

Health New Zealand Te Whatu Ora Waitematā

Introduction

This report records the results of a Surveillance 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](#).

The specifics of this audit included:

Legal entity:	Health New Zealand
Premises audited:	North Shore Hospital Waitakere Hospital Mason Clinic
Services audited:	Hospital services - Psychogeriatric services; Hospital services - Medical services; Hospital services - Mental health services; Hospital services - Geriatric services (excl. psychogeriatric); Residential disability services - Physical; Hospital services - Children's health services; Hospital services - Surgical services; Hospital services - Maternity services
Dates of audit:	Start date: 27 August 2024 End date: 29 August 2024
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:	1125

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 haumarū | 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 Waitematā (Te Whatu Ora Waitematā) provides services to around 630,000 people in the region from the 1191-bed hospitals/facilities on the North Shore, Waitākere, the Mason Clinic (Forensic mental health services), and the Wilson Centre. Clinical services include mental health and addictions, medical, surgical, assessment, treatment and rehabilitation, paediatrics and maternity, supported by a range of clinical support services and teams.

This three-day surveillance audit against the Ngā Paerewa Health and Disability Services Standard NZS 8134:2021 (Ngā Paerewa) included review of documents prior to the on-site audit and during the audit, and review of clinical records. Auditors interviewed managers, clinical and non-clinical staff across services, patients and whānau. Observations were made throughout the process. The Wilson Centre was not visited as part of this audit. The newly built Tōtara Haumarū medical and surgical facility was visited, to verify the suitability of the two medical wards recently occupied (the week prior to the audit).

The audit identified that improvements were required in relation to management of adverse events, staffing, staff performance reviews, completion of 'Shared Goals of Care'/resuscitation status, documentation of venous thromboembolism (VTE)

assessments, food services and the kitchen facility, and ensuring privacy in toilets/bathrooms. Since the previous audit, improvements to facilities at the Waitākere maternity service have been made, and all areas from the partial provisional audit at Tōtara Haumaru (March 2024) have been addressed. There were no areas requiring improvement in the two medical wards in the Tōtara Haumaru facility in relation to partial provisional requirements.

Ō tātou motika | Our rights

Te Whatu Ora Waitematā recognises Te Tiriti o Waitangi and supports Māori patients and whānau in the practices of mana motuhake.

For Pacific patients and families, their worldviews, cultural and spiritual beliefs are supported, particularly through Pacific navigators.

Patients and their whānau were informed of their rights according to the Code of Health and Disability Services Consumers' Rights (the Code) and these were upheld, including informed consent and requirements for those under the Mental Health Act. Patients were free from abuse or neglect. Property was respected. Employees maintained professional boundaries. Patients and their whānau were treated with respect and, in general, their privacy was maintained. Patients reported being fully informed of their choices.

Patients and whānau understood how to make a complaint and these were addressed and resolved in accordance with the Code, using an equitable process for Māori. The complainant was informed of the findings.

Hunga mahi me te hanganga | Workforce and structure

Te Whatu Ora Waitematā is continuing to respond to the ongoing health reforms from the Pae Ora (Healthy Futures) Act 2022 and 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, and monitoring occurs within the district, regionally and nationally. The Māori health leadership and services structure supports improving outcomes and achieving equity for Māori. District clinical governance is managed through the quality executive committee.

A well-established quality and risk management framework demonstrated a commitment to patient safety, improvement and a risk-based approach, with a range of projects based around the Health Quality and Safety Commission (HQSC) programmes and other priorities. Risks were well managed at district level, with ongoing development at the regional and national level. The principles of the National Adverse Events Reporting Policy are followed, with recommendations developed to make improvements where possible. 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 real-time data to support decision-making by those working in the Integrated Operation Centre (IOC). Competencies, skills and qualifications are defined and support effective service delivery.

Professional qualifications and credentials are validated prior to employment. An organisation-wide orientation programme and area/professional group-specific programmes are in place and a wide range of ongoing training and professional development opportunities made available. Health care and support workers have the opportunity to review and discuss their practice and performance.

Ngā huarahi ki te oranga | Pathways to wellbeing

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

Interventions were implemented to ensure goals and needs are met. Regular review and reassessment of progress occurs, with changes to care initiated in collaboration with the patient/whānau and the multidisciplinary team. Processes are in place to plan patient transfers and discharge.

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

Food is managed through a contracted service, with current approved food control plans. There is a system in place to offer meal choices that meet the nutritional needs of patients and whaiora.

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

Building warrants of fitness were current, and Tōtara Haumarū has a current code compliance certificate. Plant, equipment and biomedical equipment were tested regularly as required. The physical environments were fit for purpose, and culturally inclusive.

Fire and Emergency New Zealand (FENZ) approved evacuation plans were sighted.

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 governing body. They are 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.

Here taratahi | Restraint and seclusion

The quality executive committee (clinical governance), leadership team and restraint committees demonstrated commitment towards eliminating restraint. Restraint events have reduced over the last six months. Employees have completed appropriate training to ensure the least restrictive and safe practice, cultural-specific interventions and de-escalation techniques.