



NEW ZEALAND PRIVATE SURGICAL  
HOSPITALS ASSOCIATION INC

## **NZPSHA Nurse and Clinical Leaders Group / HR Managers / Quality Meeting**

1615 - 1815 – Wednesday 11<sup>th</sup> September 2024  
MSocial Hotel, 196/200 Quay Street, Auckland

### **AGENDA**

	<b>Agenda item:</b>
<b>1600</b>	<b>Afternoon Tea</b>
<b>1615</b>	<b>Welcome &amp; apologies - Steph Feldbrugge, Marie Russell, Jo Bell</b>
	<b>Opening karakia</b>
<b>1625</b>	<b>Previous meeting:</b> <ul style="list-style-type: none"><li>▪ Confirmation of previous minutes of NCLG meeting held on 16 March 2023 (attached)</li><li>▪ Matters arising from previous meeting</li></ul>
<b>1630</b>	<b>Ice breaker &amp; reconnect</b>
<b>1645</b>	<b>Quality Managers Support Network – Angela Dewhirst</b>
<b>1700</b>	<b>Improving Hospital Culture with Wellbeing – Steph Feldbrugge</b> How can we cultivate and enhance culture through Wellbeing?
<b>1730</b>	<b>Managing Psychological Risk — Jo Bell</b> Expanding our approach to include different facets of colleague well-being
<b>1800</b>	<b>Review and feedback on the Terms of reference for the group (attached)</b>
	<b>External Sector Group Representation and SIPCAG report (attached)</b>
	<b>Breaking News!</b>
	<b>Election of Co-Chairs</b>
<b>1815</b>	<b>Closing Karakia</b>
	<b>Date of next meeting: TBC</b>

# HR / QUALITY / NURSE CLINICAL LEADERS MEETING

## Minutes – 14 September 2023

**Name:** NZPSHA - HR / Quality / Nurse Clinical Leaders

**Date:** Thursday 14 September 2023

**Time:** 9:00 am to 11:00 am

**Location:** Intercontinental Hotel - Wellington

**Chair Members:** Julia Abbot, Marie Russell; Steph Feldbrugge,

## 1. Welcome

### 1.1 Opening karakia – Dean Cowles

Dean opened with Karakia

**Karakia Whakamutunga:** Unuhia

Unuhia, unuhia  
Unuhia ki te uru tapu nui,  
Kia wātea, kia mama te ngākau,  
Te tinana, te wairua, i te ara  
Tangata. Kōia rā e Rongo,  
whakairia ake ki runga  
Kia tīna! Tīna! Hui e! Tāiki e!

*Draw on, draw on,  
Draw on the supreme sacredness  
To clear, to free the heart, the body and  
the spirit of mankind  
Rongo, suspended high above us  
Draw together! Affirm!*

Marie welcomed everyone to the meeting.

Julia Abbott and Steph Feldbrugge - introductions

### 1.2 Previous Minutes:

- Confirmation of previous minutes of NCLG meeting held on 16 March 2023 (attached)
- Matters arising from previous meeting

Acceptance of minutes from March meeting

#### Attendees:

Julia Abbott, Victoria Aliprantis, Rebecca Atkins, Joanne Bell, Aimee Bourke, Deb Boyd; Sandy Brace; Vicki Bulmer, Michelle Chadwick, Dene Coleman, Dean Cowles, Robyn Cumings; Anouk Doevandans-lumb; Belinda Dore; Steph Feldbrugge; Carol Ferguson; Ingrid Fisher; Helen Foley, Monica Goldwater, Debby Govers; Karen Hall, Teresa Healing, Leslie Henderson, Scott Hunter; Colin Hutchison, Janine Ingram, Steven Johnston, Carole Kaffes, Kate Kennedy; Rachael Lucas, Julie Lucas, Jaimee Mchugh; Herika Mendes, Pippin Morrison; Dorothy Paton, Denise Primrose; Nick Pullan; Rebecca Quintal; Peter Radley, Catherine Robbins, Tina Rogers; Angela Ross, Marie Russell; Angela Shaw, Hannah Sims, Leigh Singers, Fiona Stevens-hounglee, Kayla Turvey, Sue Valentine; Stacy Valentine; Lianne Van Egdom, Nicky Van Praagh; Maria Withers

## 2. Apologies

N/A

### 3. Icebreaker and Reconnect

Marie introduced an Icebreaker:

- Introduce yourselves to someone you haven't met before.
- Find out their name, where they work and their role.
- Find out a fun fact, surprising talent or their superpower
- Be prepared to introduce someone you have met to the wider group when we come back together.

Feedback:

- Ability to make my self **invisible**
- NZ Cycling **representative** at masters games
- Mr New Zealand
- Being able to Crochet
- Ability to drink **yourself** through anything
- Ability to get the best from the team
- Ability to pack 4 outfits and 2 pairs of shoes into carry-on luggage

### 4. Carey Campbell – Clinical Director Orion

Introduction by Julia

Presentation of a successful digital transformation. Example Southern Cross Healthcare.

"It's about will not skill: The importance of grit, a growth mindset and nurses for a successful digital transformation"

### 5. Pippa Morrison and Dean Cowles: Introductions by Steph Feldbrugge

Presentation on Our Te Ao Māori Journey

### 6. Thank you to Julia Abbott:

Marie Russell thanked Julia Abbott who is stepping down from HR / QUALITY / NURSE CLINICAL LEADERS co-chair position. Julia's contribution to the preparation, ideas, guidance and running of these meetings over the past two years has been outstanding.

Marie welcomed Joanne Bell as the new Co-Chair.

- Joanne Bell; Quality and Risk Manager, Ormiston Surgical and Endoscopy Limited, Auckland.

### 7. Review and feedback on the Terms of reference for the group.

External Sector Group Representation and SIPCAG report.

A question was raised around the reasons for not continuing NZPSHA representation on Sepsis group  
Julia to forward email from NZPSHA regarding the decision to not have representation.

Reminder - Quality Awards 2024

AT – possible name change – Perioperative Practitioner – looking at overseas candidates that have different but relevant qualifications. Supervision period for newly registered practitioners

### 8. Marie shared updates from HQSC around the move to an electronic national dashboard, which is operational from November 2023, and amendments to the Misuse of Drugs Regulations 1977 which will come into effect on 5 October 2023.

### 9. Closing karakia – Dean Cowles

Close at 10:30 am



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## **Terms of Reference - NZPSHA Nursing and Clinical Leaders Group**

### **Terms of Reference**

#### **Core Functions:**

1. Provide NZPSHA representative nursing input into national nursing issues
2. Provide professional development opportunities for NZPSHA members
3. Share best practice and ideas for NZPSHA members
4. Leading workstreams:
  - a. Organising meetings associated with NZPSHA March and September seminars
  - b. identify opportunities for future educational sessions
  - c. Co-ordinating nursing input into submissions and project work e.g. RNAA / Anaesthetic Technicians framework
  - d. NZPSHA Clinical Indicator programmes - provide timely feedback
  - e. HQSC Expert Advisory Groups and HQSC work streams -offer up appropriate NZPSHA members for external groups
  - f. Other work as agreed with the NZPSHA Executive, as group resource permits

#### **Structure**

## Summary of NZPSHA Representation on External Sector Groups – September 2024

	Organisation:	Name of External Group:	NZPSHA Representative:	Hospital / Position:
1	HQSC	HQSC Strategic IPC Advisory Group (SIPCAG)	<b>Lynne Downing</b> <a href="mailto:Lynne.Downing@royston.co.nz">Lynne.Downing@royston.co.nz</a>	Quality Co-ordinator, Infection Preventionist, Royston Hospital / Evolution Healthcare
2		HQSC Medication Safety Expert Advisory Group (MSEAG)	<b>Joanne Beachman</b> <a href="mailto:Joanne.Beachman@mercyascot.co.nz">Joanne.Beachman@mercyascot.co.nz</a>	Pharmacy and Allied Services Manager, MercyAscot
3	EGGNZ:	Endoscopy Guidance Group Committee (NZPSHA MoU with Endoscopy Guidance Group signed January 2019)	<b>Ainsley Cunliffe</b> <a href="mailto:Ainsley.cunliffe@gracehospital.co.nz">Ainsley.cunliffe@gracehospital.co.nz</a>	
4	Ministry of Health:	Surgical Mesh Urogynae Roundtable	<b>Maree Cassidy</b>	MercyAscot
		National Credentialing Committee	<b>Liam Wilson</b> Feedback through NZPSHA Executive	Surgeon, Grace Hospital

26 August 2024

Rose Geden  
Executive Director  
NZ Private Surgical Hospitals' Association  
[executive.director@nzpsaha.org.nz](mailto:executive.director@nzpsaha.org.nz)

Kia Ora Rose

**Credentialling process for surgeons to provide women's stress urinary incontinence procedures – including credentialling for the use of surgical mesh.**

I'm writing to update you on the next phase of the credentialling process for surgeons who wish to be credentialled to provide women's stress urinary incontinence procedures - this includes credentialling for the use of surgical mesh.

There was significant interest in this round of credentialling for the 15 places available. A prioritisation process developed by the Ministry of Health has been applied to ensure we have clinicians credentialled in a range of procedures and in a range of locations, with a focus on capability and capacity throughout the country.

The credentialling process requires surgeons to provide detailed information and evidence to support their application. The current process will culminate in November 2024, with in person interviews with an international expert panel. Candidates will also have a formal discussion with consumer and equity representatives.

Further information on the process is available on this web page [Credentialling – Health New Zealand | Te Whatu Ora](#). It is our intention to make as much information as possible about the process available on this page, so clinicians can prepare for future credentialling rounds and interested stakeholders can learn more about the process.

It's also important that consumers can see the rigorous assessment process that surgeons undertake in order to be credentialled to perform these important surgeries for women.

Information on future credentialling rounds will be publicised early in 2025. For more information or queries about the process, please contact [meshcredentialling@cdhb.health.nz](mailto:meshcredentialling@cdhb.health.nz)

Can you please share this update with your members and interested parties – thank you.

Ngā mihi



Richard Sullivan

**Chief Clinical Officer**

**Health New Zealand | Te Whatu Ora**

**NZPSHA FEEDBACK TEMPLATE EXTERNAL ADVISORY AND WORKING GROUPS FOR HQSC  
AND OTHER STAKEHOLDER GROUPS:**

<b>Name of external working group / EAG:</b>	<b>SIPCAG</b> <i>Te Rōpū Tohutohu Rautaki Ārai Mate, Whakahaere</i>
<b>Organisation (e.g. HQSC, ACC):</b>	<b>HQSC</b> Te Tāhū Hauora
<b>NZPSHA member representative:</b>	<b>Lynne Downing</b>
<b>NZPSHA member hospital:</b>	<b>Royston Hospital</b>
<b>Working group meeting date:</b>	<b>Wednesday 20<sup>th</sup> March 2024</b>
<p><b>For NZPSHA Executive and wider membership: Key feedback points (and their relevance to the private sector):</b></p> <p><b>Vancomycin Resistant Enterococcus</b>  The Waikato Hospital cluster (vanB type) continues to cause concern in the Waikato, Bay of Plenty, Tairāwhiti and Lakes regions, with ongoing transmissions occurring.</p> <ul style="list-style-type: none"> <li>All hospitals should assess patients on admission for VRE.</li> <li>All patients who have had an overnight stay at Waikato, Thames, Tauranga, or Lakes hospital, or as a day patient in their renal or oncology units should be screened for VRE and isolated with Contact Precautions while awaiting results. (strong recommendation)</li> <li>All patients who have had an admission overnight to another New Zealand hospital should be screened for VRE and isolated as per local policy.</li> <li>All patients who have been admitted to an overseas hospital in the last year should be screened for VRE and other multi drug resistant organisms and isolated with Contact Precautions while awaiting results.</li> <li>On admission patients should be checked for MDRO alerts/ National Warnings and treated accordingly.</li> </ul> <p>There is also a cluster of MRSA in Dunedin, and invasive group A strep and tuberculosis are currently on the Health New Zealand watch list due to rising numbers of reported cases.</p> <p><b>Surgical site infection improvement programme (SSIIP):</b>  SSI Cardiac surgery rate 2.9  SSI Orthopaedic surgery rate 1.0</p> <ul style="list-style-type: none"> <li>Facilities that conduct light surveillance that do not submit their quarterly summaries in a timely manner may be requested to revert to full surveillance.</li> <li>Approximately 50% of arthroplasty procedures performed in the private sector are not Health NZ contracted patients. HQSC considering adding these procedures to the data collected.</li> <li>Several private surgical hospitals are currently involved in a pilot entering data directly into the electronic database. This will be extended to other facilities in the private sector.</li> </ul> <p><b>Hand Hygiene New Zealand:</b>  New dashboard goes live November 2023. Average compliance 85%. NZPSHA participating hospitals results are combined in one report. Te Whatu Ora divisions now have their outcomes as a Key Performance Indicator.</p> <p><b>Te Tāhū Hauora Health Quality &amp; Safety Commission</b>  Dashboard of health system quality has been updated to include all information available from one page <a href="https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/">https://www.hqsc.govt.nz/our-data/quality-dashboards/dashboard-of-health-system-quality/</a></p>	



### **Patient centred care**

Several outpatient departments have piloted the question "Did you see hospital staff wash or sanitise their hands before touching you". This will be extended to all sites.

Preliminary results:

Yes always 69.1%, Yes sometimes 15.7%, No 11.8%, Not applicable 3.4%

Member representative recommendation: NZPSHA facilities to consider adding this to their patient experience surveys.

### **Hospital Acquired Staphylococcus Aureus Bacteraemia (HA-SAB):**

There is a mis-match between HQSC data and HCRT data due to coding differences. HQSC captured 471 events versus 61.

### **National healthcare associated infections point prevalence survey and costings analysis:**

Update to data presented at last meeting:

Deaths per year revised from 700 to 1000

Full report pending.

### **Peripheral IV catheters:**

World Health Organization PIVC guidelines due for release in April 2024. Proposed NZ bundle includes:

- Avoid areas of flexion
- Use a standard insertion kit
- Asepsis when accessing device
- Review daily
- Have a defined schedule or clinically indicated criteria for removal.

The HQSC PIVC collaborative will commence a pilot at selected facilities in September 2024, for a 12 – 18 month period.

### **Member Round Table**

Health New Zealand | Te Whatu Ora facility compliance with the NZS 8134:2021 Ngā paerewa Health and disability services standards 1.1.5 and 1.2.5.

- Facilities with consumer councils may continue to maintain these groups if they wish to do so.
- Facilities that do not currently have consumer councils have been instructed to utilise co-design strategies such as focus groups and forums, rather than setting up formal councils.

The Pae Ora (Disestablishment of the Māori Health Authority) Amendment Bill will require a revision of the SIPCAG | Te Rōpū Tohutohu Rautaki Ārai Mate, Whakahaere terms of reference. A draft revision will be presented for consideration at the next meeting.

**The next SIPCAG meeting will be held via Zoom in July 2024.**