

# Canterbury District Health Board

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## Introduction

This report records the results of a Certification Audit of a provider of hospital services against the Health and Disability Services Standards (NZS8134.1:2008; NZS8134.2:2008 and NZS8134.3:2008).

The audit has been conducted by Central Region's Technical Advisory Services 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 10 of the Health and Disability Services (General) Standards (NZS8134.0:2008).

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

The specifics of this audit included:

<b>Legal entity:</b>	Canterbury District Health Board
<b>Premises audited:</b>	Hillmorton Hospital  Lincoln Maternity Hospital  Kaikoura Hospital  Chatham Island Health Centre  Oxford Hospital  The Princess Margaret Hospital  Tuarangi Home  Rangiora Hospital  Ashburton Hospital  Burwood Hospital  Waikari Hospital  Christchurch Hospital  Darfield Hospital  Ellesmere Hospital
<b>Services audited:</b>	Hospital services - Psychogeriatric services; Hospital services - Medical services; Hospital services - Mental health services; Hospital services - Geriatric services (excl. psychogeriatric); Rest home care (excluding dementia care); Hospital services - Children's health services; Dementia care; Hospital services - Surgical services; Hospital services - Maternity services
<b>Dates of audit:</b>	Start date: 18 June 2018    End date: 22 June 2018

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

**Total beds occupied across all premises included in the audit on the first day of the audit:** 1164

# Executive summary of the audit

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## Introduction

This section contains a summary of the auditors' findings for this audit. The information is grouped into the six outcome areas contained within the Health and Disability Services Standards:

- consumer rights
- organisational management
- continuum of service delivery (the provision of services)
- safe and appropriate environment
- restraint minimisation and safe practice
- infection prevention and control.

## General overview of the audit

Canterbury District Health Board's Annual District Plan describes how health services are provided to the people of Canterbury. The whole of system approach to healthcare is in collaboration with other health agencies in the region. This approach has enabled health services to continue efficiently despite the continued aftermath of the earthquake.

There are 1459 inpatient beds. The audit team visited services at Christchurch, Christchurch Women's, Burwood, Lincoln, Darfield, Waikari, Tuarangi and Ashburton hospitals and the mental health services at Princess Margaret and Hillmorton.

The new acute services building adjacent to Christchurch hospital is due for completion late 2019 and a master plan for the site is awaiting approval.

Continued improvements and a culture of safety and patient centred care was demonstrated across the services.

The audit team received a self-assessment and supporting evidence was available pre-audit and on site. The audit team met with staff, patients and their families during the audit. Fifteen patient tracer journeys were completed across Canterbury District Health

Board in medical; surgical; child health; maternity; mental health; geriatric and long-term aged residential care. Two systems tracers were completed for medicines management and infection prevention and control.

There are 11 required improvements arising from the audit. These relate to consent, document management, corrective actions, performance plans, mandatory training, nursing assessments, goal setting, planned activities, medicine management and restraint.

## **Consumer rights**

Safe Services that comply with consumer rights legislation are provided in a respectful manner. 'Your Rights' leaflets and posters ensure patients and their families are informed. Assessment of patients identify individual needs and this forms the basis for appropriate care planning. A Māori Health Action Plan provides the framework for provision of health services to Māori and cultural support is provided to Māori and Pacific people during service provision. Policies and expectations ensure patients are not discriminated against. Staff are professional and are guided by the code of conduct and professional requirements. The Canterbury District Health Board encourages good practice. There is an emphasis on education, professional development and research. Health pathways, clinical audit and clinical protocols and pathways support clinical best practice.

Patients confirmed they are involved in their care, treatment and decision making. Survey results confirmed that patients are positive about the care and service provided by the organisation. The complaints process is advertised and accessible. The process complies with Right 10 of the Health and Disability Code of Consumer Rights.

## **Organisational management**

The Board and management provide governance and leadership to the organisation. They receive advice from both the Consumer Council and the Clinical Board. The values of the organisation and the planned direction are communicated to staff and the community. The organisation is led by experienced managers. Performance measures show the District Health Board is efficient and, despite the increasing numbers of patients attending the hospitals, patient flow and beds are effectively managed. The quality and safety programme supports staff to provide safe care and the structure supports an integrated quality management system.

Policies and procedures guide staff in their practice and the Safety 1st recording and file management system is used for incident, complaints and risk management.

There are documented strategies in place to provide the right skill mix of staff based on acuity. Recruitment and appointment processes are documented and used. All medical staff are credentialed. All staff attend orientation and there are ongoing professional and personal development training programmes offered with an increasing use of online training. The people and capability strategy is progressing.

The District Health Board is moving from a paper based clinical record to a digital record. Currently the record is a hybrid record to ensure all information about the patient is available for care and treatment.

## **Continuum of service delivery**

Canterbury District Health Board has processes in place to support standardisation of inpatient care systems and processes where possible, including the development and implementation of emerging technology advances that support patient care.

The review of patients' journeys and incidental sampling demonstrated a multi-disciplinary team approach to patient care. All members of the multi-disciplinary team document patient care and treatment in the patient's clinical record. There is timely access to allied health services staff when this is required. Access to medical and nursing staff is 24 hours a day, 7 days a week. Evaluation of patient care and changes to patient care planning when this is required was evidenced. Patients and family members interviewed confirmed they have input into care planning and are consulted on their and their family members' treatment and care, where appropriate.

Continuity of care is facilitated through handovers at the change of each shift and appropriate sharing of information between staff was demonstrated. Daily rounds and 'huddles' provide a forum for planning the day in the wards noting patients for discharge, assessment and/or referral to other services. Patient transfer to other services, internally and externally, are clearly documented in the patient record following a referral process used throughout Canterbury District Health Board. Transfers between services follow

a newly introduced computerised handover system that facilitates detailed information about the patient and allows for transfer timeframes to be adhered to.

The electronic medication prescribing and administration system is supported by policies and procedures.

The patients interviewed were positive about the food services which is managed by a contracted service provider with dietitian input into menus and special diets.

## **Safe and appropriate environment**

Systems are in place to support the provision of a safe environment to patients, staff and visitors. All buildings have a current warrant of fitness. The organisation is still managing the effects of the earthquake on its buildings and infrastructure, however, risk management processes remain strong. Waste, including recycling, is managed effectively with education provided to staff. Mechanisms for disaster and emergency response, including fire safety, are established. Staff are trained and plans are practiced. Amenities are provided to meet the needs of the specific patient groups including areas for recreation, dining, playroom in paediatrics and outside areas.

## **Restraint minimisation and safe practice**

The restraint minimisation and safe practice policies and procedures are used across the organisation with specific policies to inform practice with identified groups of patients, such as paediatrics, psychogeriatric and mental health.

There is a range of approved restraints and enablers for general use listed in the policy document to guide staff.

Mandatory training is delivered to staff within the organisation. There are clear policies for safe seclusion use.

## **Infection prevention and control**

The infection prevention and control committee is multidisciplinary. A review of the Canterbury District Health Board infection prevention and control programme was undertaken and as a result, a number of improvements are being implemented.

Surveillance activities were reviewed and these include audits and surgical site infection surveillance. Canterbury District Health Board participates in the Health Quality and Safety Commission surgical surveillance programme.

Antimicrobial stewardship is in place with prescribing benchmarked against the other South Island District Health Boards. Infection prevention and control programme training occurs, including gold auditor training for all staff in regional hospitals to monitor compliance of hand hygiene.

The infection prevention and control system tracer focused on management of patients with known and suspected norovirus. The Canterbury District Health Board norovirus outbreak guidelines provide guidance for staff to prevent and control cross infection of norovirus gastrointestinal disease.