

Nelson Marlborough District Health Board

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:

Legal entity:	Nelson Marlborough District Health Board
Premises audited:	Nelson Hospital Wairau Hospital Alexandra Hospital 110 Toi Toi Street 4/132 Toi Toi Street 71 Maxwell Road 3/246 Vanguard Street 6 Regent Lane
Services audited:	Hospital services - Psychogeriatric services; Residential disability services - Intellectual; Hospital services - Medical services; Hospital services - Mental health services; Rest home care (excluding dementia care); Residential disability services - Physical; Hospital services - Children's health services; Hospital services - Surgical services; Hospital services - Maternity services
Dates of audit:	Start date: 9 April 2019 End date: 12 April 2019
Proposed changes to current services (if any):	Addition of 11 beds in the medical assessment unit at Nelson hospital, which is due to open July 1 2019.

Total beds occupied across all premises included in the audit on the first day of the audit: 381

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 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

Nelson Marlborough District Health Board provides health services to the people of Nelson, Blenheim and the surrounding area. The audit team received a self-assessment and documents prior to the audit and further evidence was provided on site. Interviews were held with managers, staff, patients and families. The audit team visited clinical services in Nelson, Alexandra and Wairau hospitals as well as community houses across the region. Nine patient tracers and three systems tracers were undertaken. Further incidental sampling was undertaken for residential disability services.

Services are led by the chief executive and executive team. The Board are guided by the annual plan and receive timely information to inform decision making.

Initial planning and consultation is underway for a new clinical services building in Nelson. The current surgical services are provided from a less than optimal environment, with the addition of consistently very high occupancy rates, creating daily challenges for effective management of services.

The audit team observed that staff are patient focused, deliver safe services and are committed to ongoing improvement of systems and patient care. Progress has been made since the last external review related to models of care and quality improvements.

There are 12 corrective actions arising from the audit. These are related to informed consent, implementation of quality and risk management processes, implementation of corrective action plans, strategies for improved patient flow and capacity management, ensuring progress towards Care Capacity Demand Management, information management, nursing assessments, nursing care planning, transfers/discharge and handover practices, medicines management processes, the use of personal protective equipment, enabler and restraint management processes and policy.

Consumer rights

Patients and their families from all areas of the Nelson Marlborough District Health Board confirmed they are provided with documented information about the Health and Disability Commissioner's Code of Health and Disability Services Consumers' Rights and the complaints processes. Interviews confirmed patients and their families have access to advocacy and interpreter services.

Patient interviews confirmed they are treated with dignity and respect. Māori and Pacific Island patients reported they have their needs met and they are supported. Links with family and community services are maintained for patients who may need this support.

Patients and their families confirmed they receive information on the complaints process. This information is easily accessible, and the process complies with Right 10 of the Health and Disability Code of Consumer Rights.

Organisational management

Nelson Marlborough District Health Board services are planned, coordinated and delivered to ensure safe patient care. Values are known by staff and influence decision making.

Services are coordinated to ensure patients receive safe and timely care. TrendCare is utilised to ensure safe staffing levels. Progress towards the implementation of strategies to improve patient flow, increase capacity and provide an improved environment for staff and patients will ensure enhanced outcomes are met.

Policies, procedures and guidelines are controlled and available to staff in electronic and hard copy. Progress has been made to review outdated documents and ensure current documents are in use.

The clinical governance framework is established and improvements have been made in the implementation of quality systems.

Risk identification and management occurs across the organisation including the Board. Incidents and events are managed using the Safety 1st information system.

Human resources are managed according to best employment practice and current legislative requirements. Orientation, education and training is available to all staff.

Clinical records both paper and electronic are available for patient care.

Continuum of service delivery

Nine patient journeys were followed through individual patient methodology sampling processes in medical, surgical, child health, maternity services, mental health services, health of older persons and residential disability services. Incidental sampling was completed throughout the Nelson Marlborough District Health Board.

Care and treatment of patients is documented in patients' clinical records, with evidence of a multi-disciplinary approach to care and the provision of timely access to allied health input.

Medical and nursing care is provided 24 hours a day, 7 days a week. Patients and their families confirmed they are consulted. There is evidence of services facilitating continuity of care.

There is evidence of processes to maintain safe and effective care. The Nelson Marlborough District Health Board uses hard copy medication records across inpatient services and clinical pharmacists provide support to clinical areas. Targeted medicines reconciliation was evident throughout the organisation.

Food services are provided on site by an external contractor and feedback from patients and families was positive. Food services included dietitian input into menus and special diets.

Safe and appropriate environment

Nelson Marlborough District Health Board has established systems and processes that support and maintain a safe environment for patients, staff and visitors. Building maintenance is planned and completed as scheduled. Earthquake strengthening has been completed at some sites. The risks associated with mature buildings is understood and mitigated. Older clinical service areas are well maintained despite not supporting current models of care. All buildings have a current warrant of fitness. Cleaning services are conducted in house by household staff and laundry services are managed by a contracted service provider. There is an internal audit schedule in place to monitor the cleaning and laundry services.

Emergency and disaster plans are developed and include collaboration between local, regional and national networks. Staff discussed business continuity during periods of unexpected emergencies and swift response to managing core services. Staff receive training and information for each service area. Security processes are implemented to provide a safe environment.

Restraint minimisation and safe practice

The restraint minimisation and safe practice policies and documents are used across the organisation to inform practice with identified groups of patients including mental health services and the general acute care setting. There is a restraint advisory group in place that includes staff from both mental health and the general hospital.

Mandatory restraint training is available and completed by staff within the organisation.

Infection prevention and control

The infection prevention and control committee includes a clinical microbiologist, infectious disease physicians and clinical nurse specialists with representatives based in all areas of service delivery, including kitchen and household. There are investigation systems and robust reporting processes in place for management of infections and outbreaks.

The infection prevention and control system tracer focused on management of patients who require isolation. Surveillance activities were reviewed and included internal audits and surgical site infection surveillance.