

Health New Zealand Te Whatu Ora Lakes

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:	Rotorua Hospital Taupo 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: 10 September 2024 End date: 12 September 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:	192

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 Lakes (Te Whatu Ora Lakes) provides services to around 110,000 people in the region from its 210-bed sites in Rotorua and Taupō. 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 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 recently refurbished maternity area was reviewed and found to be safe and comfortable for women and babies, providing a much-improved environment.

The audit identified that improvements were required in relation to family violence intervention assessments, consumer engagement, staffing requirements, staff performance reviews, documentation of 'Shared goals of care', some aspects of planning care for patients (tāngata whaiora) in the mental health service, ensuring facilities meet the needs of patients, and the debrief

process for tāngata whaiora following any seclusion events. Good progress has been made since the previous audit to most of these areas that required improvement, with ongoing work progressing. Several of the previous areas identified for improvement have been addressed and closed. These include cultural training and opportunities to develop te reo Māori and tikanga skills, the provision of activities for tāngata whaiora in the mental health service, medication management, discharge planning and several aspects related to the environment. One area of continuous improvement is recognised in relation to a project implemented to strengthen anticoagulant stewardship.

Ō tātou motika | Our rights

Te Whatu Ora Lakes recognises Te Tiriti o Waitangi and supports Māori patients and whānau in the practices of mana motuhake. Te Aka Matua Kaupapa service has support worker roles, 'Pou Manawa', who work across services, supporting patients and clinicians to provide interventions that are culturally safe.

For Pacific patients and families, their worldviews, culture and spiritual beliefs are supported.

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. Patients were free from abuse or neglect. Property was respected. Employees maintained professional boundaries.

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 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 work plan and operations plan defining district priorities. Monitoring occurs within the district, and 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 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) programme and other priorities. Risks were being managed at service and district level and reported regionally and nationally, where required. The principles of the National Adverse Events Reporting Policy are followed, with recommendations resulting from adverse events reviews followed through to completion. 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 provided a wealth of real-time data to support decision-making by those working in the Integrated Operations Centre (IOC), along with professional leaders and the senior management team. Competencies, skills and qualifications are defined and support effective service delivery.

Professional qualifications are validated prior to employment. An organisation induction and area-specific orientation programmes were in place and a wide range of ongoing training and professional development opportunities made available. Employees are provided with opportunities to discuss and review their 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 was safely managed through a contracted service in Rotorua and inhouse in Taupō and met the nutritional needs of patients.

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

Building warrants of fitness were current. Plant, equipment and biomedical equipment were tested regularly as required. In most cases, the physical environments were fit for purpose, and culturally inclusive. No changes were required to the current Fire and Emergency New Zealand (FENZ) approved evacuation plan and building warrant of fitness for the refurbished maternity area. These were sighted and were current.

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. 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 is 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 clinical quality governance executive and restraint elimination committee demonstrated commitment towards eliminating restraint. Restraint and seclusion events have continued to reduce over the last year with a dedicated cultural approach, the provision of continuing de-escalation practices and positive staff engagement. Employees have completed appropriate training to ensure the least restrictive and safe practice, cultural-specific interventions and de-escalation techniques.