

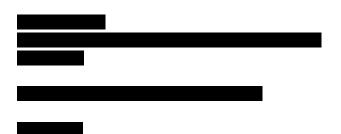
# **CORPORATE OFFICE**

Level 1 32 Oxford Terrace Christchurch Central CHRISTCHURCH 8011

Telephone: 0064 3 364 4160 Fax: 0064 3 364 4165

carolyn.gullery@cdhb.health.nz

20 March 2019



#### **RE Official information request CDHB 9992**

We refer to your email dated 4 December 2018 requesting the following information under the Official Information Act from Canterbury DHB.

- All statistical information related to staff incidents at Hillmorton Hospital over the least three financial years?
  - Please break it down by incident and by financial year.

The information should include, but not be limited to, all reported incidents at Hillmorton, separated into categories in your incident management system (such as physical assaults, verbal abuse and sexual threats).

I refer to the email from Kathleen Smitheram dated 5<sup>th</sup> December 2018 with the attachment for our previous response CDHB9931 & WCDHB9201. This email also included a link to a previous response CDHB 9835 (https://www.cdhb.health.nz/?s=9835)

We believe that this information substantively addresses your question on this topic.

 Please also include the total of incident-related leave taken by Hillmorton staff and the number of occasions police have been called because of incidents. Please present this data by financial year, over the last three complete financial years.

I refer to the email from Kathleen Smitheram dated 5<sup>th</sup> December 2018 with the attachment for our previous response CDHB 9867. This attachment covers incident related leave "loss time injury" on page 2. Also included is the Canterbury DHB policy related to staff making a complaint to Police.

Since the adoption of the Safety First reporting system, we have developed a strong reporting culture for all types of adverse incidents. Staff are entitled to make a complaint with the Police but the incident reporting system does not hold data concerning the number of times the Police were called to assist or intervene in any of the incidents.

To retrieve this would require use of substantial public resources to undertake research and collation of data against each individual patient file. We are therefore declining this question under section 18(f) of the Official Information Act.

We believe these previous responses give sufficient data to answer your query. However if you would like this response updated (such as year to date) please contact me as soon as possible.

 Please also provide correspondence sent and received by Toni Gutschlag and David Meates since November 1 that relates to staff and patient safety at Hillmorton. The correspondence should include, but not be limited to, emails from unions and complaints from staff.

Please find attached as **Appendix 1** correspondence sent and received by Toni Gutschlag and David Meates since November 1 2018 that relates to staff and patient safety at Hillmorton.

**Please note**: we have redacted or withheld information under the following sections of the Official Information Act.

Section 9(2)(a) "i.e. to protect the privacy of natural persons, including that of deceased natural persons".

Section 9(2)(ba)(i) "i.e. to protect information which is subject to an obligation of confidence or which any person has been compelled to provide under the authority of any enactment, where the making available of the information – would be likely to prejudice the supply of similar information, or information from the same source, and it is in the public interest that such information should continue to be supplied."

If you disagree with our decision to withhold information you may, under section 28(3) of the Official Information Act, seek an investigation and review of our decision from the Ombudsman. Information about how to make a complaint is available at <a href="https://www.Ombudsman.parliament.nz">www.Ombudsman.parliament.nz</a>; or Freephone 0800 802 602.

I trust that this satisfies your interest in this matter.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely

Carolyn Gullery

Executive Director

**Planning, Funding & Decision Support** 

Section 9(2)(a)		

Section 9(2)(a)			
))			

From:

Toni Gutschlag

Sent:

Monday, 19 November 2018 8:16 p.m.

To:

David Meates; Mary Gordon (Executive Director of Nursing); Michael Frampton

Subject:

Fwd: Invite for nurses to meet CEO David Meates

Sent from my iPhone

Begin forwarded message:

From: Section 9(2)(a)

**Date:** 19 November 2018 at 7:40:28 PM NZDT

To: SMHS - All Staff < SMHS-AllStaff@cdhb.health.nz> **Subject: Invite for nurses to meet CEO David Meates** 

Dear Mental Health Colleagues,

A group of your colleagues have been meeting for the past few months to address the recognised and ongoing violence towards nurses here in CDHB including our Specialist Mental Health areas.

We recently progressed this issue by meeting with Chief Executive Officer David Meates, Director of Nursing Mary Gordon, Dr John Woods Chair of CDHB and Michael Frampton from the People and Capabilities team.

We expressed our concerns at the ongoing violence nurses are subjected to daily at Hillmorton Hospital. Our approach appeared to be warmly received by David Meates and he has offered to be available to ALL Nursing staff at Hillmorton for two meetings. During the meeting he will be available for questions, and we encourage you to bring your questions to the meeting. Here, we can voice our concerns to him personally in a safe environment without fear of repercussions.

He is here to "hear your voices" and to "personally hear your stories".

DATES for meetings at Hillmorton Hospital Lincoln Lounge with David Meates CEO CDHB are Monday 3rd December 1000hrs. Friday 7th December 1400hrs.

Below is a list of subjects discussed at our previous meeting with CEO David Meates:

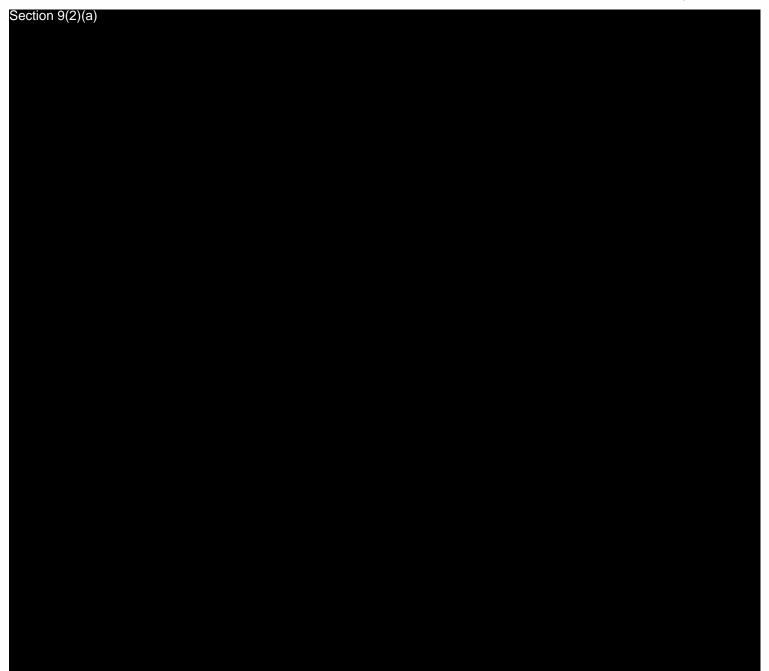
- \* If we are working towards "Eliminating seclusion by 2020", what realistic, proven alternative strategies will be provided to keep nurses and other staff safe? Will our buildings be purpose built in time for this?
- \* Staff fears there will be further collateral damage from assaults on nurses through pushing ahead the reduction of seclusion without safe alternatives.
- \* What will happen to those patients who have incorporated wishes to be secluded into their own care plan and advanced directives, for when they become unwell?
- \* Current culture of fear and hopelessness among staff affecting staff retention, this needs clear investigation.
- \* Staff fears of speaking out after incidents, culture of incidences being minimised and that the experience of violence is an expectation of the role.

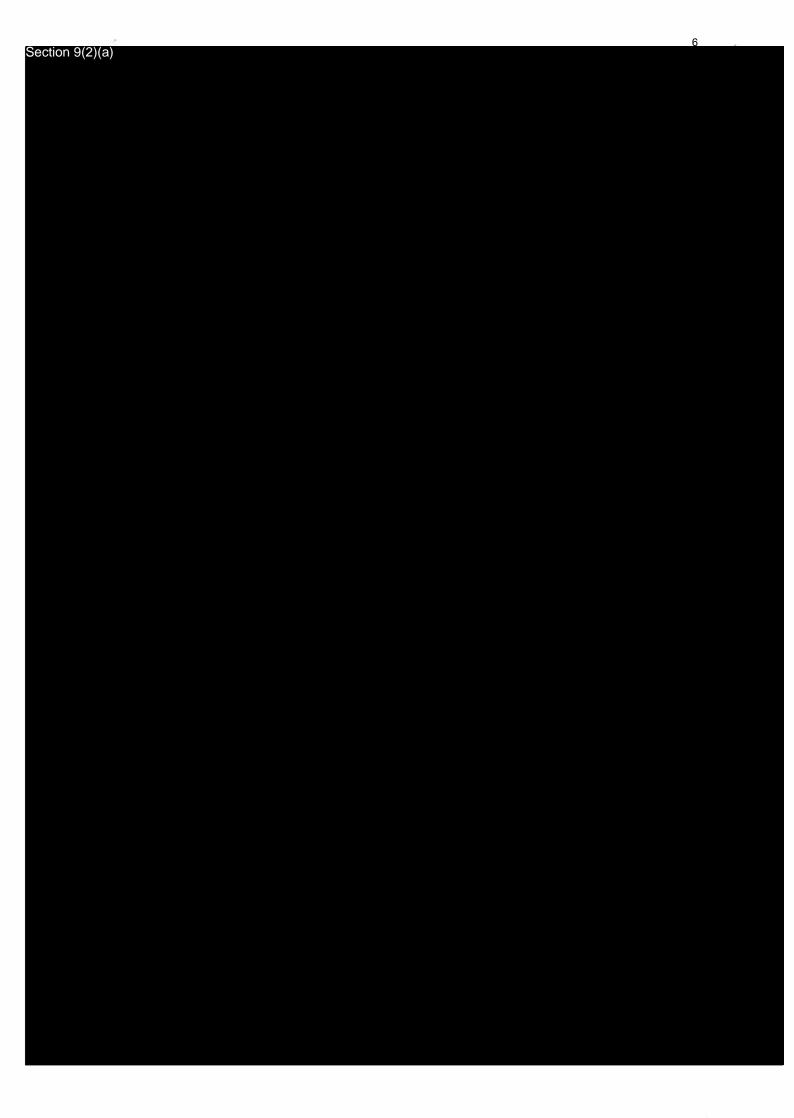
- \* The breakdown in communication and transparency between management and staff, there 4 is a need for nurses to be on executive boards
- \* Worksafe involvement in assessments and reporting of harm The role of WellNZ/ACC in accident claims, when is it safe to return to work. Clarification of light duties.
- \* Cumulative symptoms of trauma and PTSD among nursing staff and vicarious trauma experienced by their whanau
- \* CDHB Health and Safety reporting transparency is needed in relation to the reporting of all assaults (verbal, physical and threats).

Balancing the rights of clients with the rights of workers, clarity is required regarding rights on both sides.

\* What "action" is being taken now to ensure staff safety?

as i sion for sion fo We encourage you ALL to make yourself available for this opportunity. This is our future and we would love to see safety of staff encouraged to bring back our passion for this unique





Section 9(2)(a)		

From:

Stephanie Manning

Sent:

Wednesday, 5 December 2018 11:23 a.m.

To:

**David Meates** 

Cc:

Michael Frampton; Mark Lewis (People & Capability); Tania Beynon

Subject:

FW: CEO meeting

David,

I received the email below from Les this morning and he and Michael have asked me to forward it to you. Toni is also aware that I'm sending it to you.

Kind Regards Steph

From: Section 9(2)(a)

Sent: Wednesday, 5 December 2018 8:50 a.m.

To: Stephanie Manning

Cc: Section 9(2)(a)
Subject: CEO meeting

Toni Gutschlag

Dear David

NUPE is concerned at the ongoing serious assaults which continue to occur at Hillmorton Hospital. This also includes the Seager unit based at Princess Margaret Hospital. NUPE has been continually raising these issues for many years and it is only when these assaults reach the media then the DHB has a kneejerk reaction and does something. Too often we hear "it goes with the job". Well that is not good enough and there needs to be a long term solution to address theses assaults. At present any interventions are usually short term solutions to ensure staff safety but doesn't take long to slip back to the status quo.

We realise the DHB cannot prevent every assault from occurring but can certainly do a lot more than present to mitigate the risk. We believe that a combined effort between the unions and the DHB with a genuine commitment from the DHB we could reach an outcome which would give long term permanent protection for our members and other staff. I don't believe there has ever been an approach from the DHB to engage with the unions to in an attempt to seek a solution and as important stakeholders you need to involve and work with us more for the safety of staff.

I have spoken with Lead Organisers from NZNO and PSA and we all agree on a bi-partisan approach in an attempt to resolve these issues. In the first instance we would seek a meeting with you and your team to get matters rolling and look forward to your early response.

Kind regards



Secti

Section 9(2)(a)

National Union of Public Employees
Trade Union Centre
68 Langdons Road, Papanui
P O Box 13032
CHRISTCHURCH 8053

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Website: www.nupe.org.nz co-operation without compromise

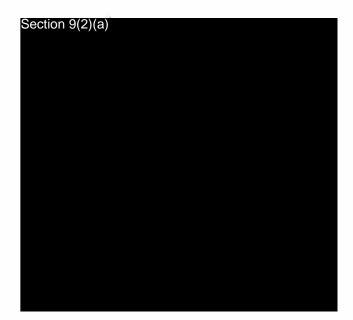
### I do not work Wednesdays so any emails received on a Wednesday will be read the following day

This email message and any attachment(s) is intended solely for the addressee(s) named above. The information it contains is confidential and may be legally privileged. Unauthorised use of the message, or and and a small or the contract of the contrac the information it contains, may be unlawful. If you have received this message by mistake please call the sender immediately on 03 3773582 or notify us by return email and erase the original message and attachments.

The National Union of Public Employees accepts no responsibility for changes made to this email or to any attachments after transmission from the office.

Thank you.

Section 9(2)(a)	
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Section 9(2)(a)	

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ction 9(2)(a) & 9(2)(ba)(i)



RELEASED UNDER THE OFFICIAL INFORMATION

From: @psa.org.nz> Section 9(2)(a) Sent: Thursday, 6 December 2018 4:41 p.m. Michael Frampton; 'secretary@apex.org.nz'; Section @nzrda.org.nz'; To: Section 9(2)(a) @meras.co.nz'; Se @asms.nz'; Section ; Alice Rabbidge; Bernard Timings; Bernice Marra; Beth Shearer; Section 9(2)(a) ; Evon Currie; Felicity Dan Coward; Section 9(2)(a) Woodham; Heather Gray (Director of Nursing); Section 9(2)(a) ; 'John Miller'; Section ; Kirsten Beynon; Section ; Mark Lewis (People Pauline Clark; Section 9(2)(a) & Capability); Section 9(2)(a) ; Stephanie Manning; Stu Bigwood; Toni Gutschlag; Win McDonald; Section 9(2); Se @nupe.org.nz'; David Meates; Mary Gordon (Executive Director of Nursing); Tania Beynon RE: Keeping our People Safe and Well: Union Engagement Subject:

Hello Michael

Importance:

I fully understand the CDHB's legitimate desire to ensure that all unions are fully engaged in this process. I endorse this sentiment and believe we need to make this a genuine multi-union, multi-disciplinary approach.

To that end, and perhaps stating the obvious, I ask that you arrange another meeting as soon as possible and prior to the end of 2018. The issue is both extremely important and very urgent.

The PSA looks forward to receiving an invite to another meeting in the very near future.

Are we now reverting to a regular BAG meeting? There are ongoing issues to discuss.

High

Kind regards

Importance: High

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----Original Appointment----
From: Sarah.Connell@cdhb.health.nz < Sarah.Connell@cdhb.health.nz > On Behalf Of Michael Frampton
Sent: Thursday, 6 December 2018 4:19 PM
To: Section @apex.org.nz'; Section @nzrda.org.nz'; Section 9(2)(a) @meras.co.nz'; Se @asms.nz'; Section
Alice Rabbidge; Section 9(2)(a); Bernard Timings; Bernice Marra; Beth Shearer; Section 9(2)(a)
Section 9(2)(a); Dan Coward; Section 9(2)(a)
                                                ; Evon Currie; Felicity Woodham; Heather Gray
(Director of Nursing); Section 9(2)(a)
                                                              '; 'John Miller'; Section; Kirsten Beynon;
Section; Mark Lewis (People & Capability); Section 9(2)(a)
                                                                       ; Pauline Clark; Section 9(2)(a)
Section: Stephanie Manning; Stu Bigwood; Toni Gutschlag; Win McDonald; Section 9(2)(a); Se @nupe.org.nz';
David Meates; Mary Gordon (Executive Director of Nursing); Tania Beynon
Subject: Canceled: Keeping our People Safe and Well: Union Engagement
When: Tuesday, 11 December 2018 3:00 PM-4:30 PM (UTC+12:00) Auckland, Wellington.
Where: Room 211, Level 2, CDHB Corporate Building, 32 Oxford Terrace
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Further to my note below, I've received feedback from some of you that next Tuesday is not feasible, including because one of our union partners is in collective bargaining. We're committed to ensuring that we have all of our union partners involved in this conversation and therefore please expect a revised invite early tomorrow as a priority.

My apologies for any inconvenience caused and I look forward to meeting with you next week.

Kind Regards Michael

Michael Frampton

Chief People Officer

Canterbury District Health Board and West Coast District Health Board

T: 03 364 4138 | M: Section E: michael.frampton@cdhb.health.nz

Level 1, Corporate Office, 32 Oxford Terrace | PO Box 1600 | Christchurch | New Zealand

www.cdhb.health.nz | www.wcdhb.health.nz

#### Tēnā koutou

I'd like to continue the conversation about how we partner together to deliver on our shared commitment to the health, safety and wellbeing of our people, your members.

Some weeks ago, you were invited to be involved in the initial stages of the development and implementation of the Canterbury DHB and West Coast DHB Worker Participation and Engagement system. More than 50 of our staff and union partner representatives participated in a workshop held two weeks ago to commence this work with focus and urgency.

You'll also be aware of the recent serious incidents within our Specialist Mental Health Service at Hillmorton Hospital. A number of your organisations have requested that we work collectively and in partnership to step through the challenges that our mental health services in particular face.

It's in this context that I'm therefore proposing to hold a meeting on Tuesday, 11 December 2018, focussed on how we can collectively work together to continue improving the safety of the work environment for our people.

The meeting will be attended by David Meates, myself and other members of the DHB's Senior Leadership Team.

Meeting details:

Date:

11 December 2018

Time:

3pm to 4:30pm

Location:

Room 211, Level 2, CDHB Corporate Building, 32 Oxford Terrace

I apologise for the short notice but I hope that you can appreciate the importance of focussing our discussion on those matters which are most important to us right now. Please confirm your attendance by acceptance of this invitation.

Ngā mihi maioha

Michael

Michael Frampton Chief People Officer

Canterbury District Health Board and West Coast District Health Board

T: 03 364 4138 | M: Section E: michael.frampton@cdhb.health.nz

Level 1, Corporate Office, 32 Oxford Terrace | PO Box 1600 | Christchurch | New Zealand

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Section 9(2)(a) & 9(2)(ba)(i)	

From:

Stephanie Manning

Sent:

Friday, 7 December 2018 9:38 a.m.

To:

David Meates; Mary Gordon (Executive Director of Nursing)

Cc:

Michael Frampton; Tania Beynon; Mark Lewis (People & Capability)

Subject:

FW: Today's SMHS meetings

Importance:

High

David and Mary,

Please see note below from Section 9(2) at the PSA regarding the meeting set for 2pm today with SMHS staff (I've noted he spelt your name wrong David and therefore you may not have received it).

Tania and I are happy to draft a response on your behalf if that would be helpful, noting the complexity of the situation and the context which led to this meeting which Anthony may not be aware of.

Please let me know if a draft response from us would be helpful.

**Thanks** Steph

From: Section 9(2)(a)

@psa.org.nz]

Sent: Friday, 7 December 2018 9:18 a.m.

To: david.meater@cdhb.health.nz

Cc: Stephanie Manning; Michael Frampton; Warwick Jones; Se @nupe.org.nz'; Section 9(2)(a) '; John Miller; Toni

Gutschlag

Subject: Today's SMHS meetings

Importance: High

Hello David

I have received a copy of the email below, regarding the meeting you are holding with nursing staff today.

The PSA is fully supportive of your desire to interact with staff regarding the recent serious assault incidents at Hillmorton, and how the CDHB and staff can work together to eliminate/reduce the incidents of violence by patients against staff, other patients and whanau.

However our concern is that a key issue seems to have been lost: violence against staff is not solely a nursing concern. The PSA notes:

- Social Workers and Occupational Therapists are among the staff who are now receiving compulsory restraint training. As the main union for these staff, we are aware of a number of incidents or violence or near violence against Allied Health staff. Yet their voice is not being heard today.
- 2 The Pukenga Atawhai staff are a pivotal part of de-escalation strategies in SMHS. Again, this means they are constantly in situations where violence may occur against them. Yet without them, the number of violent assaults would be significantly higher. Yet because they are not deemed to be nursing staff, again their voice is not being heard today.
- 3 Clerical staff have been caught up in a number of incidents, or have witnessed them. This has an effect on them as well.
- 4 Finally, PSA would note that, while the majority of nurses are NZNO members, both PSA and NUPE do represent these staff; and between us we represent the vast majority of your Allied Health and Clerical

staff. To this end, it is disappointing that today's meetings have not been opened up to PSA. I expect that NUPE will be equally disappointed in this exclusion.

David, on behalf of our members – Nursing, Allied Health and Clerical – we ask both that today's meeting is opened up to **ALL** staff, and that you invite other unions to be in attendance. We respect the original reasons for the meeting, but clearly events have progressed. We appreciate that the DHB has agreed to our request for a multi-union, multi-disciplinary meeting next week, and we welcome this. But a combined approach needs to be the approach from the beginning: that includes today's meeting.

Please call me on Section 9(2) if you need to discuss this.

Kind regards

From: Susan Fitzmaurice On Behalf Of David Meates

Sent: Thursday, 6 December 2018 2:02 p.m.

To: SMHS - All Staff Section 9(2)(a)

Subject: Message for all SMHS Nursing staff

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff including senior nurses to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current issues that we are facing. As the majority of nurses are NZNO members we have an expectation that they would be present to support their members.

I look forward to meeting on Friday at 2pm.

David Meates, MNZM
Chief Executive | Canterbury District Health Board and West Coast District Health Board
T: 03 364 4110 (ext 62110) | E: david.meates@cdhb.health.nz
P O Box 1600, Christchurch 8140
www.cdhb.health.nz | www.westcoastdhb.org.nz



REIERSED UNDER THE OFFICIAL III

From:

Karalyn van Deursen

Sent:

Friday, 7 December 2018 10:26 p.m.

To:

Section @nzno.org.nz

Cc:

David Meates; Toni Gutschlag

Subject:

FW: Message from David Meates to all Specialist Mental Health Staff

Importance:

High

And fyi, this was a note that went out to all staff late today.

From: Samantha Chapman

Sent: Friday, 7 December 2018 6:29 p.m.

Subject: Message from David Meates to all Specialist Mental Health Staff

**Importance:** High

Dear mental health colleagues,

Please see below a note from our Chief Executive, David Meates.

## A message from David Meates to all Specialist Mental Health Staff:

This afternoon I had another meeting with nursing staff where a range of issues were discussed. I want to make it clear, that while today's meeting was with nurses, it is well understood that the issues relating to violence are of concern to all staff members in the Mental Health Services, and are not unique to nursing. There are a range of upcoming forums that are being organised for all Hillmorton staff regardless of your role. Details will be sent out shortly.

I want to reiterate that violence against any staff member in any part of the organisation is never ok, and we are actively working through a range of options to see how we can make our Specialist Mental Health services a safer place for everyone.

-ENDS-

Best regards,

#### Samantha Chapman

Senior Communications Advisor - mental health Canterbury District Health Board Corporate Office, 32 Oxford Terrace, Christchurch

M: Section 9(2) E: samantha.chapman@cdhb.health.nz

















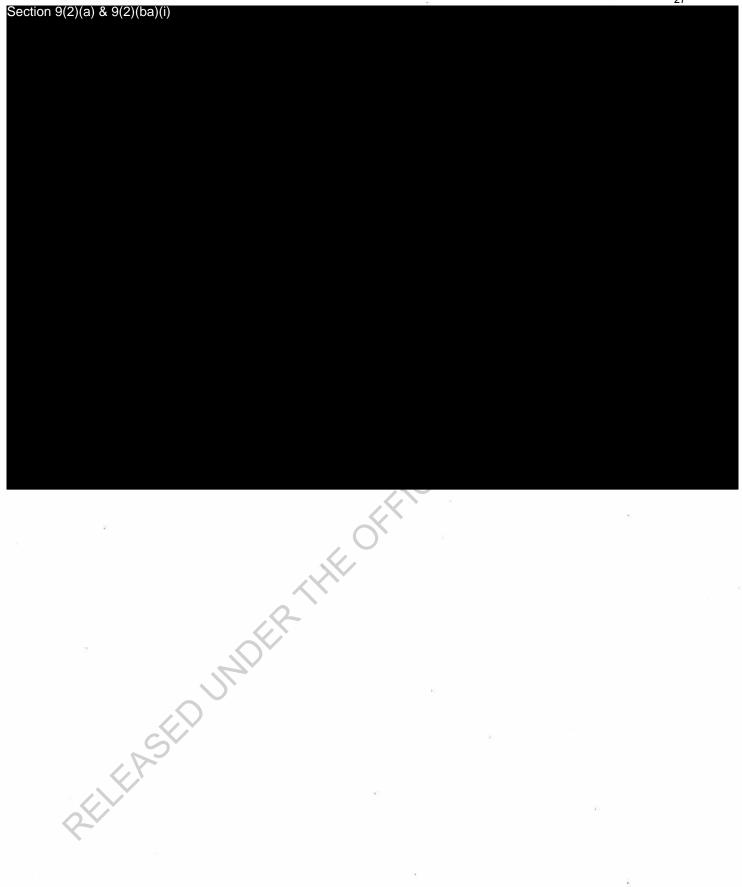




Section 9(2)(a) & 9(2)(ba)(i)		

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Section 9(2)(a) & 9(2)(ba)(i)		



PAELER SED INDER THE OFFICIAL INFORMATION ACT

From:	David Meates
Sent:	Saturday, 15 December 2018 6:11 a.m.
To:	
Cc:	Toni Gutschlag;
Subject:	Re: Excellent feature article in the Press today
	,
	·
Agree. This is not a bad article th	at is at least balanced. The time spent with has paid off
Sent from my iPhone	C)
> On 15/12/2018, at 5:35 AM,	wrote:
> I think the walk around with >	was time well-spent.
> http://readnow.isentia.com/Te >	mp/36489/1051615536.pdf
>	
> <1051615536.pdf>	
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RELEASED	

REFERSED UNDER THE OFFICIAL INFORMATION ACT

<u></u>	<del> </del>
From:	on behalf of David Meates
Sent:	Friday, 14 December 2018 10:46 a.m.
To:	
Cc:	; Toni Gutschlag;
Subject:	RE: Re: WorkSafe meeting [UNCLASSIFIED]

Thank you for providing confirmation of your visit to Hillmorton at 09.00am on Monday 17 December 2018. We look forward to working collaboratively with you to address the health and safety challenges in various facilities operated by Canterbury DHB, with a particular focus on Hillmorton Hospital and Princess Margaret Hospital. Toni Gutschlag (General Manager Mental Health Services) and (Head of Wellbeing Health and Safety) are working though the arrangements to ensure you are supported and get the information you require.

You have noted in your email that you have emailed Toni Gutschlag with the outline of your assessment. However, I understand from Toni that she did not receive this email, though she has now received your appointment.

Thank you for providing WorkSafe's summary of the meeting held 5<sup>th</sup> April 2018. As a matter of record, I would like to clarify the following based on our records:

- The meeting WorkSafe attended was with the Hillmorton Safe Staffing Group. This was at the request of NUPE, PSA and NZNO Unions to clarify WorkSafe's monitoring and notification procedures. This is not one of our Health and Safety Committees, but rather a bi-partisan action group that is set up through the Nursing Collective Agreement (MECA). This group was established to inform the staffing and resourcing of Specialist Mental Health Services (SMHS). As part of this work, Unions and staff work on issues of mutual interest and this has included discussions about staff assaults.
- During this meeting we understand that WorkSafe offered to present to the Canterbury DHB Board Chair.
- Following the meeting NUPE provided a summary of the meeting to the Board and noted that WorkSafe was willing to meet with the Board.
- The Board Secretary has no record of a formal request from WorkSafe for a meeting.

To avoid future confusion over WorkSafe visits and meeting requests, I would ask that:

- As agreed, all future communications in relation to the SMHS Assessment are via both Toni Gutschlag and (Head of Wellbeing, Health and Safety); and
- All other future communications and meeting requests between WorkSafe and CDHB are via and (Chief People Officer), who will ensure the appropriate arrangements are made expeditiously.

The Board is looking forward to meeting with Worksafe in the new year.

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



Values - A Matou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

From:

Sent: Tuesday, 11 December 2018 12:32 p.m.

To: David Meates

Cc:

**Subject:** FW: Re: WorkSafe meeting [UNCLASSIFIED]

Importance: High

Kia ora David

Firstly Jo and I would like to thank you and your team for making the time to meet with us last Thursday 6<sup>th</sup> of December.

It was acknowledged WorkSafe and the Christchurch District Health Board are in agreement to work collaboratively to address the health and safety risks in various facilities within Christchurch in particular Hillmorton Hospital and Princess Margaret Hospital. It was also agreed that WorkSafe and The Christchurch District Health Board will coordinate media responses to ensure our messages are aligned. We look forward to fostering a relationship of open communication and co-operation to ensure all workers return home after work happy and safe.

As requested I have attached a summary of the meeting that took place in April earlier this year for your records.

It has been acknowledged there is an increased number of assaults of workers within Hillmorton Hospital in particular in the Te Awakura Unit and the Assessment, Treatment and Rehabilitation Unit. WorkSafe will now be conducting a number of workplace assessments, one of these will be prior to Christmas 2018 and respond as per its findings.

Our initial assessment will be looking at and understanding:-

- The organisational structure of Specialist Mental Health Services division.
- Workforce composition and size.
- Facility familiarisation in particular Te Awakura and AT&R Units
- identification of critical/key risks and what controls are in place.

In successive co-ordinated assessments in the new year we will also be reviewing:-

- Officer due diligence, to assess how Officers monitor and evaluate health and safety within the Organisation.
- Review worker engagement and participation processes.
- Review health and safety reporting systems

We may also ask that a Health and Safety Representative is made available for an Inspector to speak to on the day of the assessment. I have been in contact with Toni Gutschlag and we have arranged to attend Hillmorton at 09:00 a.m. on Monday 17<sup>th</sup> of December next week. I have emailed Toni with the outline of our assessment above.

I have supplied the link below of a guidance document for Directors you may find useful. <a href="https://worksafe.govt.nz/dmsdocument/860-health-and-safety-guide-good-governance-for-directors">https://worksafe.govt.nz/dmsdocument/860-health-and-safety-guide-good-governance-for-directors</a>

Ngā mihi nui

# Canterbury & West Coast General Inspectorate

2 Degrees House Level 2 351 Lincoln Road Addington Christchurch 8024



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RELEASED UNDER THE OFFICIAL INFORMATION ACT

From: Sent: To: Cc: Subject:	David Meates Thursdav. 13 December 2018 10:58 a.m.  Toni Gutschlag; Re: The Press:  comments/petition
	Mary's views. I am concerned that we get / allow fear to become contagious and aff and therefore problems become worse
Sent from my iPhone	
> On 13/12/2018, at 10:54 AM,	wrote:
> Do you want to comment? >	
>Original Message > From:	REMITTED
> Sent: Thursday, 13 December 2 > To: > Subject: The Press:	018 10:40 a.m. comments/petition
> > Hi	periments, pediatri
> Do you want to provide commo wouldn't want people knew	
	hed by Christchurch man Paul Isaacs. Port Hills MP Ruth Dyson has agreed to deliver quiry into assaults on staff at Hillmorton.
	ent? I discussed it in general with Toni the other day, but will probably include both oday.
> If you're able to provide somet	hing by 3pm that would be wonderful.
> Cheers,	
>	
> Sent from my iPhone	
> The information contained in to not the intended recipient, any unattached files is unauthorised. The communicated without the writt advise the sender immediately be	

REFERSED INTERTHE OFFICIAL INFORMATION ACT

From:	David Meates
Sent:	Wednesday, 5 December 2018 10:01 p.r
To:	
Cc:	Toni Gutschlag;
Subject:	Re: Nursing safety

Dear

When we met I was very clear that I was really happy to meet with nurses to both listen and hear the concerns and to ensure that nurses were being heard and that the organisation was hearing the concerns and fears. I was deeply concerned that there appeared to be a range of nursing roles that seem to be being excluded from conversations and that was never my intent.

Given the issues and concerns being raised it is really important that I am hearing all the nursing views as that is where most of the solutions will come from by all of us making this a great place to work. Most of the nurses in mental health are also NZNO members and we have been working really hard with NZNO to solve problems and create solutions and hence I would have an expectation as representatives of nursing are part of discussions about what needs to happen to improve things.

A divided nursing workforce is not conducive to a strong healthy culture that is required if we are going to make mental health services safe for everyone to work in.

My intent was to enable a nursing only forum (seperate from medical, allied health and support staff) to ensure that all nurses are heard.

The more that professional groups are divided makes it more difficult to ensure that we are progressing solutions urgently that will help with the current situation.

I have a number of additional forums scheduled for other staff groups to ensure that there issues and concerns are also heard. These are occurring because I had agreed to some nursing only forums.

I have a nursing workforce in mental health that are facing huge challenges and are under immense pressure. I am totally committed to working through and rapidly implementing appropriate solutions and to do that I do need all nurses feeling that they can be part of that.

I am absolutely committed that there will be no consequences for staff and would be very concerned if that was a message being promoted.

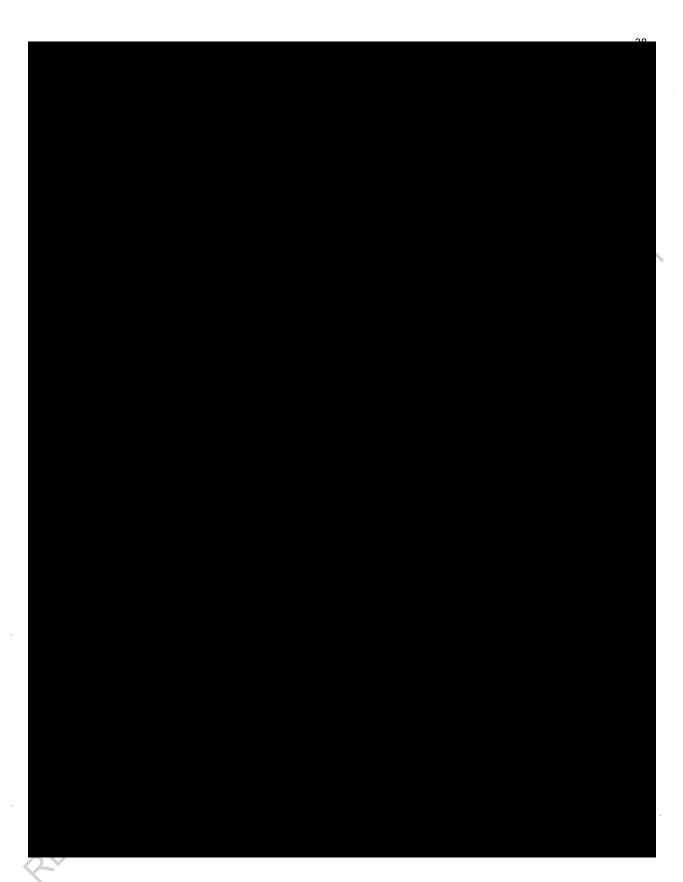
There are already a wide range of views within nursing on what options or solutions exist. CNS, CNE, CTCs and CNMs are ALL registered nurses and are clinical roles.

Regards

David

Sent from my iPhone

On 5/12/2018, at 8:10 PM,	wrote:



From: Sent: To: Cc: Subject:	David Meates Tuesday, 4 December 2018 5:57 p.m. Toni Gutschlag; Re: Interview with	
After meeting		
Sent from my iPhone		
> On 4/12/2018, at 5:18 PM, > > Sam, if you could book a room > > I've told there could be s	that would be fab.  some waiting involved, as the meeting with nurses	wrote:
till 5 if anything like the last one.		ON.
	ew on Friday morning, before the next meeting tak	es place – what are your
> > > > > > > > > > > > > > > > > > >	OFFICIAL.	
	ADER	
RELEASED		

PETER SED INDER THE OFFICIAL MED SED INDER THE O

From:

**David Meates** 

Sent:

Monday, 3 December 2018 1:53 p.m.

To:

Cc:

Toni Gutschlag;

Subject:

Re: NZNO - Communication and Representation

Will ask

to arrange meeting ASAP. I think that there were some confused communications today.

Regards David

Sent from my iPhone

On 3/12/2018, at 1:45 PM,

wrote:

Kia ora David

We would like to meet regarding recent meetings with yourself and NZNO delegates and representatives. We have no issue with delegates organising to meet but all parties need to be transparent and communicate arrangements and outcomes of such meetings.

Your meeting this morning with nurses has cause considerable collateral damage, mostly me getting emails from your allied health employees accusing NZNO of excluding workers who are also effected by current safety issues.

We believe you have a responsibility to engage fully with NZNO around agreements and commitments made to NZNO representatives and wish to discuss how this will happen.

Naku noa na

www.nzno.org.nz

New Zealand Nurses Organisation | PO Box 4102 | Christchurch

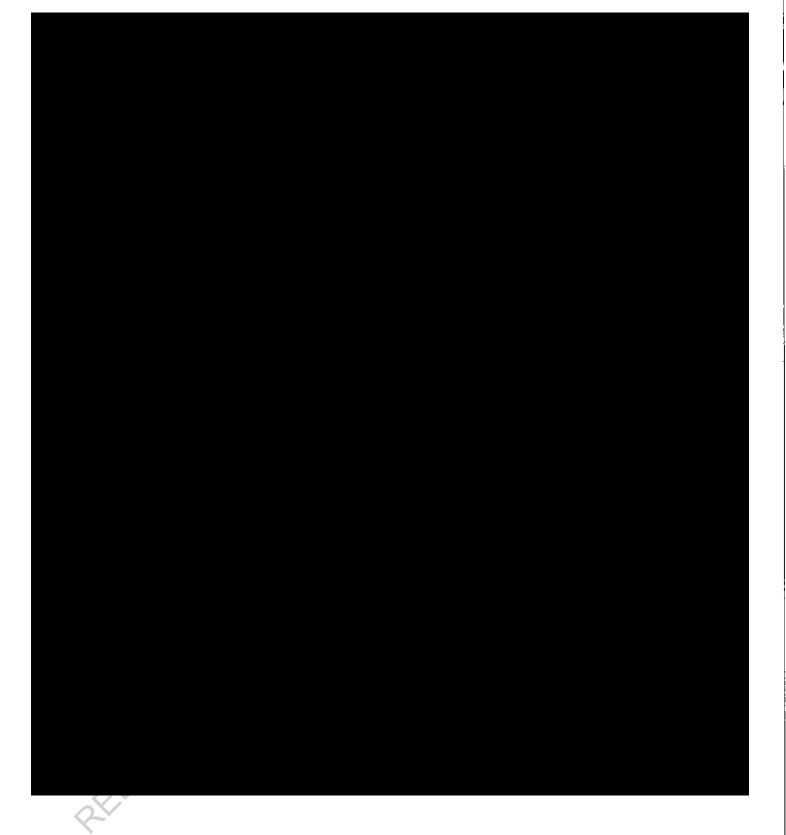
<image001.jpg>

<image002.png>

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http://www.facebook.com/NZNursesOrganisation

RELEASED UNDER THE OFFICIAL INFORMATION ACT



RELEASED UNDER THE OFFICIAL INFORMATION ACT

From:

David Meates

Sent:

Monday, 3 December 2018 1:26 p.m.

To:

Cc:

Toni Gutschlag;

Subject:

Re: The Press: Hillmorton Hospital incidents [UNCLASSIFIED]

When have we turned down a meeting with Worksafe?? Have I missed something?

Sent from my iPhone

On 3/12/2018, at 1:05 PM,

wrote:

Hi all – can someone advise on the Qs below? can you pls coordinate the response?



From:

Sent: Monday, 3 December 2018 1:04 p.m.

To:

Subject: Fwd: The Press: Hillmorton Hospital incidents [UNCLASSIFIED]

Hi all,

I need to get a response to this, particularly the request for an urgent meeting and the fact WorkSafe say risk management at the hospital is not at an acceptable level and the CDHB must improve things immediately.

We're publishing soon. I've got comment from David from yesterday but would appreciate a response soon to this.

Questions below:

- 1) When will the board meet with WorkSafe?
- 2) Does it accept the above statements from the regulator?
- 3) What immediate steps will it take to improve risk management at Hillmorton Hospital?
- 4) What was discussed at the meeting with staff this morning?
- 5) What is the status of the nurse who was stabbed yesterday? Is she in Christchurch Hospital and was she admitted to the ED last night?

Thank you. Can you please let me know when you get this, and if you can provide a response soon.

Cheers.

Forwarded message
From:
Date: Mon, 3 Dec 2018 at 11:15
Subject: RE: The Press: Hillmorton Hospita

Subject: RE: The Press: Hillmorton Hospital incidents [UNCLASSIFIED]

To:

Hi

Hopefully the following helps in answering your questions.

- 1. Anyone can notify WorkSafe (or raise a concern as noted in our OIA response to you in September)
- 2. It is the duty of the business to ensure it takes all reasonably practicable steps to protect the health and safety of its staff.
- 3. WorkSafe met with H&S reps, Unions and H&S managers in April this year regarding the ongoing issues at Hillmorton.
  - a. Identified that better reporting was needed
  - b. There was evidence that there was a trend in patient assaults developing, and risk management needed to be better
  - c. The worker representatives and staff representatives were urged to engage with the Board to ensure the Board had good oversight and response to the evidence that was appearing
- 4. WorkSafe sought a meeting with the Board which has not been accepted
- 5. As a result of the concerns outlined above and the two recent events, of which one was advised to WorkSafe, we are seeking an urgent meeting with the Board and management to advise that risk management at the hospital is not at an acceptable level and must be improved immediately as required under S37 of HSWA duties.
- 6. Some useful info:
  - a. <u>https://worksafe.govt.nz/laws-and-regulations/operational-policy-framework/worksafe-positions/when-will-worksafe-intervene/</u>
  - b. I also attach copies of Sections 23, 37 and 58-60 of HSWA which are especially relevant to this matter.

Thanks,

Sent: Sunday, 2 December 2018 9:04 p.m.  To: wsmedia  Subject: The Press: Hillmorton Hospital incidents
Hi there,
I've spoken to a number of nurses who are concerned and frustrated by WorkSafe, specifically a perception it is unwilling to investigate workplace violence incidents at Hillmorton Hospital.
Last Monday, a mental health nurse suffered serious burns after a patient threw boiling water over her. She was hospitalised, which meets the criteria for a notifiable injury.
Nurses claim this has happened before, and say it could have been prevented by lowering the temperature of water accessible to patients.
Today (Sunday) a nurse was stabbed in the leg by a patient. I've been told she was also taken to hospital, however that's yet to be confirmed.
Both incidents took place in Te Awakura, the acute adult inpatient unit.
Questions below:
1) Who can notify an incident to WorkSafe?
2) Is WorkSafe aware of/has it been notified of the incident last Monday where a nurse had boiling water thrown over her at Hillmorton?

From:

3) Is it investigating? If not, why not? What, if any, actions have been taken in relation to the incident?

4) Is WorkSafe aware of/has it been notified	of the incident on Sunday where a nurse was
stabbed by a patient at Hillmorton?	

- 5) Is it investigating? If not, why not? What, if any, actions have been taken in relation to the incident?
- 6) Nurses are losing faith in WorkSafe over a perception it is not looking into incidents at Hillmorton. What response, if any, does the organisation have?
- 7) What is the actual threshold for WorkSafe to investigate? Does it require a death? Is a stabbing and serious burns not enough?

Thank you. Could you please confirm receipt of this email. We're running a follow-up story tomorrow. Please provide a response by 1pm.

Feel free to call me in the morning on if you want to clarify any part of this request.

Cheers,

158 Gloucester St, Christchurch, 8011 PO Box 2722, Christchurch 8140, New Zealand





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158 Gloucester St, Christchurch, 8011 PO Box 2722, Christchurch 8140, New Zealand

## stuff ( Neighbourly THE PRESS

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<Health and Safety at Work Act 2015 (re Hillmorton).pdf>

REFERSED UNDER THE OFFICIAL MED RAMATION ACT

From: Sent: To: Cc: Subject:	David Meates Sunday, 2 December 2018 8:49 p.m.  Toni Gutschlag; Re: checkpoint interview request Assault this weekend and meeting on Monday
We might need	to do. Decide on the morning
Sent from my i	Phone
On 2/12/2018,	at 8:39 PM, wrote:
Canter	oury & West Coast District Health Boards
Begin f	Forwarded message:
	From:  Date: 2 December 2018 at 5:35:52 PM NZDT  To:  Cc: "communications@cdhb.health.nz" < communications@cdhb.health.nz > Subject: Assault this weekend and meeting on Monday
	Hey just following up on my request earlier this week and the subsequent stabbing this weekend, are we able to organize an interview for Checkpoint with David or Toni after the meeting with nurses tomorrow?
	Cheers,
6	Sent from my Samsung Galaxy smartphone.

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PEFFE OF FROM THE OFFICIAL INTERPRETATION OF THE OFFICIAL INTE

From:	David Meates
Sent:	Wednesday, 28 November 2018 1:37 p.m.
To: Cc:	Toni Gutschlag;
Subject:	Re: re ombudsmans feedback
That is brilliant feedback	
Sent from my iPhone	
On 28/11/2018, at 1:11 PM,	wrote:
Hello	
	the feedback following the unannounced audit by the Ombudsman's office ail sums it up well.
Regards	E.OR
Administration Building, Hilln	norton Hospital,Private Bag 4733,Christchurch. www.cdhb.health.nz
From: Sent: Wednesday, 28 Nov	vember 2018 1:02 p.m.
**	AFInpatientUnit@cdhb.health.nz>
Cc:	
Subject: re ombudsmans	feedback
Dear Team,	
The ombudman's feedba	ck on the unit was in their words overwhelmingly positive.
	ressed with their observations of the staff interactions with the patients
and the patients positive	
	on what they saw in the clinical review in terms of the interactions hey also really liked the core team approach.
	rith role as they had not seen this before.
The major negatives were	e around the building/ facilities .
We will update you later	re recommendations once they complete their report
Well done everyone, I am	proud of you all

Child and Family Inpatient and Day Unit The Princess Margaret Hospital Christchurch New Zealand

Thursday, 1 November 2018 12:20 p.m.  Toni Gutschlag  RE: Toni/ approval request - media enquiry - follow up to Sept 2018 OIA re:  AT&R unit - The Press
Follow up Completed
I a couple of queries below. I will share with the MoH comms person working on their response.
er 2018 11:53 a.m. al request - media enquiry - follow up to Sept 2018 OIA re: AT&R unit - The Press
response to this media enquiry concerning the AT&R Unit for your review and approval. team for their swift response.
appreciate the sensitivities, so a few changes may need to be made. Also, any advice for
share this with our MoH counterparts once approved?
y, 2 November 2018

Responses below are attributable to Toni Gutschlag, General Manager Specialist Mental Health Service, Canterbury District Health Board.

1) Please describe the two different client groups in the AT&R, and the way both patient groups are admitted and funded in the unit.

The Assessment, Treatment and Rehabilitation (AT&R) Unit provides inpatient assessment, treatment and rehabilitation for people with intellectual disabilities and people with significantly challenging behaviour(s) that may be broadly categorised into two main cohorts.

- 1. <u>Care recipients or consumers under a part 3 assessment:</u> these consumers are subject to legislation under the Intellectual Disability (Compulsory Care and Rehabilitation) Act due to the criminogenic component of their behaviour.
  - \*criminogenic a system, situation or place causing or likely to cause criminal behaviour. [is there a better description?]

Can you explain/expand on what is meant by a part 3 assessment?

These consumers are admitted through the Forensic Coordination Services (Intellectual Disability) (FCS (ID)). In most cases, this includes care recipients whose community placement with the Regional Intellectual Supported Accommodation Service (RIDSAS) has become problematic due to an increase in challenging behaviours and/or containment issues. Additionally, patients may be directed to the RIDSAS AT&R Unit from the court if a part 3 assessment has been requested.

In certain cases, patients come under the high and complex needs framework (overseen by FCS (ID)) and patients will be appointed an intensive service co-coordinator via that service.

These beds are funded by the Ministry of Health and managed by the FCS (ID).

## 2. Patients with challenging behaviour and an intellectual disability:

Consumers in this cohort are *not* subject to the Intellectual Disability (Compulsory Care and Rehabilitation) Act, but most consumers will be subject to the Mental Health Act.

Consumers are admitted from their community or family home usually due to an increase in challenging behaviour and, more specifically, violence that cannot be safely managed in the community.

These beds are funded by the Ministry of Health and managed by NASC (Lifelinks)

2) In May, CDHB staff informed the Ministry they could not accept a patient because staff felt it would be unsafe to do so. How many times has the CDHB refused to accept patients into the AT&R on this basis this year?

The Canterbury District Health Board may refuse to admit a person into its service if there is too great a risk to safety and wellbeing of the staff, other consumers, or the consumer themselves. This is a decision we take seriously.

Since 1 January 2018, one individual on one occasion was refused admittance into the Assessment, Treatment and Rehabilitation Unit of Hillmorton Hospital.

3) Emails from the Ministry show it was focused on maintaining access to Regional Intellectual Disability Service beds over AT&R. How many beds are there in the AT&R in total, and how many are designated for this service?

The AT&R Unit has a total of 10 beds which are currently capped at 7 for safety reasons.

RIDSAS (regional funded beds) are divided into:

Can you explain what the difference in these beds is?

- Capacity funded beds (3) these beds are for people who are referred by x , and are usually admitted under the xxxx
- Fee for service beds (4) these beds are for people who are referred by x and are usually admitted under the xxxx
- Assessment bed (1) can understand what this one is for someone who is being assessed.
- All RIDDS beds: (8)
- 4) Toni Gutschalg made it clear to the Ministry the financial cost of the service was unsustainable and there was initial reluctance signing a contract to continue its provision. What, if any, developments have there been since? Is the service still financially unsustainable? Has there been any funding increase?

Canterbury DHB is working closely with the Ministry of Health regarding the funding of these services.

There has not been a funding increase since the Official Information Act response 9914

5) Were admissions to the AT&R suspended? If so, when did this happen? For how long? And what did the CDHB do to cater to that patient group and advise groups like the police?

In the event of suspended admissions, contact is made with relevant Specialist Mental Health Services (SMHS) staff, NGOs, Forensic Coordination Intellectual Disability Service, and the Ministry of Health.

SMHS crisis response leaders are advised of the process to follow if a care recipient under the Intellectual Disability (Compulsory Care and Rehabilitation) Act presents with a mental health concern.

6) In June, the Ministry emailed to request the DHB temporarily suspend admissions to AT&R beds to prioritise RIDSS. Toni responded: "asking us to deny access to one cohort of consumers to give priority to another without adequate development of alternatives or guidance, feels risky and uncomfortable from a human rights perspective." What happened, was the contract suspended?

The contract was not suspended.

Toni

7) Has the Ministry provided any other assistance for the AT&R unit, either in terms of facilities development or staff recruitment?

No additional human or financial resources have been provided to the AT&R Unit since the Official Information Act response 9914.

8) In July, David Meates wrote to the Ministry about 'defensive, intimidating, bullying and overtly forceful behaviors' displayed by DSS. Since then, has there been any improvement in the relationship?

The Canterbury District Health Board and the Ministry of Health has resolved this issue and we continue to work together to ensure appropriate service delivery for the consumers and staff.

9) The financial breakdown included in the OIA response says there is a funding shortfall of \$1,178,000 a year. Is that correct and current? Or has there been any change?

The funding situation has not changed since the Official Information Act response 9914.

From: Toni Gutschlag Sent: Wednesday, October 31, 2018 12:37 PM
To: Cc:
Subject: RE: Media enquiry - follow up to Sept 2018 OIA re: AT&R unit - The Press
Hi
I think it best to prepare written responses to these questions, the MOH will need to be made aware they've come
in too I think.
David Meates, and I are part of a group working with the MOH to address these issues, which are national as well as local.
I'd like to meet some time too.
Kind regards

From:

Sent: Wednesday, 31 October 2018 11:18 a.m.

To: Toni Gutschlag

Cc:

Subject: Media enquiry - follow up to Sept 2018 OIA re: AT&R unit - The Press

Importance: High

Good morning Toni,

Yesterday we received a media enquiry from The Press with a number of follow up questions for an OIA (September 2018) concerning the AT&R Unit. The MoH also received an enquiry regarding this issue. I have attached the OIA, as well as the media enquiry sent to the MoH for context.

The journalist has requested a telephone interview to discuss the OIA. Could you please scan the questions below and see if you think it would be appropriate for us to comment on this issue? One consideration is the risk of unintentionally speaking out against the MoH. And if you would prefer a written response, could you please advise who you would like me to reach out to to develop responses on AT&R Unit.

our new media advisor, has pushed back the deadline to the end of the week.

CDHB and I would be happy to introduce you to him in the next couple of weeks.

Questions are as follows:

- 1) Please describe the two different client groups in the AT&R, and the way both patient groups are admitted and funded in the unit.
- 2) In May, CDHB staff informed the Ministry they could not accept a patient because staff felt it would be unsafe to do so. How many times has the CDHB refused to accept patients into the AT&R on this basis this year? This might have been a single incident. We have been closed to admissions several times but I'm not sure if a patient presented at that time.
  - 3) Emails from the Ministry show it was focused on maintaining access to Regional Intellectual Disability Service beds over AT&R. How many beds are there in the AT&R in total, and how many are designated for this service?
  - 4) Toni Gutschalg made it clear to the Ministry the financial cost of the service was unsustainable and there was initial reluctance signing a contract to continue its provision. What, if any, developments have there been since? Is the service still financially unsustainable? Has there been any funding increase?

I understand there is some work happening within the MOH regarding funding of these services. I don't have any specific information and there has not been a funding increase.

- 5) Were admissions to the AT&R suspended? If so, when did this happen? For how long? And what did the CDHB do to cater to that patient group and advise groups like the police?
- 6) In June, the Ministry emailed to request the DHB temporarily suspend admissions to AT&R beds to prioritise RIDSS. Toni responded: "asking us to deny access to one cohort of consumers to give priority to another without adequate development of alternatives or guidance, feels risky and uncomfortable from a human rights perspective." What happened, was the contract suspended?

No it wasn't.

7) Has the Ministry provided any other assistance for the AT&R unit, either in terms of facilities development or staff recruitment?

No

8) In July, David Meates wrote to the Ministry about 'defensive, intimidating, bullying and overtly forceful behaviors' displayed by DSS. Since then, has there been any improvement in the relationship?

Yes

9) The financial breakdown included in the OIA response says there is a funding shortfall of \$1,178,000 a year. Is that correct and current? Or has there been any change?

No

Many thanks,



Best regards,

Senior Communications Advisor – mental health Canterbury District Health Board





















From

Sent: Tuesday, October 30, 2018 12:22 PM

To:

Subject: FW: The Press: AT&R unit

Hi

Are you able to assist with collating a response to this one as well?

Cheers

From:

**Sent:** Tuesday, 30 October 2018 11:05 a.m.

To:

Subject: The Press: AT&R unit

Hi all,

These questions relate to OIA response 9914 and refer to correspondence between the Ministry and the CDHB about the AT&R unit.

## Questions below:

- 1) Please describe the two different client groups in the AT&R, and the way both patient groups are admitted and funded in the unit.
- 2) In May, CDHB staff informed the Ministry they could not accept a patient because staff felt it would be unsafe to do so. How many times has the CDHB refused to accept patients into the AT&R on this basis this year?
- 3) Emails from the Ministry show it was focused on maintaining access to Regional Intellectual Disability Service beds over AT&R. How many beds are there in the AT&R in total, and how many are designated for this service?
- 4) Toni Gutschalg made it clear to the Ministry the financial cost of the service was unsustainable and there was initial reluctance signing a contract to continue its provision. What, if any, developments have there been since? Is the service still financially unsustainable? Has there been any funding increase?
- 5) Were admissions to the AT&R suspended? If so, when did this happen? For how long? And what did the CDHB do to cater to that patient group and advise groups like the police?
- 6) In June, the Ministry emailed to request the DHB temporarily suspend admissions to AT&R beds to prioritise RIDSS. Toni responded: "asking us to deny access to one cohort of consumers to give priority to another without adequate development of alternatives or guidance, feels risky and uncomfortable from a human rights perspective." What happened, was the contract suspended?
- 7) Has the Ministry provided any other assistance for the AT&R unit, either in terms of facilities development or staff recruitment?
- 8) In July, David Meates wrote to the Ministry about 'defensive, intimidating, bullying and overtly forceful behaviors' displayed by DSS. Since then, has there been any improvement in the relationship?
- 9) The financial breakdown included in the OIA response says there is a funding shortfall of \$1,178,000 a year. Is that correct and current? Or has there been any change?

Thank you. If there's any chance of interviewing someone over the phone about this it would be much appreciated as the different client groups, legislation and management make this slightly difficult to interpret.

If not, please can you provide a response by 12pm tomorrow.

Cheers,





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_	5. 1114
From:	David Meates
Sent:	Sunday, 16 December 2018 6:09 p.m.
To:	Toni Gutschlag
Cc:	
Subject:	Re: Worksafe 161218.pptx
	be good to put into context with turnover rates nationally.
	reakdown of assaults and which services es - have they increased? Impact of reduced
seclusion Sent from my iPhone	i.E.ORINIA
> On 16/12/2018, at 2:22 >	PM, Toni Gutschlag wrote:
	off presentation for Worksafe tomorrow. They have asked for:
> ricuse inia attachea are	in presentation for worksale tomorrow. They have asked for.
>. The organisational st	ructure of Specialist Mental Health Services division.
> · Workforce compositi	
> Facility familiarisation	n in particular Te Awakura and AT&R Units
> · identification of critic	cal/key risks and what controls are in place.
>	
> The purpose of this presavailable to view also.	sentation is to provide an overview of clinical context. The SMHS risk register will be
>	.0-
> Apologies about timing	but I would appreciate feedback about this tonight please if at all possible.
> CDHB staff attending to	morrow's meeting with Worksafe will be reviewing at 8am.
>	
> Specifically:	
> places shock slice	los 24 27 Last this info from Lubo had also shocked it with Finance
> can yo	les 24-27, I got this info from who had also checked it with Finance. In please add in a couple of slides re employee
> incident management	
>	
<ul> <li>can you please add a couple of points re specimen—can you</li> <li>please add a couple of points re MHA if you think relevant.</li> </ul>	
	ionits re ivina il you think relevant.
>	>

REFERSED INTERTHE OFFICIAL INFORMATION ACT

From:

David Meates

Sent:

Thursday, 13 December 2018 7:10 a.m.

To:

Toni Gutschlag

Subject:

Fwd: security in Te Awakura

Sent from my iPhone

- Begin forwarded message:

From:

Date: 13 December 2018 at 4:53:33 AM NZDT

To: David Meates

PELLINGE

Ce:

RELEASED INDER THE OFFICIAL INFORMATION ACT



RELIERSED INDER THE OFFICIAL INFORMATION ACT

From:	David Meates
Sent:	Tuesday, 11 December 2018 1:08 p.m.
To:	Toni Gutschlag;
Cc:	
•	
Subject:	RE: PRESS FEATURE ON SATURDAY - VIOLENCE & WHAT'S REHIND IT The Press:

We need to be thoughtful about telling the story and rationale as to why the changes were made in 2013 and the process behind that. We need to be very evidenced based regarding level of assaults and the positive impacts associated with reduction in seclusion.

It would be useful to be able to highlight the major safety issues etc that were in place with Pipiri and why things needed to change.

I think that this is an important opportunity of telling the mental health story.

additional questions

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



Values – Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

From:

Sent: Tuesday, 11 December 2018 12:49 PM

To: Toni Gutschlag

David Meates

Subject: PRESS FEATURE ON SATURDAY - VIOLENCE & WHAT'S BEHIND'IT The Press: additional questions

Hi all – please note that is looking to run a mental health feature on Saturday.

The latest line of questioning is suggesting that the changes to the ward layout/restructure in 2013 are behind the increasing violence, and that overcrowding and sleepovers were a problem before the quakes.

Appreciate your input.

Also, please not question re allowing a photographer in.

We have provided them with some pics last year – but can facilitate if manageable and you are agreeable.

From:

Sent: Tuesday, 11 December 2018 12:18 p.m.

To: Subject: The Press: additional questions
Hi
More context for you: the article will likely run on Saturday as an in-depth looking at this nurse's claims/talking to others about the reasons for the level of violence in the acute inpatient unit.
I've looked at some documents that pre-date the earthquakes, including this summary of an extern of Te Awakura conducted in 2008. <a href="http://img.scoop.co.nz/media/pdfs/0808/Executive_Summary_ext_review.pdf">http://img.scoop.co.nz/media/pdfs/0808/Executive_Summary_ext_review.pdf</a>
It mentions overcrowding was an issue then, as were sleepovers - so those are issues that clearly earthquakes.
There's also this study:

, including this summary of an external review y ext review.pdf

vers - so those are issues that clearly pre-date the

vices/aop-cambridge-6A/S2056469400003235a.pdf/unlocking an ac es assaults and seclusions.pdf which looks at

Rates of unauthorised absences increased by 58 per cent, and there was also an increase (deemed not significant) of violent incidents, however seclusion hours dropped by 53 per cent.

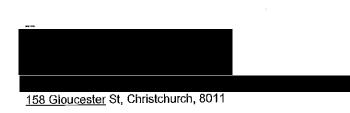
## Questions below:

- 1) How does the CDHB explain the current high rates of violence in Te Awakura?
- 2) Overcrowding and sleepovers were an issue before the earthquakes, why have they not been resolved?
- 3) Does the CDHB accept that the 2013 restructure and move towards a less restrictive environment has contributed to the current high rates of violence?
- 4) Does the CDHB have any more comment on the state of facilities at Hillmorton, namely the claim they are among the worst mental health facilities in the country?
- 5) Are there any current plans to increase rebuild or improve Te Awakura?

is there any chance a photographer would be allowed to shoot pictures inside Te Awakura? With the proviso that they would not photograph any patients. Let me know.

If you're able to provide a response to these questions by 2pm tomorrow that would be appreciated.

Cheers,





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REFERENCE OFFICIAL responsibility for the contents of this message or attached files.

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David Meates

Sent:

Tuesday, 11 December 2018 1:02 p.m.

To:

Toni Gutschlag;

Cc:

FW: Re: WorkSafe meeting [UNCLASSIFIED]

**Attachments:** 

Subject:

April meeting Summary.docx

Importance:

High

Please note attached letter and email below.

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



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From:

Sent: Tuesday, 11 December 2018 12:32 PM

To: David Meates < David. Meates @cdhb.health.nz>

Cc:

Subject: FW: Re: WorkSafe meeting [UNCLASSIFIED]

Importance: High

Kia ora David

Firstly and I would like to thank you and your team for making the time to meet with us last Thursday 6<sup>th</sup> of December.

It was acknowledged WorkSafe and the Christchurch District Health Board are in agreement to work collaboratively to address the health and safety risks in various facilities within Christchurch in particular Hillmorton Hospital and Princess Margaret Hospital. It was also agreed that WorkSafe and The Christchurch District Health Board will coordinate media responses to ensure our messages are aligned. We look forward to fostering a relationship of open communication and co-operation to ensure all workers return home after work happy and safe.

As requested I have attached a summary of the meeting that took place in April earlier this year for your records.

It has been acknowledged there is an increased number of assaults of workers within Hillmorton Hospital in particular in the Te Awakura Unit and the Assessment, Treatment and Rehabilitation Unit. WorkSafe will now be conducting a number of workplace assessments, one of these will be prior to Christmas 2018 and respond as per its findings.

Our initial assessment will be looking at and understanding:-

- The organisational structure of Specialist Mental Health Services division.
- Workforce composition and size.
- Facility familiarisation in particular Te Awakura and AT&R Units
- identification of critical/key risks and what controls are in place.

In successive co-ordinated assessments in the new year we will also be reviewing:-

- Officer due diligence, to assess how Officers monitor and evaluate health and safety within the Organisation.
- Review worker engagement and participation processes.
- · Review health and safety reporting systems

We may also ask that a Health and Safety Representative is made available for an Inspector to speak to on the day of the assessment. I have been in contact with Toni Gutschlag and we have arranged to attend Hillmorton at 09:00 a.m. on Monday 17<sup>th</sup> of December next week. I have emailed Toni with the outline of our assessment above.

I have supplied the link below of a guidance document for Directors you may find useful. https://worksafe.govt.nz/dmsdocument/860-health-and-safety-guide-good-governance-for-directors

Ngā mihi nui

Canterbury & West Coast General Inspectorate

2 Degrees House Level 2 351 Lincoln Road Addington Christchurch 8024

w www.worksare.govc.nz

WORK

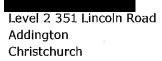
Getting you home healthy and safe. That's what we're working for.

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Date: 11 December 2018



Kia ora David

## Summary notes from 5 April 2018 meeting

As discussed there was a meeting conducted at Hillmorton Hospital 5th of April 2018 between Chief Inspector (General Inspectorate Southern) and Healthy Workplace Committee. This was in response to an assault on 3 nurses in March 2018. The committee consisted of H&S reps, Union, H&S Managers and an HR Manager

Details in summary discussed at this meeting were:-

- · Critical risks discussion and identification.
- Discussion on notification requirements.
- · Assaults raised as biggest risk.
- Health and safety reporting stats LTI at 4 x increase over past 5 years.
- Limited pool of resources (staffing)
- Views from some that "I must help" causing concern.
- Business paper to be presented to the board to indicate increasing staff resources required and to discuss an early intervention programme to manage assaults on workers.
- WorkSafe requested to meet with the Board to further discuss critical risk and management. This meeting was to be initiated by the by the Health Workplace Committee in consultation with the CDHB Board but this never occurred.

Please don't hesitate to make contact if you require any further information in relation to this matter.

Ngā mihi nui





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David Meates

Sent:

Monday, 10 December 2018 8:56 p.m.

To:

Toni Gutschlag;

Subject:

Fwd: Just a personal message

Sent from my iPhone

Begin forwarded message:

From:

Date: 10 December 2018 at 7:06:24 PM NZDT

To: "david.meates

Subject: Just a personal message

Hi David and sorry this is a bit later than it should have been but just wanted to say keep up your amazing work. You/we will get through this Hillmorten stuff and end up with safe staff and safe patients. Take care.

Sent with BlackBerry Work (www.blackberry.com)

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**David Meates** 

Sent:

Monday, 10 December 2018 6:44 a.m.

To:

Toni Gutschlag;

Subject:

Fwd: Hillmorton WOF ...FAIL.

Sent from my iPhone

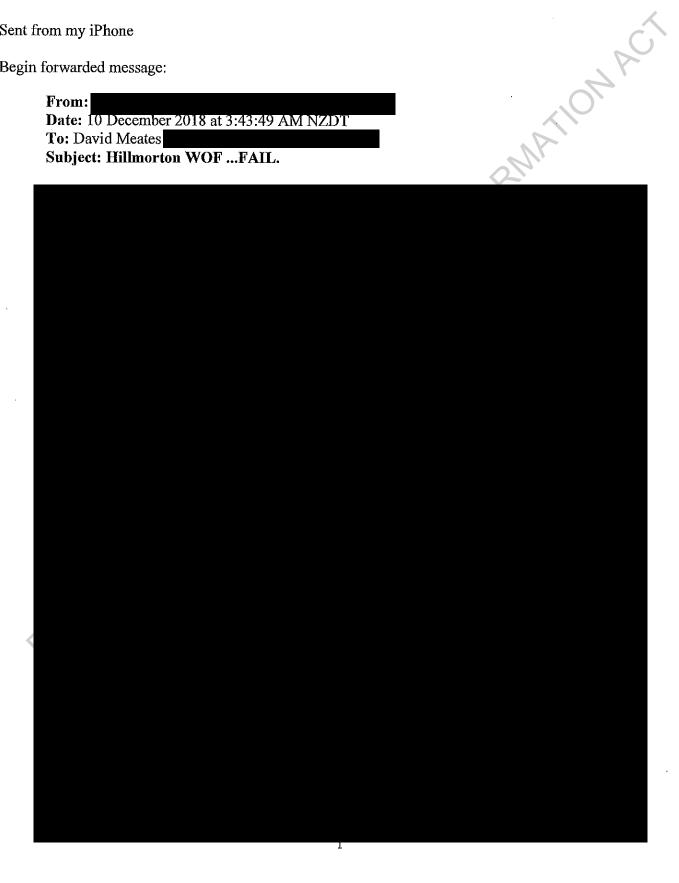
Begin forwarded message:

From:

Date: 10 December 2018 at 3:43:49 AM NZDT

To: David Meates

Subject: Hillmorton WOF ...FAIL.





From: Sent: To: Cc:	David Meates Sunday, 9 December 2018 4:03 p.r Toni Gutschlag;	m.
Subject: Attachments:	Mental Health Slide for Mental Health,pptx	
Importance:	High	
	s Mental Health has seen an increase in the some very sickening injuries.	e number of serious unprovoked acts of violence
	e that has been grappling with significant ir or purpose in-spite of a number of "patch u	ncreases in activity and acuity and a range of up" jobs following the earthquakes.
	he appropriate steps and actions in place (I	al health we are needing to move quickly to both now and into the future) to ensure that
	s over the coming two weeks to hear both	ourses with further meetings scheduled with staff concerns relating to safety of staff as well as
there will be more over that need to occur along occurs – I am very happy	he coming weeks. I have detailed some of with a lead person (s) identified to ensure	early articulated last week and I am sure that these below and suggested actions / next steps that the right dialogue, conversations and input to might be more appropriate. One thing that is n plan.
I would ask that Toni, happening from key peopeing highlighted.		ything together with support and input ere is a visible action plan to address the issues
Key Themes / Areas of Fo	cus (in no order of priority)	
<u>Interface</u> between adult services – Toni,	and forensic services — concerns about sup	port, alignment and interface between these
Options / solutions for de	ealing with <u>meth / synthetics</u> including inte	erface with Police regarding detox etc – Toni,
	egarding staff numbers, turnover, recruitm tly this doesn't appear to exist in a way wh Toni	nent, vacancies by service that needs to be visible nere all parties are referring to the same
<u>Safety First / Incident reporting</u> weekly / monthly reporting of both patient and staff incidents, actions / responses to incidents and closing the loop with incidents back to staff. Currently there seems to be variable understanding / visibility and lack of clarity / consistency about what is being reported (staff feedback that the need to complete two forms – one for patients and one for staff is complicated and therefore doesn't happen or that patient and staff		

incidents are interrelated) -

taken. – Toni
Exit doors in the high care areas. There seems to be some confusion as to whether this issue has been raised and whether there are options to deal with this. The lack of an alternative exit is seen by staff as a high risk and contributing to concerns about staff safety. Need to understand what is required and options and timeline to deal with issue – Toni,
<u>Security Guards</u> – seen as an important interim step. 2 additional security commenced on Friday for 24/7 with support and training being provided by senior nursing staff eg Need to monitor effectiveness and support – Toni,
Progress re joint NZNO / DHB working on <u>alternative support staff</u> framework instead of security guards. This needs to be being developed and actioned urgently. Toni,
<ul> <li>Police. A number of issues relating to linkages with police raised by staff</li> <li>Variation in response times and reactions to incidents in adult inpatient services – need to develop an agreed protocol with Police and Mental Health Staff as to what incidents should require a Police response and expectations about response times etc – Toni, (P&amp;C)</li> <li>Concern that assaults on staff often don't result in offender being charged and victim being spoken to by police. Often a sense that because a mental health patient is involved that a prosecution won't be successful in court therefore not worth charging – Protocol to be developed and agreed between Police and Mental Health. Toni,</li> <li>Police have agreed to a meeting with staff. Toni</li> </ul>
Concern regarding DHB <u>follow up and support</u> with staff that have been assaulted. Options raised regarding the introduction of a "welfare officer" to follow up / case manage as appropriate. To cover all staff groups including Nursing, Allied Health, Medical and Support staff.
<u>Worksafe</u> . Following the increase and seriousness of injuries, worksafe are to undertake an assessment across Mental Health (scope still to be finalised) to review and understand current systems, risk processes etc. This will commence prior to Christmas with a follow up at the end of February. Worksafe is an issue that has been raised by a number of parties including staff who don't think that they have responded to concerns raised by staff. Worksafe also looking to become more engaged with health so this is going to be an important process for both them and the DHB. Toni,
Summary of <u>reports and reviews</u> undertaken across Mental Health Services including MOH and unannounced audits. These will be important for both Worksafe and Board
Community Options. Need to review the attached slide and confirm both timelines and actions.
<u>Debrief.</u> A number of staff have highlighted concerns about the need for a more structured debrief process occurring after incidents to ensure that feedback and lessons are occurring. with appropriate input from
<u>Funding / Financials</u> – we need to ensure that we have an agreed, reconciled and lined up view of funding and budgets including whats in the ringfence, regional etc.
<u>Inpatient Intensive Care</u> . Do we require and if so options. – Toni,
Adult Inpatient bed numbers. Options to reduce the number of inpatient beds. – viable or not??. Toni,
Facility Business Case. Exploration of new adult facility developed in Middlemore including Business Case and Facility

Lack of action regarding serious incidents. This seems to relate to visibility of what is occurring and actions being

This will not be a full list and very happy for things to be added / deleted and improved. However, I do want a single very clear and agreed action plan.

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



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Service	ervice Contingent On Status	Status
Enhanced Crisis Services		Deferred pending MH Inquiry outcome.
Community withdrawal management increased	NGO certification requirements met within existing facility Additional medical staff in place	Feedback from consultation necessitates a more indepth analysis of the current role and future model.
Phone based Crisis services	Contract with Homecare medical Ltd (HIML) for provision	Discussion between SMHS and HML occurring to develop contractual framework.
Increased options for children and young People	NGO contract Recruitment of additional workforce to enhance current provision	Increased capacity agreed from early 2019.
Enhanced community Support workforce	NGO contract/S Recruitment	Deferred while Mana Ake being established.
Community Acute Residential Service	Selection of a provider/s and contract in place Facility and staff sourced Development of operational protocols with	Model agreed Contract in place with Pathways Health and

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David Meates

Sent:

Friday, 7 December 2018 8:02 p.m.

To:

Toni Gutschlag

Subject:

Fwd: Meeting 07/12/2018



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David Meates

Sent:

Friday, 7 December 2018 11:13 a.m.

To:

Toni Gutschlag;

Subject:

RE: URGENT - FOR APPROVAL - Draft statement - in response to this morning's

assault.

Happy with this statement

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

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From:

Sent: Friday, 7 December 2018 11:07 AM

To: David Meates

Toni Gutschlag

Subject: URGENT - FOR APPROVAL - Draft statement - in response to this morning's assault.

Importance: High

Morena

We've received the first media query about this morning's assault when a security guard was seriously assaulted. Police and ambulance were called.

Please attribute comment to David Meates, Chief Executive, Canterbury DHB

I can confirm an incident took place on the Hillmorton campus this morning which resulted in a security team member being assaulted.

The staff member is currently being assessed in the Emergency Department.

I vehemently condemn all assaults against staff, patients and visitors.

Staff and patient safety at Hillmorton is a priority and we have a further meeting today with staff about this.

We are introducing additional measures to help make Hillmorton a safer place for everyone.

## Kind regards

Canterbury and West Coast District Health Boards Corporate Office, 32 Oxford Terrace, Christchurch

Values – A matou uara Care and respect for others – Manaaki me te kotua i etahi Integrity in all we do – Hapai i a matou mahi Responsibility for outcomes – Kaiwhakarite i ka hua



**David Meates** 

Sent:

Thursday, 6 December 2018 6:41 p.m.

To:

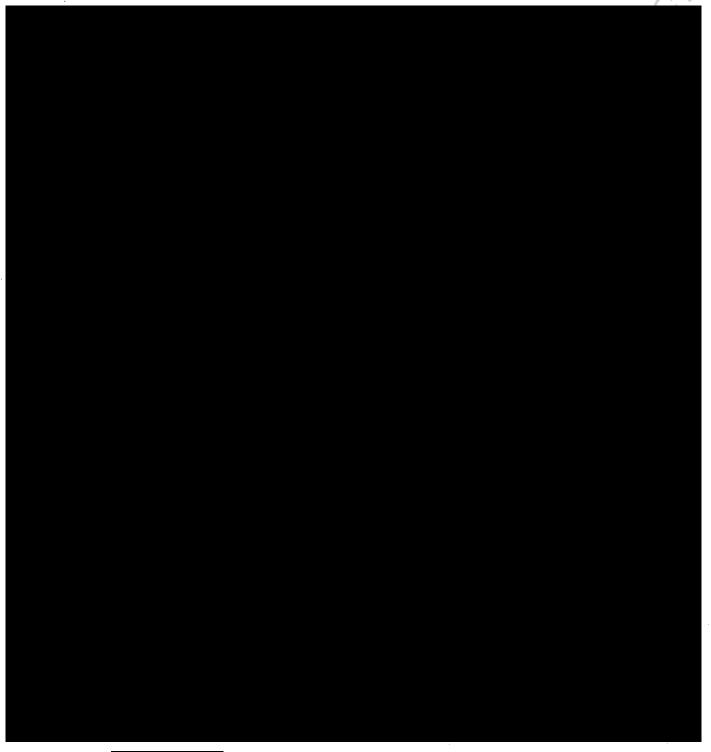
Toni Gutschlag

Subject:

Fwd: Message for all SMHS Nursing staff

Attachments:

image001.jpg



From:

On Behalf Of David Meates

Sent: Thursday, 6 December 2018 2:02 p.m.

To: SMHS - All Staff

Subject: Message for all SMHS Nursing staff

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff including senior nurses to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current issues that we are facing. As the majority of nurses are NZNO members we have an expectation that they would be present to support their members.

I look forward to meeting on Friday at 2pm.

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

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David Meates

Sent:

Thursday, 6 December 2018 6:07 p.m.

To:

Toni Gutschlag;

Subject:

RE: Update following meeting with WorkSafe

Great

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

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From: Toni Gutschlag

Sent: Thursday, 6 December 2018 5:53 PM

To: David Meates

Subject: RE: Update following meeting with WorkSafe

I'd like to do it.

From: David Meates

Sent: Thursday, 6 December 2018 5:52 p.m.

To:

Subject: RE: Update following meeting with WorkSafe

Really comfortable with this. Best to come from Toni or me??

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

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From:

Sent: Thursday, 6 December 2018 5:50 PM

To: Toni Gutschlag

David Meates

Subject: Update following meeting with WorkSafe

Hi all – would appreciate feedback on this draft note to for Toni G to send out to all Specialist Mental Health Staff tomorrow the morning:

###

Kia ora koutou

Following a meeting on Thursday with representatives from WorkSafe and the NZNO, I wanted to update you.

We had a constructive conversation and both organisations are committed to working together to address safety issues within our service.

Worksafe will carry out an assessment of our current Health and Safety policies, systems, processes and practices. At this time the scope hasn't been confirmed – although Te Awakura and the A T & R unit are services of interest. It's planned that this assessment will start before Christmas and the process will likely take a couple of months.

The assessment will be designed to cover the following:

- to ensure we are meeting our obligations under the Health & Safety at Work Act [2015]
- to understand how well we are identifying and managing risks
- to promote ways of achieving sustained improvements in managing risks to health and safety.

I will let you know when I have more information.

Kind regards

Canterbury and West Coast District Health Boards Corporate Office, 32 Oxford Terrace, Christchurch

Values - A matou uara

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REFER SED INDER THE OFFICIAL INFORMATION ACT

<b>Sharryn Sunbeam</b>
------------------------

Sharryn Sumbeam	
From:	David Meates
Sent:	Thursday, 6 December 2018 6:07 p.m.
То:	Toni Gutschlag;
	<u> </u>
Cc:	
Subject:	RE: DRAFT RESPONSE FOR REVIEW RE: Official Information Act request C DHB 9972
	- Response
Have made a few comments and	suggestions below ealth Board and West Coast District Health Board
David Meates, MNZM	
Chief Executive   Canterbury District He	ealth Board and West Coast District Health Board
P O Box 1600, Christchurch 8140	
www.cdhb.health.nz   www.westcoastc	thb.org.nz
make it better	4,0
Values – Ā Mātou Uara	
Care and respect for others - Manaaki m Responsibility for outcomes - Te Takoha	ne te whakaute i te tangata   Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono   nga i ngā hua
responsibility for outcomes to randing	ingo Friga Had
From:	
Sent: Thursday, 6 December 201	8 5:33 PM
To: David Meates	Toni Gutschlag
Con	
Cc: Subject: DRAFT RESPONSE FOR E	REVIEW RE: Official Information Act request C DHB 9972 - Response
Subject DIAL FRESPONSE FORS	TEVIEW N.C. Official information Act request C Data 9972 - Response
Hi all,	
is running this story tomorrow	w. Can you please provide feedback on the draft response we have so far below?
Once finalised and we have secu	rity guard numbers from we will forward
Cheers	
Circuit Circuit	

Please see below for a response; to be attributed to David Meates, Chief Executive, Canterbury DHB:

1) Is the CDHB concerned by the number of resignations in its mental health nursing group?

We are concerned by the number of resignations within our mental health nursing staff as the number of experienced mental health nurses is a finite resource. We do have a number of new graduate nurses who will be starting in 2019. Toni, do you want to put a number in here? I understand we have 22 who have confirmed and more on the verge of signing up. We could say 'more than 20'

2) Nurses say violence is affecting staff retention. Does the CDHB believe this to be a factor? There are a range of factors that affect staff retention in our mental health services, including violence against staff. These services are under significant pressure and this is impacting not only the care we provide our consumers but the safety of our staff.

However, our mental health service is also currently caring for twice the volume of patients than prior to the Canterbury earthquakes with the same number of beds and in inadequate facilities, and this is also putting pressure on our staff.

Negative media coverage is also impacting our ability to recruit. While we are not suggesting that media don't report on mental health issues, we are keen to see more balance and accuracy in terms of some of the initiatives that are in place. The current practice of taking photos and quotes from social media, which only represents one segment of our nursing workforce in mental health is frustrating, as comments are taken as 'facts'. Media may be surprised to hear that we have mental health nurses who, despite the challenges, find their job rewarding. Toni/ — can we identify someone who loves their MH nursing role and is prepared to talk. If we can't I don't think we should make the comment.

3) What, if any, resolutions came from David Meates meeting with WorkSafe?

This was a constructive conversation and both organisations are committed to working together. As a result of the meeting we will be working with WorkSafe to ensure that:

- we are meeting our obligations under the legislation WorkSafe administers
- we are identifying and managing risks
- we promote ways of achieving sustained improvements in managing risks to health and safety
- 4) The regulator previously said the CDHB needs to make immediate improvements. Please outline what, if any, steps the CDHB plans to take to manage risk at Hillmorton?

CDHB has been managing significant risks for a number of years resulting with doubling of mental health patient numbers and increased acuity post-earthquake and managing within not fit for purpose facilities. We are taking action to reduce the risk of violence within our service. For example, the Specialist Mental Health Service is working on a project with the New Zealand Nurses Organisation (NZNO) to support a safe and sustainable acute inpatient service. The project aims to address assaults and threats, and is looking at ways to proactively and systematically prevent, de-escalate and manage aggressive behaviour. The project is also reviewing leadership roles and crisis admission procedures, and taking steps to create a more calming and therapeutic environment.

Other improvements that have been made include:

- Robust High Care Area doors being installed at Te Awakura
- The boiling water machines being turned off
- The doors to the high care areas have been replaced with more solid metal doors
- Furniture in Te Awakura has been replaced with heavier weight furniture that can't be picked up and thrown

On Monday I had the opportunity to sit down with some of the nursing staff from our Specialist Mental Health Services. We had an open and honest conversation and we discussed possible options for managing specific patient groups and strengthening some of our processes. We discussed the very real constraints of our current facilities and the impact on staff of feeling unsafe in their workplace. The staff presented a range of options, including increasing the security presence on the site, which we are looking to introduce as soon as possible.

5) How many security staff are employed by the CDHB at Te Awakura?

- 6) Are they stationed in the unit itself, and what ability do they have to respond to violent incidents?
- 7) Has the CDHB made any changes to the ability of patients to access boiling water?

  The boiling water machines which patients previously had access to, have now been turned off and decommissioned. Alternative arrangements have been made for staff access to boiling water.

Kind regards

Canterbury and West Coast District Health Boards

Level 1, Corporate Office, 32 Oxford Terrace, Christchurch





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Values – A matou uara
Care and respect for others - Manaaki me te kotua I etahi
Integrity in all we do - Hapai i a matou mahi katoa i ruka i te pono
Responsibility for outcomes - Kaiwhakarite i ka hua



From:

Sent: Thursday, 6 December 2018 12:46 p.m.

To:

Subject: Fwd: RE Official Information Act request C DHB 9972 - Response

Hi all,

I have some questions re this OIA response, the meeting with WorkSafe, and allegations made by a patient I've spoken to who was recently in Te Awakura (have seen paperwork that confirms this to be the case).

The former patient said he did not feel secure during his time there, and said there was a noticeable lack of security in the unit.

He said patients access to boiling water for a wall-mounted unit was ridiculous, and that in light of the most recent scalding incident the CDHB needed to adjust and lower the temperature.

While he said his care was good and staff were excellent, he felt the mix of consumers in the unit could be unsettling for people.

Questions below:

- 1) is the CDHB concerned by the number of resignations in its mental health nursing group?
- 2) Nurses say violence is affecting staff retention. Does the CDHB believe this to be a factor?
- 3) What, if any, resolutions came from David Meates meeting with WorkSafe?
- 4) The regulator previously said the CDHB needs to make immediate improvements. Please outline what, if any, steps the CDHB plans to take to manage risk at Hillmorton?
- 5) How many security staff are employed by the CDHB at Te Awakura?
- 6) Are they stationed in the unit itself, and what ability do they have to respond to violent incidents?
- 7) Has the CDHB made any changes to the ability of patients to access boiling water?

Thank you. Can you please let me know when you get this, and if you can provide a response by 4pm?

Cheers,

Sent from my iPhone

Begin forwarded message:

From:

Date: 5 December 2018 at 4:05:56 PM NZDT

To:

Subject: RE Official Information Act request C DHB 9972 - Response

Dear

Please find attached our response to your Official Information Act request CDHB 9972.

Kind regards

Canterbury District Health Board and West Coast District Health Board

Project Facilitator, Planning and Funding Level 2, 32 Oxford Terrace PO Box 1600

Christchurch 8140

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**David Meates** 

Sent:

Thursday, 6 December 2018 5:52 p.m.

To:

Toni Gutschlag;

Subject:

RE: Update following meeting with WorkSafe

Really comfortable with this. Best to come from Toni or me??

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



Values - Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

From:

Sent: Thursday, 6 December 2018 5:50 PM

To: Toni Gutschlag

David Meates

**Subject:** Update following meeting with WorkSafe

Hi all — would appreciate feedback on this draft note to for Toni G to send out to all Specialist Mental Health Staff tomorrow the morning:

###

Kia ora koutou

Following a meeting on Thursday with representatives from WorkSafe and the NZNO, I wanted to update you.

We had a constructive conversation and both organisations are committed to working together to address safety issues within our service.

Worksafe will carry out an assessment of our current Health and Safety policies, systems, processes and practices. At this time the scope hasn't been confirmed – although Te Awakura and the A T & R unit are services of interest. It's planned that this assessment will start before Christmas and the process will likely take a couple of months.

The assessment will be designed to cover the following:

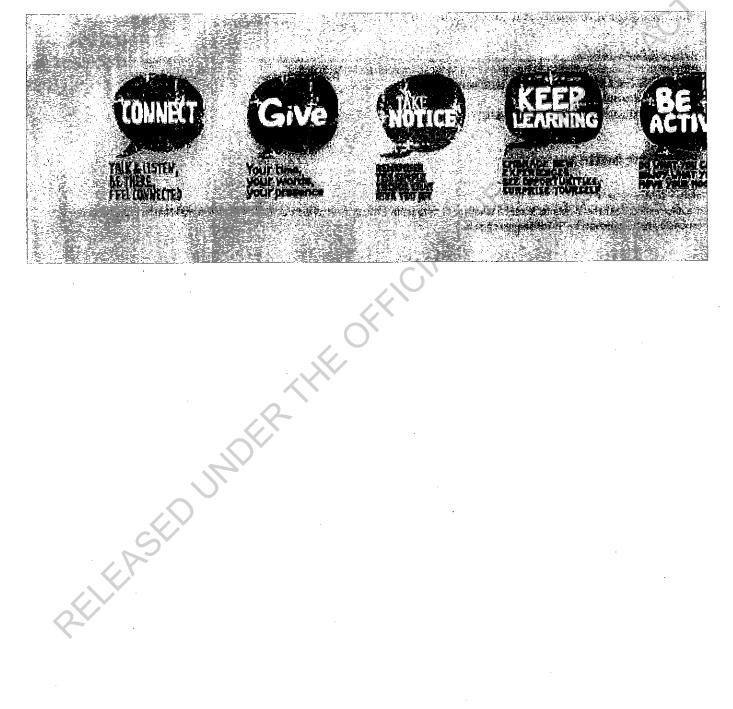
- to ensure we are meeting our obligations under the Health & Safety at Work Act [2015]
- to understand how well we are identifying and managing risks
- to promote ways of achieving sustained improvements in managing risks to health and safety.

I will let you know when I have more information.

## Kind regards

Canterbury and West Coast District Health Boards Corporate Office, 32 Oxford Terrace, Christchurch

Values – A motou uara Care and respect for others – Manaaki me te kotua i etahi Integrity in all we do – Hapai i a matou mahi Responsibility for outcomes – Kaiwhakarite i ka hua



on behalf of David Meates

Sent:

Thursday, 6 December 2018 2:02 p.m.

To:

SMHS - All Staff

Subject:

Message for all SMHS Nursing staff

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff including senior nurses to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current issues that we are facing. As the majority of nurses are NZNO members we have an expectation that they would be present to support their members.

I look forward to meeting on Friday at 2pm.

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



Values – Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

RELEASED UNDER THE OFFICIAL INFORMATION ACT

David Meates

Sent:

Thursday, 6 December 2018 1:31 p.m.

To:

Toni Gutschlag

Cc:

Subject:

FW: Email to SMHS Nursing staff

Final version to go out – can you ensure that this is now sent to the right staff

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff including senior nurses to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current issues that we are facing. As the majority of nurses are NZNO members we have an expectation that they would be present to support their members.

I look forward to meeting on Friday

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

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Values – Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

\*\*\*\*\*

**David Meates** 

Sent:

Thursday, 6 December 2018 1:29 p.m.

To:

Gutschlag;

Subject:

RE: Email to SMHS Nursing staff

Happy with this

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



Values - Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

From:

Sent: Thursday, 6 December 2018 1:06 PM

To: David Meates

Toni Gutschlag

Subject: RE: Email to SMHS Nursing staff

Kia ora

How about the last sentence reading

As the majority of nurses are NZNO members we hove an expectation that they would be present to support their members.

Naku noa na

New Zealand Nurses Organisation | PO Box 4102 | Christchurch



Please consider the environment before printing this e-mail

http://www.facebook.com/NZNursesOrganisation

From: David Meates

Sent: Thursday, 6 December 2018 12:38 p.m.

To:

Toni Gutschlag

Subject: Email to SMHS Nursing staff

Please see draft below - happy for you to add / delete etc

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff including senior nurses to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current issues that we are facing. As the majority of nurses are NZNO members it is important that they are there to support their members.

I look forward to meeting on Friday

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O-Box 1600, Christchurch 8140 www.cdhb.health.nz | www.westcoastdhb.org.nz



Values - Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

\*

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\*\*\*\*\*

**David Meates** 

Sent:

Thursday, 6 December 2018 12:38 p.m.

To:

Toni Gutschlag;

Subject:

Email to SMHS Nursing staff

Please see draft below - happy for you to add / delete etc

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff including senior nurses to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current issues that we are facing. As the majority of nurses are NZNO members it is important that they are there to support their members.

I look forward to meeting on Friday

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

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Values - Ā Mātou Uara

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on behalf of David Meates

Sent:

Thursday, 6 December 2018 10:20 a.m.

To:

Toni Gutschlag

Subject:

FW: Addressing violence at Hillmorton hospital

Attachments:

Dear Mr Meates.docx

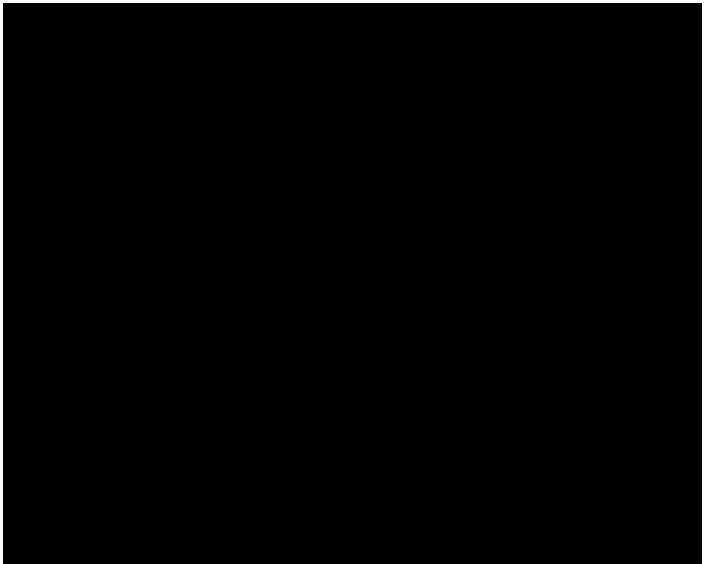
fyi

From:

Sent: Thursday, 6 December 2018 10:10 a.m.

To: David Meates

PAEL FASED INDER THE OFFICIAL INFORMATION AS A SELLEN OF THE OFFICIAL INFORMATION AS A SELLEN OFFICIAL INFORMATION AS A SELLEN Subject: Addressing violence at Hillmorton hospital



PEHEVER

REFERENCIAL INFORMATION ACT

**David Meates** 

Sent:

Wednesday, 5 December 2018 3:29 p.m.

To:

Toni Gutschlag;

Subject:

RE: SMHS nurses meeting

Hi

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current faces that we are facing. As the majority of nurses are NZNO members it is important that they are there to support their members.

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P Q Box 1600, Christchurch 8140

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Values – Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

From:

Sent: Tuesday, 4 December 2018 12:15 PM

To: David Meates

Toni Gutschlag

Subject: SMHS nurses meeting

## Kia Ora

I would just like to thank you for yesterday's meeting at Hillmorton and I'm aware that the team did thank David on the day.

However on the day it would seem that the message that was promised to be sent out to the DON, CNM, CTC and nurse managers to assist on the floor and therefore enable the RNs, ENs & HCAs to attend did not either get sent or not received.

This as you know caused division on the day. This was left to the team to manage on the day and take abuse from those nurse leaders at the time and later at work.

We now hear from the DON she was directed to tell us that the meeting we had scheduled for Friday at 2pm has been now opened up again to all staff. This is disappointing, as we know that further meetings are scheduled for all staff next week.

Communication through other people often ends up with mixed messages, it would have been respectful if the wish to change our agreement re meetings was discussed with our team.

Yours sincerely

Canterbury Regional chairperson

From: Sent: Tuesday, 4 December 2018 1:54 p.m. To: Subject: RE: Meeting yesterday at Hillmorton
Kia ora
Nid Old
There is no record of Worksafe having requested a meeting with the DHB Board and / or senior leaders. The meeting referred to in April was a regular Hillmorton Safe Staffing meeting, to which NUPE had invited Worksafe to respond to concerns about Worksafe's own monitoring and notification processes.
In 2017, we had Worksafe on site at the DHB where we took them through the unique challenges facing the DHB post-earthquakes particularly with regard to facilities across the DHB and issues they needed to be aware of. In addition there have been a number of other interactions with Worksafe including:
<ul> <li>Late July 2018. Following a request from WorkSafe in late June from meeting was held between understanding of our current practices and organisational risks.</li> <li>Early September 2018. WorkSafe requested the Canterbury DHB temporary boiler site as training for a number of WorkSafe inspectors. WorkSafe were very impressed with how the risks were being managed and requested the opportunity to take a video of the facility to use for wider national training.</li> <li>27 September 2018. Meeting with [WorkSafe], [Manager Wellbeing Health and Safety], [Programme Director Construction and Property] and [Senior Health and Safety Advisor]. The meeting built on previous meetings and covered a number of areas in more detail including discussion re a further site visit however no further request was received from WorkSafe.</li> <li>We have also notified 11 incidents to Worksafe since March 2018, five of which related to Mental Health with one further case currently being referred.</li> </ul>
Nga mihi
David Meates, MNZM Chief Executive   Canterbury District Health Board and West Coast District Health Board
P O Box 1600, Christchurch 8140 www.cdhb.health.nz   www.westcoastdhb.org.nz  make it better
angaz (Chette)
Values – Ā Mātou Uara Care and respect for others - Manaaki me te whakaute i te tangata   Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono

Sent: Tuesday, 4 December 2018 11:12 a.m.

Responsibility for outcomes - Te Takohanga i ngā hua

To: David Meates

Subject: Meeting yesterday at Hillmorton

Kia ora David,

I was one of the nurses who attended the meeting at Hillmorton yesterday, and I spoke to you about my concerns that Worksafe had not investigated the situation at Hillmorton.

You assured me that appropriate reporting had been done to Worksafe, and that yourself and the Board were also very surprised Worksafe had not investigated things sooner. You assured me that you would follow up with Worksafe regarding this, and advocate on our behalf.

I have just read this article by Radio New Zealand which states Worksafe attempted to have a meeting regarding Hillmorton Hospital in April of this year, but the Board declined this offer. I would like to give you the opportunity to explain to me this discrepancy in what you told us compared to what was reported, before I take this information any further.

Nga mihi



**David Meates** 

Sent:

Monday, 3 December 2018 7:53 p.m.

To:

Toni Gutschlag

Subject:

Options

A few thoughts for response to

It would be wonderful if the MOH just delivered on anything. The dhb has contracted 8 acute community beds, is waiting on final approval for mother's and babies etc after 4 years, the MOH are aware of how bad forensic and adult inpatient facilities are - with absolutely no support from MOH to progress, ID continues to be problematic. There is a very real sense of no support from MOH etc

Sent from my iPhone

**David Meates** 

Sent:

Monday, 3 December 2018 1:14 p.m.

To:

Toni Gutschlag;

Subject:

Mental Health

Some initial thoughts re a statement - very very rough

A raw conversation that reflected the long and sustained pressures that adult mental health services have been under.

The level of inappropriate facilities that are impacting on how care is being provided, lack of engagement and options for dealing with some patient groups and feeling unsafe were key areas highlighted.

Acknowledgement that the services are dealing with twice the volume of patients that the services was seeing prior to the earthquakes with the same number of beds in facilities not designed for the care being provided.

Le etc.

AELLERSED UNDER THE OFFICIAL IN A SELLER SED UNDER THE OFFICIAL IN A SELLER S A range of options were highlighted including increased security presence etc

Sent from my iPhone

**David Meates** 

Sent:

Sunday, 2 December 2018 4:13 p.m.

To:

Toni Gutschlag;

Subject:

MR - incident in Te Awakura 02122018

**Attachments:** 

MR - incident in Te Awakura 02122018.docx

PAFIFE OF HICHALING OF WATION ACT

#### Draft 1

### MEDIA STATEMENT RE INCIDENT IN TE AWAKURA

Please attribute to David Meates, Chief Executive, Canterbury DHB

I am extremely concerned to hear another staff member has been assaulted while at work in the adult mental health inpatient unit.

I can confirm that a nurse was stabbed in the thigh by a patient. We are doing all we can to ensure she is well supported in her treatment and recovery. The nurse is in a stable condition and likely to be discharged.

Whenever there is a serious incident such as this, a review will be carried out to understand what happened and what can be done to reduce the chance of a recurrence. That process is underway.

I am meeting with nursing staff at Hillmorton tomorrow [as part of a pre-arranged series of meetings] and we will be discussing a number of things including the level of assaults in the unit.

No level of violence towards staff, patients, or anyone else is acceptable.

I am open to hearing all ideas staff have to reduce the risk of violence within our service. The Canterbury region has been dealing with significant Canterbury region has been dealing with significant ill'sincreases in mental health patients following the earthquakes in 2011 which has also been exacerbated by rapid population growth. These services continue to be provided not as simple as putting in more staff, as thein -units that are regularly is already over-crowded and is not designed in a way to support the numbers of patients and modern practice. Experienced mental health nurses are a finite resource, and the demand for beds in the acute adult inpatient unit frequently exceeds capacity.

Since May this year we have been working with the NZ Nurses Organisation on initiatives to support a safe and sustainable acute inpatient service. The project has been focused on aims to addressing assaults and threats, and is looking at ways to proactively and systematically prevent, de-escalate and manage aggressive behaviour. The project has led to a strengthening of is also reviewing leadership roles out of hours and over weekend and crisis admission procedures, and taking steps to create a more calming and therapeutic environment.

A number of changes have been implemented including: additional nursing leadership into Te Awakura. We have replaced furniture in high care areas with specialist weighted furniture that cannot be easily lifted, in order to help ensure staff safety. The high care area doors in Te Awakura are being replaced with more robust metal doors.

Clearly there is more we need to do immediately, and in the longer term, and we will be working collaboratively with staff and the NZNO to make our acute mental health unit safer.

#### **ENDS**

Note: no further information will be provided regarding the nurses' injuries or condition.

From:
-------

David Meates

Sent:

Monday, 26 November 2018 5:28 p.m.

To:

Toni Gutschlag

Subject:

Fwd: MHS nurses meeting

Attachments:

image001.jpg

Sent from my iPhone

Begin forwarded message:

From:

Date: 26 November 2018 at 12:09:22 PM NZDT

To: David Meates

Subject: FW: MHS nurses meeting

David

Can we discuss asap.

Canterbury District Health Board

×

From:

Sent: Monday, 26 November 2018 10:40 a.m.

To:

Subject: MHS nurses meeting

Dear l

I'm writing to seek guidance on the meeting between David Meates and the mental health nurses of the CDHB.

It was mine and those that attended, that this meeting was for the RNs, ENs and HCAs working on the floor within MHS to have an opportunity to hear from and speak to David re the violence and issues they face on a daily basis at work. To hear what the CDHB plan going forward, to make working in MHS safer and better for staff and patients.

We as asked discussed and suggested times and venue for the 2 meetings. We were happy to

change the dates, aware of Davids calendar being set for the later part of the year. We were happy to go with the 3/12 and 7/12. Although not happy with our venue suggested in AIS being changed to the Lincoln room in the admin building, the team said ok and then emailed all staff to notify and encourage them to attend a safe and nursing lead forum with David, where they would be safe to listen and speak on their issues.

Then on the Friday, 23rd November at 5:30pm an email was received by staff from Toni Gutschlag, General manager stating that staff had to register by name and it would be first in first served basis. The email also changed the room agreed on, to rooms 1 and 2 in the Ferguson building and frankly made it sound as if management had set this up and owned it. This was not what staff wanted, we asked that management stepped up and facilitated staff to attend by relieving on the floor.

It was Staff dissatisfaction in management's lack of responses to the on going violence within the CDHB MHS that lead to the meeting being called with a David Meates and yourself in the first place. We now feel that again MHS nurses voices are being limited by the service manger, in her taking over of these forums. Toni did not even attempt to talk to the nurses involved and seek their input. The email Toni sent, insisting that staff identify themselves and changing the venue has made staff that had already responded to the teams email say they don't feel safe to attend. I think we clearly stated that many fear for their jobs if they speak out in the current MHS environment.

I would like your thoughts on a way forward for nurses ( not management) to get their voices heard in what was to be a nurses meeting with David Meates.

I am off work on Monday 26/11 but have meetings from 1-3 at the CDHB.

Yours Sincerely

Canterbury Regional chair

David Meates

Sent:

Friday, 23 November 2018 4:49 p.m.

To:

Toni Gutschlag

Subject:

RE: Invitation to staff forums with CEO David Meates at Hillmorton Hospital

Yep.

#### David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

#### P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



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From: Toni Gutschlag

Sent: Friday, 23 November 2018 4:28 PM

To: David Meates

Subject: Invitation to staff forums with CEO David Meates at Hillmorton Hospital

Importance: High

Hi David.

Are you ok with this message going out?

Dear all,

I would like to provide clarification on the upcoming meetings with our CEO, David Meates.

David will be holding two staff forums on the Hillmorton Hospital site next month to update staff on our campus facilities, as well as engage on other priority issues. Similar forums were recently held at the Princess Margaret Hospital campus.

Hillmorton site staff are welcome to attend one of the following sessions, which will take place in meeting rooms 1 and 2 of the Fergusson Building:

- Monday, 3 December at 10:00 am;
- Friday, 7 December at 2:00 pm.

We are anticipating a lot of interest in these forums. As we unfortunately do not have large meeting venues on our site, spaces are limited and we are asking staff to register in advance. However, David has offered to run additional forums if required.

If you would like to attend, please email

and specify which date

you prefer. Enrolment will be on a first-in, first-served basis.

I look forward to seeing those of you who are able to attend then.

Kind regards,

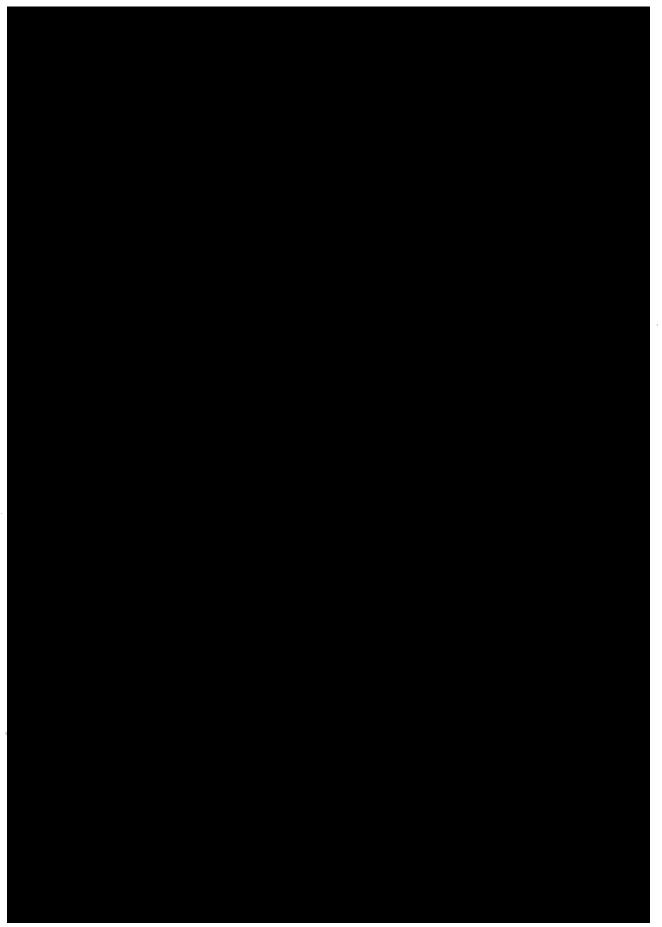
Toni Gutschlag

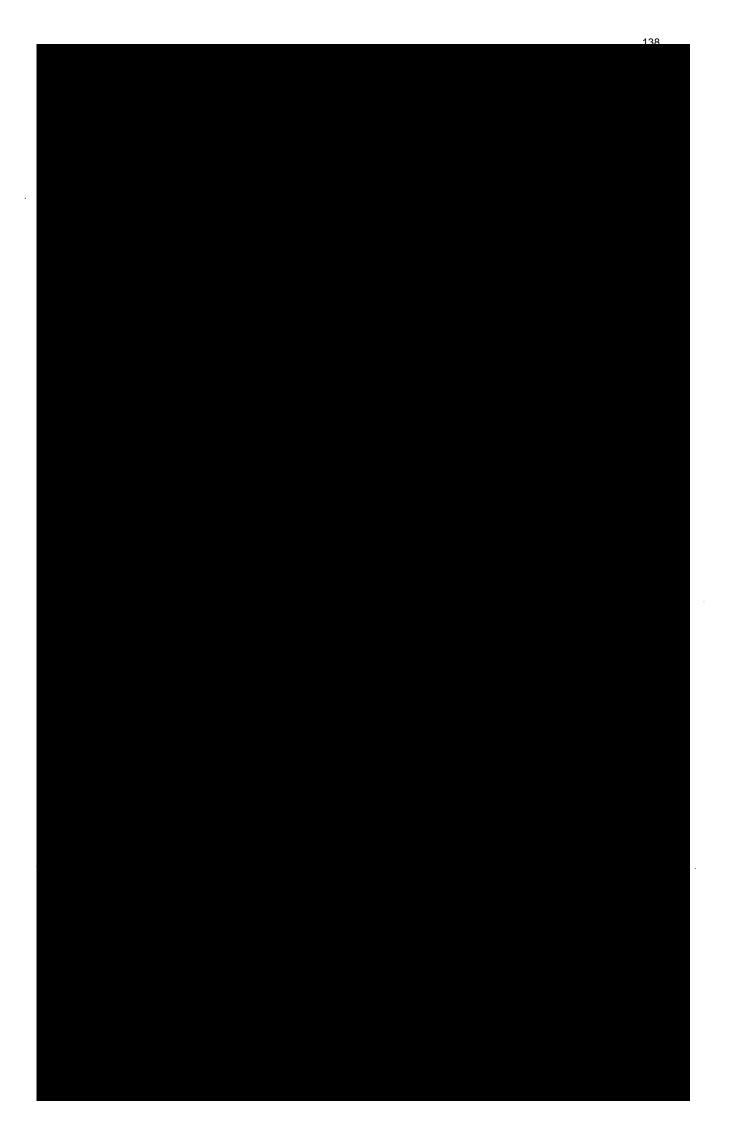
Toni Gutschlag General Manager - Mental Health

Canterbury District Health Board RELEASED UNDER THE OFFICIAL INFORMATION ACT Hillmorton Hospital, Private Bag 4733, Christchurch 8140 |

our health system

From: Sent:	David Meates Friday, 9 November 2018 8:49 p.m.
To:	Toni Gutschlag
Cc:	
Subject:	Re: Thank you to AIS staff
Yes a good way to end	a week
Sent from my iPhone	
On 9/11/2018, at 3:37 F	PM, Toni Gutschlag wrote:
	y to end the week! es that real change is occurring in Te Awakura and is a huge contrast to their nce.
From: Toni Gutso Sent: Friday, 9 No To:	chlag ovember 2018 5:33 p.m.
Cc:	
Subject: FW: Tha	ink you to AIS staff
Hi	
Please see below Awakura.	a lovely email from sister of a sister of a patient in Te asked me to pass this on to you.
approach to mer	eive feedback which outlines so clearly a responsive, patient and family focussed ntal health care. and family have had previous experiences with our hey have not felt so well supported.
	the work you have done to support this patient and family, you have clearly had n them and your work is very much appreciated.
told me	, can you please share this more widely with Te Awakura staff? considers the whole service has been amazing.
Kind regards Toni	
Toni Gutschlag Ģeneral Manage	r - Mental Health
Canterbury Distr Hillmorton Hospital,	rict Health Board Privale Bag 4733, Christchurch 8140





Toni Gutschlag

Sent:

Thursday, 13 December 2018 7:00 a.m.

To:

**David Meates** 

Subject:

Re: security in Te Awakura

No text in the email

Sent from my iPhone

On 13/12/2018, at 6:58 AM, David Meates

wrote

Sent from my iPhone

Begin forwarded message:

From:

Date: 13 December 2018 at 4:53:33 AM NZDT

To: David Meates

Cc:

Subject: security in Te Awakura

to

Toni Gutschlag

Sent:

Tuesday, 11 December 2018 9:12 p.m.

To:

**David Meates** 

Subject:

Fwd: WorkSafe meeting [UNCLASSIFIED]

**Attachments:** 

image003.png; image004.jpg; image005.gif

FYI

I'm not that happy with this and feel it is somewhat engineered advice as I was asked yesterday to step back by a and allow H&S to be the single contact.

No-one understands our delivery context as we do.

Will step back though if this is what you need.

Sent from my iPhone

# Begin forwarded message:

From:	
Date: 11 December 2018 at 8:17:31 PM NZDT	

To:

Cc:

Toni Gutschlag

Subject: RE: Re: WorkSafe meeting [UNCLASSIFIED]

Many thanks



I think an acknowledgement of the record of the meeting is important; and I recommend that the sensible approach for the CDHB is for you to suggest that in future it would be best to establish that all communication between WorkSafe and CDHB, is via the CDHB Health and Safety team. In my view, this is the appropriate way for WorkSafe to communicate with CDHB – and it helps manage the CDHB's risk to any WorkSafe involvement. At the moment my impression is that there is no clear protocol and I recommend that one is established immediately. This is common in other large clients of Once H & S receives an approach, it can take responsibility for prioritising it and managing the response in a way that does not prejudice CDHB's position.

I think it is also important to try to clear up the misunderstanding around the request to meet with the Board. If there is an explanation, then please let me know and we can consider how it is best conveyed. If there is a good explanation, we should make it know as soon as possible.

Kind regards,



From: Sent: Tuesday, 11 December 2018 7:00 PM
To:
Cc: Toni Gutschlag
Subject: FW: Re: WorkSafe meeting [UNCLASSIFIED]
Importance: High
Hi ·
Please see attached and below the notice from WorkSafe in relation to the assessment.
Toni and I are in the process of drafting a response to thank them for the information re the Assessment and we are look forward to meeting with them.
They have also attached their record of our meeting and I would like your advice on whether we challenge the following statement made by WorkSafe:
<ul> <li>WorkSafe requested to meet with the Board to further discuss critical risk and management.</li> <li>This meeting was to be initiated by the by the Health Workplace Committee in consultation with the CDHB Board but this never occurred.</li> </ul>
I can confirm that WorkSafe met with our Safe Staffing Group at Hillmorton at the request of NUPE to clarification. I understand that this is not a Health and Safety Committee meeting per se but a bipartisan action group that is set up through the Nursing Meca. As part of their work they work on issues of mutual interest which has included staff assaults. During this meeting WorkSafe offered to present to the Board.
I understand that WorkSafe left a voicemail for the Secretary to the Board Chair re a meeting. The Secretary reportedly called back to confirm that this was possible but never heard back from WorkSafe. I am currently validating this and determining if we have recorded this.
Thanks
Canterbury District Health Board and West Coast District Health Board
Level 4, Oxford Tce   PO Box 1600   Christchurch   New Zealand www.cdhb.govt.nz   www.westcoastdhb.org.nz
www.cumb.gov.nz   www.wcstcoastumb.qrg.nz
×

From: David Meates

Sent: Tuesday, 11 December 2018 1:02 p.m.
To: Toni Gutschlag

Cc:

Subject: FW: Re: WorkSafe meeting [UNCLASSIFIED]

Importance: High

Please note attached letter and email below.

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140

www.cdhb.health.nz | www.westcoastdhb.org.nz



Values - A Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

From:

Sent: Tuesday, 11 December 2018 12:32 PM

To: David Meates

Cc:

**Subject:** FW: Re: WorkSafe meeting [UNCLASSIFIED]

Importance: High

Kia ora David

Firstly Jo and I would like to thank you and your team for making the time to meet with us last Thursday 6<sup>th</sup> of December.

It was acknowledged WorkSafe and the Christchurch District Health Board are in agreement to work collaboratively to address the health and safety risks in various facilities within Christchurch in particular Hillmorton Hospital and Princess Margaret Hospital. It was also agreed that WorkSafe and The Christchurch District Health Board will co-ordinate media responses to ensure our messages are aligned. We look forward to fostering a relationship of open communication and co-operation to ensure all workers return home after work happy and safe.

As requested I have attached a summary of the meeting that took place in April earlier this year for your records.

It has been acknowledged there is an increased number of assaults of workers within Hillmorton Hospital in particular in the Te Awakura Unit and the Assessment, Treatment and Rehabilitation Unit. WorkSafe will now be conducting a number of workplace assessments, one of these will be prior to Christmas 2018 and respond as per its findings.

Our initial assessment will be looking at and understanding: -.

- The organisational structure of Specialist Mental Health Services division.
- Workforce composition and size.

- Facility familiarisation in particular Te Awakura and AT&R Units
- identification of critical/key risks and what controls are in place.

In successive co-ordinated assessments in the new year we will also be reviewing:-

- Officer due diligence, to assess how Officers monitor and evaluate health and safety within the Organisation.
- Review worker engagement and participation processes.
- Review health and safety reporting systems

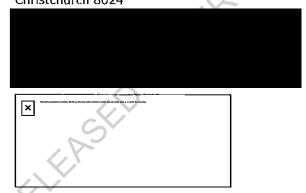
We may also ask that a Health and Safety Representative is made available for an Inspector to speak to on the day of the assessment. I have been in contact with Toni Gutschlag and we have arranged to attend Hillmorton at 09:00 a.m. on Monday 17<sup>th</sup> of December next week. I have emailed Toni with the outline of our assessment above.

I have supplied the link below of a guidance document for Directors you may find useful. <a href="https://worksafe.govt.nz/dmsdocument/860-health-and-safety-guide-good-governance-for-directors">https://worksafe.govt.nz/dmsdocument/860-health-and-safety-guide-good-governance-for-directors</a>

Ngā mihi nui

## Canterbury & West Coast General Inspectorate

2 Degrees House Level 2 351 Lincoln Road Addington Christchurch 8024

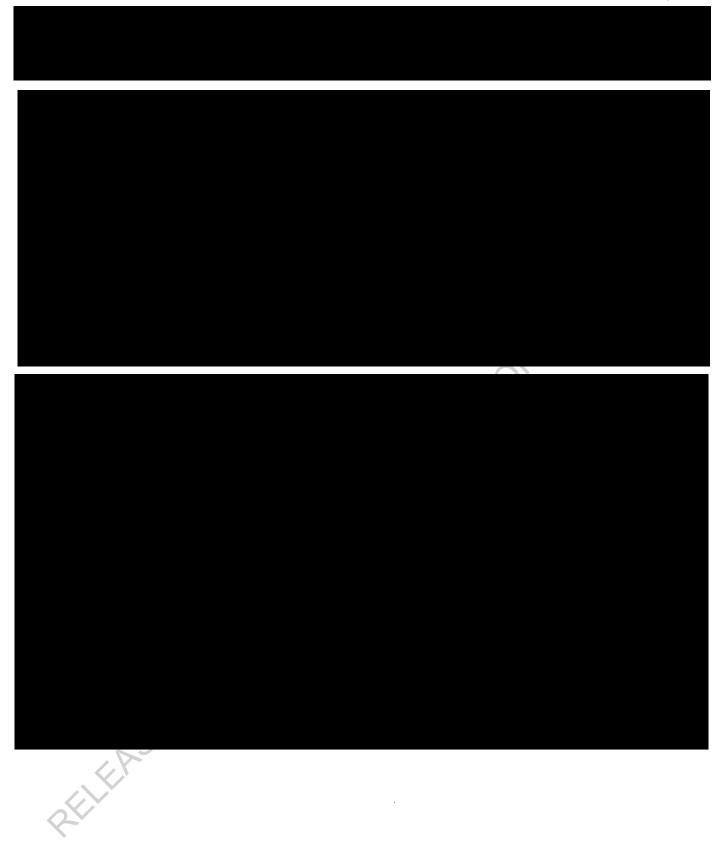


www.govt.nz - your guide to finding and using New Zealand government services

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5HARCÍ



From: Sent: To:	Toni Gutschlag Saturday, 8 December 2018 8:36 a.m. David Meates
Subject:	Fwd: incident at Hillmorton today - media attention likely
FYI	
Sent from my iPhone	
Begin forwarded message:	
Dear lam writing to advise to and was in the process outside to smoke, cam now been remanded in bail. laready had chait situation, the media with building by a	Ilmorton today - media attention likely  that

PARTILE OF FICIAL INFORMATION ACT

From:

Toni Gutschlag

Sent:

Friday, 7 December 2018 8:20 p.m.

To:

David Meates

Cc: Subject:

Re: Meeting 07/12/2018

Great feedback. Thanks David for fronting things this week, I really appreciate it and staff have too.

Sent from my iPhone

On 7/12/2018, at 8:01 PM, David Meates

wrote

Sent from my iPhone

Begin forwarded message:



Sent from my Samsung Galaxy smartphone.

ORMATION ACT

From:

Toni Gutschlag

Sent:

Thursday, 6 December 2018 6:45 p.m.

To:

**David Meates** 

Subject:

RE: Message for all SMHS Nursing staff

Thanks, yes I'm familiar with this story and there is one other similar example. It relates to when

From: David Meates

Sent: Thursday, 6 December 2018 6:41 p.m.

To: Toni Gutschlag

Subject: Fwd: Message for all SMHS Nursing staff

Sent from my iPhone

Begin forwarded message:

From: On Behalf Of David Meates

To: SMHS - All Staff

Subject: Message for all SMHS Nursing staff

Sent: Thursday, 6 December 2018 2:02 p.m.

With regard to the meeting on Friday, I think that it is really important that this meeting is open to all nursing staff including senior nurses to ensure that all voices are being heard and that as an organisation we are doing all we can to work with staff to deal with the current issues that we are facing. As the majority of nurses are NZNO members we have an expectation that they would be present to support their members.

I look forward to meeting on Friday at 2pm.

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

P O Box 1600, Christchurch 8140 www.cdhb.health.nz | www.westcoastdhb.org.nz



Values – Ā Mātou Uara

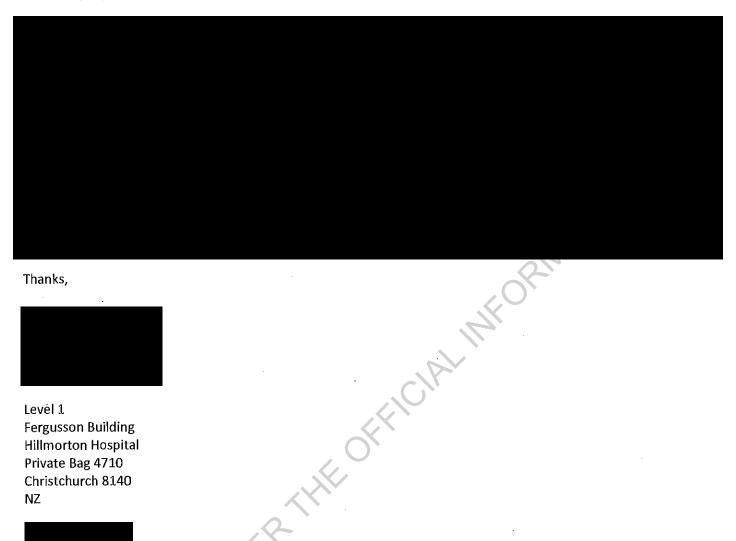
Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

From: Sent:	Toni Gutschlag Thursday, 6 Dece	ember 2018 6:22 p.m.		
To:	David Meates			
Subject:	FW: Trespass			
This relates to person who	assaulted			_
From: Sent: Thursday, 6 December	er 2018 9:13 a.m.			, C)
To:		Toni Gutschlag		
Cc:				
Subject: RE: Trespass				· · · · · · · · · · · · · · · · · · ·
<u> </u>			OF.	
Hi Line His with I have discussed this with I				
that the team discuss the i				
are then happy to support violence simply because so				
with an order in place.	ineone also has a ment	at timess and it is pos	sible to livite people	e for appointments etc.
Regards		/(0.		
From:		4		
Sent: Thursday, 6 Decemb	er 2018 7:57 a.m.			
To: Toni Gutschlag				
Cc:				
Subject: FW: Trespass				
Dear All,				
	•			
Re				
As you may be aware assaulted a member of staguidance.				
The day before that hat the recent assault of mem implication was that the sa	ber of staff on the ward	d l	n at the Fergusson bi	uilding, while referring to The
At present is in police	custody while charges a	are pressed.		

and I have discussed the possibility of a trespass order. I have approached how that might work, and his reply is below with attached policy above.

to explore

What are people's thoughts on this, as to whether we should take this further?



Thanks,



Level 1 Fergusson Building Hillmorton Hospital Private Bag 4710 Christchurch 8140 NΖ

Sent: Wednesday, 5 December 2018 2:49 p.m.

Subject: Trespass

Dear

Thank you for the message. I attached a yet to be published policy, but one which has been approved at GM level across CDHB.

Toni as GM for the service needs to approve the decision to trespass. Following that, the Security Manager, can assist with the trespass notice itself and the logistics of getting it to the individual.

If staff are subject to harassment/threats there are other options in addition/instead of a trespass notice depending on the detail of what has/is occurring.

Happy to discuss.

Regards

Canterbury and West Coast District Health Boards

From:

Toni Gutschlag

Sent:

Thursday, 6 December 2018 3:10 p.m.

To:

David Meates

Subject:

RE: Addressing violence at Hillmorton hospital

PEFFE OF FILL WIFO BY WATER THE OF FICIAL WIFO BY WATER THE OF FILL WIFE OF FILL WIFF OF FILL WIFE OF FILL WIFE OF FILL WIFE OF FILL WIFE OF FILL WI The tone of the letter may speak for itself and mean a response from me is unnecessary.

From:

Sent: Thursday, 6 December 2018 10:20 a.m.

To: Toni Gutschlag

Subject: FW: Addressing violence at Hillmorton hospital

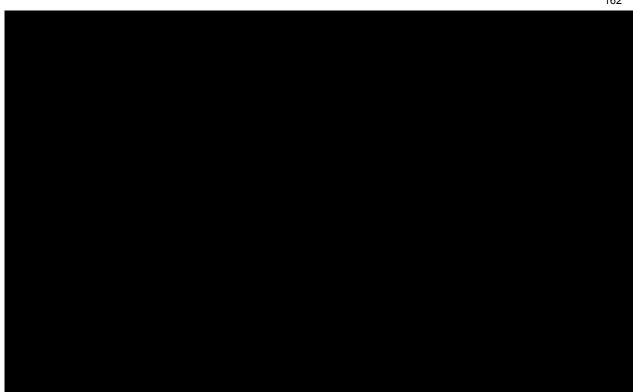
fyi

From:

Sent: Thursday, 6 December 2018 10:10 a.m.

To: David Meates

Subject: Addressing violence at Hillmorton hospital



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From:
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Toni Gutschlag

Sent:

Monday, 3 December 2018 8:20 p.m.

To:

**David Meates** 

Subject:

Fwd: incidents at Hillmorton

Sent from my iPhone

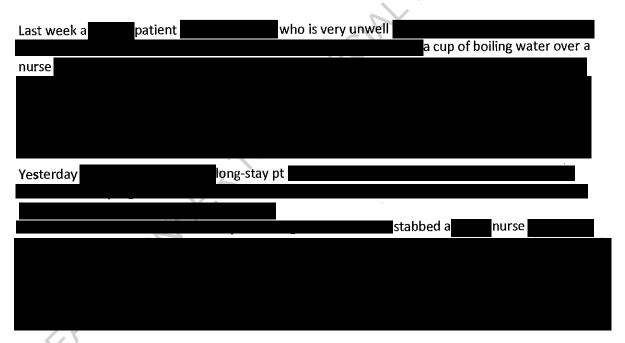
Begin forwarded message:

From:
Date: 3 December 2018 at 9:50:49 AM NZDT
To:
Cc:
Toni Gutschlag

Subject: incidents at Hillmorton

Dear

As discussed the two incidents that have had media attention are as follows:



The high level of violence on our not-fit-for purpose units is not new, and has been escalated a number of times. While more dramatic in nature, it is more of the same theme of over-crowded units that were built at a time when everyone was secluded very readily. The working party that nurses are contributing to is coming up with recommendations, none of which will solve the building issue, however they are well engaged and really distressed by these events and the media attention.

The acute alternative that has been planned will not be up and running until March but might bring some relief.

I will update if there is any new information.

Regards

Chief of Psychiatry, Canterbury District Health Board Director of Area Mental Health Services, Canterbury.

From: Sent: To: Cc: Subject: Attachments:	Toni Gutschlag Friday, 30 November 2018 2:07 p.m.  David Meates  FW: FROM ZERO SECLUSION TO SAFER FOR ALL.memo.30112019 FROM ZERO SECLUSION TO SAFER FOR ALL.memo.30112019.docx
Hi David, Further information for Monda Regards Toni	ay fyi. 18 1:36 p.m.
From: Sent: Friday, 30 November 201 To: Toni Gutschlag Cc: Subject: FROM ZERO SECLUSIO	0N TO SAFER FOR ALL,memo.30112019
Hi Toni	
all staff regarding the change of with David prior to the staff for	yesterday the project team agreed that it would be helpful to develop messaging for of Zero Seclusion to Safer for All. We thought it would be helpful to share this brums next week given concerns have been raised about staff safety in the context owith background and a brief update.
has assisted in the c supported by the Clinical Lead	communication and the project group is happy with the wording , which is also
was hoping to give David forward this to him.	d a heads up but you may well see him today at the conference and happy for you to
Thanks	
PELERSED	

## FROM ZERO SECLUSION TO SAFER FOR ALL

In recent months there have been concerns about introducing the HQSC 'Zero Seclusion' project into the Canterbury DHB, which aims to eliminate seclusion in our wards by 2020.

Seclusion is when a person is placed alone in a room or area from which they cannot freely exit. It involves containment, isolation and reduction of sensory input. Seclusion can be a traumatic experience for the consumer, their family and staff. This initiative looks at other ways to help people who are in distress, so seclusion does not need to be used.

Although the 'Zero Seclusion' project is incredibly important, the name cites an aspirational goal which ultimately puts the idea before the person – or the staff member. It is widely appreciated that completely eliminating the need for seclusion is unattainable within our current resources and service configuration. The CDHB has however made significant gains in preventing the use of seclusion over the last 5 years.

Canterbury DHB is now moving forward with the project but under a new name and focus 'Safer For All'. This is a step also taken by other DHBs across New Zealand.

'Safer for All' focuses on the causes that result in people needing to be secluded: violence and serious threats of violence. The idea is that if we reduce violence, we will reduce seclusion.

The project is looking at developing better assessment plans, improved management plans, and is reviewing the actions of the multidisciplinary teams and the use of medication in order to prevent violence and threats. The HQSC component will bring training and support resources, Quality Improvement tools and discipline to the project.

'Safer For All' is a co-designed project that brings in the voices of consumers, family and staff at every step of the design process. These goals align precisely with those of the Te Awakura working group, which is working to support a safe and sustainable acute inpatient service for staff consumers and their families.

PARTITE OF FIGHER THE OF FIGHE

From:

Toni Gutschlag

Sent:

Friday, 23 November 2018 4:28 p.m.

To:

**David Meates** 

Subject:

Invitation to staff forums with CEO David Meates at Hillmorton Hospital

Importance:

High

Hi David,

Are you ok with this message going out?

Dear all,

I would like to provide clarification on the upcoming meetings with our CEO, David Meates.

David will be holding two staff forums on the Hillmorton Hospital site next month to update staff on our campus facilities, as well as engage on other priority issues. Similar forums were recently held at the Princess Margaret Hospital campus.

Hillmorton site staff are welcome to attend one of the following sessions, which will take place in meeting rooms 1 and 2 of the Fergusson Building:

- Monday, 3 December at 10:00 am;
- Friday, 7 December at 2:00 pm.

We are anticipating a lot of interest in these forums. As we unfortunately do not have large meeting venues on our site, spaces are limited and we are asking staff to register in advance. However, David has offered to run additional forums if required.

If you would like to attend, please email

and specify which date

you prefer. Enrolment will be on a first-in, first-served basis.

I look forward to seeing those of you who are able to attend then.

Kind regards,

Toni Gutschlag

Toni Gutschlag General Manager - Mental Health

Canterbury District Health Board Hillmorton Hospital, Private Bag 4733, Christchurch 8140 J

our health system