# Health New Zealand Te Whatu Ora Lakes

## Introduction

This report records the results of a Partial Provisional 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 Manatū Hauora (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 Manatū Hauora website by clicking [here](http://www.health.govt.nz/our-work/regulation-health-and-disability-system/certification-health-care-services/health-and-disability-services-standards).

The specifics of this audit included:

**Legal entity:** Health New Zealand

**Premises audited:** Rotorua 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: 23 September 2024 End date: 23 September 2024

**Proposed changes to current services (if any):** Reconfiguring of the children ward.

**Total beds occupied across all premises included in the audit on the first day of the audit:** 0

# 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 tātou 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 haumaru │ 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

Health New Zealand – Te Whatu Ora Lakes (Te Whatu Ora Lakes) provides services to around 110,000 people in the region from the 210-bed sites in Rotorua and Taupo. Clinical services include mental health and addictions, medical, surgical, older persons and rehabilitation services, paediatrics and maternity, supported by a range of clinical support services and teams.

This partial provisional audit for the newly refurbished and reconfigured 22-bed paediatric ward was undertaken as part of the surveillance audit, with a further one-day visit by an auditor two weeks following the surveillance audit to review the refurbished ward area facilities. The audit covered the required subsections of the Ngā Paerewa Health and Disability Services Standard NZS 8134:2021 (Ngā Paerewa) to confirm the level of preparedness for the relocation of the children’s ward from the ‘decant’ ward returning to the refurbished ward on the Rotorua Hospital campus. In addition to the interviews carried out as part of the surveillance audit, those involved with the children’s ward project were interviewed, including the contract managers, the group director operations (GDO), the children’s ward managers and the infection control nurse specialist. The audit confirmed that the area was safe and comfortable for children/Tamariki and families/whānau, providing a much-improved environment.

The audit identified that improvements were required in relation to consumer engagement, orientation, storage of medicines, and several aspects of facilities already planned to be completed prior to occupancy including:

• A certificate of public use

• Testing of gases, hot water temperatures, the call bell system, security measures

• Confirmation that no changes are required to the current fire evacuation scheme

• Installation of window coverings and curtains

• Final cleaning of the area.

## Ō tātou motika │ Our rights

Not applicable to this audit.

## Hunga mahi me te hanganga │ Workforce and structure

Te Whatu Ora Lakes is continuing to respond to the ongoing health reforms from the Pae Ora (Healthy Futures) Act 2022, the establishment of Health New Zealand – Te Whatu Ora and the recent appointment of a commissioner, deputy commissioners and regional deputy chief executives. A regional approach was evident in many areas of service delivery. Legislative, contractual and regulatory requirements were being managed. Health New Zealand – Te Whatu Ora sets the direction and goals, with a district workplan and operations plan defining district priorities. Monitoring occurs within the district, regionally and nationally. The Māori health team supports efforts to improve outcomes and achieve equity for Māori. District clinical governance is managed through the clinical quality governance executive (CQGE).

A range of mechanisms are used to ensure that the right numbers of staff are available to meet the changing needs of patients across all 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), professional leaders and the senior management team. Competencies, skills and qualifications are defined and support effective service delivery. There have been no changes to the previous staffing levels required for the new ward.

Professional qualifications are validated prior to employment. An organisation induction and area-specific orientation programmes are in place and a wide range of ongoing training and professional development opportunities made available. A planned orientation for staff to familiarise with the new environment and equipment has commenced and continues once relocation occurs. Employees are provided with opportunities to discuss and review their performance.

## Ngā huarahi ki te oranga │ Pathways to wellbeing

The refurbished ward has storage structures in place, including suitable drug safes and swipe card entry to the ‘staff only’ area. Medication room, medicines and blood products are managed through the ward/pharmacy and laboratory service respectively, with established systems and processes in place. This includes prescribing, administration, storage and disposal of medicines. Controlled drugs are managed and stored in accordance with regulation and legislation.

Food services are managed through a contracted service in Rotorua with an approved food safety plan and registration. Menus are overseen by a dietitian and are designed to meet the nutritional needs of patients. There is no change required to the current arrangements for food services to these wards.

## Te aro ki te tangata me te taiao haumaru │ Person-centred and safe environment

Building warrants of fitness were current across the sites. A certificate of public use (CPU) assessment was scheduled for the week of the onsite audit. Plant, equipment and biomedical equipment are to be retested in accordance with the existing preventative maintenance and calibration of equipment processes, for relocation from the previous/‘decant’ ward. The physical environments, both internal and external, were accessible, safe and promoted safe mobility, with adequate bed space and storage available. There were existing systems for planned and unplanned maintenance in place. A detailed documented migration plan outlines the preparation required for migration on the day of the move, including risk management.

Fire and Emergency New Zealand (FENZ) is reviewing the current evacuation plan. Fire readiness training is delivered by the fire and emergency manager and supported by online learning modules. Emergency trolleys will relocate with the ward. Security systems include swipe card entry doors, closed-circuit television monitoring, and duress alarms. There is an existing system to report any security events.

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

The infection prevention and control and antimicrobial stewardship programmes have been developed by a team of experienced infection control specialists and approved by the clinical quality governance executive. It is linked to the quality improvement programme and reviewed and reported on annually. Infection prevention education has been provided to all employees as part of orientation and ongoing based on roles, responsibilities and services provided.

Surveillance of health care-associated infections is appropriate to the size and scope of the service and has been implemented as planned. Results of surveillance and recommendations to make improvements were evident and reported to the governing group.

The antimicrobial stewardship programme optimises antimicrobial use and minimises harm. Infection control nurse specialists have been involved in the refurbishment/reconfiguration and rebuild projects. The builders and clinical cleans prior to occupancy are scheduled.

## Here taratahi │ Restraint and seclusion

Not applicable to this audit.