





# HealthCERT Bulletin

## Information for the Sector

#### Welcome to the September 2023 bulletin

Welcome to the September issue of HealthCERT Bulletin for 2023.

Spring has sprung, daylight hours are getting longer, and it won't be long before we are thinking of Christmas.

28 August 2023 saw the end of the final grace period for auditing regulated providers against the Ngā paerewa Health and disability services standard (Ngā Paerewa). As you may know, there are several new criteria in Ngā Paerewa. For the first 18 months of Ngā Paerewa, these criteria were managed under a 'grace period', meaning providers did not receive corrective actions for not applying the criteria if they could show they were working to meet those criteria. With the end of the grace period, all criteria not fully attained will now receive corrective actions at the time of audit.

We'd like to take this opportunity to acknowledge the mahi undertaken across the health sector with the implementation and transition to Ngā Paerewa. It has been quite a journey and wonderful to see so many providers now fully attaining the new requirements.

In this September edition, we end our series of spotlights on knowing your HealthCERT team with the last, but by no means least, spotlight set on our acting manager.

We have clarified aged residential care providers certification requirements when supporting younger people with lifelong disabilities (YPD) and residents under the long-term support – chronic health contract (LTS-CHC). We have also clarified the requirements for couples' rooms in aged residential care facilities.

We introduce the review of Te Whatu Ora | Health New Zealand (Te Whatu Ora) public hospital audit framework.

We also include an update from the Assisted Dying Service and an article from WorkSafe New Zealand about the Health and Safety at Work Act 2015 – New Zealand's umbrella law.

Lastly, there is a reminder about the availability of Ngā Paerewa Te Tiriti e-learning modules.

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# **Operating matters**

#### Knowing the HealthCERT team

In this bulletin, we are featuring Kirsten Lassey, our HealthCERT Acting Manager. Kirsten has been in this management role for over a year now. Among other things, her role involves:

- leading and enabling the team to make informed, logical, consistent decisions related to HealthCERT's regulatory function of health care services
- holding relationships with a wide range of stakeholders from across the health and disability sector
- managing recruitment, budgeting, business planning and all that background work that keeps the wheels oiled
- supporting the team to be the amazing kaimahi and hoamahi they are.

Kirsten is a registered nurse, with many years' experience working in the public sector as a ward nurse, specialist nurse and manager. She joined Manatū Hauora and HealthCERT nearly two years ago and has enjoyed the extensive learning and knowledge she has gained (while recognising there is still plenty more to learn). The supportive, friendly colleagues (both inside and outside the team), morning coffees and frequent shared sweet treats certainly help as well!



# Young people with disabilities and long-term conditions in aged residential care certification requirements

Aged residential care (ARC) providers support a range of individuals with short-term and longterm care needs. Funding for this is provided mainly under the Age-Related Residential Care Agreement (ARRC), however, care is provided under other funding contracts/arrangements, such as with Whaikaha | Ministry of Disabled People for younger people with lifelong disabilities (YPD), with Te Whatu Ora funding arrangements (including long-term support – chronic health conditions (LTs-CHCs), mental health, respite, interim care) and with the Accident Compensation Corporation (ACC) (including long- and short-term care options). We'd like to clarify here the certificate requirements for when ARC providers have residents funded under these additional agreements.

Many of the younger people entering long-term care and people entering under short-term arrangements have complex needs, requiring a higher level of clinical oversight. For this reason, if a hospital-level ARC provider supports these residents, their certification must include 'Hospital services – Medical services' as well as 'Hospital services – Geriatric'.

The Health and Disability Services (Safety) Act 2001 requires a provider to be certified for residential disability care when they provide care for five or more people with an intellectual, physical, psychiatric or sensory disability (or a combination of two or more such disabilities) to help those people function independently. This means that any ARC facility that provides care for five or more YPD residents must have 'Residential Disability' certification.

If you are an ARC provider and wish to add certification for 'Hospital services – Medical services' and/or 'Residential Disability' services to accommodate residents under other funding arrangements, please include this in your application at your next certification audit. An important component of certification audits for residential disability services is a consumer auditor, which will be arranged by your designated audit agency.

If your next audit is a surveillance audit, please email us, advising us the service(s) you want to add to your certification. We will either approve your request or ask for more information. In the case of the latter, you can ask your designated auditing agency (DAA) to include this information in your audit.

There are minimal additional audit requirements needed to add 'Hospital – Medical services' to a certification, but to add 'Residential Disability', the DAA will need to verify at audit that you are meeting your YPD and/or LTC residents' needs, which may include, but is not limited to, consumer rights, community involvement, nutrition, activities and care.

Please contact us if you would like to discuss these requirements further.

#### **Clarification of couples' rooms in ARC facilities**

It is becoming increasingly common for ARC facilities to have rooms that can accommodate couples but are predominantly occupied by single people. We have been asked to clarify how these beds are recorded. After consultation, we have determined the following.

- All rooms designed to accommodate couples should be verified as suitable by auditors, and this verification should be reflected in the audit report.
- Bed numbers will be recorded as single use as we know this is the most common scenario and will most correctly reflect the requirements for staffing and other facilities (such as space in the dining area).
- A facility can have up to five couples without being required to notify us of this.
- If five or more couples are planned, the facility will need to request a reconfiguration. Once any requirements for the increase in bed numbers are met, bed numbers in the

system will be increased, and we will continue to allow flexibility for a further five couples before another reconfiguration is required.

 Auditors will record the correct total numbers of residents at the time of audit, specifically noting the number of couples.

#### **Review of the public hospital audit framework**

We are pleased to confirm we will shortly be commencing a review of the way Te Whatu Ora public hospitals are audited and certified under the Health and Disability Services (Safety) Act 2001 and against the Ngā paerewa Health and disability services standard (NZS 8134:2021). As we determine the new audit framework for public hospitals in our reformed health system, we will share what has worked and what could be improved.

We are now in the planning phase for this project and are conducting an internal evaluation of business processes, as well as establishing the project plan and governance for the review. We will share more details about the review project, process and engagement opportunities through this bulletin and directly to key stakeholders following the planning decisions.

In the meantime, particularly if you are keen to be involved in the review process, you are welcome to reach out directly to the project manager, <u>Jade.Cincotta@health.govt.nz</u>

#### Te Tiriti eLearning module reminder

We would like to remind you that Ngā Paerewa Te Tiriti eLearning modules are available on the Manatū Hauora Learn Online platform. Please be aware you will be asked to create a username and password to access this free online module. The second module is divided into sections that can be completed separately, however all sections need to be completed to achieve certification.

For more information on both eLearning modules, visit the Manatū Hauora website, at the dedicated webpage: <u>Ngā Paerewa: Training and Support</u>

We hope you enjoy completing the eLearning modules and take away some new learnings for providing your unique care and support settings with culturally responsive health and disability services based on Te Tiriti.

If you have any questions or feedback, please contact the HealthCERT team at: <u>certification@health.govt.nz</u>

### **Sector matters**

#### Update from the Assisted Dying Service

On 6 March 2023, some parts of the Assisted Dying Services transferred to Te Whatu Ora from Manatū Hauora as part of the wider health reforms. You can read more about the reform on the Manatū Hauora website, at the webpage <u>New health and disability system</u> (www.health.govt.nz/new-zealand-health-system/new-health-and-disability-system).

Te Whatu Ora is now responsible for overseeing and monitoring the operational aspects of the Assisted Dying Service, including collecting data and generating summary reports. All reports, including those previously completed by Manatū Hauora, are available on Te Whatu Ora website, at the webpage <u>Assisted Dying Service Data and Reporting</u> (www.tewhatuora.govt.nz/for-the-health-sector/assisted-dying-service/assisted-dying-service/assisted-dying-service-data-and-reporting).

Recent quarterly reporting by Te Whatu Ora, from 1 April 2023 to 30 June 2023, noted the service received 190 applications for assisted dying, and there were 88 assisted deaths during the quarter.

Assisted deaths can take place at the person's home or elsewhere in the community. In the last quarter around the motu:

- 75 (or 85.2 percent) took place at the person's home or another private property
- 9 (or 10.2 percent) took place in a public hospital
- 4 (or 4.5 percent) took place in a community facility (for example, ARC service, hospice).

Health service providers are encouraged to regularly review their policies and guidance for situations where a person may request information about or access to assisted dying. Policy templates to support providers can be found on Te Whatu Ora website, at the webpage <u>Assisted dying information for health service providers</u> (www.tewhatuora.govt.nz/for-the-health-sector/assisted-dying-service/assisted-dying-information-for-health-service-providers).

If you have questions about assisted dying or would like to subscribe to the Assisted Dying Service newsletter, please contact the Assisted Dying Service, either by calling 0800 223 852 or emailing <u>AssistedDying@health.govt.nz</u>

#### The Health and Safety at Work Act – New Zealand's 'umbrella' law

New Zealand has a broad health and safety at work law. The Health and Safety at Work Act 2015 (HSWA) sets out employers' obligations for ensuring the health and safety of their workers, and people affected by their business' work. HSWA covers all types of work and working contexts in New Zealand, including paid and unpaid work, and includes health care. Robust health and safety systems, processes and procedures support a health care workforce to provide the care and services required of them.

Health care work is often regulated under more than one law, such as the Health and Disability Services (Safety) Act 2001, as well as HSWA.

Employers, including health care organisations, are expected to manage their obligations under these different laws alongside each other.

When an adverse event happens, more than one regulatory body may need to be notified – for example, HealthCERT and the coroner's office. If the event results in harm to a worker or

other person (including a health service user), then it may also qualify as a 'notifiable event' under work health and safety law and will also need to be reported to WorkSafe New Zealand.

It is important to note that other notification requirements do not override the need to notify WorkSafe where the event meets the criteria.

HSWA legislation applies to any affected person and to any type of service, including in-home care.

It is vital that employers understand HSWA and what it means for them.

#### **Resources for health care employers**

A range of resources are available on the WorkSafe New Zealand website to help workers and employers understand and manage health and safety at work. Find out more on the WorkSafe New Zealand website at the following webpages.

- <u>What risk looks like in your industry: Health services</u> (www.worksafe.govt.nz/managing-health-and-safety/managing-risks/what-risk-looks-like-in-your-industry/health-services)
- <u>WorkSafe positions: Our approach to the healthcare and social assistance sector</u> (www.worksafe.govt.nz/laws-and-regulations/operational-policy-framework/worksafepositions/our-approach-to-the-healthcare-and-social-assistance-sector)
- Notifications: Notify WorkSafe (www.worksafe.govt.nz/notifications/notify-worksafe).

Specialist health and safety consultants or technical advisors can also provide specific advice and support. You can find out more on the Health and Safety Association of New Zealand (HASANZ) website, at the webpage <u>HASANZ Register</u> (www.hasanz.org.nz/hasanz-register).

#### The role of WorkSafe New Zealand

WorkSafe New Zealand is our country's primary work health and safety regulator. Its aim is to ensure that every New Zealander who goes to work comes home healthy and safe. It works to educate and engage with employers to ensure they understand their obligations under HSWA. Where necessary, WorkSafe New Zealand enforces that law.

#### Invitation to submit success stories

You can submit a success story to celebrate in the next issue of the bulletin. Tell us your stories of innovation and endeavours in continuous quality improvement.

Email your stories to us at <u>certification@health.govt.nz</u>.