FOCUSED ON QUALITY

OUR QUALITY PICTURE 2015
DID YOU KNOW THAT EVERY DAY...

- 6 babies will be born
- 11 fragile babies will be cared for in the special care baby unit
- 15 km An orderly can walk on average 15km
- 16 people will get their free annual diabetes check
- 20 women will have a mammogram and a further 29 a cervical smear test
- 31 operations will be completed
- 55 children will receive one of their vaccinations
- 100 people will be admitted to Hawke’s Bay Fallen Soldiers’ Memorial Hospital
- 153 visits/appointments will be made to support people with mental health issues
- 223 visits will be made by District Nurses and Home Service Nurses
- 248 children on average will be seen for their free dental health check
- 260 people will receive meals on wheels
- 1,334 people will see their local family doctor
- 4,400 prescriptions will be written
- 5,256 laboratory tests will be completed
- 5,915 items of laundry will be delivered to the hospital
VISION
“Excellent health services working in partnership to improve the health and well-being of our people and reduce health inequities within our community.”

VALUES
Tauwhiro - delivering high quality care to patients and consumers
Rāranga te tira - working together in partnership across the community
He kauanuanu - showing respect for each other, our staff, patients and consumers
Ākina - continuously improving everything we do
We are pleased to share with you our third Hawke’s Bay Health sector’s quality accounts demonstrating our commitment to high quality health care, living our values and sharing with you our successes and what our future plans are.

As a community we face a number of challenges, including the growth of chronic illness, our ageing population and the vulnerability of a large section of our community.

As a sector we believe our consumers should be at the centre of health care. In these quality accounts we have focussed on some of the improvements currently underway across Hawke’s Bay which, we believe, will better meet the needs of our community and give us the opportunity to deliver the best care we can.

At the same time we need to continue to manage the risks of providing health care and reducing incidents of unintentional harm that can occur while undergoing care.

These accounts show how we are meeting these challenges – showing our successes, and where we need to improve and focus in the future. We welcome any feedback, as well as any suggestions for future topics.

What quality means to us?

Ākina, one of our sector values means that we continuously look for ways in which we can make improvements and learn when things don’t go as well as we planned. Achieving high quality care across the sector means the care is the right care, in the right place, at the right time, every time. We want to help develop our staff to become far more person and whānau centred, really understanding our consumers goals and needs, working in partnership to improve our communities health.
OUR CLINICAL COUNCIL AND CONSUMER COUNCIL

Establishing the Hawke’s Bay Clinical Council (2010) and Hawke’s Bay Health Consumer Council (2013) has helped us make change across our health sector – hearing the voice of both our clinicians and consumers.

The Clinical Council is made up of a number of health professionals from across our sector, including hospital specialists, family doctors, nurses and allied health (social workers, pharmacists) to provide leadership and oversight around safety and clinical improvements.

The Hawke’s Bay Health Consumer Council provides a strong voice for the community and consumers on health service planning and delivery. The Council is tasked with enhancing the consumer experience, making sure our services meet our communities needs.

A strong sense of teamwork and working together has been established between the councils which means that all service improvements and changes must be reviewed and recommended by both councils before they are discussed and approved by the Hawke’s Bay DHB Board. The key to success to date has been the commitment at board and senior executive levels to support both these councils so that both clinical and consumer voices are able to grow.

The future challenge is making sure we continue to work together to empower all our teams to deliver person and family/whânau centred care.

We need to provide you with information that is understandable, to help you make informed decisions about your care and treatment. We need to work together to ensure we design and develop services that improve health outcomes for our community.
There are 2604 staff working for Hawke's Bay District Health Board

There are 161 family doctors in 28 general practices

There are 125 pharmacists in Hawke's Bay

There are 27 aged residential care facilities

WHO ARE WE?

159,600 Hawke's Bay population 2014/15

25.2% Māori in Hawke's Bay
15.6% in New Zealand

4% Pacific people in Hawke's Bay
6.5% in New Zealand

17.3% Over 65 years in Hawke's Bay
14.6% in New Zealand

27% High Deprivation

DID YOU KNOW?
Our Working in Partnership for Quality Health Care in Hawke’s Bay (2013) focusses on three key themes which reflect the New Zealand health system’s ‘Triple Aim’ for health care – equity, people and efficiency.

In our last quality accounts we said we were developing a team to support our services to continuously look at ways to improve quality and safety. We have appointed a number of Improvement Advisors and a new Consumer Engagement Manager, who will be focussing on improving how we engage with our community, listening to your feedback and working with you to develop services so they best meet our communities needs. Our focus for the next 12 months will be educating our teams in how to better engage with you, how to make improvements and to support people when sometimes things don’t go as planned.

New Zealand Health System’s Triple Aim

“Making sure we help you keep well in the community and provide a safe and high quality experience of health”

“Making sure we consistently deliver high quality services in an efficient way”

“Making sure our services are accessible to everyone in our community”
Many things in life are unequal. Health inequities are inequalities in health that are avoidable or preventable. The Health Equity Report (October 2014) stated that there are many inequities in health in Hawke’s Bay, particularly for Māori, Pasifika and people living in poorer areas. There are also areas where, with determined and focussed effort, we have improved outcomes and reduced inequities. Inequities are not inevitable - we can change them if we have courage and work together with our communities.

Smoking is the biggest cause of inequity in death rates in Hawke’s Bay - it is the single most important cause of preventable ill health and early death. The high rate of smoking amongst Māori women giving birth is at a crisis point because of the long term impact on the next generation.

Other challenges are our increasing rates of obesity. People living in Hawke’s Bay are less active than the average person in New Zealand. Obesity increases a person’s risk of dying young; it increases the risk of cancer, heart disease, diabetes and many other related medical conditions.

We also found that there were a large number of people who have difficulty in getting to see a family doctor and therefore come to the hospital for their care, especially amongst 46-64 year olds. The cost of visiting the family doctor is one of the most common reasons why we have seen increased numbers of consumers coming to our Emergency Department.

So what have we been focussed on in the last 12 months to reduce these inequities?

**Urgent Care - “I am unwell, and I need advice or treatment now”**

The equity report identified a number of barriers for consumers getting an appointment with their family doctor. For some consumers these include, not being able to get an appointment at short notice, not being able to pay, and not having any transport. These barriers are a factor in the increased numbers going to our Emergency Department, which is not the best place to get treatment for colds, coughs and other minor medical conditions. Over 80 percent of those who come to our Emergency Department would have been better treated at their family doctor.

These challenges mean we have to change the way our services are delivered. In January 2015 a group of over 50 health professionals, managers and consumers met to discuss these issues. They are complex and one solution or quick fix isn’t going to solve all the problems. This diverse group are looking at several options including:

- improving access to family doctors in normal working hours and after work
- better communication with our communities to help them make more informed decisions about where to go for treatment
- better transport assistance
- improved access to emergency dental treatment, among many other options.

As this project nears its first year of activity it will be making some key recommendations for change, which will impact on our community in the long term.
SMOKING IN PREGNANCY

A crisis for Hawke’s Bay

There are over 2,000 babies born every year in Hawkes Bay, 28 percent of those pregnant mothers are smoking, with a third being Māori. A new programme was developed between the Hawke’s Bay DHB Smokefree Team, Hawke’s Bay DHB Maternity Service and Kahungunu Choices Health Services. This collaboration brought together teams to provide support, education and incentives to new mothers wanting to quit smoking. Each mother was referred to a stop smoking service and received free nappies at four, eight and twelve weeks if they remained smokefree. During the year over 360 stop smoking referrals were made with a third signing up to stop smoking services. Thirty two mothers quit smoking during pregnancy and after birth. Our focus for the coming year will be to increase the promotion of this vital programme to encourage both pregnant mothers and whānau to stop smoking for the health of their baby and themselves.

In 2014/2015

- **28%** pregnant mothers smoke
- **360** stop smoking referrals
- **32** mothers quit smoking

Pregnant & Smokefree...

THE ONLY WAY TO BE!
Keeping healthy during pregnancy, breastfeeding and healthy eating for our young children all have a positive impact for children and families/whānau. The evidence suggests that getting it right from day one gives each child a good start in life and can protect against obesity throughout adulthood.

One of the programmes we are leading is “Healthy First Foods” which gives information and practical skills to families/whānau.

We worked with parents and Well Child providers (Plunket, Tamariki Ora) to develop the programme, which includes:

• key messages around healthy first foods
• when to introduce solids
• nutritious food appropriate for the child’s age
• water and milk being the best drinks
• no added salt or sugar
• home preparation.

A number of activities were also undertaken which were easy to understand and are delivered in a way which supports learning.

Over the last 12 months over 100 parents and whānau have attended workshops delivered in the community.

We will continue to focus our efforts in 2015/2016 in this area, alongside a number of other initiatives targeted at all age groups.
REDUCING INEQUITIES – PORANGAHAU-ORA

The winner of the Commitment to Reducing Inequities category in the 2014 Hawke’s Bay Health Awards, the "Porangahau-Ora A Population Health Approach Programme" delivered by Central Health Ltd, demonstrates how full community and whānau engagement leads to success.

The Porangahau community has 198 people (2013 census), 58.3 percent Māori with a lower average income than the rest of Hawke’s Bay and most of New Zealand. It was a community facing severe health inequities associated with being Māori, compounded by low socio economic status and geographical isolation including lifestyle illnesses and poor access to primary health care and screening.

Following focus groups and consultation hui Central Health identified the dreams and aspirations of the community and began to implement programmes which are now having a major impact on the whole community, including:

- three weekly nurse led clinics
- establishment of a community garden Te Manawaru – in the heart of the town – a place to grow, harvest and socialise. Education sessions are held regularly assisting people to develop their own edible gardens and their understanding of healthy eating
- development of a school kitchen – used for every meal, children are free to access the kitchen and healthy choices larder at all times, and cook and eat if hungry
- Waka Ama for kaumatua through to tamariki is increasing activity levels and improving mental wellbeing and stamina
- establishing Connect Kaumatua Club - offering health promotion, a nurse clinic, Tai Chi and activities.

All these initiatives are providing many ways of giving health information to whānau. Over 70 percent of the Porongahau community are now actively engaged in one or more of the programmes – a success by anyone’s standards.
REDUCING OUR DID NOT ATTEND RATES IN SURGICAL SERVICES

Last year we told you about the work we were undertaking to try to reduce the number of consumers who did not attend their specialist appointments. We made some very positive progress throughout the year in reducing the rates, however during this time we also began to understand the real reasons why this was happening. Through exceptional work by our kaitakawaenga (Māori liaison) we began to get a proper picture of some of the issues, which were:

- we didn’t have up to date address information so people weren’t getting their appointment cards
- if appointment cards arrived, it was either too short notice or after the appointment
- it was difficult to change appointments and there was a lack of flexibility in appointment times
- there were many issues with public transport and other transport issues
- for some people the costs of taking time off and getting to appointments weighed up against other family needs stopped people attending appointments.

Having a clearer picture of the problems, we have now shifted our focus. Over the next 12 months we will be starting a project around customer focussed booking, with the aim of developing an efficient system, that is flexible, easy to use by our consumers, places the consumer at the heart of the booking process, while also being effective for our clinical teams. This will take time and we hope that we will start to see some initial changes in the coming year.
CONSUMER EXPERIENCE

Why is this important
We want you and your whānau to have a positive experience, and you tell us that it matters to you too! It is important because treating you well is the right thing to do. We also know it is important because feeling well informed and comfortable in your surroundings helps you get better sooner.

What has been achieved
Over the last 12 months we have increased our focus on improving the consumer experience by finding out what matters to those that use our services – our consumers. We have consumers involved at every level – from governance, service delivery and at a community and individual level.

In August 2014 we started using a national consumer experience survey. A selection of all adult consumers who spend at least one night in hospital are sent an invitation to complete the national survey every three months. This anonymous feedback helps us understand how well our hospital services are working for consumers and their families/whānau.

We are proud of the positive contribution of the Partnership Advisory Group. This is a group of dedicated people and whānau members with personal experience of mental illness and addiction who have ensured that the development of mental health services included consumer input and advice. You can read more about their contribution on page 31.

What we plan to do
The survey results tell us that overall, Māori have a lower response rate and lower consumer satisfaction compared to non-Māori across the four domains of consumer experience: communication, partnership, coordination and physical and emotional needs. We plan to better engage with our Māori and Pacific communities to find out how we can improve the experience for everyone.

We are looking at ways that we can better engage and more proactively seek out our consumers thoughts, opinions, feelings and experiences of our services. We are also planning to involve consumers more in re-designing services. We call this co-design.

There will be opportunities for our community to get involved in areas of the health sector that they have experienced and work with us to improve the way we do things.

“This was my first time in hospital ever, I was scared but all staff made me feel very comfortable. Thanks so much.”
Results from the National Patient Experience Survey

83% Felt we communicated well, and we listened to your questions

85% Felt you were involved in any decisions about your care and treatment

85% Felt you received good care and support and we treated you with dignity and respect

83% Felt you were given consistent information from the teams that were treating you

“I understood fully why I needed to stay in as they explained it in a way I could understand.”

“There was so much humour and laughter always, and a sense that staff cared personally about my recovery. I was almost sad to leave such a warm and supportive environment.”
CONSUMER STORIES

Why is this important
Consumer stories are an opportunity for consumers to talk about and make sense of their own experience. They are also a wonderful opportunity for health professionals to listen and reflect on the delivery of care from a perspective unlike their own. Stories help us understand the experience of being a consumer through their eyes and give us insight into what we are doing well and what we need to continue doing. Consumer stories give us opportunities to reflect on what we may do differently as we strive to improve.

What has been achieved
During the past twelve months we have started sharing stories about the experiences that some of our consumers and their families/whānau have had while receiving care and treatment in the hospital and in the community. We are starting to share stories across the organisation - at board level, in service meetings, and for training and development purposes. In doing so we gain greater empathy and have made changes that make a difference to our consumers.

We received lots of negative feedback and stories about our Emergency Department reception area and because of this over the next six months you will start to see changes and improvements to this area of our hospital.

What we plan to do
We will continue to seek out and listen to the stories our consumers share with us. We will continue to share these stories and experiences to make improvements.

“I felt I was heard and was never made to feel that anything I had to say was not important.”

“Something needs to be done about the ED waiting room. It would help if people didn't use it as a thoroughfare. I was embarrassed that all in sundry could see my loved one so distressed.”

<table>
<thead>
<tr>
<th>DID YOU KNOW</th>
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<tbody>
<tr>
<td>On average we receive around 53 compliments per month</td>
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<tr>
<td>On average we receive around 45 complaints per month</td>
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<tr>
<td>The highest proportion of complaints to HBDHB are in relation to how we communicate with you</td>
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<tr>
<td>On average it takes us 14 days to respond to a complaint</td>
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We had 15 cases of whooping cough and one measles outbreak this year.

There are 25 public health nurses working in schools.

We focus on working with people and communities to try to prevent disease and support people to be healthy and well in their community.

POPULATION HEALTH

- One case of rheumatic fever in 2014/15 down from five the previous year
- Over 95 percent of our eight month old infants had their vaccinations
- Highest rates of cervical cancer screening for Māori in New Zealand

- Working with small communities to improve the safety of their water supply
- Address housing issues and poor insulation - working with Housing New Zealand
- Help pregnant women stop smoking
- Increasing the levels of activity and wellness of our infants and preschoolers
- Working with communities to create a culture of health and wellbeing

DID YOU KNOW?

OUR QUALITY PICTURE 2015
Improving diagnosis and early intervention of respiratory disease

Over 20 percent of the people who come to our Emergency Department are suffering from a respiratory disease, which can be for example asthma or lung disease. This has a huge impact on our services and so we needed a new approach.

We developed a new community service led by practice nurses at 18 Hawke’s Bay general practices. We worked with Asthma Hawke’s Bay, pharmacists and specialist nurses in the hospital, which enabled us to provide early intervention and education so that consumers can best manage their health, improve their quality of life and avoid the need to go to the Emergency Department.

This is a team based approach - the family doctor, nurse, and the consumer all working together to get the best outcomes. The aim is to test lung function, help support and educate them, even teaching something as simple as learning the right way to breathe so that they can look after themselves. If they do need the Emergency Department we can now follow-up with them more easily. Nurses educate consumers about the medicines they take and help them see how these can improve the quality of their lives and stabilise their conditions.

This work is beginning to see some fantastic benefits to our consumer, with primary care taking the lead in the delivery of quality health care services that focus on the individual needs of each consumer.
PRIMARY HEALTH CARE

Primary health care is the first place you go to for health services; often this is your general practice or health centre. The doctors, nurses and pharmacists working in general practice provide a range of health services aimed to keep you well, from health promotion and screening to diagnosis and treatment of medical conditions.

• Development and implementation of the Respiratory Pilot
• More patients with diabetes being monitored
• 39 (92 percent) new-born babies were enrolled with a family doctor between February and May 2015. Hawke’s Bay has the fourth equal highest rate of new-born enrolment across the country
• 1310 Hawke’s Bay four year old children had a Before Schools check; we have far exceeded the national target of 90 percent

• Improving health literacy and self management of health issues in our community
• Patient Portal - extending out to other family doctors so each consumer has easy access to their health information
• Learning more about your health experience - you may be asked to complete a Patient Experience Survey in the coming year about your family doctor

DID YOU KNOW

Around 154,000 consumers enrolled with a family doctor

234 e-referrals are being sent from general practices to the hospital each week

81% (Target 80%) of Hawke’s Bay women received cervical screening
Our clinical pharmacists

Clinical pharmacists who work in general practices were established in 2011. They work with the doctors and nurses reviewing those consumers who have lots of different medical issues to make sure they are taking the best possible combination of medicines to help them and reduce any harm. The feedback from our consumers has been very positive about this service and it is providing a better quality of life for them.

Family violence intervention programme

The Hastings Health Centre (HHC) Family Violence Intervention Programme was first introduced in 2008, and since then it has become nationally recognised. The aim of the programme is early intervention for the victims of abuse and neglect. It is unique and there is no other comparable programme operating in primary care in New Zealand. The programme supports staff to recognise appropriately, respond to and refer on the victims of partner abuse, child abuse and neglect, sexual assault, elder abuse and neglect and other forms of abuse. Staff are encouraged to screen women over the age of 16 and men where there is a suspicion of abuse, all children are assessed for abuse and neglect, and those aged 65 years and older are screened for elder abuse and neglect. Since it began, over 80 immediate supports have been put in place to keep individuals safe, and over 150 children who we were concerned about have been provided with additional support. It has now been extended across our sector with the help and support of Health Hawke’s Bay with over 179 health professionals trained representing 25 different practices.

“I can’t thank you enough for checking my medications and seeing me in my home made it really easy”

“You saw me as a person, you are the first person in my life to actually see me, I have been invisible for so long, but you saw me”
ACUTE AND MEDICAL

We are responsible for providing safe and effective care across a number of services including: Emergency Department, Intensive Care Unit, Radiology, Renal Services, Cancer Services, General Medicine, Cardiology, Respiratory and Palliative Care.

- In the last six months over 95 percent of people attending ED were seen and treated within six hours
- Developments relating to our AIM 24/7 programme (see page 23)
- A major refurbishment of the mortuary to provide a better environment to support our families/whānau dealing with loss
- Reduced average length of stay for consumers for general medicine
- Development of a multi-disciplinary committee to improve the quality of care for people admitted with trauma
- Improvements made in radiology service to reduce delays

- To continue to improve and sustain patient flow so that we can see people more quickly in the Emergency Department
- Continuing to develop Faster Cancer Treatment programme so consumers see our specialist sooner so treatment can begin
- Development of a stand-alone gastroenterology service and facility
- Complete the final stage of our renal services facility
- Refurbishment of the Emergency Department waiting room to improve our service
Acute Inpatient Management 24/7 (AIM 24/7) is the name of a programme we put in place in 2014 designed to improve the way we care for people needing urgent care 24 hours a day, seven days a week.

We knew we needed to improve how we managed the journey of consumers from when they first arrived into the Emergency Department (ED) so they could be treated or admitted much more quickly. We also knew we needed to give our staff the tools and resources to make that happen. To do this we refitted and refurbished some of our existing facilities to provide a Medical Day Unit, more treatment and observation spaces in ED and the Acute Assessment Unit (AAU). This made for a better environment for acutely ill patients and their families/whānau, and for our staff to work in. We also provided options for some patients to bypass ED and go directly to the AAU.

The AIM 24/7 project was tasked with making real changes so we could deliver a better service to our consumers. This includes making sure we have the right people in the right place all of the time because people don't just get sick between 8am and 5pm.

By improving the number and expertise of our staff working after hours we can provide better care for the people of Hawke's Bay.

“Everyone who works in the hospital plays a part in how we manage our patients and their journey through our sometimes very complex system”. Dr John Gommans, Chief Medical Officer - Hospital
"Everyone explained their role and what they were doing and what to expect from prior to my hip replacement through to when I was discharged from hospital."

**SURGICAL**

We are responsible for providing surgical procedures for our consumers, whether they be elective (planned) or acute (not planned or accident) in our seven theatres, carrying out day case surgeries and caring for consumers after they have undergone surgery.

- We exceeded the national elective health target and completed 6,154 surgeries, 142 above our plan
- Only 17 people were waiting more than four months for surgery as at June 2015
- Our surgical infection rate was maintained consistently below the national average
- The Day Surgery Unit is working to full capacity averaging 40 cases each day

- To continue to improve access to surgery for our community
- To enhance the surgical consumers’ experience and journey from being referred by their family doctor, having surgery and then being discharged home
- To ensure timely and effective surgery for all cancer consumers
- To increase the number of both hip and knee operations for our community

**KEY RESULTS**

**OUR FOCUS 2015/2016**

On average we plaster cast 60 people a week

We do around 35 surgeries each day in our theatres

3000 completed acute surgeries ranging from broken bones to caesarean sections

Around 32,000 people were seen at surgical clinics

901 cataract eye operations completed this year (our most common surgical procedure)

**DID YOU KNOW**
Operation Productivity

“Operation Productivity” is the name we gave to improving productivity in our operating theatres project. We face an ongoing challenge of being able to meet the increased demand for surgery. With theatres being an expensive resource we need to make sure we get the most out of them and have them functioning efficiently so we can offer more people elective operations.

The catch phrase for the project is, "It’s all about TeamWork" meaning all the teams, including consumers are focussed on working together to design and make improvements so the project can make a difference to our community.

In the time the project has been running, we’ve been able to on average, complete more than 40 extra operations every month. The project still has more work to do but we are continuing to see a steady improvement in the number of operations we have been able to complete for our community.

Physiotherapists - supporting consumers with arthritic pain

Over the last two years our physiotherapists have helped to ensure that those most in-need consumers with arthritic pain are identified to our surgeons so that they can be considered for a hip or knee replacement. Physiotherapists have provided individualised advice on how our consumers can look after themselves, referring them to occupational therapists, and providing them with crutches, walking frames or home equipment when appropriate.

They get lots of feedback from consumers saying the advice and support has helped them remain independent and in their home.

Having surgery is always the last resort for managing pain as there are a lot of risks. We are continuing to provide advice and support and plan to co-ordinate with family doctors, Arthritis Hawke’s Bay and Green Prescriptions to look at other options for our consumers which can delay or remove the need for surgery.

"I would like to acknowledge the excellent work and responsiveness of the Home Loan Equipment store. They are consistently understanding, helpful and problem solving."
Women, Children and Youth services provide services from early pregnancy through to whānau with children under the age of 15 in Napier, Hastings, Central Hawke's Bay and Wairoa. We support women, children and whānau through all aspects of their children’s health journey from birth to teenagers providing acute and long term conditions assessment and care inclusive of audiology, and ongoing child development services. There is a particular focus on our most disadvantaged with a strong partnership with our violence intervention programmes.

Maternity services facebook - using social media to connect

The Hawke’s Bay Maternity Facebook page was launched in 2014, as an innovative way of connecting with our consumers, providing information, about what we’re doing and providing new mothers with the ability to share their stories and ask questions of the team.

This page has become a vital education and information tool for many. With over 1000 ‘likes’ it is a source of feedback from new mothers about their experiences. We are improving this page so that we can link into other services in our community to support new parents, for example Out and About Hawke’s Bay which is the largest parenting advice page in Hawke’s Bay.

OUR FOCUS 2015/2016

• Opening of our new Primary Birth Centre in 2016
• Engaging with our consumers to help design our services
• Evolving our Maternal Wellbeing and Child Protection Service
• Engaging with our youth to look at ways to improve their health
• Improve the coordination of care for those children with complex needs
• Collaboration with all children and youth agencies and providers

KEY RESULTS

• Established the Napier Maternity Resource Centre
• Created a Maternity services Facebook page
• Reduced the numbers of sudden unexplained deaths of infants (SUDI) from 2.1 deaths per 1,000 births to 1.77 deaths
• Established the day assessment unit for our pregnant women

DID YOU KNOW

• Over 2000 babies were born this year
• The most common children’s illness is acute bronchiolitis
• On average we have 11 babies in our Special Care Baby Unit every day
• We gave 458 epidural pain relief this year
• All newborns are screened for hearing before they leave hospital

The most common children’s illness is acute bronchiolitis

On average we have 11 babies in our Special Care Baby Unit every day

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Over 2000 babies were born this year
Neonatal Home Visiting Service

The Neonatal (new born) Home Visiting Service is a new service that began as a six month pilot at the end of 2014. It has since become a permanent service, with two neonatal nurses providing this service three days a week.

Many of the Special Care Baby Unit (SCBU) babies require a long stay in hospital, before they can go home. The programme provides a home visiting service, supporting a coordinated early discharge plan that reduces the time babies have to stay in SCBU.

The nurses work in partnership with the families/whānau to develop a discharge plan, which includes providing education for the families/whānau before they go home. The neonatal home care service enables these families/whānau to be discharged earlier, with ongoing support and the reassurance of knowing they have specialised neonatal support if they need it.

The nurses work closely alongside the midwives, Well Child providers and general practice, making sure links are established with ongoing specialised support services if required.

“They visited me before discharge, so we had built a good relationship before our discharge, which provided great preparation for going home”

“They do a fabulous job and really helped us to have the confidence in ourselves to bring our baby boy home.”
We are responsible for providing inpatient rehabilitation to consumers of all ages. Our teams reach into the community and see people in their own homes. Part of our team is Options Hawke’s Bay who provide a service to assess people for the appropriate packages of care to support them in their own homes, aged residential care, or residential care of family.

**OLDER PERSONS HEALTH**

- Setting up a new service “engAGE” to help frail older people stay in their community rather than in hospital
- Clinical Nurse Specialists employed to work with older people to achieve the best outcomes for them in their homes or in aged residential care
- Older Persons’ Mental Health services that continue to meet the demand of our growing number of consumers with dementia
- Provided packages of care for people to help them stay in their own homes

**DID YOU KNOW**

- There are around **23,000** people older than 65 in Hawke’s Bay
- Only 5% of older population live in aged residential care
- Provided approximately **3000** assessments this year
- Provide subsided care for over **1000** people in rest homes each year

**OUR FOCUS 2015/2016**

- engAGE service to be fully functional and having a positive impact so that we can look at how we deliver our services in the hospital
- Enhancing our stroke service that will support our consumers
- Growing our community teams so that they are responsive to the needs of the people in Hawke’s Bay

There are around 23,000 people older than 65 in Hawke’s Bay.
The engAGE project is all about joining the teams from across the hospital and community to make it easier for older people to get help and support so that they can remain independent for as long as possible.

Twelve months ago we established a team working in Taradale, and then later in Havelock North, so we could begin to see what these services could look like. The learnings from this will help us refine our services as we roll out a further two teams in Napier and Hastings before the end of the year, and then move further afield into Central Hawke’s Bay and Wairoa.

These teams are made up of nurses, doctors, physiotherapists, social workers, occupational therapists and pharmacists who work in general practices working together to understand the needs of our individual consumers and develop wraparound care to support them.

There will also be a new engAGE Orbit being set up in our Emergency Department, Accident and Medical Centres and with St John’s ambulance working seven days a week to help support our older consumers by completing assessments urgently, coordinating services, providing equipment and arranging support so these consumers can return to their own homes as quickly as possible.

"It was the genuine sincerity with which they asked me questions that impressed me. Especially when they were the kind of things they would be having to ask every patient all day, every day."
MENTAL HEALTH

We are responsible for delivering mental health services to people with moderate to severe mental health illness. We have community teams situated in Wairoa, Napier, Hastings and Waipukurau and a residential addiction service in Napier.

• Completing the new build of a $22 million Ngā Rau Rākau Mental Health Inpatient Unit
• Developed a new model of care for the way we deliver services which has established home based treatment, community resilience programmes and intensive day programmes
• Increased number of people with relapse prevention plans
• Strengthening our partnerships with our community providers

KEY RESULTS

• Moving into our new building and continuing to develop and implement new services to support our consumers
• Strengthen the Community Mental Health Teams to manage and reduce the number of consumers needing acute treatment
• Recruit further staff to support our Mental Health Crisis Teams

OUR FOCUS 2015/2016

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OUR QUALITY PICTURE 2015

DID YOU KNOW

There has been a 68% increase in access to our services since 2005

We have an inter-professional crisis team who are available all day, every day

We provide Maternal Mental Health specialist services for pregnant women who experience moderate to severe mental health issues

We have a 12 bed addiction house in Napier called “Springhill”
Mental Health service redesign and a new Inpatient Unit

For years we've known our Inpatient Unit for Mental Health was not working for our consumers. They said they wanted a wider range of services that were closer to home and in their community, and they also wanted a more therapeutic and home-like environment in the inpatient unit.

In 2012 the Ministry of Health provided Hawke's Bay DHB with the funds to rebuild our unit and redevelop the way in which we delivered our services – that’s where this journey began! The journey is coming to an end with our new inpatient unit, Ngā Rau Rākau, opening in January 2016. The unit has been designed to focus on safety and promoting recovery within a home-like environment.

Out in the community we have a host of new services:

- **Waekura Home Based Treatment up and running.** This is for people who are experiencing an acute episode of mental illness. Care is delivered via home visits by a team who engage with each person and their family/whānau to improve resilience and recovery.

- **Wai-o-Rua – Unplanned Respite** delivered by Te Taiwhenua o Heretaunga. This is for people who would benefit from a short stay away from their home to receive care and treatment to enhance recovery that is not hospital based.

- **Recovery based programmes** delivered by Whatever It Takes and Te Taiwhenua o Heretaunga at Manaia House in Napier and Te Puawaitanga in Hastings. These programmes are for people living with mental illness in the community. They provide social, support, creative and skills based activities to assist people to live fulfilling lives in the community.

- **Community Resilience Programmes.** This offers group therapy around depression/anxiety, bipolar, psychosis, mindfulness and managing distress. These programmes provide information and skills useful for building resilience and getting better.

There will be more changes in delivering our services so we have a single point of entry, so when people contact Mental Health services they are given timely appointments with a health professional matched to their needs.

For the past year we have been doing this work in partnership with consumers through the Partnership Advisory Group. This is a wonderful team of dedicated volunteers, DHB staff and representatives from our community providers. Based on a model of co-design we are working together to get the best outcomes for consumers and whānau.

“At the beginning of our journey it seemed we were on opposing sides, very much ‘Us and Them’. We have reached the stage where there is a healthy respect and a strong relationship between US all, and there is no ‘Them’ anymore. Together we have broken down those barriers and we now have a real sense of co-ownership and share our passion for improvement. We’re now working well together to inspire each other and deliver the best mental health services to the community that we can.”

Deborah Grace, Chair Partnership Advisory Group
RURAL, ORAL AND COMMUNITY

The Rural, Oral and Community Directorate (ROC) has services located in Wairoa, Central Hawke’s Bay, Napier and Hastings. Most of our services support people staying well in their community with a focus on integration and collaboration of services with primary care, Māori providers and other providers. ROC services provide a diverse range of care including: district nursing, pulmonary rehabilitation, continence services, ostomy, Napier Health, outpatients, public health nursing, integrated sexual health services, Wairoa Health (including two general practices), Central Hawke’s Bay Health Centre, diabetes service, endocrinology, podiatry, hospital dental and community oral health.

**KEY RESULTS**

- Increased number of attendances at Napier clinics and reduced the numbers of did not attends
- Successful handover of the Chatham Islands to Canterbury DHB in June 2015
- Increased the number of new born babies enrolled into oral health services
- Roll out of District Nurses working in general practices in Napier
- Focus on the development of a Central Hawke’s Bay integrated family health centre
- Continuing to develop integrated services in Wairoa to meet the needs of the community

**OUR FOCUS 2015/2016**

**DID YOU KNOW**

17,210 people attended clinics in Napier Health
193 flights between Wairoa and Hastings, transporting 218 patients
6 people on average on the ward in Wairoa each day
27 people treated in the Chatham Islands hospital this year
A new way of working for our District Nurses

In 2012 a new way of delivering services to our community was established. This included moving our district nurses, who provide care to our population in Hastings, into a number of general practices, so that we provided a better and more integrated way of working to ensure that our consumers received the best possible care. What we’ve seen is a positive impact on the consumers’ care and experience because we are using the skills of many different health professionals. This new way of working has been so successful in improving the relationships between the district nurses and general practices in Hastings, and improving consumer treatment that we are beginning to roll it out to Napier over the next few months, and in the future the wider district.

Central Hawke’s Bay – Supporting our Māori Community

Six months ago we introduced a new programme to see if establishing a Kaitakawaenga service from the Central Hawke’s Bay Health Centre would improve and support better health outcomes for our Māori population. To date this has proved successful with over 60 people being referred for health services who might never have had, or taken up the opportunity. In addition to this we have been working closely with Healthy Homes and Housing NZ to get better insulation for some of our high risk homes (including the Waipukurau Kaumatua flats). Transport for Māori consumers was arranged so they could get to the hospital for appointments which has reduced Did Not Attend rates. This trial has proved very successful and we have been able to extend it for a further twelve months.

"The resources are fantastic in Napier - I found exactly what I was looking for and even more. Thank you "

"When they come they write up or type into the laptop a report that gets sent to my GP and me. The communication is brilliant. The nurses can access information about my allergies."
NATIONAL HEALTH TARGETS

Our results

- 6,154 surgeries delivered – 142 more than the target.
- 100% of people wait less than four weeks for radiation or chemotherapy treatment.
- 95% of people spent less than six hours in the Emergency Department.
- More than 95% of eight month olds had their immunisations on time.
- More than 90% of the eligible population had their Cardiovascular Disease risk assessed in the last five years.
- More than 95% of hospitalised smokers were offered advice to quit.
- Less than 90% of those consumers who are smokers and have a family doctor were offered advice to quit.
# NATIONAL HEALTH TARGETS - AT A GLANCE

<table>
<thead>
<tr>
<th>HEALTH TARGET</th>
<th>TARGET</th>
<th>OUR RESULT</th>
<th>TREND (since last year)</th>
<th>COMMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shorter stays in Emergency Department</td>
<td>95%</td>
<td>Achieved</td>
<td>↑</td>
<td>Our Aim 24/7 project has helped us reach the target. We need to continue with this so that we can sustain this performance.</td>
</tr>
<tr>
<td>Improved access to elective surgery</td>
<td>100%</td>
<td>Exceeded</td>
<td>↑</td>
<td>Many initiatives to improve productivity and throughput have been successfully implemented this year resulting in us exceeding our target, however we again need to maintain our focus to sustain this performance.</td>
</tr>
<tr>
<td>Shorter waits for cancer treatment</td>
<td>100%</td>
<td>Achieved</td>
<td>-</td>
<td>This Health Target has now been replaced with a new Faster Cancer Treatment Health Target which will make sure that when there is a high suspicion of cancer that over 85% of our consumers are treated within 62 days of being referred for treatment.</td>
</tr>
<tr>
<td>Increased immunisation</td>
<td>95%</td>
<td>Exceeded</td>
<td>↑</td>
<td>We are one of only three DHBs to have achieved the 95% target by December 2014 and we have been able to maintain this for the last six months.</td>
</tr>
<tr>
<td>Better help for smokers to quit (Hospitals)</td>
<td>95%</td>
<td>Exceeded</td>
<td>-</td>
<td>Hawke’s Bay DHB has achieved this target for the last two years.</td>
</tr>
<tr>
<td>Better help for smokers to quit (Primary Care)</td>
<td>90%</td>
<td>Not achieved</td>
<td>↓</td>
<td>We need to focus our attention in Primary Care so that we are better able to consistently hit this target.</td>
</tr>
<tr>
<td>More heart and diabetes checks</td>
<td>90%</td>
<td>Exceeded</td>
<td>↑</td>
<td>We have maintained our performance, however we need to continue to look for opportunistic screening and focussing on screening our hard to reach populations.</td>
</tr>
</tbody>
</table>

**KEY:**
- ↑: Improved our performance against the health target.
- ↓: Our performance against the health target has declined.
- -: Our performance against the health target has stayed the same.
SERIOUS ADVERSE EVENTS

In hospital

Serious adverse events are those that result in significant harm to our consumers, where they need additional treatment, has been life threatening or has led to an unexpected death.

These events are uncommon, however with more than 34,000 admissions this year we continue to focus on improving the quality and safety of the care that we provide to all our consumers so that we can prevent these events in the future.

In 2014/2015 Hawke’s Bay DHB had eleven serious events which is the same as the previous year.

When a serious adverse event occurs we fully investigate what has happened and identify any improvements that need to be made. We also share these reports and the learnings from them to reduce the likelihood of them occurring again.

Serious events 2014/15

1. Clinical Processes
   - Patient accident
2. Surgical complications
3. Delayed diagnosis
4. Falls
The Health Quality & Safety Commission (HQSC) is driving improvement in the safety and quality of New Zealand’s health care through the national patient safety campaign ‘Open for Better Care’. All of New Zealand’s district health boards need to report on how well they are doing against some key targets. These targets are about making sure consumers are not harmed from a fall when they are in our care, that we reduce the number of infections and that we make sure that when consumers have surgery that they receive the necessary medicines and that we work as part of a team.

So how are we doing with these targets:

- **Hand hygiene:** percentage of health professionals who clean their hands before and after having contact with a patient. Target 70%
  - 85%

- **Surgical site infection targets:**
  - Antibiotic administered in the hour before surgery. Target 100%
    - 100%
  - Right antibiotic in the right dose. Target 95%
    - 93%

- **Falls:** older consumers assessed for risk of falling. Target 90%
  - 90%

- **Perioperative Harm (harm from surgery):** all parts of the surgical safety checklist used in operations. Target 90%
  - 99%

- **Appropriate skin antisepsis in surgery.** Target 100%
  - 100%
Preventing harm from infection

Hand hygiene has been recognised as the single most effective way to prevent the spread of infection. The national hand hygiene programme (“Five Moments for Hand Hygiene”) has been implemented and is measured through regular observational audits of hand hygiene practice by clinical staff. As at June 2015, Hawke’s Bay District Health Board achieved 85 percent compliance, above the 80 percent target set by HQSC - a result ranking amongst the top performers in New Zealand. Moving the responsibility to all front-line health professionals will be a focus in the next year.

Hawke’s Bay DHB has participated in the Surgical Site Infection Prevention programme (initially as a pilot site) since 2013 which means reporting hip and knee procedure infections. Our results consistently meet required targets with the exception of the ‘right antibiotic in the right dose’ which is currently just below the 95 percent target at 93 percent. We will continue to closely monitor and support our surgical teams to achieve this target.

Preventing harm from surgery

The surgical safety checklist is now routinely used to ensure consumers receive the right procedure with the right preparation. We achieved our aim of exceeding the national target of 90 percent.

Next year will see the checklist evolve from its current paper format (stored in the consumer’s health record) to that of a poster with surgical safety check points or prompts situated in every operating room. It will be referred to before each procedure to ensure there is a continued focus on patient safety, and improving team work and communication.

Preventing harm from falls

This year we introduced ‘Intentional Rounding’ in a number of hospital wards. Intentional Rounding is a way of ensuring consumers are assessed by their nurse more regularly. This way consumers gain better access to help when they need it – for example: ensuring their call bell is within reach, assistance with toileting, and managing their comfort needs. Our focus has also been on ensuring that all people admitted to hospital are assessed within the first hour to see if they are more likely to fall over while in hospital. We achieved the target of 90 percent.

We have also been investing in new beds and personal alarms for those people who have an added risk of falling when they are in an unfamiliar place.

In the community, people at risk of harm from falls are comprehensively assessed by a doctor, and their medicines reviewed by a pharmacist. Vitamin D supplements (to improve bone and muscle health), and exercise programmes are being offered to those who would benefit from them.

Next year we intend to strengthen these programmes to provide a robust ‘wrap-around’ approach to preventing falls in hospital and in the community, to those most at risk of having a fall.
We have made considerable changes in the past three years. With the establishment of the Quality Improvement and Patient Safety Framework, and a team to support it, we are making progress in improving the health and wellbeing of our community. Our focus continues to be on improving our services to meet the needs of our people.

The new team is evolving and bringing a greater depth of improvement resources and skills to enable and support all the teams across the health sector to create services that are safe, efficient and effective to meet the health challenges that we face in our community.

Hawke’s Bay’s Clinical and Consumer Councils are now working more closely together and increasingly providing greater emphasis and leadership to enable a system-wide approach to quality improvement and patient safety.

This year, across the sector we will be focussing on a number of priorities including continuing the work around our urgent care services and implementing our obesity, rheumatic fever and smokefree strategies – these are just some of the key pieces of work to reduce inequities in our community.

We know that engaging with our consumers and learning from them is key to improving our services and we will focus on putting in place mechanisms so that we can do this better.
YOUR FEEDBACK

Consumer feedback
We welcome and appreciate receiving feedback. To improve our services we need to hear your story. Whether compliments, comments, questions or suggestions, complaints or a mixture, your feedback is valuable. It helps us see where we are performing well and where we could improve.

You can give feedback in a number of ways:
- email us: feedback@hbdhb.govt.nz
- complete an online feedback form: www.ourhealthhb.nz
- phone us: 0800 000 443
- complete a freepost feedback form which may be given to you when you visit, or which can be found in many areas across the DHB’s sites.

You may receive a phone call or receive a request to complete a survey based on your experience. It is your choice to take part or not.

Then what happens?
Your feedback will be passed to the manager of the area you are providing feedback on. We will acknowledge your feedback, and if your feedback is a complaint an investigation will take place. We will let you know what we have found out and this may include what we have done to make things better, or what we are planning on doing to ensure things improve.