

# Nelson Marlborough District Health Board

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## Introduction

This report records the results of a Surveillance 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>	Nelson Marlborough District Health Board
<b>Premises audited:</b>	35 Ngawhatu Road  64 Grove Street  12 Trolove Place  136 McShane Road  75 Saxton Road West  22 Tasman Street  154 Songer Street  Murchison Hospital and Health Centre  11 Harford Court  Nelson Hospital  Wairau Hospital
<b>Services audited:</b>	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
<b>Dates of audit:</b>	Start date: 24 November 2020      End date: 27 November 2020
<b>Proposed changes to current services (if any):</b>	None

**Total beds occupied across all premises included in the audit on the first day of the audit: 436**

# 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

Nelson Marlborough District Health Board provides health services to the people of Nelson, Blenheim and surrounding areas. The audit team received a self-assessment and associated 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, Wairau and Murchison Hospitals as well as eight community residential homes across the region. Eight patient tracers and four systems tracers were undertaken.

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

Progress has been made since the last audit related to informed consent, patient flow and capacity management. The audit team observed that clinical staff are involved in quality activities, committed to ongoing system improvement, are patient focussed and deliver safe services. All patients interviewed were positive about the care and treatment they received.

The previous corrective actions related to informed consent, staff participation in quality, implementation of corrective action plans, strategies to improve patient flow and capacity management, information management, transfer/discharge and handover practices alongside the use of personal protective equipment have been closed.

The previous corrective actions related to assessment, care planning, medication management processes and restraint management remain open.

There is one new corrective action relating to evaluation.

## **Consumer rights**

Patients and family/whānau are provided with the information they require at the appropriate times to make informed decisions which includes consent for treatment.

There is an implemented policy and associated procedure for obtaining consent in circumstances where there is diminished capacity and for patients in emergency situations. The policy and procedure met legislative and best practice requirements.

A computerised system is in place across Nelson Marlborough District Health Board that ensures all complaints are monitored and reviewed to meet expected timeframes. Staff, patients and family confirmed they are aware of their right to make a written or verbal complaint.

Staff interviewed are knowledgeable about the organisation's policies and procedures for informed consent.

## **Organisational management**

The chief executive and executive leadership team provide leadership to the organisation. The Nelson Marlborough District Health Board has access to a range of data and real time information is used to manage the organisation and assist decision making. The

Board reviews risks. Risk mitigation strategies are monitored. The Nelson Marlborough District Health Board has a risk management system in place and staff are aware of the risks facing the organisation.

Quality and risk management systems support the organisation's approach to ongoing quality improvement. The executive leadership team provides teams and services with support and leadership related to quality initiatives.

An electronic reporting system is in place to manage incidents, accidents, complaints and significant events. Significant events are investigated using root cause analysis methodology. Open disclosure to patients and family is practiced.

Human resource management includes projects and activities to ensure the changing pandemic environment and changes in legislation are reflected in the recruitment and employment process.

The clinical governance group oversees the development of new policies, procedures and clinical pathways to ensure they align with best practice. Inpatient services are provided by a skilled workforce.

## **Continuum of service delivery**

A review of patient journeys using tracer methodology was completed during the audit in medical, mental health, surgical, maternity, child health, aged residential care and residential physical and intellectual disability services. Systems tracers were completed for infection prevention and control, deteriorating patient, medication and falls management.

Review of patients' journeys and systems tracers undertaken evidenced that multidisciplinary teams provide a collaborative team approach to service delivery. All members of the multidisciplinary team are qualified and skilled for their roles. Patients and family members interviewed confirmed they have input into care planning and are kept informed.

Service planning is provided through daily rounds and meetings. Handovers in the wards and community services occur between staff at each change of shift. Medical staff are available 24 hours a day, 7 days a week. Systems and processes are implemented to ensure that patients have timely access to allied health services.

A falls prevention programme is implemented. The programme focusses on identifying patients who are at risk and implementing strategies to prevent falls. A deteriorating patient programme is in place. Nelson Marlborough District Health Board's medication management system is a blend of computerised and paper-based records.

Patient journeys were reviewed and incidental sampling completed throughout the services showed that there is a team approach to patient care.

Care and treatment of patients is documented in patients' clinical notes.

The information gathered from these tracers was supported by additional sampling.

Care is provided by suitably qualified and experienced staff. Communication with patients and their family confirmed they are consulted and have input into treatment and care decisions, where appropriate.

Discharge planning is occurring. All patients and family/whānau interviewed provided positive feedback about services received and that communication with staff was timely and clear.

Policies, procedures and guidelines provided guidance for medication management. The national medication chart is implemented across all services. Allergies and sensitivities are assessed and communicated. Medicines are stored safely and managed safely throughout the organisation.

## **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. All inpatient buildings have a current building warrant of fitness. There is a preventative maintenance programme in place and the environment in the clinical areas is safe for patients and staff. The risks associated with older buildings is understood and managed. Clinical service areas are well maintained. There is an internal audit schedule in place to monitor the cleaning and laundry services. Cleaning services are conducted by Nelson Marlborough District Health Board staff and laundry services are managed by a contracted service provider.

Emergency and disaster plans are developed. Collaboration between local, regional and national networks is established. The Nelson Marlborough District Health Board COVID-19 pandemic response has been managed by an all of organisation response and linked to regional and national planning and management. Staff discussed business continuity during periods of unexpected emergencies and swift response to managing core services to maintain patient access to safe services. Staff receive training and information for each service area. Management staff work with the contracted security service to ensure the safety of patients, staff and visitors.

## **Restraint minimisation and safe practice**

The restraint and enabler policies and procedures, and related guidelines, are available to all staff. There are a range of approved restraint and enablers for general use listed on the intranet and in policy documents. Training is available via an E learning programme, which includes definitions of restraint and enablers that align with the restraint minimisation and safe practise standards.

There is one restraint coordinator with responsibility for the oversight of restraint and enabler minimisation across the Nelson Marlborough District Health Board.

The restraint advisory group meet two-monthly. There are representatives from each service area on this committee, and their role is to monitor and review the incidents of restraint and enabler use and to approve the use of enablers in the clinical settings.

Mandatory restraint training is provided to staff within the mental health service of the Nelson Marlborough District Health Board.

## **Infection prevention and control**

Infection prevention and control policies and processes are in place and accessible to staff via the intranet. The Nelson Marlborough District Health Board has a continual surveillance programme that includes surgical site infections surveillance, hospital acquired blood stream infections, and laboratory reporting of multi resistant and other significant organisms.

An infection prevention and control tracer was undertaken of processes and management of COVID-19 across the organisation.