

IN FOCUS



News & views about Our Health from Hawke's Bay DHB
Interim Chief Executive Craig Climo

September 2019

Thank you

Firstly and foremost thank you to all staff for your response to the situation Hawke's Bay Hospital has been in for the past month. It is greatly appreciated.

The hospital, including ED – I don't think of ED as being separate – has been in overload from a bed perspective.

I am also appreciative of your efforts to maintain as much elective surgery as we have. The needs of many people waiting for surgery are as great as it is for the many people already in hospital.

I am sorry it has placed a lot of extra pressure on staff. It's been frustrating for me, so it will have been exceptionally so for you.

While this additional surge in activity is a bit later than historically, it is nevertheless something that is foreseeable, and we all want to do better.

I am aware there have been a number of initiatives over recent years to prevent seasonal overload. I want to assure you that management is determined to help sort it out, which begs the question of what that might look like.

It seems to me that dipping our toe in the water won't make much difference. We need to look at options at scale. While there have been a number of iterations to improve patient flow, through ED and the hospital, we also need to look at pre and post hospital - better still avoid the need for admission in the first place.

While the ultimate objective is a healthier community, we will always have people who need services provided in a hospital and increasing hospital capacity may be part of the answer. However, hospital stays are typically about three or four days and I ask myself what are the diagnostics, treatment, and care in a hospital setting that could be provided in the community to avoid the admission, or at least enable earlier discharge.

When we get into overload we need an effective escalation plan. Day-after-day the hospital is "red" and little changes despite the heightened activity and stress. ED should not be seen as solely responsible for managing its situation.

Whatever we do needs clinical leadership and broad involvement. Management can facilitate but it can't by itself effect organisational change.

I anticipate that by this time next year you will feel the benefit of changes.

Ngā mihi,
Craig

Craig Climo
Interim Chief Executive
Hawke's Bay District Health Board

