

Kapiti Retirement Trust - Sevenoaks Lodge

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:	Kapiti Retirement Trust
Premises audited:	Sevenoaks Lodge
Services audited:	Hospital services - Medical services; Hospital services - Geriatric services (excl. psychogeriatric); Rest home care (excluding dementia care); Dementia care
Dates of audit:	Start date: 16 November 2022 End date: 17 November 2022
Proposed changes to current services (if any):	There has been a reconfiguration of dual-purpose beds from four to six since the last audit.
Total beds occupied across all premises included in the audit on the first day of the audit:	53



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
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

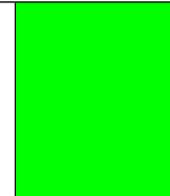
Sevenoaks Lodge provides aged-related rest home and hospital level services, dementia care, long-term support-chronic health conditions, short-term care (respite), day respite care for younger disabled (under 65 years of age), and Accident Compensation Corporation Pathways for up to 61 residents. The facility is owned and operated by The Kapiti Retirement Trust.

This surveillance audit was conducted against a subset of Ngā Paerewa: Health and Disability Services Standard 2021 and the service provider's agreement with Te Whatu Ora – Health New Zealand Capital, Coast and Hutt Valley. The audit process included review of policies and procedures, review of residents' and staff files, observations, and interviews with residents, family/whānau, managers, staff, and a general practitioner.

No areas requiring improvement were identified during this audit process. Improvements have been made to quality and risk management activities and a menu review, addressing those areas requiring improvement at the previous 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.

Kapiti Retirement Trust works collaboratively to support and encourage a Māori world view of health in service delivery at Sevenoaks Lodge. There are residents who identify as Māori in the service.

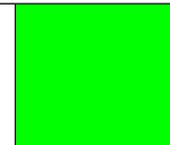
Sevenoaks Lodge collaborates with staff to support residents in all aspects of service delivery. All staff receive in-service education on Te Whare Tapa Whā, pronunciation of te reo, cultural diversity and the Code of Health and Disability Services Consumers' Rights (the Code). Residents who identify as Māori are treated equitably and confirmed that their self-sovereignty/mana motuhake is supported. The service is socially inclusive and person-centred. Te reo Māori and tikanga Māori is incorporated in daily practices.

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

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.



Subsections applicable to this service fully attained.

The service is governed by Kapiti Retirement Trust. The trustees work with senior managers to monitor organisational performance and ensure ongoing compliance. Planning ensures the purpose, values, direction, scope, and goals for the organisation are defined and monitored. Performance is monitored and reviewed at planned intervals.

There is a documented and implemented quality and risk management system which includes processes to meet health and safety requirements. Quality data including adverse events are analysed to identify and manage trends. All incidents are being reliably reported and recorded with corrective actions taken where this is necessary. The service complies with statutory and regulatory reporting obligations.

Staffing levels and skill mix meet the cultural and clinical needs of residents, workforce planning is fair, equitable, and respects input from staff. The management team have the required skills and experience. Qualified staff are employed and rostered to be on site to meet the needs of residents 24 hours a day, seven days a week but this has been challenging for the service at times due to the nationwide shortage of registered nurses. Staff are suitably skilled and experienced, competencies are defined and monitored, and staff performance is reviewed. A systematic approach to identify and deliver ongoing learning supports safe equitable service delivery.

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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On admission to Sevenoaks Lodge residents receive a person-centred and family/whānau-centred approach to care. The service conducts routine analysis of entry rates, this included specific data for entry rates for Māori. There have been no incidents of any residents declined entry in the past two years. If a prospective resident was declined entry, there are processes for communicating the decision to the person and their family/whānau.

Care plans are individualised and demonstrate wellbeing outcomes for Māori.

The activity programme offers a diverse range of activities and incorporates the cultural requirements of the residents. All activity plans are completed in consultation with family/whānau with residents noting their activities of interest. Residents and EPOA/whānau/family expressed satisfaction with the activities programme in place.

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

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

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.
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The environment is safe and fit for purpose. The facility is designed and maintained in a manner that supports independence. Resident areas are personalised. Spaces were culturally inclusive, suited to the needs of the resident groups and reflect cultural preferences. The building warrant of fitness is current.

Fire and emergency procedures are documented, and related staff training has been carried out. Emergency supplies are available. All staff are trained in the management of emergencies. Security is maintained and hazards identified.

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.

Sevenoaks Lodge ensures the safety of residents and staff through a planned infection prevention (IP) and antimicrobial stewardship (AMS) programme that is appropriate to the size and complexity of the service. The programme is coordinated by the clinical manager. There is a pandemic plan in place which is assessed periodically.

Surveillance of infections is undertaken, and results are monitored and shared with all staff. Action plans are 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 governance group are aware of their responsibilities in respect of restraint elimination. The service is actively working to eliminate restraint and restraint information is presented at board meetings. When restraint is used, this is as a last resort after all alternatives have been explored.

Policies and procedures meet the requirements of the standard. The restraint coordinator is a defined role providing support and oversight for restraint management. A restraint register is in place as is a comprehensive assessment, approval, monitoring, and reviews process. Staff demonstrated a sound knowledge of the restraint process.

There are clear lines of accountability for restraint use, all restraints have been approved. Family/whānau and/or enduring power of attorney (EPOA) were involved in decision making.

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	21	0	0	0	0	0
Criteria	0	53	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>Sevenoaks Lodge has policies, procedures, and processes to enact Te Tiriti o Waitangi in all aspects of its work. A Māori health plan is in place and understood by staff interviewed and staff have received training on the te whare tapa whā model of care and culturally inclusive care.</p> <p>The governance group is aware of the requirement to recruit and retain a Māori workforce across all levels of the organisation. There were residents and staff at Sevenoaks Lodge who identify as Māori during the audit. Staff were employed across several organisational roles, including leadership/education roles.</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</p>	Not Applicable	<p>Sevenoaks Lodge is currently developing a Pacific Health Plan which has the intent of assisting staff to better meet the care needs and cultural considerations of Pacific peoples. On the day of audit, there were no residents who identified as Pasifika. Engagement with Pasifika communities has not yet been put into place.</p>

<p>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>		
<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>	FA	<p>The Code of Health and Disability Service Consumer Rights (the Code) is available and displayed in English and Māori throughout the facility, as is a range of signage in te reo Māori. Residents who identified as Māori were evidenced to have their mana motuhake recognised and respected. Enduring Power of Attorney (EPOA)/family/whānau/or representatives of choice are consulted in the assessment process to determine residents' wishes and support needs when required. The service is guided by the cultural policies and training sessions that outline cultural responsiveness to residents' who identify as Māori.</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>	FA	<p>The admission process at Sevenoaks Lodge ensures that, residents and family/whānau participate in determining their values and beliefs, culture, religion, disabilities, gender, sexual orientation, relationship status, and other social identities or characteristics. Records sampled 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>Residents' privacy, dignity, confidentiality, and preferred level of interdependence are respected. Team leaders (TL), the clinical manager (CM) and the group manager resident welfare (GMRW) reported that residents are supported to maintain their independence. Residents were able to move freely within the facility, and outside dependent on COVID-19 restrictions.</p> <p>There is a documented privacy policy that references current legislation requirements. All residents have a private room. Staff was observed respecting residents' personal areas and privacy by knocking on the doors before entry.</p> <p>At the time of audit staff have had no formal training on Te Tiriti o Waitangi. However, staff have received training on te whare tapa whā,</p>

		<p>the pronunciation of Māori words and cultural diversity to enable culturally inclusive care. Interviews verify staff understand what Te Tiriti o Waitangi means to their practice with te reo Māori and tikanga Māori being promoted. The organisation has 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 is respected in the care planning process. Training on Te Tiriti o Waitangi is booked for February 2023. The service was evidenced to respond to tāngata whaikaha needs, however there has been no formal specific engagement with tāngata whaikaha to enable their participation in te ao Māori if residents require 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 abuse.</p> <p>As service providers: We ensure the people using our services are safe and protected from abuse.</p>	<p>FA</p>	<p>The GMRW and CM stated that any observed or reported racism, abuse or exploitation at Sevenoaks Lodge is addressed promptly and they are guided by a code of conduct.</p> <p>Residents expressed that they have not witnessed any abuse or neglect, they are treated fairly, they feel safe, and protected from abuse and neglect. There are monitoring systems in place, such as residents' satisfaction surveys and residents and family/whānau meetings, to monitor the effectiveness of the processes in place to safeguard residents.</p> <p>During interview, the CM and TLs stated that a holistic model of health at Sevenoaks Lodge is promoted, that encompasses an individualised approach and that ensures best outcomes for all.</p> <p>On the day of audit, a cultural training session was also heard to include discussion on institutional and systemic racism, and the ability to question its existence at Sevenoaks Lodge if it was thought to exist.</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>FA</p>	<p>Six staff members who identify as Māori, and resident's whanau assist staff to support cultural practice. 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 have received training on cultural safety and tikanga best practice. A Māori caucus group meets regularly at</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>Sevenoaks Lodge, to enhance opportunities for the care of Māori residents and staff.</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>	<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 family/whānau are provided with information regarding the complaints process, and advocacy services, on entry. Information regarding the complaints process is displayed. There have been no complaints received from Māori residents, however, there are processes in place in policy to ensure complaints from Māori will be treated in a culturally respectful and equitable fashion. Residents and family/whānau interviewed understood their right to make a complaint and knew how to do so.</p> <p>There have been 12 complaints since the last audit; written and verbal. These related to the actions of the service in relation to visiting when COVID-19 restrictions were in place, laundry services, food, pain management, and minor care issues (e.g., showering regimen). Records confirmed that all complaints were managed in line with Right 10 of the Code and that they had been closed to the satisfaction of the complainant. No complaints have been received from external sources.</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</p>	<p>FA</p>	<p>Sevenoaks Lodge is governed by the board of trustees of Kapiti Retirement Trust. The board assumes accountability for delivering a high-quality service, honouring Te Tiriti o Waitangi, defining a governance and leadership structure (including for clinical governance) that is appropriate to the size and complexity of the organisation, and in appointing an experienced and suitably qualified person to manage the</p>

<p>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>service. The general manager (GM) and GMRW confirmed knowledge of the sector, regulatory and reporting requirements and maintains currency within the field. Trustees are encouraged to complete education on Te Tiriti, health equity, and cultural safety. Four of seven trustees are culturally competent. The service is currently developing policy around enabling independence for tāngata whaikaha.</p> <p>The service holds contracts with the Te Whatu Ora – Health New Zealand Capital, Coast and Hutt Valley for aged-related rest home and hospital level services, dementia care, long-term support-chronic health conditions (LTS-CHC), short-term care (respite), day respite, care for younger disabled (under 65 years of age), and Accident Compensation Corporation Pathways (ACC). Fifty-three (53) residents were receiving services on the day of audit. Four residents were receiving rest home services, 31 hospital level services, 13 dementia care, one LTS-CHC, two respite, and two through ACC. No residents were receiving services under the care for younger disabled (under 65 years of age) contract or the day respite contract on the day of audit.</p> <p>There was no evidence of infrastructural, financial, physical, or other barriers to equitable service delivery for Māori, Pasifika, or tāngata whaikaha. This was supported by interviews with staff, residents and their family/whānau.</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 trust board, through its policy and procedure, is 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 National Adverse Event Reporting Policy. Equity is not yet a part of risk management activities.</p> <p>Leadership commitment to quality and risk management is evident in quality and risk documentation and board reporting documents. Ethnicity data is being consistently gathered for residents and staff.</p>

		<p>Positive outcomes for Māori and people with disabilities are part of quality and risk activities. High-quality care for Māori is embedded in organisational practices and the efficacy of this was confirmed by Māori residents and their family/whānau.</p> <p>Quality data includes incidents/accidents, infection and outbreak events, complaints/compliments, resident and family/whānau satisfaction surveys, and staff surveys, 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. Two corrective actions identified during the certification audit (HDSS 2008: 1.2.3.5 and 1.2.3.6) related to the analysis and evaluation of quality improvement data and reporting these during meetings has been addressed by the service and these are now closed.</p> <p>The service complies with statutory and regulatory reporting obligations. In 2022 notifications have been made in relation to, falls (two), pressure injury (three), COVID-19 outbreak (one). There have also been notifications made in relation to RN shortage due to the nationwide shortage of nurses (ten), the change of clinical manager and reconfiguration of dual purpose beds (from four to six).</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. Care staff 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 each shift has a current first aid certificate and there is 24/7 RN coverage for the facility.</p> <p>Managers of the service acknowledge that it has been challenged by staffing due to COVID-19 and, at times, by the difficulty recruiting RN staff. The service responded to the RN deficit by reducing admissions between February and October 2022 until there were sufficient RNs to provide services. Ten section 31 (S31) notifications have been made to</p>

	<p>the Ministry of Health (MoH) related to the RN shortage. During the shortage, there was at least one registered nurse in the facility 24/7 over this time, supported by senior health care assistants (HCAs) who are medication competent HCAs. Recruitment for registered nurses is continuing.</p> <p>Five weeks of rosters were reviewed. Staffing for the facility comprises of RN cover over 24/7 per week. The Clinical Manager (CM) and GMRW work Monday to Friday and are available on call as required. There are two RNs on a morning shift, supported by a CM two clinical team leaders (RNs) Monday to Friday. Afternoon shifts have at least one RN on duty with either another RN or an enrolled nurse (EN) rostered, there is one RN on night shift. The RNs are supported by HCAs, 13 in the morning; 11 in the afternoon; and five on night shift. The service also employs four lifestyle and leisure staff (recreation) who provide activities five days per week. Three of the staff are qualified diversional therapists. Domestic (cleaning and laundry) and food services are carried out by dedicated staff seven days per week. Support staff includes administration and maintenance services which are shared with the group's Retirement Villages.</p> <p>Continuing education is planned on an annual basis and includes mandatory training requirements. Education includes mandatory training topics such as 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 and competency in their training programmes, including information on equity, cultural safety, Te Tiriti o Waitangi, and tikanga practices. Specific Te Tiriti o Waitangi training has not yet taken place, however, this is booked for February 2023.</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 families/whānau. All staff who administer medicine are regularly competency assessed to ensure compliance with known best practice and safe procedures in medicine management. Care staff have access to a New Zealand Qualification Authority (NZQA) education programme to meet the requirements of</p>
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		<p>the provider's agreement with Te Whatu Ora Capital. Coast and Hutt Valley. Seven of eight RNs employed by the service maintain interRAI competency.</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. A sample of staff records reviewed confirmed the organisation's policies are being consistently implemented. Records are kept confirming that all regulated staff and contracted providers have proof of current practising certification with their regulatory bodies (e.g., the NZNC, the NZ medical council, pharmacy, physiotherapy, and podiatry board). All new staff engage in a comprehensive orientation programme tailored for their specific role, which includes being 'buddied' with a peer. Staff interviewed confirmed that the orientation prepared them for their role.</p> <p>Personnel records are accurate and stored in ways that are secure and confidential. Records contain information that meets the requirements of the Health Information Standards Organisation (HISO). Staff ethnicity data is recorded and used in accordance with HISO.</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 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>FA</p>	<p>Residents are admitted to Sevenoaks Lodge when they have been assessed and confirmed by the local Needs Assessment and Service Coordination (NASC) Service, as requiring the level of care the service provides. Family and whānau interviewed stated they were satisfied with the admission process and the information that had been made available to them on admission, including for residents who identify as Māori. Files reviewed met contractual requirements. Sevenoaks Lodge conducts routine analysis of entry data, this included specific data for entry rates for Māori. There have been no residents who have been declined entry into Sevenoaks Lodge in the last two years. One unit has however, been closed to admissions for a number of months due to staffing shortages between February and October 2022.</p> <p>If a prospective resident was to be declined entry, there are processes for communicating the decision to the person and family/whānau.</p> <p>Files of residents reviewed in the secure unit, had specialist's</p>

		<p>authorisation for placement and a Protection of Personal Property Rights (PPPR) application, or an activated Enduring Power of Attorney (EPOA) in place.</p> <p>Kapiti Retirement Trust has not ,at this time, developed formal meaningful partnerships with the local Māori community organisations to benefit Māori individuals and whānau. There is a local Māori Health provider in the area that has been identified as a connection.</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 Sevenoaks Lodge work in partnership with the resident and family/whānau to support the resident’s wellbeing. Five residents’ files were reviewed. Three from the hospital, one from the rest home and one from the secure unit. Files included residents under 65 years, on a LTS-CHC contract, on a contract funded by the ACC, 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 with insulin dependent diabetes, and residents with weight loss. Files reviewed verified a care plan is developed by an 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, medical assessment, initial care plan, long-term care plan, short term care plans and review/evaluation timeframes met contractual requirements. This was verified by sampling residents’ records, from interviews, including with the general 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 is different to that expected, changes are made to the care provided in collaboration with the resident and/or whānau. Residents and 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.</p> <p>Te Tiriti: Service providers support Māori community initiatives 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>FA</p>	<p>Two diversional therapists, an activities assistant and a part time training diversional therapist provide a diverse activities programme at Sevenoaks Lodge five days a week. The programme supports all residents to maintain and develop their interests and aspirations.</p> <p>Activity assessments identified the individual interests, including the residents 'Life Map'. An individualised activities plan is developed that addresses individual residents' interests, strengths, and goals. Residents in the secure unit, have a plan that includes meeting the residents' 24 hour needs. Individual and group activities reflected residents' goals and interests, ordinary patterns of life and included normal community activities. Opportunities for Māori, staff and whānau to participate in te ao Māori are facilitated. Matariki, Māori language week and Waitangi Day have been celebrated. A Māori cultural group visited and spent the day at Sevenoaks Lodge doing activities and teaching residents and staff aspects of Māori culture. Activities included baking Māori bread, making pois, singing, and teaching Māori language. Prior to COVID-19 restrictions being in place, several community groups including the local school and college kapa haka groups visited Sevenoaks Lodge, however this has not occurred during the COVID-19 outbreak. Residents who participate in local community activities are enabled to go out and participate in these. Van outings enable those less able residents to get out on a regular basis.</p> <p>All residents at Sevenoaks Lodge have access to Wi-Fi at the service.</p> <p>Residents' and family/whānau meetings enable residents to express concerns or offer suggestions to improve the services provided at Sevenoaks Lodge. Meetings enable residents and family/whānau to evaluate and offer suggestions to improve the activities programme. Those interviewed confirmed they found the programme diverse, and it 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>FA</p>	<p>The medication management policy is 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</p>

<p>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>		<p>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 within the recommended temperature range. Prescribing practices meet requirements. The required three-monthly GP review was consistently recorded on the medicine chart.</p> <p>Self-administration of medication is facilitated and managed safely. Residents, including Māori 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. Standing orders are used at Sevenoaks Lodge, and instructions meet standing order guidelines.</p>
<p>Subsection 3.5: Nutrition to support wellbeing</p> <p>The people: Service providers meet my nutritional needs and consider my food preferences. Te Tiriti: Menu development respects and supports cultural beliefs, values, and protocols around food and access to traditional foods. 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 Sevenoaks Lodge is in line with recognised nutritional guidelines for older people. The menu was reviewed by the dietitian in May 2021. This addresses the corrective action identified at the previous audit (HDSS 2008: 1.3.13.1), whereby the menu had not been reviewed by the dietitian within the previous two years.</p> <p>Each resident has 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 are accommodated in the daily meal plan. All residents have opportunities to request meals of their choice and the kitchen will address this.</p> <p>Family/whānau are welcome to bring culturally specific food for their relatives. The interviewed residents and family/whānau expressed satisfaction with the food options.</p> <p>Residents in the secure unit have access to food anytime night or day.</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>	<p>FA</p>	<p>Transfer or discharge from the service is planned and managed safely with coordination between services and in collaboration with the resident and family/whānau. The resident and family/whānau interviewed reported being kept well informed during a recent transfer of their relative, to an acute facility.</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>	<p>FA</p>	<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 building warrant of fitness for the facility is current. Spaces promote independence and safe mobility and were culturally inclusive and suited the needs of the resident groups with smaller spaces for the use of residents and their visitors. There has been a reconfiguration of dual-purpose beds since the last audit from four to six. All dual-purpose rooms are spacious enough to manage differing levels of care (rest home or hospital level), including the use of equipment for resident handling. Residents, and their family/whānau reported that they were happy with the environment, including heating and ventilation, privacy, and maintenance.</p> <p>There are plans for further building projects at Sevenoaks Lodge, the GM of the Kapiti Retirement Trust is aware of the requirement to consult with Māori.</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>FA</p>	<p>The fire evacuation scheme was reviewed and approved by Fire and Emergency New Zealand on 26 May 2009. The scheme requires trial evacuation, and this was carried out on 16 June 2022.</p>

<p>Te Tiriti: Service providers provide quality information on emergency and security arrangements to Māori and whānau. As service providers: We deliver care and support in a planned and safe way, including during an emergency or unexpected event.</p>		<p>Residents and staff were familiar with emergency and security arrangements. Staff wear identification badges. Appropriate security arrangements are in place and access into the facility is currently controlled as a precaution to prevent the spread of COVID-19. Rapid-antigen tests (RATS) are currently required for entry due to COVID-19 being currently in the Kapiti community. External doors and windows are locked at a predetermined time each evening. These are accessible from the inside but not from outside the building.</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>	<p>FA</p>	<p>A senior health care assistant is the infection prevention and control officer (IPCO) at Sevenoaks Lodge, with support and oversight from the CM.</p> <p>A pandemic preparedness plan is in place, and this is reviewed at regular intervals. The plan was evaluated during a COVID-19 outbreak from March-May 2022. 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>At the time of audit, Sevenoaks Lodge has no educational resources available in te reo Māori, and has no partnerships with Māori established for the protection of culturally safe IP practices.</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>	<p>FA</p>	<p>Surveillance of health care-associated infections at Sevenoaks Lodge is appropriate to that recommended for long term care facilities and is in line with priorities defined in the infection control programme. Sevenoaks Lodge 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</p>

		<p>documented.</p> <p>There has been one outbreak of COVID-19 at Sevenoaks Lodge in 2022. Residents affected were isolated in their rooms, the unit was closed, and visiting was restricted. The Regional Public Health Unit (RPH) and the Te Whatu Ora Capital, Coast and Hutt Valley were informed of the outbreak.</p> <p>COVID-19 restrictions at Sevenoaks Lodge remain in place on visiting and outings, as there is an outbreak in the community. All staff and visitors are rapid antigen tested (RAT) prior to entry, temperature checks and illness screening is undertaken.</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>The service is actively planning for a restraint free environment. The governance group are aware of their responsibilities in respect of restraint elimination; this is outlined in policy and procedure and was confirmed at interview with a trustee of the service.</p> <p>Restraint information is analysed and aggregated restraint data, including the type and frequency of restraint, is reported at board meetings. At the time of audit three residents were using a restraint, all bedrails. This is reduced from nine at the last audit. Family/whānau and/or EPOA were involved in decision making.</p> <p>A restraint register is in place. The restraint coordinator is a senior RN who has a defined job description outlining the role, providing support and oversight for any restraint management required. Policies and procedures are in place to guide staff in the safe use of restraint and staff were able to describe safety requirements.</p>

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.

No data to display

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, 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

End of the report.