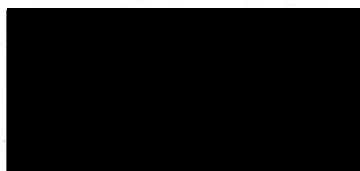




Waitemata
District Health Board
Best Care for Everyone

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10 December 2018



Dear 

RE: Official Information Act request - health and safety complaints

Thank you for your Official Information Act request of 15 November 2018 seeking details from Waitemata District Health Board (DHB) about any health and safety complaints or risks at Waitakere Hospital's maternity unit. Please note there are two maternity wards at Waitakere Hospital – Piha Ward and Te Henga Ward. The information supplied covers both.

1. At Waitakere Hospital's maternity ward, what health and safety complaints (possibly including equipment failures) were recorded from staff and patients in the year to June 2018 and also year to June 2017. How many, and what, where.

In answer to your questions, we have summarised the complaints received for 2016/2017 and 2017/2018 as requested and attached as Appendix 1 and 2.

It is important to note that Waitakere Hospital provides a high-quality service for mothers and babies, with around 2800 babies born in the unit each year.

We take a proactive approach to managing any potential risks that could impact on mothers and babies. Documenting these issues is an essential part of managing risk to ensure the continuity of safe care.

The Waitakere Hospital maternity unit deals with similar challenges to other maternity units around the country and we stand by the high quality of care our staff provide.

There is a current national shortage of midwifery staff and references in Appendix 1 and 2 to concerns about staffing levels must be seen in this wider context. Waitemata DHB has a strong record of providing a safe service for mothers and babies, including taking all possible steps to ensure there is a full complement of staff on our wards for each shift.

You will also note references to security incidents. Occasionally, family and community tensions flow into our hospital wards. Waitemata DHB has procedures in place to manage these isolated events and trains staff to assist in de-escalation where appropriate.

Where appropriate, our staff also have the option of calling on the rapid support of our in-house security team to attend the wards.

2. That the risk register, or document recording potential or existing hazards and risks for Waitakere Hospital's maternity ward please be provided.

Please see attached as Appendix 3 and 4, risk and hazard registers for the maternity wards.

Please note that references to 'risk' in these documents are in relation to potential risk, not actual cases of harm.

The identification of potential risks is an important part of any healthcare provider's planning process to develop mitigations and long-term solutions.

Waitemata DHB takes our responsibility to provide a safe care environment seriously and when concerns are identified, our focus is on improving systems.

Appendix three refers to the limitations of the existing building infrastructure, which is a common issue across DHBs nationwide. Waitemata DHB is working to make the very best of our existing infrastructure to support best care to women and babies while we plan for future investment that will support the growing West Auckland population into the future.

Projects currently under development are a new primary birthing unit for West Auckland, which has received in-principle Board approval, and a major upgrade to the Waitakere Hospital Special Care Baby Unit.

Waitemata DHB, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider them.

We hope this reply satisfies your request.

Yours sincerely,



Fiona McCarthy
Director Human Resources
WAITEMATA DISTRICT HEALTH BOARD

Appendix 1 2016-2017 Health & Safety Complaints

Incident Date	Brief Factual Description
08/07/2016	Security incident.
08/07/2016	Security incident
24/08/2016	Induction delayed.
24/08/2016	Concern about staffing levels.
24/08/2016	Concern about staffing levels.
26/08/2016	Concern about staffing levels.
13/09/2016	Security incident.
13/09/2016	Security incident.
10/10/2016	Concern about staffing levels.
15/10/2016	Concern over size of office being too small.
03/11/2016	Concern about staffing levels.
12/12/2016	Headboard/notice board above patient bed fell off wall in Piha ward.
13/12/2016	Security incident.
13/12/2016	Security incident.
23/01/2017	Threat of violence made on hospital grounds.
18/02/2017	Power cord burnt through in Te Henga ward.
18/02/2017	Potential medicine reconciliation error.
02/03/2017	Concern about staffing levels when on call doctor is in theatre.
12/03/2017	Patient booked for birth at Waitakere Hospital but transferred to North Shore Hospital.
18/03/2017	Security incident.
18/03/2017	Security incident.
24/03/2017	Security incident.
07/05/2017	Security incident.
07/05/2017	Security incident.
09/06/2017	Maternity patient diverted to North Shore Hospital due to lack of beds at Waitakere
17/09/2017	Concern raised over maintenance statistics of ultrasound scanner. Proof of scheduled checks confirmed.

Appendix 2 2017-2018 Health & Safety Complaints

Incident Date	Brief Factual Description
10/07/2017	Concern about staffing levels.
16/10/2017	Security incident.
31/10/2017	Security incident.
06/11/2017	Security incident.
19/11/2017	No supply of safety cannulas in the maternity unit at Waitakere hospital.
30/11/2017	Security incident.
30/11/2017	Security incident.
12/12/2017	Security incident. Fire alarm (false alarm)
14/12/2017	Security incident
14/12/2017	Security incident.
15/12/2017	Potential trip hazard.
18/12/2017	air conditioner not working in Piha Ward.
26/01/2018	Concern about staffing levels
19/03/2018	Inadequate preparation for patient arrival.
23/03/2018	Roof leaking above room in Piha Ward.
02/04/2018	Security incident.
18/04/2018	Concern over the size of birthing room being too small in Piha Ward.
28/04/2018	Roof leaking above room in Piha Ward.
23/05/2018	Roof leaking above room in Piha Ward.
05/06/2018	Roof leaking above room in Piha Ward.

Division - Child, Women & Family

Department - Maternity Facilities West

Area - Whole Department						
ID	Description	HAC Score	Control	Person Responsible	Next Due	Reviewed Manager
1040	SLIPS/TRIPS/FALLS There are a number of hazards that can result in slips, trips and falls, e.g. cables, wet floors.	1	<p>Ensure all staff receive local induction in relation to the possibility of potential harm caused by slip trips and falls</p> <p>Mandatory annual OH&S e-Learning update completed by all staff</p> <p>Bi-monthly VGM checklist, or 3 Monthly Environmental checklist (depending on the area), to be completed</p> <p>Ensure correct footwear worn by all staff as per uniform policy</p> <p>Review the effectiveness of controls in conjunction with the incident reporting system</p>	<p>Unit Manager</p> <p>Unit Manager</p> <p>Health and Safety Representative</p> <p>Unit Manager</p> <p>Unit Manager</p>	<p>22/05/2019</p> <p>22/05/2019</p> <p>22/05/2019</p> <p>22/11/2019</p> <p>22/11/2019</p>	Yes
1614	<p>WORKPLACE VIOLENCE Workplace violence has emerged as a significant hazard in and around hospitals and other healthcare facilities. This may include physical or verbal assault, and inappropriate behaviour. Some areas have a higher risk than others, e.g. Mental Health, ED, Renal and Community nursing. These areas may require more specific controls, depending on the type of work performed and the environment, and should be addressed in further detail.</p> <p>Potential harm</p> <p>Can range from emotional distress to serious harm</p>	12	<p>Staff receive training appropriate to their area of work on induction and at specified intervals</p> <p>Clear statement displayed that any violence towards staff will not be tolerated</p> <p>Patient assessment must include potential for violence to others and with documented action taken, ie a watch, psychiatric assessment, removal to low stimulus environment</p> <p>During each staff handover staff be made aware of potential risks with any patient</p> <p>Duress alarms and personal alarms provided as required</p> <p>Report staff incidents of verbal or physical violence from patient visitors or other staff on incident reporting system-Riskpro</p> <p>Pre-employment screening requirements for infectious diseases are complied with</p> <p>Local induction for all new staff includes the BBFA process and the importance of immediate action</p> <p>All staff to complete mandatory Occupational Health and Safety and Infection Prevention and Control (IPC), e-Learning training on induction and annually</p> <p>Ensure personal protective equipment (PPE) is available, maintained and used</p> <p>Appropriate isolation procedures followed as per IPC policies</p> <p>Review the effectiveness of controls annually in conjunction with the incident reporting system</p>	<p>Unit Manager</p> <p>Health and Safety Representative</p> <p>Unit Manager</p> <p>Unit Manager</p> <p>Unit Manager</p> <p>Unit Manager</p> <p>Health and Safety Representative</p> <p>Unit Manager</p> <p>Unit Manager</p> <p>Unit Manager</p>	<p>22/11/2019</p> <p>22/11/2019</p> <p>22/11/2019</p> <p>22/12/2018</p> <p>22/11/2020</p> <p>22/05/2019</p> <p>22/11/2019</p> <p>22/05/2019</p> <p>22/11/2019</p> <p>22/05/2019</p> <p>22/05/2019</p> <p>22/11/2019</p>	Yes
2155	<p>NEEDLE STICK / BLOOD AND BODY FLUID ACCIDENTS (BBFA) A BBFA is the exposure of an employee through injection, broken skin or mucous membrane to another person's blood, tissue or other body fluids that are potentially infectious.</p> <p>In addition to blood and body fluids containing visible blood, the following fluids are considered potentially infectious: Cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid, uterine / vaginal secretions and semen.</p> <p>Faeces, nasal secretions, saliva, sputum, sweat, tears, urine and vomitus are not considered potentially infectious for blood borne viruses unless they contain blood.</p> <p>Potential harm</p> <p>The primary risk from BBFAs relates to potential infection from Hepatitis B, Hepatitis C, or HIV.</p>	8	<p>Pre-employment screening requirements for infectious diseases are complied with</p> <p>Local induction for all new staff includes the BBFA process and the importance of immediate action</p> <p>All staff to complete mandatory Occupational Health and Safety and Infection Prevention and Control (IPC), e-Learning training on induction and annually</p> <p>Ensure personal protective equipment (PPE) is available, maintained and used</p> <p>Appropriate isolation procedures followed as per IPC policies</p> <p>Review the effectiveness of controls annually in conjunction with the incident reporting system</p>	<p>Unit Manager</p> <p>Health and Safety Representative</p> <p>Unit Manager</p> <p>Unit Manager</p> <p>Unit Manager</p> <p>Health and Safety Representative</p> <p>Unit Manager</p> <p>Unit Manager</p> <p>Unit Manager</p>	<p>22/11/2019</p> <p>22/05/2019</p> <p>22/11/2019</p> <p>22/05/2019</p> <p>22/05/2019</p> <p>22/11/2019</p> <p>22/05/2019</p> <p>22/11/2019</p>	Yes

2386	The potential for fire can occur from many different sources: e.g. heat producing equipment; inappropriate use of equipment; storage of chemicals; combustibles; faulty electrical wiring and equipment. Potential harm Burns and smoke inhalation, collapse and death, property damage	5	All staff to be inducted on fire safety including location of fire hoses and alarms, emergency contact numbers and evacuation plan Review the effectiveness of controls annually in conjunction with the incident reporting system	Unit Manger Unit Manger	22/11/2019 22/11/2019	Yes
2619	Electricity: e.g. damaged electrical cords, plugs or leads, poorly maintained electrical equipment and failure to follow safe work practices. Potential harm Possible electrocution; burns; fires and property damage	8	All staff to complete mandatory fire e learning All new staff inducted to electrical safety Electrical equipment checklist to be completed All staff will check electrical equipment prior to use and will report faulty equipment as per local processes (Belims request) Review the effectiveness of controls annually in conjunction with incident reporting system (Riskpro)	Unit Manger Health and Safety Representative 2 Health and Safety Representative Health and Safety Representative 2 Unit Manger	22/11/2019 22/05/2019 22/02/2019 22/05/2019 22/11/2019	Yes

Child, Women & Family

Risk ID	Location	Owner	Date Added	Risk Details	Risk Category	Init Sc	Cur Sc	Risk Resp	Treatment Actions / Controls	Tgt Sc	Review Date
747	Womens Health (Obstetrics & Maternity) WTH	Head of Midwifery	2/06/2017	<p>Title: Inadequate maternity facilities at Waitakere leading to increased clinical risk for mothers and babies and reduced experience for mothers</p> <p>Cause: Facility was not purpose built and upgrades have not kept pace with increased demand and complexity of the service. The unit has too few rooms with piped medical gases, the birthing rooms are too small, and the wards are separated by a public space.</p> <p>Effect: Infection risk from shared bathrooms Poor sound proofing in birthing rooms Privacy risk by transporting labouring women through public areas Clinical risk of managing complex births in two clinical areas</p> <p>Impact: Increased clinical concern for safety of mothers and babies Increased complaints from women and their families</p>	Clinical Quality (Pt Care / Safety / Experience)	4 x 3 4 x 3 = 12	4 x 4 4 x 3 = 12	Treat	<p>Control</p> <p>Build a purpose designed Maternity Unit on the Waitakere site</p> <p>Progress</p> <p>Included in Waitemata 2025 plan</p> <p>Due</p> <p>04/08/25</p>	4 x 1 = 4	30/04/2019
									<p>Control</p> <p>Review some interior layouts to create more usable space</p> <p>Due</p> <p>31/12/18</p>		