

Te Whatu Ora – Health New Zealand Whanganui- Whanganui Hospital

Introduction

This report records the results of a Certification Audit of a provider of hospital 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 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 Ministry of Health’s website by clicking [here](#).

The specifics of this audit included:

Legal entity:	Te Whatu Ora – Health New Zealand
Premises audited:	Whanganui Hospital
Services audited:	Hospital services - Medical services; Hospital services - Mental health services; Hospital services - Geriatric services (excl. psychogeriatric); Hospital services - Children's health services; Hospital services - Surgical services; Hospital services - Maternity services
Dates of audit:	Start date: 21 February 2023 End date: 23 February 2023
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: 133

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 tatou 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

Te Whatu Ora – Health New Zealand Whanganui (Te Whatu Ora Whanganui) provides services to around 68,000 people in the region from the 176-bed site in Whanganui. Clinical services include mental health and addictions, medical, surgical, assessment, treatment and rehabilitation, paediatrics and maternity, supported by a range of clinical support services/teams.

This three-day certification audit, against the Ngā paerewa Health and Disability Services Standards, included review of documents prior to the on-site audit and during the audit, including review of clinical records. Auditors and technical expert assessors interviewed managers, clinical and non-clinical staff across all services, patients and whānau. Observations were made throughout the process.

The audit identified that improvements are required in relation to patients' physical privacy and privacy of clinical records, family violence screening, consent procedures, within the acute mental health service (Te Awhina), management of complaints, timely review of adverse events, staffing, staff performance reviews and completion of education. Improvements are also required in

relation to appropriate placement of patients, clinical assessments, care planning, evaluation and discharge planning, and medicines reconciliation. The kitchen environment is not fit for purpose. Aspects of restraint practice, seclusion and night safety order (Standford House) also need attention.

Ō tatou motika | Our rights

Te Whatu Ora Whanganui recognises Te Tiriti o Waitangi and supports Māori patients and whānau in the practices of mana motuhake. The haumoana navigator roles, across all services, support patients and clinicians to ensure that interventions with Māori are culturally safe. Staff also complete cultural training Hapai Te Hoe.

For Pacific patients and families, cultural support is also provided by the haumoana navigators with easily accessed support from local Pacific communities and networks.

A focus on identifying barriers to equity and improving inequities was evident through a range of projects and representation on committees, groups and projects and through the leadership structure. Ethnicity data is used to guide decision making and monitor progress through key performance measures.

Patients and their whānau are informed of their rights according to the Code of Health and Disability Services Consumers' Rights (the Code) and these are upheld. Personal identity, independence, and dignity are respected and supported. Patients are free from abuse.

Patients and whānau receive information in an easily understood format and felt listened to and included when making decisions about care and treatment. Informed consent, overall, is occurring. Open communication and open disclosure are practised. Interpreter services are provided as needed. Whānau and legal representatives are involved in decision making that complies with the law.

Complaints management policies and procedures are in place and known to staff, who communicate this to patients and whānau. Patients and whānau understood how to make a complaint. A complaints register is maintained.

Hunga mahi me te hanganga | Workforce and structure

Te Whatu Ora Whanganui is working through the change to Te Whatu Ora - Health New Zealand structure prudently, despite the challenges related to changes in reporting lines with several key leadership roles now reporting nationally to either Te Whatu Ora or Te Aka Whai Ora, or in some case both nationally and to Te Whatu Ora Whanganui. A regional approach was evident in many areas.

Strategies, priorities, and proposed system changes are defined, within a range of planning documents. A robust monitoring and reporting process was evident through the Local Leadership Team (LLT). The Te Hau Ranga Ora structure (Māori Health Services) supports cultural developments and Māori and Pacific people through the haumoana team and other roles, working in partnership with kaitiakitaki roles.

Input from the consumer council is well established with good participation of members in committees, projects and other forms of planning and evaluation. Tangata whaikaha are also represented and involved in decision making. The clinical board, providing clinical governance, continues to develop.

A well-established quality and risk management framework demonstrates a commitment to patient safety, improvement and risk with a range of projects based around the Health Quality and Safety Commission (HQSC) programme and other priorities (e.g., care sensitive indicators). Risk is well managed aligning regional and national developments. An equity improvement focus was evident. Recommendations resulting from review of incidents/events, audit activity and projects are followed through to completion using an electronic system. Essential notifications were completed.

A range of mechanisms are used to ensure that the right numbers of staff are available to meet the changing needs of patients across the services. The Care Capacity Demand Management (CCDM) programme provides a wealth of real time data to support decision making by those working in the Integrated Operation Centre (IOC). A strong focus on recruitment, retention and support across the region was evident.

Professional qualifications are validated prior to employment. An orientation programme is in place and a wide range of ongoing training and professional development opportunities are available. Māori workforce development is supported by roles and a range of training programmes.

Clinical records are a mix of electronic and paper and were of an acceptable standard.

Ngā huarahi ki te oranga | Pathways to wellbeing

Patient tracers were undertaken in clinical areas across the site. Auditors and technical experts worked collaboratively with staff to review the relevant documentation.

Patients access services based on need, guided by relevant pathways and guidelines. Waiting times are managed and monitored. Screening tools are used to determine any clinical risks.

Patients are assessed by the qualified multidisciplinary team using validated assessment tools. Informed choice underpins the development of individualised care or support plans, developed in partnership with patients and their whānau. Cultural values and beliefs are considered and incorporated into care delivery. Care plans included the individual's aspirations where appropriate.

Interventions are implemented to ensure goals and needs are met. Processes are in place to plan patient transfers and discharge. This includes collaboration with patients, their whānau and, for complex patients, the multidisciplinary team. Discharge planning occurs from admission onwards.

Patients are supported to participate in activities to support recovery and community integration.

Medicines and blood products were prescribed, administered, stored and disposed of safely in each clinical setting visited.

Food is well managed through a contracted service and meets the nutritional needs of patients.

This service does not provide electroconvulsive therapy (ECT) on site. Services are provided via Wellington or Palmerston North hospitals with liaison and transfer of care utilising the provider's guidelines and documentation processes.

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

Building warrants of fitness and fire compliance certificates were current. Plant is tested regularly as required. General equipment and biomedical devices were tested. The physical environments, both internal and external, were accessible, safe and promote safe mobility.

Fire and emergency evacuations are planned and practised by all staff. Fire compliance certificates were sighted in relevant buildings. Staff are kept up to date with emergency, security, and lock-down procedures which are practised regularly. Security events are recorded and analysed to identify causes and opportunities for improvements.

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

Two experienced clinical nurse specialists lead the infection prevention and control programme at Te Whatu Ora Whanganui. A formal agreement for infection prevention and antimicrobial stewardship expertise is in place with Te Whatu Ora Capital, Coast and Hutt Valley.

The clinical nurse specialists have a close working relationship with the Whanganui Public Health service and the six surrounding regional hospital infection prevention and control teams. There is a clear line of communication, with the infection prevention and control committee reporting to the Clinical Board.

The infection prevention and control annual plan is developed and agreed by the infection prevention and control committee. It includes objectives, monitoring of antimicrobial use, surveillance, audits of the environment, staff practices and processes.

Here taratahi | Restraint and seclusion

The service has a designated restraint minimisation and safe practice approval committee who review hospital wide restraint data and events. The committee includes representation from peer support and 'lived experience' staff. From the clinical file reviews completed by the committee, recommendations are fed back to service managers for ongoing improvement and reduction in the use of restraint.

The current restraint policies and procedures define clear roles and responsibilities around restraint.

Restraint events have reduced over the last six months. There is a 'Zero Seclusion' meeting held monthly, chaired by the associate director of Nursing. Seclusion guidelines are reviewed, education is planned for staff and risks and trends are analysed. Reviews of seclusion occur weekly on the acute mental health ward with recommendations and debriefs held for staff involved, as well as for tangata whaiora.