

Methven Care Trust - Methven Central Care Home

Introduction

This report records the results of a Partial Provisional 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 Manatū Hauora (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 Manatū Hauora website by clicking [here](#).

The specifics of this audit included:

Legal entity:	Methven Care Trust
Premises audited:	Methven Central Care Home
Services audited:	Rest home care (excluding dementia care)
Dates of audit:	Start date: 13 October 2025 End date: 13 October 2025
Proposed changes to current services (if any):	Replacement building for an old rest home facility, Methven House.
Total beds occupied across all premises included in the audit on the first day of the audit:	0

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 tātou 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 haumaruru | person-centred and safe environment
- te kaupare pokenga me te kaitiakitanga patu huakita | infection prevention and antimicrobial stewardship
- here taratahi | restraint and seclusion.

General overview of the audit

This partial provisional audit was conducted against the Ngā Paerewa Health and Disability Services Standard NZS 8134:2021 to determine the organisation's level of compliance with the Standards and to assess the preparedness and suitability of Methven Central Care Home for opening as a new facility.

The audit process included a review of policies and procedures, staff and resident documentation, and direct observation of the environment and care systems. Interviews were undertaken with the Nurse Manager, Clinical Advisor, and two members of the Trust Board.

Methven Central Care Home is a newly developed 20-bed rest home-level facility, including 1–5 Licence to Occupy (LTO) beds. The fully refurbished hotel replaces the existing Methven House and has been designed to deliver modern, person-centred care in a safe and welcoming environment. The opening of the new facility is planned for late 2025, following the completion of final building and compliance requirements.

The existing Methven House facility remains operational, and both residents and staff will transfer to the new premises once full certification and occupancy approval are obtained. The old and new facilities are in proximity within Methven township, supporting a smooth and well-coordinated transition. The organisation has a detailed transition plan in place to ensure safe resident relocation, continuity of care, and familiar staffing during the move.

The organisation was found to be largely compliant and well-prepared for opening, with strong systems, experienced leadership, and governance oversight in place to support safe service delivery. The facility is modern, contemporary, warm, and fit for purpose, designed over two levels with spacious rooms, wide corridors, accessible bathrooms, and well-ventilated living areas. The building includes a nurse station, medication room, and accessible toilets on the ground floor, along with outdoor decking and a welcoming dining and lounge area.

Located close to local amenities, the facility supports community integration with easy access to the GP clinic, pharmacy, and cafés. It also features a full commercial kitchen, laundry, and cleaning utilities, all designed to support infection prevention and safe daily operations.

Several areas requiring improvement were identified in relation to governance, organisational management, and environmental readiness. Corrective actions include: ensuring all trustees complete formal training in Te Tiriti o Waitangi, health equity, and cultural safety; completion of the medication room fit-out, including installation of the controlled drug (CD) lock box, CD register book, and medication refrigerator; and completion of remaining building works, including electrical finishing, call bells, chemical storage, and the outside decking area, prior to occupancy. Additional improvements are required to finalise the transfer of the Food Control Plan from the previous facility, and to ensure the Infection Prevention and Control (IPC) Coordinator undertakes formal IPC and Antimicrobial Stewardship (AMS) education relevant to the role.

Ō tātou motika | Our rights

Not Audited.

Hunga mahi me te hanganga | Workforce and structure

Methven Central Care Home has appointed eight community trustees to provide governance and strategic oversight of the organisation. The service is managed by an experienced registered nurse and clinical consultant, with operational oversight and accountability to the board of trustees. The governance structure ensures strong community representation and clinical leadership, promoting safe, high-quality, and person-centred care.

The organisation's governance framework supports meaningful inclusion of Māori in decision-making, honours Te Tiriti o Waitangi, and actively works to reduce barriers that impact outcomes for Māori and people with disabilities (tāngata whaikaha).

Planning processes define the organisation's purpose, values, direction, scope, and goals, with performance monitored and reviewed at regular intervals. The nurse manager maintains strong reporting links with the board, providing regular updates on service performance, quality, risk, and resident outcomes. Annual objectives have been developed with a strong governance focus to ensure accountability and continuous improvement.

Staffing levels and skill mix are structured to meet the cultural and clinical needs of residents. Staffing has been carefully planned, and staff ratios have been designed to ensure adequate coverage and skill mix to safely meet the cultural and clinical needs of residents. Staff are appointed, orientated, and managed in accordance with current best practice, with a structured approach to education and professional development that supports competence, confidence, and safe service delivery.

Ngā huarahi ki te oranga | Pathways to wellbeing

Medicines are safely managed and administered by competent, authorised staff, following current best-practice and organisational policies.

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

The facility is clean, well-presented, and designed to a high modern standard. Rooms and corridors are spacious, providing a comfortable and accessible environment for residents, staff, and visitors. The building has been purpose-built to support safe and efficient service delivery, with contemporary fittings and furnishings throughout.

All electrical equipment has been tested and tagged in accordance with regulatory requirements, with some equipment transferred from the former facility.

Security systems are in place, including locked entry points and external CCTV cameras, to maintain resident and staff safety.

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

Comprehensive infection prevention and control (IPC) and antimicrobial stewardship (AMS) programmes have been developed and are in place at Methven Central Care Home, ensuring the facility is well prepared to protect the safety and wellbeing of residents, staff, and visitors. These programmes are appropriate to the size and complexity of the service and will be led by an experienced and trained infection control coordinator.

The infection control coordinator will be actively involved in procurement processes, facility operations, and all aspects of reprocessing and decontamination of reusable medical devices, ensuring full alignment with current infection prevention standards and best practice guidelines.

Staff are prepared and demonstrate sound knowledge of infection prevention and control principles, supported by ongoing education, competency assessments, and evidence-based policies. Residents, staff, and whānau are familiar with the organisation's pandemic and infectious diseases response plan, which provides clear procedures for preventing and managing potential outbreaks.

Methven Central Care Home is committed to promoting the responsible prescribing and use of antimicrobials through its AMS programme. Regular infection surveillance processes will be undertaken, with findings analysed and appropriate follow-up actions implemented. The physical environment has been purpose-designed to support infection prevention, minimise transmission risks, and uphold high standards of hygiene and cleanliness throughout the facility.

Waste management, storage of hazardous substances, and laundry services are safely managed and comply with all relevant legislative and infection control requirements, ensuring a safe, hygienic, and well-maintained environment for residents and staff.

Here taratahi | Restraint and seclusion

Not Audited.

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	6	0	6	0	0	0
Criteria	0	79	0	6	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.

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 2.1: Governance</p> <p>The people: I trust the people governing the service to have the knowledge, integrity, and ability to empower the communities they serve.</p> <p>Te Tiriti: Honouring Te Tiriti, Māori participate in governance in partnership, experiencing meaningful inclusion on all governance bodies and having substantive input into organisational operational policies.</p> <p>As service providers: Our governance body is accountable for delivering a highquality service that is responsive, inclusive, and sensitive to the cultural diversity of communities we serve.</p>	<p>PA Low</p>	<p>Methven Central Care Home has established a robust governance framework that meets the intent of the Health and Disability Services Subsection 2.1, ensuring the organisation operates with integrity, accountability, and cultural responsiveness. The governance body demonstrated a clear commitment to legislative, contractual, and regulatory compliance.</p> <p>The organisation’s structure, purpose, values, scope, direction, and goals are clearly defined, and are reviewed and monitored at regular intervals. The board meets monthly to oversee governance systems, review performance, and ensure that objectives remain aligned with strategic priorities. Each trustee has a defined job description, and there are clear reporting lines from management to governance. The nurse manager provides regular reports on service delivery, quality, risk, and resident outcomes, ensuring transparent communication and accountability across all levels of the organisation.</p> <p>A suitably qualified Registered Nurse (being a former trustee) with experience at the Methven House Facility has provided support to the Nurse manager with the transfer to Methven Central Care Home to ensure continuity of leadership, familiarity with residents, and stability during the transition. The board demonstrates strong leadership and</p>

		<p>commitment to maintaining a robust quality and risk management system, actively engaging in monitoring and continuous improvement initiatives. There are effective communication and collaboration between the board and staff, fostering a culture of openness, trust, and shared responsibility for quality outcomes.</p> <p>Methven Central Care Home demonstrated a strong commitment to Te Tiriti o Waitangi, health equity, and cultural safety. Māori participation is supported through meaningful inclusion at the governance level, with an active board member who has extensive experience in Māori cultural safety and a background working with Māori organisations. This representation ensures authentic input into organisational policy, planning, and decision-making.</p> <p>The board acknowledged a current corrective action relating to the need for all trustees to complete formal competency training in Te Tiriti o Waitangi, health equity, and cultural safety. This training has been planned as part of the board’s governance development programme.</p> <p>The governance body is committed to ensuring that services delivered by Methven Central Care Home, improve outcomes and achieve equity for Māori and tāngata whaikaha (people with disabilities). Systems are in place to identify and address barriers to equitable service delivery. The organisation’s clinical governance structure is appropriate to the size and complexity of the service and ensures oversight of clinical safety, quality, and continuous improvement across all areas of care.</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. 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. 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>Methven Central Care Home ensures that day-to-day operations are managed effectively to deliver high-quality, person-centred, and whānau-centred services. The organisation promotes a culture of respect, compassion, and professionalism, where skilled and caring health care and support workers listen to residents, provide individualised care, and treat each person holistically.</p> <p>There are sufficient staff rostered on duty to ensure that culturally and clinically safe care is delivered. The staffing model has been carefully planned to maintain safe coverage, with existing staff transitioning from the former facility under consistent rosters to ensure continuity of care.</p>

		<p>All staff possess the skills, attitudes, qualifications, and experience required for their roles. A structured education and competency plan is in place, supported by an education planner that tracks completion of training, certifications, and mandatory competencies. Staff have completed initial competencies, and ongoing education sessions are scheduled to maintain current practice and regulatory compliance.</p> <p>The organisation implements systems to identify and develop staff competencies, ensuring care is delivered equitably and safely to meet the diverse needs of residents. Training and support are also provided to empower residents and whānau to participate meaningfully in their care.</p> <p>There is a clear education and competency plan for all staff, with training scheduled and tracked on an education planner. Certifications are verified and up to date, and staff have completed key competencies relevant to their roles. Adequate staffing levels are rostered to ensure safe and continuous service delivery, with the existing team transferring from the former facility and maintaining consistent rosters to support continuity of care and a smooth transition for residents.</p> <p>Methven Central Care Home uses health equity and quality improvement tools to ensure services are culturally responsive and aligned with the principles of Te Tiriti o Waitangi. The organisation is committed to the collection and sharing of high-quality Māori health information to support equitable service planning and improve outcomes for Māori. The facility utilises a patient management system (PMS) that enables accurate recording and analysis of ethnicity data, allowing the organisation to identify, measure, and address any health inequities between Māori and non-Māori residents.</p> <p>Wellbeing initiatives are in place to support staff health, resilience, and work-life balance, contributing to a positive and safe work environment. The service continues to invest in the development of organisational health equity expertise, fostering a workplace that values continuous learning, cultural responsiveness, and excellence in care delivery.</p>
Subsection 2.4: Health care and support workers	FA	Methven Central Care Home ensures that a skilled, diverse, and

<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>adequately staffed workforce is available at all times to deliver clinically and culturally safe, person-centred care. Policies and procedures are in place and aligned with good employment practice and legislative requirements. Each position within the organisation has a clearly defined job description outlining the skills, knowledge, accountabilities, and responsibilities required for safe and effective service delivery.</p> <p>All staff undergo comprehensive pre-employment checks, with professional qualifications and registrations validated prior to appointment to confirm appropriate scope of practice. Staff receive a structured orientation and induction programme covering the essential components of the service, including cultural safety, infection prevention, emergency procedures, and person-centred care.</p> <p>On the day of audit, several examples of completed performance appraisals were sighted, confirming that staff have regular opportunities to review and discuss their performance. Staff ethnicity and qualifications are well documented and securely stored in accordance with Health Information Standards Organisation (HISO) requirements. A patient management system (PMS) supports the recording of this data and ensures it remains accurate, relevant, and confidential.</p> <p>Following incidents, staff can debrief and receive support to promote wellbeing—this process was observed following a recent outbreak and demonstrated effective reflective practice and team support. Policies related to employment, health and safety, and clinical governance are embedded within the PMS and meet all contractual and regulatory requirements.</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>PA Low</p>	<p>A comprehensive medication management system has been developed at Methven Central Care Home, appropriate to the scope of the service. Some aspects of the medication room and storage area are still being completed prior to opening.</p> <p>Medication prescribing, dispensing, reconciliation, and review are undertaken and communicated by registered health professionals, including the general practitioner (GP), through an electronic medication management and prescribing system. This system also identifies, records, and monitors any medication-related allergies or sensitivities,</p>

		<p>with appropriate responses in place for adverse events.</p> <p>All staff involved in medication handling are trained and competent, having completed relevant medication management education. They safely manage all aspects of medication—receiving, storage, administration, monitoring, and disposal or return to the pharmacy. An internal audit system ensures ongoing compliance with safe practice and legislative requirements.</p> <p>Residents are provided with ongoing education and support to understand their prescribed medications, with examples observed of staff and the GP engaging residents in discussions to promote understanding and independence. Where appropriate, safe self-administration processes are in place, supported by competency assessments and supervision.</p> <p>Standing orders are not used at Methven Central Care Home. Over-the-counter medications and supplements are reviewed and recorded by the GP as part of each resident's medication plan to ensure accuracy and safety. The service also provides appropriate advice and support for Māori residents, acknowledging the use of rongoā Māori where appropriate and ensuring culturally responsive medication management practices.</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>PA Low</p>	<p>Methven Central Care Home ensures that all residents' nutritional and hydration needs are met in a way that promotes health, wellbeing, and cultural inclusivity. Menu development considers individual food preferences, dietary requirements, intolerances, allergies, and cultural needs, and is undertaken in consultation with residents and whānau. The organisation adopts a holistic approach to nutrition, ensuring that meals are balanced, appealing, and reflective of residents' cultural and personal preferences, including menu options that are culturally specific to te ao Māori and support traditional food practices and beliefs.</p> <p>Residents and whānau can be involved in meal preparation where appropriate to the service setting, helping to foster connection and participation. The dining environment at Methven Central Care Home is an inviting and contemporary space, designed to be safe, welcoming, and dignified. It encourages social interaction while maintaining</p>

		<p>residents' individual choice, comfort, and independence. The modern layout and natural light create a warm atmosphere that enhances the dining experience, promoting enjoyment and wellbeing as part of everyday life within the facility.</p> <p>The nutritional value of the menu is reviewed by a suitably qualified dietitian, ensuring it meets recommended dietary guidelines and supports the health needs of older adults. The food control plan from the existing facility requires transfer to the new site, to ensure compliance with food safety legislation.</p> <p>All aspects of food procurement, production, preparation, storage, transportation, delivery, and disposal comply with current legislative and food safety requirements. The existing kitchen staff, processes, and food preparation systems from the previous facility will be transferred to the new facility, ensuring consistency, familiarity, and continuity of safe, high-quality food service for residents.</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>PA Low</p>	<p>Methven Central Care Home provides a modern, safe, and welcoming environment designed to meet the physical, cultural, and emotional needs of residents. The facility is fit for purpose, compliant with relevant health and disability service legislation, and designed to optimise residents' sense of belonging, independence, and wellbeing. The environment is inclusive of all cultures and supports culturally safe practices, with plans to incorporate Māori-inspired artwork and design elements that reflect te ao Māori and create an inviting atmosphere for residents and whānau.</p> <p>The physical layout is spacious and accessible, with wide doorways, hallways, and entrance points to accommodate mobility equipment such as wheelchairs and walking aids. Each resident room is large and contemporary, with modern furnishings, excellent natural lighting, large external windows, and effective ventilation. Ceiling-mounted heating panels provide consistent, temperature-controlled warmth throughout the building. Each room includes nurse call bells, and bathrooms are fitted with handrails and non-slip flooring for safety and accessibility. Adequate toilet and shower facilities are conveniently located across both levels.</p> <p>The facility includes a lift providing access between floors, which has</p>

		<p>been checked and certified for compliance. Clinical spaces, including the nurses' station and treatment rooms, are efficiently located to support safe, responsive care delivery. Communal areas are thoughtfully designed, with a bright downstairs dining area and an upstairs lounge offering ample space for activities and social interaction.</p> <p>Externally, the site is flat and easily accessible, with paving, landscaped gardens, lawns, and shaded seating areas currently being completed. These will provide safe and pleasant outdoor spaces for residents and visitors once finished.</p> <p>While the facility is largely complete, final building works remain outstanding in some areas, including electrical finishing and external landscaping. Methven Central Care Home has engaged with the local council to complete the Building Warrant of Fitness (BWF) process, which will be issued following final sign-off of the remaining works.</p>
<p>Subsection 4.2: Security of people and workforce</p> <p>The people: I trust that if there is an emergency, my service provider will ensure I am safe.</p> <p>Te Tiriti: Service providers provide quality information on emergency and security arrangements to Māori and whānau.</p> <p>As service providers: We deliver care and support in a planned and safe way, including during an emergency or unexpected event.</p>	<p>PA Low</p>	<p>Methven Central Care Home delivers care and support in a planned, safe, and responsive manner, including during emergencies or unexpected events. The organisation is committed to ensuring the safety and security of residents, staff, and visitors through robust emergency management systems, policies, and procedures that align with legislative requirements.</p> <p>An orientation and induction programme has been developed to familiarise all staff, residents, and whānau with the safety and emergency aspects of the new facility when they transfer from the former site. Comprehensive fire safety and emergency procedures are in place, including evacuation plans, fire doors, and designated assembly points. The submitted fire evacuation plan is yet to be signed off by Fire and Emergency New Zealand (FENZ), and full approval remains pending until final building compliance is achieved.</p> <p>A nurse call bell system has been installed throughout the facility to enable residents and staff to summon assistance when required; however, final installation and testing are still to be completed (refer to criterion 4.1.1). The facility includes security doors that automatically lock at night, with timings to be determined collaboratively by residents and the board. Security cameras are installed around the external</p>

		<p>perimeter of the facility to monitor access points and enhance safety. There are no internal cameras within resident or communal areas, and appropriate signage is displayed to inform visitors and staff of external surveillance.</p> <p>Emergency supplies, including torches, bottled water, emergency food, cooking equipment, first aid kits, blankets, and battery-powered lighting are available and will transfer from the existing Methven House facility to ensure emergency preparedness. Staff have also received training and equipment to respond effectively to emergency and security situations, including fire safety, evacuation procedures, first aid, and incident management.</p> <p>Policies and plans cover a range of emergency scenarios such as fire, power failure, and natural disasters, and include clear processes for maintaining resident safety. Alternative energy and utility sources are available to ensure continuity of essential services in the event of a mains supply failure. Methven Central Care Home also has access to emergency power generators within the rural community to maintain essential services during any prolonged outage.</p> <p>Emergency and security arrangements are clearly communicated to all residents, staff, and whānau as part of the orientation and induction process, ensuring everyone understands procedures and responses required in the event of an emergency. Information provided includes considerations for Māori cultural needs, supporting an environment that is safe, inclusive, and culturally responsive for all.</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>Methven Central Care Home demonstrates strong and accountable governance in overseeing the infection prevention and control (IPC) and antimicrobial stewardship (AMS) programmes. The governance body provides competent leadership to manage infection risks and ensure the responsible use of antimicrobials. Equity monitoring for Māori is an integral part of IPC and AMS governance, ensuring culturally responsive and equitable outcomes are achieved.</p> <p>IPC and AMS are identified as core components of the organisation's strategic and business plans, reflecting the service's commitment to quality improvement, resident safety, and workforce wellbeing.</p>

<p>respond to relevant issues of national and regional concern.</p>		<p>Governance oversight includes regular review of IPC and AMS performance indicators.</p> <p>There is a formally agreed mechanism for accessing appropriate IPC and AMS expertise. The Nurse manager (NM), who also serves as the IPC coordinator, accesses expert guidance through the general practitioner (GP) and external IPC educators from Health New Zealand – Te Whatu Ora (Te Whatu Ora). The CM provides monthly reports to the governing body on IPC activities, outcomes, and any issues requiring escalation.</p> <p>A documented pathway exists for reporting IPC and AMS issues to the board at defined intervals, ensuring transparency and accountability. Significant IPC events are managed through a stepwise risk management process, with appropriate investigation, corrective action, and follow-up. All events are recorded within the organisation’s risk management system, ensuring they receive the necessary level of organisational support and oversight.</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>PA Low</p>	<p>Methven Central Care Home has developed and implemented a comprehensive infection prevention (IP) programme that is appropriate to the size, needs, and scope of the service. The programme demonstrates a strong commitment to maintaining a safe and healthy environment for residents, staff, and visitors through effective systems, policies, and procedures that align with legislative and best practice requirements. The service promotes culturally safe infection prevention practices, with communication that is accessible, relevant, and inclusive of Māori perspectives, ensuring information is easily understood by residents, staff, and whānau.</p> <p>A designated Infection prevention and control (IPC) coordinator has been appointed with a job description that clearly defines their responsibilities and authority for IP decision-making. The IPC coordinator oversees and coordinates the implementation of the IP programme and reports regularly to the governance body. The programme has been developed by external professionals with recognised expertise in IP and AMS, and it is approved by the governance body, linked to the quality improvement system, and</p>

		<p>reviewed annually through the patient management system (PMS).</p> <p>A full suite of infection prevention and control policies is documented within the PMS. All policies comply with relevant legislation and best practice guidelines.</p> <p>An up-to-date pandemic and infectious disease response plan is in place, supported by adequate personal protective equipment (PPE) and resources. A recent infectious outbreak response demonstrated effective IP documentation and adherence to good infection control practices. Clear reporting lines to governance are established, and the service can access multidisciplinary IP expertise as required, including external support from Te Whatu Ora and the facility's general practitioner (GP).</p> <p>IP personnel have input into the development and review of other clinical policies that may influence HAI risk and have access to shared clinical records and diagnostic results to support effective surveillance and decision-making. Infection prevention education is included in the staff orientation programme, with ongoing training and competency updates scheduled at defined intervals. The education planner sighted during audit included core IPC and AMS competencies, such as hand hygiene and outbreak management, and confirmed that mandatory training had been completed.</p> <p>The IPC coordinator is involved in procurement processes for equipment, consumables, and devices to ensure suitability for infection control requirements. Evidence also confirmed that the IPC coordinator was actively involved in consultation and design decisions during the construction of the new facility, providing input into the selection of surfaces, fixtures, and layouts to support infection prevention standards and optimal environmental hygiene.</p> <p>Reusable medical devices and shared equipment are appropriately decontaminated and reprocessed in accordance with manufacturers' recommendations and infection prevention best practice guidelines. The service conducts regular internal audits of cleaning and decontamination practices, with results reviewed through clinical governance to confirm compliance with policy. Single-use devices are not used. Disposable scissors are sterilised occasionally due to low risk and the absence of alternative reusable options. Scissors are sterilised after use in a designated area using monitored sterilisation processes and following a</p>
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		<p>risk assessment. This process has governance body approval to ensure the practice remains safe and compliant.</p> <p>Educational resources are available in te reo Māori and designed to be accessible and easily understood, ensuring Māori residents and whānau can engage meaningfully with the infection prevention programme. IP personnel and committees work in partnership with Māori to uphold culturally safe infection prevention practices, honouring the spirit and intent of Te Tiriti o Waitangi.</p>
<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>	<p>FA</p>	<p>Methven Central Care Home has a clearly defined antimicrobial stewardship (AMS) programme designed to promote responsible and effective antimicrobial use. The programme is appropriate to the size, scope, and complexity of the service and aims to optimise antimicrobial prescribing, minimise harm, and reduce the development of antimicrobial resistance. The AMS programme has been approved by the governance body and is guided by evidence-based prescribing standards and clinical best practice.</p> <p>Policies and guidelines are in place to support safe and appropriate antimicrobial use, ensuring that prescribing, dispensing, and administration align with evidence-informed practice. The service has access to laboratory diagnostic testing and reporting, which informs prescribing decisions and supports clinical oversight by the general practitioner (GP) and clinical manager.</p> <p>During the audit, an AMS report was sighted that tracked antibiotic usage trends and included analysis by ethnicity data, demonstrating the organisation's commitment to health equity and monitoring of outcomes for Māori. The report is reviewed by the governance body, ensuring accountability and continuous improvement.</p> <p>The effectiveness of the AMS programme is regularly monitored and evaluated by reviewing antimicrobial prescribing patterns, identifying opportunities for improvement, and assessing progress against AMS goals. The programme's communication and education materials are culturally safe, easy to understand, and relevant to residents, staff, and whānau, ensuring that all aspects of antimicrobial management uphold the principles of Te Tiriti o Waitangi and support equitable, evidence-</p>

		based care.
<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>Methven Central Care Home has a structured and well-documented health care-associated infection (HAI) surveillance programme that aligns with national and regional guidelines and is proportionate to the size, scope, and complexity of the service. The surveillance programme is designed to identify, monitor, and manage infection risks, including multidrug-resistant organisms (MDROs), with a focus on continuous improvement and health equity.</p> <p>Surveillance activities are tailored to the service type and the acuity and risk profile of residents, as well as the health and safety of staff. The infection prevention and control coordinator (IPCC) determines the type and frequency of surveillance, ensuring that methods and tools are consistent with standardised definitions and best practice guidelines. Surveillance data is documented and analysed within the patient management system (PMS), enabling ongoing monitoring and accurate reporting.</p> <p>The surveillance process includes ethnicity data collection and analysis, allowing the organisation to identify and respond to any inequities in infection rates or outcomes for Māori and other cultural groups. This ensures that the surveillance programme remains culturally safe and consistent with the principles of Te Tiriti o Waitangi.</p> <p>Results of surveillance are reported to the governance body monthly and shared with the clinical and care team to guide quality improvement initiatives and risk mitigation strategies. Where required, recommendations are documented and actioned promptly, ensuring responsive infection control measures.</p> <p>Communication with residents and whānau regarding any identified HAI is undertaken in a clear, culturally safe, and supportive manner, ensuring understanding and transparency. The approach fosters trust, empowers residents to participate in their care decisions, and reinforces Methven Central Care Home's commitment to maintaining a safe and equitable environment for all.</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>Methven Central Care Home maintains a clean, hygienic, and well-managed environment that supports infection prevention and minimises the risk of transmitting antimicrobial-resistant organisms. Policies and procedures align with legislative and local authority requirements, ensuring the safe storage and disposal of waste and hazardous substances. Staff are trained and equipped with appropriate PPE to handle these materials safely.</p> <p>Cleaning processes are structured, with clear methods, frequencies, and approved materials. Effectiveness is monitored through audits, and feedback is provided to cleaning staff to ensure consistency and high standards. While designated cleaning storage areas are in place, the chemical storage cupboard is still being completed as part of final building works (see criterion 4.1.1).</p> <p>Laundry services are safe and efficient, with defined procedures ensuring a clear separation between clean and dirty items. Laundry areas and chemical storage facilities are appropriately designated and will be fully completed alongside remaining building tasks (see criterion 4.1.1).</p> <p>The IPC coordinator oversees environmental hygiene, including cleaning, waste, and laundry processes, as part of the infection prevention programme. The environment is culturally safe, well-maintained, and supports resident wellbeing, consistent with the principles of Te Tiriti o Waitangi.</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 2.1.10</p> <p>Governance bodies shall have demonstrated expertise in Te Tiriti, health equity, and cultural safety as core competencies.</p>	PA Low	<p>Methven Central Care Home has a well-defined governance framework, with eight appointed trustees providing oversight and strategic direction. The board meets monthly, maintains documented job descriptions, and receives regular reports from the nurse manager on quality, risk, and service performance. Governance documentation confirmed a clear commitment to Te Tiriti o Waitangi and equitable outcomes, with one board member bringing extensive experience in Māori cultural safety and engagement with Māori organisations. Policies and minutes demonstrated effective communication between governance and management. There was no evidence of cultural competencies.</p>	<p>Board members have not completed competency training in Te Tiriti o Waitangi and cultural safety.</p>	<p>Ensure all board trustees complete formal competency training in Te Tiriti o Waitangi, health equity, and cultural safety to strengthen cultural governance capability.</p> <p>180 days</p>

<p>Criterion 3.4.1</p> <p>A medication management system shall be implemented appropriate to the scope of the service.</p>	<p>PA Low</p>	<p>On the day of audit, Methven Central Care Home had medication management policies and procedures in place that align with current legislative and best practice requirements. Staff were knowledgeable, well-educated, and able to clearly describe the medication management systems to be implemented. Completed medication competencies and records of training were sighted. The service has an established electronic prescribing and medication management system in place and a general practitioner (GP) contracted to oversee prescribing and medication reviews. However, the medication room and storage area were not yet fully completed. A controlled drug (CD) lock box, CD register book, and medication refrigerator still need to be purchased and installed, and minor building works in the medication room remain outstanding.</p>	<p>Some building works, and the physical storage and essential equipment needed to fully implement the medication management system is still in progress and not yet completed.</p>	<p>Complete the medication room fit out, including installation of the CD lock box, CD register book, and medication refrigerator, and finalise all outstanding building works to ensure the medication management system is fully operational and compliant prior to occupancy</p> <p>Prior to occupancy</p>
<p>Criterion 3.5.5</p> <p>An approved food control plan shall be available as required.</p>	<p>PA Low</p>	<p>At the time of audit, Methven Central Care Home had a current and approved Food Control Plan (FCP) in place at the existing facility (Methven House). Documentation confirmed that all food service operations are compliant with legislative and food safety requirements, and kitchen staff are trained in food hygiene and handling procedures.</p>	<p>The approved Food Control Plan has not yet been transferred to the new facility (Methven Central Care Home).</p>	<p>Transfer and register the existing Food Control Plan for the new Methven Central Care Home, to ensure full compliance with food safety regulations before commencement of service delivery.</p> <p>Prior to occupancy</p>
<p>Criterion 4.1.1</p>	<p>PA Low</p>	<p>On the day of audit, Methven Central Care Home was observed to have</p>	<p>Some building and electrical work is still</p>	<p>Complete all remaining building, electrical and finishing work in</p>

<p>Buildings, plant, and equipment shall be fit for purpose, and comply with legislation relevant to the health and disability service being provided. The environment is inclusive of peoples' cultures and supports cultural practices.</p>		<p>buildings, plant, and equipment that are modern, purpose-built, and generally compliant with health and disability service requirements. The environment is inclusive of all cultures and supports cultural practices, with Māori-inspired design features incorporated throughout the facility. Most building works have been completed; however, the kitchen and laundry areas still require completion including chemical storage (criterion 5.5.4). Some electrical work and finishing touches around resident and communal areas require completion – including the outside paving and decking area to ensure full accessibility and safety. Some call bells and electricals require finishing. There is no Building Warrant of Fitness (BWOFF) in place at present, but this is in progress and will be finalised once the remaining building works have been completed.</p>	<p>required in resident and communal areas before the BWOFF can be issued.</p>	<p>resident and communal areas and obtain a Building Warrant of Fitness to confirm full compliance with legislative and safety requirements.</p> <p>Prior to occupancy</p>
<p>Criterion 4.2.1 Where required by legislation, there shall be a Fire and Emergency New Zealand-approved evacuation plan.</p>	<p>PA Low</p>	<p>Methven Central Care Home has fire safety and emergency evacuation policies and procedures in place that align with legislative and contractual requirements. Fire evacuation plans and diagrams have been developed and submitted for the new facility; however, the service has not yet been formally signed off by Fire and Emergency New Zealand (FENZ). Final approval will occur once remaining building works and safety compliance checks are completed.</p>	<p>A Fire and Emergency New Zealand approved evacuation plan has not yet been issued, as the facility is still undergoing final building compliance and fit out.</p>	<p>Obtain formal Fire and Emergency New Zealand approval of the evacuation plan once all building works are complete and compliance requirements are met.</p> <p>Prior to occupancy</p>

<p>Criterion 5.2.1</p> <p>There is an IP role, or IP personnel, as is appropriate for the size and the setting of the service provider, who shall:</p> <p>(a) Be responsible for overseeing and coordinating implementation of the IP programme;</p> <p>(b) Have clearly defined responsibility for IP decision making;</p> <p>(c) Have documented reporting lines to the governance body or senior management;</p> <p>(d) Follow a documented mechanism for accessing appropriate multidisciplinary IP expertise and advice when needed;</p> <p>(e) Receive continuing education in IP and AMS;</p> <p>(f) Have access to shared clinical records and diagnostic results of people.</p>	<p>PA Low</p>	<p>During the audit, an interview was conducted with the Infection Prevention and Control Coordinator (IPCC), who demonstrated a good understanding of infection prevention principles and was able to describe key infection control practices implemented within the facility. The IPCC has completed one hand hygiene education session and understood the foundational aspects of infection prevention. However, she has not yet completed the required leadership or specialist education in infection prevention and antimicrobial stewardship (AMS) relevant to her role as coordinator.</p>	<p>The Infection Prevention and Control Coordinator has not yet completed the required leadership education specific to infection prevention and antimicrobial stewardship</p>	<p>Ensure the infection prevention and control coordinator completes formal, role-specific training in infection prevention and antimicrobial stewardship.</p> <p>180 days</p>
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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, there is a message “no data to display” then no continuous improvements were recorded as part of this audit.

No data to display

End of the report.