

# INSIGHT: A glimpse into Capital & Coast DHB

Quality  
Accounts  
2014/15

Welcome to our annual publication aimed at providing our community with examples of how we have been improving our services supporting their health needs during 2014/15.



Welcome

Kia  
Ora

Nau mai,  
haere mai

Bula  
vinaka

Malo ni

Malo  
e lelei

Talofa  
lava

Kia  
orana



Capital & Coast  
District Health Board  
ŪPOKO KI TE URU HAUORA

## What we do

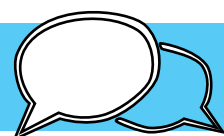
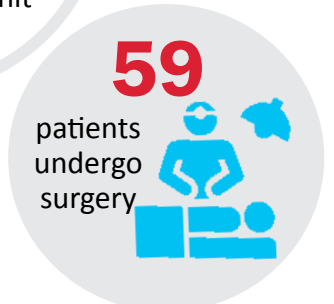
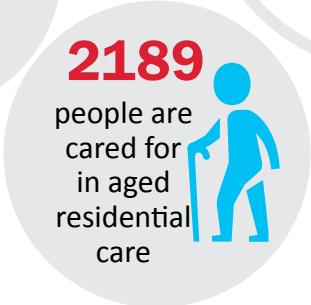
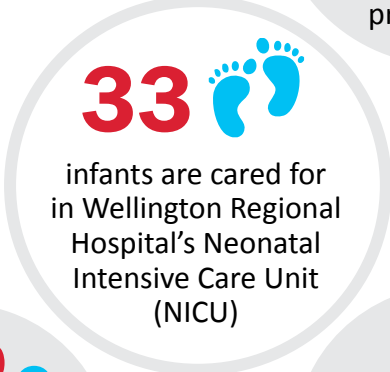
We receive funding to improve, promote and protect the health of the people within the Wellington, Porirua and Kapiti regions. We have an annual budget of more than \$900 million which we use to provide health services as well as contracting external providers, such as general practices, rest homes, and pharmacists, to deliver care.

Our district health board is the sixth largest in New Zealand with just over 300,000 people living in the district. We are also the leading provider of a number of specialist services, including neurosurgery, oncology, neonatal intensive care, and specialised mental health services, for the upper South and lower North Islands. We also provide specialist intellectual disability services for the whole country.

We operate the Wellington Regional Hospital, Kenepuru Community Hospital in Porirua, Kapiti Health Centre in Paraparaumu, and a large mental health campus based at Porirua. We also provide a range of community-based services including district nursing, rehabilitation services, social work, alcohol and drug services, and home support services. Over 4300 full-time equivalent staff work at Capital & Coast District Health Board.

The people of the Greater Wellington region enjoy, on average, better health, longer life spans, and lower rates of morbidity and mortality than many other parts of the country.

## On an average day:












If you have any feedback on how we can improve our services, email us at: [feedback@ccdhb.org.nz](mailto:feedback@ccdhb.org.nz)

# Health Targets







There are six national health targets set by the Ministry of Health to track how well district health boards are providing services to their communities. The targets include both preventative health and hospital service measures and are publically reported each quarter.

We have a number of programmes in place designed to help us meet the targets, however improving the target results will take an all of health sector approach. Because of this the DHB is building on its already strong relationship with primary and community based health care. We want to work proactively to ensure that people are getting the services, check-ups and information they need to help them to stay well.

HEALTH TARGET	Target	2014/15 Q4 Results	Achievement
 <p><b>INCREASED IMMUNISATION</b> The target is 95% of eight month olds have their primary course of immunisation at six weeks, three months and five months on time.</p>	95%	95%	 Achieved
 <p><b>IMPROVED ACCESS TO ELECTIVE SURGERY</b> The target is an increase in the volume of elective surgery by at least 4000 discharges per year.</p>	100%	101%	 Achieved
 <p><b>SHORTER STAYS IN EMERGENCY DEPARTMENTS</b> The target is 95% of patients will be admitted, discharged, or transferred from an emergency department (ED) within six hours.</p>	95%	95%	 Achieved
 <p><b>FASTER CANCER TREATMENT</b> The target is 85% of patients receive their first cancer treatment (or other management) within 62 days of being referred with a high suspicion of cancer and a need to be seen within two weeks.</p>	85%	81%	Good progress is being made
 <p><b>BETTER HELP FOR SMOKERS TO QUIT</b> The target is 95% of patients who smoke and are seen by a health practitioner in public hospitals are offered brief advice and support to quit smoking.</p>	95%	92%	Good progress is being made
<p>The target is 90% of patients who smoke and are seen by a health practitioner in primary care are offered brief advice and support to quit smoking.</p>	90%	88%	Good progress is being made
 <p><b>MORE HEART AND DIABETES CHECKS</b> The target is 90% of the eligible population will have had their cardiovascular risk assessed in the last five years.</p>	90%	89%	Good progress is being made

# Quality and Safety Markers

The Health Quality & Safety Commission is driving improvement of New Zealand's health care through the national patient safety campaign 'open for better care'. The quality and safety markers below help evaluate the success of the campaign nationally.

MARKER DEFINITION	NZ Goal	Jul to Sep 2014	Oct to Dec 2014	Jan to Mar 2015	Apr to Jun 2015	CCDHB comparison with NZ goal
<b>PREVENTING PATIENT FALLS:</b> Percentage of patients aged 75 and over (Māori and Pacific Islanders 55 and over) that are given a falls risk assessment.	90%	83%	83%	87%	92%	
<b>PREVENTING PATIENT FALLS:</b> Percentage of patients assessed as being at risk have an individualised care plan which addresses their falls risk.	90%	92%	96%	91%	95%	
<b>SAFE SURGERY:</b> Percentage of operations where all three parts of the surgical checklist were used.	90%	95%	99%	98%	99%	
<b>REDUCING SURGICAL SITE INFECTIONS:</b> Right antibiotic in the right dose - 2 grams or more cefazolin given or 1.5g or more of cefuroxime.	95%	-	99%	98%	98%	
<b>REDUCING SURGICAL SITE INFECTIONS:</b> Appropriate skin antisepsis in surgery using alcohol/chlorhex or alcohol/providone iodine.	100%	-	99%	100%	100%	
<b>REDUCING SURGICAL SITE INFECTIONS:</b> Antibiotic given (0-60 minutes before "knife to skin".	100%	99%	98%	96%	100%	
<b>IMPROVING HAND HYGIENE:</b> Percentage of opportunities for hand hygiene for health professionals.	80%	76%	76%	72%	79%	81% achieved in July-Sept 2015

# Improving health & disability services in your region

*An overview of Capital & Coast DHB's 2014/15 priorities*

## ZERO PATIENT HARM



### **Preventing falls is as important in hospital as it is in the community.**

A third of people aged over 65 will have a fall at least once a year. Someone who falls is then two to three times more likely to fall again within a year. The impact of falls is serious as people can lose confidence due to their fear of falling again.

Our falls prevention programme is making a difference, and harm caused from falls when people are in hospital is reducing. Last year we had seven months when no patients had a serious falls injury while in hospital.

Regular exercise is one of the best things you can do to help stand up to falls. ACC, Sports Wellington, and Wellington Free Ambulance are working with health professionals from hospital and in the community to focus on keeping people moving safely.

### **How you can stay safe**

- Be realistic about what you can do and ask for help when you need it.
- Wear well fitting, flat shoes and slippers with non-slip soles for increased stability.
- Don't walk around in socks or stockings.
- See a podiatrist or doctor if your feet are painful or swollen, or if you develop problems like bunions.
  - Keep active to maintain your strength and balance.
  - Make sure steps, stairs and walkways inside and outside are well lit and clear.

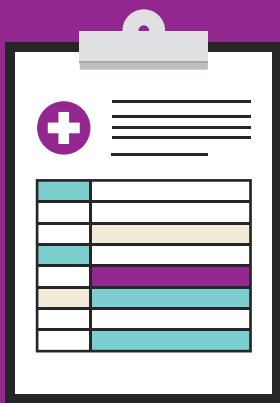
Every year falls make up over half of the serious harm events reported by NZ hospitals. During the period 1 July 2014 to 30 June 2015 Capital & Coast DHB had 27 serious and sentinel events where patients suffered harm while in hospital - seven of these events related to falls.

Our practice is to always communicate openly with patients and their whānau to acknowledge what has happened and to carry out a review to minimise the risk of these situations recurring.

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## PATIENT AND WHĀNAU CENTRED CARE



**Approximately half of New Zealanders have poor health literacy, which is the ability to obtain and understand basic health information.**

Children of parents with poor health literacy face even greater barriers to accessing the health care they need.

We reviewed how we communicate with the whānau of patients using our child health services and found the language is inconsistent and contains a lot of technical jargon.

For example, we talk about referring to a 'consultant' while GP practices use 'specialist'. We also noticed that if the specialist was referred to as Mr or Mrs, people often didn't understand they were a doctor.

We also walked from the front of the hospital through to the children's clinic – mirroring what children and their whānau do when they come to see us. It's a long walk and the clinic is not easy to locate or describe if people ask for directions.

We have rewritten the appointment letters using everyday words to make them easier to understand. Extra signage has been added to make the children's clinics easier to find. The learnings from this review will be applied to other services as well.

### How you can help

- If you are unable to attend your hospital appointment please phone the outpatient booking office on 04 806 0992 as soon as possible to reschedule.
- Write down any questions you have about your illness or treatment and bring these to your appointment.
- If you don't understand what the healthcare worker is saying ask for more information or for them to explain better.
- Ask questions and write down what you need to do next.



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## EFFECTIVE SERVICES



**Quicker and safer patient journeys that ensure faster access to specialist treatment is the intention behind a new best practice principle called Right Care, Right Now.**

We now aim for patients to be seen by specialists, such as a cardiologist, in the emergency department, and decide what treatment needs to happen within 90 minutes.

The sooner a definitive decision can be made, the better the outcome for the patient and the sooner the next person waiting in the emergency department can be seen.

This faster access helps us improve our performance against the 'Shorter Stays in Emergency Departments' national health target. The target is calculated from the time taken to treat and discharge patients in the emergency department, and the time taken for a patient to be admitted to a hospital ward.

In 2013/14 we achieved 87% of patients being seen within 6 hours, in 2014/15 this had risen to 92% - closing in on the national target of 95%.

### **What is 'Right Care, Right Now?'**

This is how we deliver care to patients in the emergency department:

Within 2 hours from the time you arrive at the emergency department the team will decide if you need to be seen by a specialist.

Within 90 minutes from that decision being made the specialist will come to the emergency department to assess you and confirm what treatment you require.

Within 1 hour of the assessment you will be transferred to a hospital ward if you need to be admitted.

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## REDUCED HEALTH DISPARITIES



**Thousands more children are now enrolled and accessing free dental care.**

In July 2014, access to free dental health services for Porirua children aged 0-5 was low.

We matched data from local GPs with that of the Bee Healthy Regional Dental Service with the result that nearly 1800 more children are now enrolled and receiving dental care. The matching exercise is being carried out in Kapiti, Hutt Valley and Wellington.

Babies born in the Wellington Region are now being enrolled with the Bee Healthy Regional Dental Service at birth, along with a number of other key health services such as a GP practice.

With increased enrolment numbers more dental therapists have been employed, including nine new graduates.

### **Ways you can enrol your child**

1. Complete an online enrolment form at [www.beehealthy.org.nz](http://www.beehealthy.org.nz).
2. Call 0800 TALK TEETH (0800 825 583) and enrol over the phone.
3. Visit your nearest Bee Healthy Dental Clinic and complete an enrolment form.

If you have recently moved to the region, changed address and need to update your details, or can't remember if your child is enrolled, call 0800 TALK TEETH (0800 825 583).



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## REGIONAL COLLABORATION



**To improve patient care the Wairarapa, Hutt Valley and Capital & Coast District Health Boards' mental health, addiction and intellectual disability services now operate as a single service.**

This is the first time district health boards have worked together to combine their individual mental health services and is a flagship innovation for New Zealand.

By integrating services we have been able to provide more help to people in the greater Wellington region. For example the younger persons and addictions group is now caring for clients up to 25 years of age. Previously this service was only available to people aged 17-19 years old.

Another example is Te Whare Ra Uta, the psychogeriatric unit located at Porirua. This service was previously only available to people living in the Capital & Coast DHB region. The service has been expanded and people from Hutt Valley are now able to access specialist mental health care for older people.

Through regional collaboration we have been able to create a service with no boundaries so clients can access the care they need, irrespective of where in the region they live or where the service is provided.

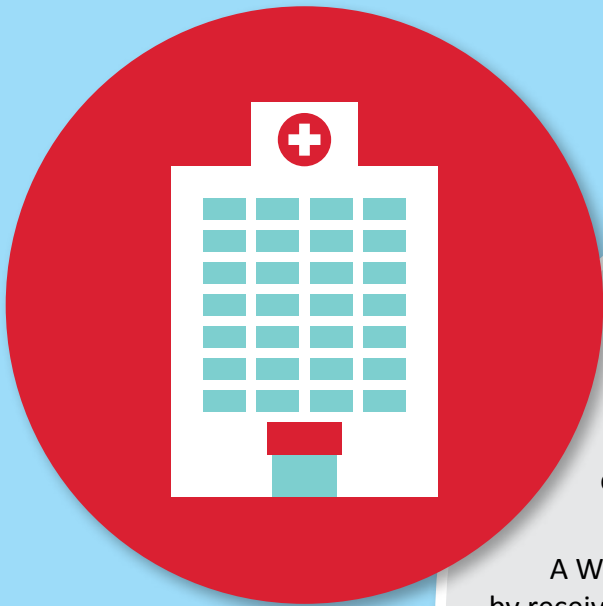
### **If you need help**

If you are concerned about your own or a loved ones mental wellbeing, you can phone 0800 745 477 any time of the day or night for support or advice.

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## OPTIMUM PERFORMANCE



A new initiative is making it easier for patients to get health care closer to their home rather than travelling to hospital for treatment.

The initiative called 'primary options for acute care' provides GPs with funding, training and equipment to treat conditions, such as cellulitis, in the community.

A Waikanae resident recently benefited from this initiative by receiving intravenous antibiotics for a skin infection at her GP clinic. Whereas previously she would have travelled to Wellington Regional Hospital for three days in a row to receive treatment.

The ability to be treated close to home is more convenient for the patient and their caregiver. It also frees up valuable hospital resources to treat other patients who have more complex conditions.

Primary options for acute care services are available in Hutt Valley, Wairarapa and Capital & Coast regions for patients who meet the eligibility criteria.

### What you can do

- See your GP early - don't wait for your condition to worsen as you could unnecessarily end up in hospital.
- Call Healthline on 0800 611 116 for free advice from a nurse to help you decide if you need to see a health professional.
  - If you require treatment you've previously received at hospital, ask your GP if there is an option for this to be provided in the community.