enact Te Tiriti o Waitangi in all aspects of its work. This is reflected in its values. Residents and family/whānau interviewed reported that staff respected their right to self-determination (mana motuhake), and residents identifying as Māori reported feeling culturally safe. The te whare tapa Whā care model is used across the organisation.</p> <p>A Māori health plan has been developed with input from cultural advisers and this can be used for residents who identify as Māori. There were no Māori residents in the facility during the audit. Residents are involved in providing input into their care planning, activities, and dietary needs. Care plans included the physical, spiritual, family/whānau, and psychological health of the residents.</p> <p>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</p>

		<p>gathered when staff are employed, and this data is analysed at a management level. There were no staff who identified as Māori at the time of audit.</p> <p>The service has links with a Māori health support through the DHB and other tangata and (local) mana whenua organisations and can access kaumatua as required.</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 health and disability services underpinned by Pacific worldviews and developed in collaboration with Pacific peoples for improved health outcomes.</p>	FA	<p>Coastal Villas identifies and works in partnership with Pacific communities. There is a Pacific Health Plan to address appropriate care and equity for Pacific peoples and to support culturally safe practices. There were residents of Pasifika descent receiving care at the time of audit. The facility has a plan for managing care so that the needs of Pasifika can be adequately met, utilising either Te Vaka Atafaga or the Fonafale model of care depending on the model most appropriate for the individual. There is support for Pasifika residents through local Pasifika organisations. There were no staff who identified as Pasifika during the audit.</p> <p>Interview with the organisation's managers and governance representative confirmed that they are aware of their responsibility to support equity for Pacific peoples.</p> <p>The service supports increasing Pasifika staff capacity by employing Pasifika staff members across differing levels of the organisation as vacancies and applications for employment permit.</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</p>	FA	<p>Staff interviewed at Coastal Villas understood the requirements of the Code of Health and Disability Services Consumers' Rights (the Code) and were observed supporting residents in accordance with their wishes. Training on the Code and the advocacy service was scheduled to have occurred in October 2021, however, was not undertaken due to COVID-19 restrictions (refer criterion 2.3.4). Training on the Code and advocacy is scheduled to occur in November 2022.</p> <p>Residents and family/whānau interviewed reported being made aware of the Code and the Nationwide Health and Disability Advocacy</p>

<p>requirements.</p>		<p>Service (Advocacy Service) and were provided with opportunities to discuss and clarify their rights. The Code is on display and accessible in English and te reo Māori. Coastal Villas has access to interpreter services and cultural advisors if required, and has established relationships with chaplains, the local Māori Health provider, Pasifika and disability organisations. The facility has a resident's advocate who runs the residents' meetings, and assists/supports residents with understanding their rights and advocacy assistance if required. An interview with the advocate verified competency for the role. Management is responsive to any concerns and addresses them promptly. The advocate is comfortable with the role and to request additional assistance if required</p> <p>The policies, procedures and processes of MLC recognises mana motuhake, however there were no residents or staff who identified as Māori to interview to verify this.</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>Coastal Villas supports residents in a way that is inclusive and respects their identity and experiences. Residents and whānau, including people with disabilities, confirmed that they receive services in a manner that has regard for their dignity, gender, privacy, sexual orientation, spirituality, choices, and independence. Care staff understand what Te Tiriti o Waitangi means to their practice with te reo Māori and tikanga Māori being promoted. Te Tiriti o Waitangi training was planned for May 2021, however, did not proceed due to COVID-19 restrictions. Cultural safety training occurred in October 2020 (refer criterion 2.3.4). Staff were aware of how to act on residents' advance directives and maximise independence. Residents verified they are supported to do what is important to them, and this was observed during the audit. Staff were observed to maintain privacy throughout the audit. All residents have a private room. When cares are being provided, 'privacy required' signage is displayed on the doors of resident's room.</p> <p>Te reo Māori and tikanga Māori is actively promoted throughout Coastal Villas and incorporated throughout all activities.</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 abuse.</p> <p>As service providers: We ensure the people using our services are safe and protected from abuse.</p>	<p>FA</p>	<p>Employment practices at Coastal Villas include police vetting. Policies and procedures outline safeguards in place to protect people from abuse, and workers follow a code of conduct. Staff understood the service's policy on abuse and neglect, including what to do should there be any signs of such practice. Residents reported that their property is respected. Professional boundaries are maintained. A holistic te whare tapa Whā model of health is promoted at Coastal Villas, in addition to two Pasifika models of care for Pacific Island residents. The philosophy of care of the facility encompasses an individualised approach that ensures best outcomes for all.</p>
<p>Subsection 1.6: Effective communication occurs</p> <p>The people: I feel listened to and that what I say is valued, and I feel that all information exchanged contributes to enhancing my wellbeing.</p> <p>Te Tiriti: Services are easy to access and navigate and give clear and relevant health messages to Māori.</p> <p>As service providers: We listen and respect the voices of the people who use our services and effectively communicate with them about their choices.</p>	<p>FA</p>	<p>Residents and family/whānau at Coastal Villas reported that communication was open and effective, and they felt listened too. Information was provided in an easy-to-understand format, in English and te reo Māori. Te reo Māori was incorporated in signage throughout the facility.</p> <p>Changes to residents' health status were communicated to residents and their family/whānau in a timely manner. Incident reports evidenced family/whānau are informed of any events/incidents. Documentation supports family/whānau or enduring power of attorney (EPOA) contact has occurred, and this was confirmed through interview with family/whānau members.</p> <p>Evidence was sighted of communication with other agencies involved in the resident's care.</p> <p>Staff knew how to access interpreter services, if required.</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</p>	<p>FA</p>	<p>Residents at Coastal Villas and/or their legal representative are provided with the information necessary to make informed decisions. They felt empowered to actively participate in decision making. Nursing and care staff interviewed understood the principles and practice of informed consent.</p> <p>Advance care planning, establishing, and documenting enduring power of attorney requirements and processes for residents unable to</p>

<p>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>consent are documented, as relevant, in the resident's record.</p> <p>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. The local Māori health provider is available to assist Coastal Villas to manage best practice tikanga guidelines for any residents who identify as Māori should this be required.</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 system in place to easily receive and resolve or escalate complaints in a manner that leads to quality improvement.</p>	FA	<p>A fair, transparent, and equitable system is in place to receive and resolve complaints that leads to improvements. This meets the requirements of the Code of Rights. Residents and family/whānau understood their right to make a complaint and knew how to do so. Policy allows for complaints to be managed in a culturally appropriate way. Documentation sighted showed that complainants had been informed of findings following investigation.</p> <p>There has been one complaint received from an external source, the Health and Disability Commissioner (HDC), since the last certification audit. The complaint related to visiting during COVID-19; this has been responded to and closed by HDC. Two other complaints, both related to communication, were managed as per the organisation's complaints procedure, appropriate action was taken, and the issue was resolved with the complainant in a timely manner.</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 high quality service that is responsive, inclusive, and</p>	FA	<p>The governing body assumes accountability for delivering a high-quality service but does not currently have Māori representation at Board level. Equity for Māori and Pacific peoples have been addressed through the Māori and Pacific Health Plan, and equity for tāngata whaikaha is enabled through participation in service development, choice and control over their supports and the removal of barriers that prevent access to information. The strategic and business plans include a mission statement identifying the purpose, mission, values, direction, and goals for the organisation, with monitoring and reviewing performance at planned intervals. Organisational goals do, however, aim for integrated service delivery and mana motuhake values are embedded into levels of practice for</p>

<p>sensitive to the cultural diversity of communities we serve.</p>		<p>all residents.</p> <p>There is a defined governance and leadership structure, including for clinical governance, that is appropriate to the size and complexity of the organisation. The governing body has appointed an experienced and suitably qualified village manager to manage the service with the support of a nurse manager who is responsible for clinical services. External support for te ao Māori, Pacific peoples and tāngata whaikaha is available through Te Whatu Ora Health New Zealand, local Māori, Pasifika, disability organisations, and the wider MLC organisation.</p> <p>Metlifecare board minutes sighted demonstrated leadership and commitment to quality and risk management. A sample of functional reports to the MLC board of directors showed adequate information to monitor performance is reported.</p> <p>The nurse manager maintains currency within the field, has been employed within aged care for several years, and confirmed knowledge of the sector, regulatory and reporting requirements. The village manager (VM) was not available over the audit period. The management team works with staff to meet the requirements of relevant standards and legislation.</p> <p>A monthly report is generated that outlines an overview of adverse events, health and safety, restraint, compliments and complaints, staffing, infection control and all other aspects of the quality risk management plan. Critical and significant events are reported immediately. All quality data collected identifies trends and specific shortfalls are addressed using a corrective action process. A sample of reports reviewed showed adequate information to monitor performance is reported. The Coastal Villas management team also evaluates services through meetings with residents and their family/whānau (though these have been disrupted due to the COVID-19 pandemic), and through surveys from residents and families/whānau, making relevant changes where shortfalls are identified, or new ideas elicited.</p>
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		<p>The service holds contracts with Te Whatu Ora Health New Zealand for the provision of age-related residential care and short-term residential care. The 30 beds in the main care area have all been approved as dual purpose. All residents were receiving services under the age-related contract. Twenty-seven (27) residents were receiving services at the time of audit, six receiving rest home services and 21 receiving hospital level services. The service has approval to have five serviced apartments certified for rest home level only but no residents within the serviced apartments were receiving care during the audit.</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 organisation has a planned quality and risk system that reflects the principles of continuous quality improvement. This includes the management of incidents/accidents/hazards, complaints, audit activities, a regular resident satisfaction survey, policies and procedures, clinical incidents including falls, pressure injuries, infections, and wounds. Relevant corrective actions are developed and implemented to address any shortfalls. Progress against quality outcomes is evaluated.</p> <p>The regional clinical manager (RCM) and nurse manager (NM) understood the processes for the identification, documentation, monitoring, review, and reporting of risks, including health and safety risks, and development of mitigation strategies. Policies reviewed covered all necessary aspects of the service and contractual requirements and were current. A Māori health plan guides care for Māori.</p> <p>Residents, family/whānau and staff contribute to quality improvement through the ability to give feedback at meetings. Outcomes from the last resident and family/whānau satisfaction surveys (2022) were primarily favourable with corrective actions raised where deficits in service were identified. Two corrective actions from the survey in relation to cleanliness and meals have been addressed.</p> <p>Staff document adverse and near miss events in line with the National Adverse Event Reporting Policy. A sample of incidents forms reviewed showed these were fully completed, incidents were</p>

		<p>investigated, action plans developed and actions followed-up in a timely manner.</p> <p>The NM understood and has complied with essential notification reporting requirements. There have been two section 31 notifications completed since the last audit. These related to a pressure injury and a change of governance (to MLC).</p> <p>Staff have input into the quality programme through health and safety, management, clinical management, and general staff meetings. These ensure that quality data is communicated and discussed. Minutes of meetings sighted confirmed that issues raised are acted upon. Corrective action plans are documented following each meeting, detailing actions to be taken, and these are signed off by either the VM (for operational matters) or NM (for clinical issues) once completed.</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>PA Low</p>	<p>There is a documented and implemented process for determining staffing levels and skill mixes to provide culturally and clinically safe care, 24 hours a day, seven days a week (24/7) using an acuity spreadsheet. The facility adjusts staffing levels to meet the needs of residents but normally staffs to bed capacity. Caregivers interviewed reported there were adequate staff to complete the work allocated to them. Residents and family/whānau interviewed supported this. At least one staff member on duty has a current first aid certificate and there is 24/7 registered nurse (RN) coverage in the facility.</p> <p>Staffing for the facility comprises of RN cover over seven days per week. There are two RNs on a morning shift, supported by a senior RN and the NM Monday to Friday and on-call. Afternoon shifts have one RNs rostered and there is one RN on night shift. The RNs are supported by caregivers, five in the morning; four in the afternoon; and one on night shift. A night porter is also available for non-clinical assistance. The service also employs an activities coordinator who is undergoing diversional therapy training and works Monday-Friday. Domestic (cleaning and laundry) and food services are carried out by dedicated support staff seven days per week. Support staff includes</p>

		<p>an administration assistance and a maintenance officer.</p> <p>Position descriptions reflected the role of the position and expected behaviours and values. Descriptions of roles cover responsibilities and additional functions, such as holding a restraint or infection prevention and control portfolio.</p> <p>Continuing education is planned on a biannual basis to be delivered annually. Not all the required elements of the training programme were completed in 2020 and minimal training took place in 2021, and 2022. The training programme was suspended in August 2021 due to COVID-19 lockdown and then staffing challenges due to sickness and/or COVID-19 standdown. The programme was re-started in July 2022. Competencies to support service delivery have been maintained over 2020/2021/2022. The service supports and encourages caregivers to obtain a New Zealand Qualification Authority (NZQA) qualification and registered nurses to maintain competency with the Nursing Council of New Zealand (NCNZ).</p> <p>Staff reported feeling well supported and safe in the workplace but noted the lack of training at interview. There are policies and procedures in place around wellness, bullying, and harassment.</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>	<p>FA</p>	<p>Human resources management policies and processes are based on good employment practice and relevant legislation and include recruitment, selection, orientation and staff training and development. There are job descriptions in place for all positions that includes outcomes, accountability, responsibilities, authority, and functions to be achieved in each position.</p> <p>A sample of six staff records were reviewed (one NM, one senior RN, one RN, two caregivers, one cleaner) evidenced implementation of the recruitment process, employment contracts, reference checking, police vetting, COVID-19 vaccination status, and completed orientation.</p> <p>Staff performance is reviewed and discussed at regular intervals and this was confirmed through documentation sighted and interview with</p>

		<p>staff.</p> <p>Ethnicity data is recorded and used in line with health information standards. Staff information is secure and accessible only to those authorised to use it.</p> <p>The service understands its obligations in recruitment in line with the Ngā Paerewa standard and is actively seeking to recruit Māori and Pacific peoples at all levels of the organisation (including management and governance) dependent on vacancies and applicants.</p> <p>A register of practising certificates is maintained for RNs and associated health contractors (the general practitioner (GP), physiotherapist, podiatrist, pharmacists and the dietitian).</p> <p>The wellbeing policy outlines debrief opportunities following incidents or adverse events; this is implemented and the ability to debrief confirmed by staff.</p>
<p>Subsection 2.5: Information</p> <p>The people: Service providers manage my information sensitively and in accordance with my wishes.</p> <p>Te Tiriti: Service providers collect, store, and use quality ethnicity data in order to achieve Māori health equity.</p> <p>As service provider: We ensure the collection, storage, and use of personal and health information of people using our services is accurate, sufficient, secure, accessible, and confidential.</p>	<p>FA</p>	<p>The service maintains quality records that comply with relevant legislation, health information standards and professional guidelines. Most information is held electronically, and password protected. Any paper-based records are held securely and available only to authorised users.</p> <p>Residents' records are uniquely identifiable and all necessary demographic, personal, clinical and health information was fully completed in the residents' files sampled for review. Clinical notes were current, integrated, and legible and met current documentation standards. Consents are sighted for data collection. Data collected includes ethnicity data.</p> <p>Residents' files are integrated electronic and hard copy files. Files are held securely for the required period before being destroyed. No personal or private resident information was on public display during the audit.</p>

		The facility is not responsible for National Health Index registration of people receiving services.
<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 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>	FA	<p>Residents are admitted Coastal Villas when they have been assessed and confirmed by the local Needs Assessment and Service Coordination (NASC) Service, as requiring the level of care the facility provides. Family/whānau members interviewed stated they were satisfied with the admission process and the information that had been made available to them on admission. Files reviewed met contractual requirements. Coastal Villas carries out routine analysis of entry and decline rates. This included specific data for entry and decline rates for Māori. There are no residents at the time of audit who identify as Māori.</p> <p>Where a prospective resident is declined entry, there are processes for communicating the decision to the person and family/whānau.</p> <p>Coastal Villas has developed meaningful partnerships with the local Māori health provider, to benefit Māori individuals and whānau. When admitted, residents have a choice over who will oversee their medical requirements. Whilst most choose the main medical provider for the facility, residents may request the local Māori health provider to manage their medical needs.</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>	FA	<p>The multidisciplinary team at Coastal Villas works in partnership with the resident and family/whānau to support the resident's wellbeing. Seven residents' files were reviewed. Five of these were hospital files, and two of these were files of rest home residents. Files reviewed verified a care plan is developed by a registered nurse (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 is based on a range of clinical assessments and includes resident and family/whānau input (as applicable). Timeframes for the initial assessment, GP assessment, initial care plan, long-term care plan, short term care plans and review/evaluation timeframes meet contractual requirements. This was verified by sampling residents'</p>

		<p>records, from interviews (including with the GP), and from observations.</p> <p>Management of any specific medical conditions were well documented with evidence of systematic monitoring and regular evaluation of responses to planned care. Where progress is different to that expected, changes are made to the care plan in collaboration with the resident and/or family/whānau. Residents and family/whānau confirmed active involvement in the process, including residents with a disability.</p> <p>A multi-disciplinary review occurs each month (when COVID-19 restrictions permit). This review includes input from the geriatrician and the nurse practitioner (NP) aligned with the geriatrician. This team is accessible by telephone and will visit if additional input is required. The purpose of access to this service is to prevent the unnecessary transfer of residents to Te Whatu Ora Capital, Coast & Hutt Valley. In addition to the multidisciplinary review, one resident a day/month is reviewed at the nurse's handover, to keep each member of the nursing team fully up to date with the resident's needs, to support continuity of care. Files reviewed of residents admitted with previous pressure injuries evidence these have healed and preventative strategies to manage the ongoing risk are in place. There are no residents requiring management of chronic wounds, though potentials for these are identified and managed.</p> <p>Policies, procedures, and processes recently implemented at Coastal Villas evidenced a commitment to ensuring tāngata whaikaha and whānau participate in service development; give tāngata whaikaha choice and control over their supports and remove barriers that prevent access to information.</p>
<p>Subsection 3.3: Individualised activities</p> <p>The people: I participate in what matters to me in a way that I like.</p> <p>Te Tiriti: Service providers support Māori community initiatives</p>	<p>FA</p>	<p>The activities coordinator at Coastal Villas provides an activities programme that supports residents to maintain and develop their interests and was suitable for their ages and stages of life.</p> <p>Activity assessments and plans identified individual interests and considered the person's identity. Individual and group activities</p>

<p>and activities that promote whanaungatanga.</p> <p>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>		<p>reflected residents' goals and interest, ordinary patterns of life and included normal community activities (when COVID-19 restrictions permit). Opportunities for residents to participate in te ao Māori are facilitated. Prior to COVID-19 restrictions being in place, several community groups including the local school and college Kapa Haka groups visited Coastal Villas, however this has not occurred during the COVID-19 outbreak. The kapa haka group recently entertained in the adjacent Village and those residents who were able, were assisted to attend. Matariki and Waitangi days were acknowledged and celebrated in the care facility.</p> <p>Residents' meetings up to July 2021 occurred every month and these enabled residents to express concerns or offer suggestions to improve the services being provided. COVID-19 restrictions have not enabled residents' meetings to occur since July 2021, however they will re-commence in September. The meetings are run by the resident's advocate, with the NM attending for the first 15 minutes. Any areas of concern are addressed by the advocate to the NM and reported back at the following meeting. Past meeting minutes, recent satisfaction surveys and interviews verify residents/family/whānau are satisfied with the activities programme provided. Residents and family/whānau are involved in evaluating and improving the programme. Those interviewed confirmed they find the programme meets their needs.</p>
<p>Subsection 3.4: My medication</p> <p>The people: I receive my medication and blood products in a safe and timely manner.</p> <p>Te Tiriti: Service providers shall support and advocate for Māori to access appropriate medication and blood products.</p> <p>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>	<p>FA</p>	<p>The medication management policy at Coastal Villas 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 administer medicines are competent to perform the function they manage.</p> <p>Medications are supplied to the facility from a contracted pharmacy. Medication reconciliation occurs. All medications sighted were within current use by dates.</p> <p>Medicines are stored safely, including controlled drugs. The required stock checks have been completed. Medicines were stored were</p>

		<p>within the recommended temperature range.</p> <p>Prescribing practices meet requirements. The required three-monthly GP review was consistently recorded on the medicine chart. Standing orders are not used at Coastal Villas.</p> <p>Self-administration of medication is facilitated and managed safely. Residents and their whānau, are supported to understand their medications.</p> <p>Over-the-counter medication and supplements are considered by the prescriber as part of the person's medication.</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>	<p>FA</p>	<p>The food service provided at Coastal Villas is provided by an external contractor. Food served is in line with recognised nutritional guidelines for older people. The menu was reviewed by a qualified dietitian on 16 March 2022. Recommendations made at that time have been implemented.</p> <p>A verification audit of the food control plan was undertaken in January 2022. Seven areas requiring corrective action was identified, around supply, storage, and preparation of food. The Coastal Villas Village manager oversees the kitchen services at Coastal Villas. The care facility NM and operations manager (OM), when interviewed stated they were unaware the food control plan had areas requiring attention. An email was received post audit from the provider dated 31 August evidencing that the issues with the food control plan had been addressed.</p> <p>Each resident has a nutritional assessment on admission to the facility. The personal food preferences, any special diets and modified texture requirements are accommodated in the daily meal plan. All residents have opportunities to request meals of their choice and the kitchen will attend to this. In each dining room there is a book, where residents (or staff on residents' behalf) record any complimentary comments or comments regarding dissatisfaction.</p> <p>Evidence of residents' satisfaction with meals was verified by</p>

		<p>residents and family/whānau interviews and satisfaction surveys. Residents were given sufficient time to eat their meals in an unhurried fashion and those requiring assistance had this provided with dignity.</p> <p>There were no Māori residents on site at the time of audit, however interviews verify residents dietary and cultural needs are met by Coastal Villas.</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 coordinate a supported transition of care or support.</p>	FA	<p>Transfer or discharge from, or to Coastal Villas is planned and managed safely with coordination between services and in collaboration with the resident and family/whānau. The facility uses the Capital, Coast & Hutt Valley yellow transfer envelope, in addition to copies of several other documents. Transfers are planned and include a collaborative approach between the sites. Resident and family/whānau interviews reported being kept well informed during the transfer of their relative.</p>
<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. The preventative maintenance programme ensures the interior and exterior of the facility are maintained, and all equipment is maintained, serviced and safe. The 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, where deviation was noted, this was addressed by a plumbing contractor. There are environmental and building compliance audits, completed as part of the internal audit schedule. The building has a building warrant of fitness which expires on 22 June 2023. There are currently no plans for further building projects requiring consultation, but the RM and NM were aware of the requirement to consult if this was</p>

		<p>envisaged.</p> <p>The environment was comfortable and accessible. There are wide corridors with handrails promoting independence and safe mobility and space to charge mobility aids. Personalised equipment was available for residents with disabilities to meet their needs. Spaces were culturally inclusive and suited the needs of the resident groups. Residents were observed moving freely around the areas with mobility aids during the audit.</p> <p>Lounge and dining facilities meet the needs of residents and smaller spaces are available for residents and their families/whānau to utilise. Lounge areas are used for activities for residents. All rooms have ensuites and there are extra shower areas and toilet facilities available for residents if required. Separate toilet facilities are available for staff and for visitors. All rooms, bathrooms and common areas have appropriately situated call bells.</p> <p>Residents' rooms are spacious and allow room for the use of mobility aids and moving and handling equipment. Rooms are personalised according to the resident's preference. All rooms have underfloor heating on a winter/summer cycle and external windows which can be opened for ventilation; safety catches are in place. Communal areas have heat pumps which can be used to set to preferred heat/cool settings. There are external areas adjacent to the facility for leisure activities.</p> <p>Residents and family/whānau 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.</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</p>	<p>FA</p>	<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 and knew what to do in an emergency. Coastal Villas acts as a Wellington Regional Emergency Management Office (WREMO) community hub in the event of a civil defence emergency. Civil defence scenarios are actively practiced, and the</p>

<p>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>		<p>response is assessed by WREMO. Coastal Villas are self-sufficient with robust plans to manage for a period of seven days following a civil defence emergency. It also acts to support the community directly around the facility. This initiative was awarded a continuous improvement rating.</p> <p>The fire evacuation plan has been approved by the New Zealand Fire Service (20 March 2004) and this is reflected in the Fire and Emergency Management Scheme. A fire evacuation drill is usually held six-monthly. The most recent drill was on 5 November 2021. No drill has been held in 2022 due to COVID-19 risk. Documentation from the MoH was sighted that allowed the suspension of trial evacuations between 25 March 2022 until the epidemic notice has expired. 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. Call bell response times are monitored daily. Residents and whānau reported staff respond promptly to call bells.</p> <p>Appropriate security arrangements are in place. Residents were familiar with emergency and security arrangements. There is always a staff member on duty with current first aid certification, and RNs are on site 24/7.</p>
<p>Subsection 5.1: Governance</p> <p>The people: I trust the service provider shows competent leadership to manage my risk of infection and use antimicrobials appropriately.</p> <p>Te Tiriti: Monitoring of equity for Māori is an important component of IP and AMS programme governance.</p> <p>As service providers: Our governance is accountable for ensuring the IP and AMS needs of our service are being met, and we participate in national and regional IP and AMS programmes and</p>	<p>FA</p>	<p>The governance body has identified infection prevention (IP) and antimicrobial stewardship (AMS) as integral to the service and part of its quality programme. The IP and AMS programmes are appropriate to the size and complexity of the service. Board and clinical governance meeting minutes reflected the reporting of IP and AMS information. They provide information on planned IP and AMS programmes (e.g., COVID-19 and respiratory infections) and any corrective actions arising from deficits identified. Expertise and advice are sought as required following a defined process and includes escalation of significant events, most notably to regional public health and Te Whatu Ora. Such events and trends are reported and managed at increasingly senior levels; through the clinical team, the</p>

<p>respond to relevant issues of national and regional concern.</p>		<p>clinical management team, and (where necessary) through the clinical governance team to the board.</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.</p> <p>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.</p> <p>As service providers: We develop and implement an infection prevention programme that is appropriate to the needs, size, and scope of our services.</p>	<p>FA</p>	<p>The infection prevention and control resource nurse coordinator (IPCRN) at Coastal Villas is responsible for overseeing and implementing the IP programme with reporting lines to the NM. The IP and AMS programme are linked to the quality improvement programme that is reviewed and reported on annually. The IPCRN has appropriate skills, knowledge and qualifications for the role and confirmed access to the necessary resources and support. Their advice has been sought when making decisions around procurement relevant to care delivery, facility changes, and policies. The IPCRN has access to expertise via the company's newly created position of an infection prevention control (IPC) lead, membership of an external IPC advisory company and the IPC nurse at Te Whatu Ora. The IPCRNs work in partnership for the protection of culturally safe IP practices that acknowledge the spirit of Te Tiriti.</p> <p>The infection prevention and control policies reflected the requirements of the standard and are based on current accepted good practice. Cultural advice is accessed where appropriate. Staff were familiar with policies through education during orientation and ongoing education and were observed to follow these correctly. Training and competency assessments were ongoing throughout 2022.</p> <p>Residents and their family/whānau are educated about infection prevention in a manner that meets their needs. Signage around the facility is in te reo Māori and English, and includes advice regarding hygiene practices, COVID-19 precautions, and actions required to minimise the risk of infection</p> <p>There is a pandemic plan in place with sufficient PPE available if this is activated.</p> <p>Reusable medical devices are decontaminated in line with best practice guidelines. Single use items will not be reused.</p>

		No vaccines are stored on site.
<p>Subsection 5.3: Antimicrobial stewardship (AMS) programme and implementation</p> <p>The people: I trust that my service provider is committed to responsible antimicrobial use.</p> <p>Te Tiriti: The antimicrobial stewardship programme is culturally safe and easy to access, and messages are clear and relevant.</p> <p>As service providers: We promote responsible antimicrobials prescribing and implement an AMS programme that is appropriate to the needs, size, and scope of our services.</p>	FA	<p>Coastal Villas is committed to reducing the inappropriate use of antibiotics and the responsible use of antimicrobials is promoted. There is a recently introduced AMS programme in place and the effectiveness of the AMS programme will be evaluated by monitoring antimicrobial use and identifying areas for improvement. The programme includes ensuring antibiotic absorption is optimised with food mealtimes and other medications optimised, they're administered at the right times and the right intervals, and the prescribed course is provided. Antibiotic use will be externally benchmarked, within MLC sites and other nationwide providers.</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.</p> <p>Te Tiriti: Surveillance is culturally safe and monitored by ethnicity.</p> <p>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 health care associated infections (HAIs) is appropriate to that recommended for long term care facilities and is in line with priorities defined in the infection control programme. Coastal Villas uses standardised surveillance definitions to identify and classify infection events that relate to the type of infection under surveillance.</p> <p>Monthly surveillance data is collated and analysed to identify any trends, possible causative factors and required actions. Results of the surveillance programme are shared with staff. Surveillance data includes ethnicity data. Culturally clear processes are in place to communicate with residents and their family/whānau, and these are documented.</p> <p>There have been no cases of COVID-19 at Coastal Villas. There have been no norovirus, gastroenterology, or scabies outbreaks in the past three years.</p> <p>There is visiting by appointment only at Coastal Villas, up until 1 September 2022, after which no appointment will be required. All visitors are rapid antigen tested and must wear a mask. Visiting is in residents' bedrooms, not communal areas.</p>

<p>Subsection 5.5: Environment</p> <p>The people: I trust health care and support workers to maintain a hygienic environment. My feedback is sought on cleanliness within the environment.</p> <p>Te Tiriti: Māori are assured that culturally safe and appropriate decisions are made in relation to infection prevention and environment. Communication about the environment is culturally safe and easily accessible.</p> <p>As service providers: We deliver services in a clean, hygienic environment that facilitates the prevention of infection and transmission of antimicrobial resistant organisms.</p>	<p>FA</p>	<p>A clean and hygienic environment supports prevention of infection and transmission of anti-microbial resistant organisms at Coastal Villas. Suitable PPE is provided to those handling contaminated material, waste, hazardous substances, and those who perform cleaning and laundering roles. Safe and secure storage areas are available, and staff have appropriate and adequate access, as required. Chemicals were labelled and stored safely within these areas, with a closed system in place. Sluice rooms are available for the disposal of soiled water/waste. Hand washing facilities and gel are available throughout the facility.</p> <p>Staff follow documented policies and processes for the management of waste and infectious and hazardous substances. Laundry and cleaning processes are monitored for effectiveness. All laundry is laundered on site including resident's personal clothing. Evidence was sighted of commitment to cultural safety by the separation of items prior to their being laundered. Staff involved have completed relevant training and were observed to carry out duties safely.</p> <p>Residents and family/whānau reported that the laundry was managed well, and the facility was kept clean and tidy. This was confirmed through observation.</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>Coastal Villas is a restraint free environment. Restraint has not been used in the facility since 2017. The RCM and NM described the focus on maintaining a restraint-free environment. Restraint was understood by the staff interviewed. There were no residents using restraint during the audit.</p> <p>Policies and procedures meet the requirements of the standards. The restraint coordinator (RC) is a defined role undertaken by a senior RN who would provide support and oversight should restraint be required in the future. There is a job description that outlines the role. Staff have been trained in the least restrictive practice, safe restraint practice, alternative cultural-specific interventions, and de-escalation techniques (last in August 2022). Restraint protocols are covered in the orientation programme of the facility and restraint use is identified as part of the quality programme and reported at all levels of the</p>

		<p>organisation.</p> <p>The RC in consultation with the NM and the multidisciplinary team would be responsible for the approval of the use of restraints should this be required in the future; there are clear lines of accountability. For any decision to use or not use restraint, there is a process to involve the resident, their enduring power of attorney and/or family/whānau as part of the decision-making process. Restraint is reported to the governance body.</p> <p>The RC continues to maintain a restraint register. The RC, in conjunction with the clinical team undertakes a six-monthly review of all residents who may be at risk and outlines strategies to be used to prevent restraint being required. Any changes to policies, guidelines, education, and processes are implemented if indicated.</p> <p>Given no restraint has been used since 2017, subsections 6.2 and 6.3 are not applicable and have not been audited.</p>
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Specific results for criterion where corrective actions are required

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.

Criterion with desired outcome	Attainment Rating	Audit Evidence	Audit Finding	Corrective action required and timeframe for completion (days)
<p>Criterion 2.3.4</p> <p>Service providers shall ensure there is a system to identify, plan, facilitate, and record ongoing learning and development for health care and support workers so that they can provide high-quality safe services.</p>	PA Low	<p>Education in 2020 included cultural awareness (which included equity) and in 2022 care planning to support appropriate clinical interventions for residents. Not all the required elements of the training programme were completed in 2020 and, apart from infection prevention and control and COVID-19 education, minimal training took place in 2021, and 2022. The training programme was suspended between August 2021 and July 2022 due to COVID-19 lockdown and then staffing challenges due to sickness and/or COVID-19 standdown. No alternative training interventions were put into place. An electronic education delivery system for health care and support workers is being planned for education, with rollout in 2023, to assist with maintaining training levels for staff. Competencies to support service delivery have been maintained over 2020/2021/2022</p>	<p>The continuing education plan to develop health care and support workers and enable them to provide high-quality safe services has not been in fully delivered since prior to 2020.</p>	<p>Ensure the planned electronic education delivery system meets the training requirements for health care and support workers and monitor completion of training requirements for each staff member.</p> <p>180 days</p>

		(moving and handling, hoist training, medication, restraint, chemical safety, food handling, fire and emergency management, pandemic planning including the use of personal protective equipment).		
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Specific results for criterion where a continuous improvement has been recorded

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

Criterion with desired outcome	Attainment Rating	Audit Evidence	Audit Finding
<p>Criterion 4.2.3</p> <p>Health care and support workers shall receive appropriate information, training, and equipment to respond to identified emergency and security situations. This shall include fire safety and emergency procedures.</p>	CI	<p>Coastal Villas acts as a WREMO community hub in the event of a civil defence emergency. It is self-sufficient and has robust plans to manage for a period of seven days following a civil defence emergency. It also acts to support the community directly around the facility.</p> <p>Civil defence emergencies are prioritised and practised at Coastal Villas, attended by WREMO. The practice is beyond a ‘paper’ exercise. Staff are trained as wardens, initially for four hours over two days with a refresher each year. Exercises are conducted during which the staff at Coastal Villas actively practice their response to civil defence emergency. Practice sessions are conducted each year, the last practice session was on 5 May 2021. The scenario for the practice was related to widespread flooding of the area due to heavy rain,</p>	<p>Coastal Villas actively practices civil defence emergencies with WREMO. The civil defence initiative is so successful at Coastal Villas that MLC is looking to roll out the initiative across all of its facilities. The resident advocate, who also acts as the civil defence liaison with WREMO has been invited to talk to the MLC executive team around how civil defence is managed at Coastal Villas and to discuss their experience with the civil defence scenarios they practice.</p>

		<p>and the associated storm surge at high tide (the area is susceptible to such a scenario). The exercise was activated at approx. 0930am with advice to prepare to evacuate to higher ground (the facility upper level). Civil defence supplies were moved to the area along with a 'go bag' for each resident containing spare clothes, continence products and toiletries. Meal preparation and other civil defence supplies (cutlery/crockery etc). was prepared for transport along with supplies to manage hygiene needs. Residents who might require medication during the evacuation were identified and medication prepared to manage their needs. Staffing was assessed depending on who was at work, who might not be able to get home, and who might not be able to attend work. Support to facilitate their comfort was organised (e.g., extra mattresses, linen, food etc). Visitors were advised re: the safety of travel to get home or accommodated to stay until the emergency was over.</p>	
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End of the report.