



NEW ZEALAND PRIVATE SURGICAL
HOSPITALS ASSOCIATION INC

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

9.00am to 11am – Thursday 14 September 2023
Lambton Room, InterContinental Hotel
2 Grey Street, Wellington

AGENDA

	Agenda item:
0900	Welcome & apologies - Julia Abbott, Steph Feldbrugge, Marie Russell
	Opening karakia – Dean Cowles
0910	Previous meeting: <ul style="list-style-type: none">▪ Confirmation of previous minutes of NCLG meeting held on 16 March 2023 (attached)▪ Matters arising from previous meeting
0915	Ice breaker & reconnect
0940	Carey Campbell "It's about will not skill: The importance of grit, a growth mindset and nurses for successfully digital transformation"
1010	Pippin Morrison and Dean Cowles Our Te Ao Māori Journey
1040	Review and feedback on the Terms of reference for the group (attached)
	External Sector Group Representation and SIPCAG report (attached)
	Election of Co-Chairs
1055	Closing Karakia – Dean Cowles
	Date of next meeting: TBC (at NZPSHA seminar, date to be confirmed)



HR / QUALITY / NURSE CLINICAL LEADERS MEETING

Minutes – 16 March 2023

Name:	NZPSHA - HR / Quality / Nurse Clinical Leaders
Date:	Thursday 16 March 2023
Time:	9:00 am to 11:00 am
Location:	Intercontinental Hotel - Wellington
Chair Members:	Julia Abbot, Marie Russell; Steph Feldbrugge,

1. Welcome

Julia welcomed everyone to the meeting and thanked the previous Chairs for their contributions.

Introduced the new Co-chairs – Marie Russell; Steph Feldbrugge

Julia provided an overview of the results of a survey to members, and advised the main areas of feedback has provided the focus for this meeting. The feedback included: -

- Time to network and connect.
- Group discussions
 - Current issues and challenges
 - New and/or exciting and productive initiatives

Attendees:

Jaimee Mchugh; Rebecca Quintal; Nicky Van Praagh; Rachael Stephens; Belinda Dore; Tina Rogers; Colette Breton; Vicki Briant; Jackie Dearman; Nicki Stretch; Debby Govers; Lorna Grove; Sue Valentine; Ingrid Fisher; Stacy Valentine; Robyn Cumings; Dorothy Gelens; Kate Kennedy; Marie Russell; Ross Turner; Anouk Doevandans-lumb; Nick Pullan; Sandy Brace; Jeremy Kloet; Scott Hunter; Angela Dewhirst; Sarah Hydes; Adrian Amandus; Joanne Bell; Deb Boyd; Alison Fleming; Denise Primrose; Vicki Bulmer; Chris Mitchell; Julia Abbott; Pippin Morrison; Kelly Davis; Steph Feldbrugge; Carol Ferguson; Marg Jenner; Carole Kaffes

2. Apologies

N/A

3. Icebreaker and Group Discussion

3.1 Marie presented and introduced an Icebreaker:

The group really enjoyed the networking and connecting through taking part in the icebreaker. It was fun and a valuable introduction to the session.

3.2 Group discussion and feedback

The main group was divided into 3 groups: -

Group One: Leadership succession planning – developing leaders for the future.

- Leadership training at all levels.
- Using training programs.
- Developing pathways that are visible.
- Starting the journey on commencement
- Identifying potential managers
- Putting right people on the right programme
- Best ideas come from the shop floor.
- Issue – is releasing people.

Group Two: Workforce challenges and potential solutions – what are others doing.

- Looking at the workforce
- Have robust discussions.
- Framework for getting people at the top of their scope.
- Find opportunities for people.
- Not have RN's doing all the work
- Look at RN, EN, HCA's – clinical task levels – This is embedded in Australia and is coming to NZ.

Group Three: Implementation of the Ngā Paerewa Health and Disability Services Standards

- **What's working well.**
- **Learnings to share.**

Pippin Morrison shared her experiences so far with audits at SCH.

4. Presentation on HRIS solutions – ELMO at St George's Hospital

Steph presented St George's Hospital implementation of ELMO - HRIS software.

Overview of Presentation, which was presented in PowerPoint – St George's Hospital People Hub.:



HR Core

HR Core has allowed us to centralise and electronically keep our colleague information. HR Core enables Managers and colleagues to find and have access to their own personal data and information anywhere, anytime.

The system provides managers with a complete view of their team, including their Contracts, Variations, Learning – booked, completed, mandatory training and / or clinical competencies and their progress, - e.g., enrolled, in progress, completed and/or a recompletion date if applicable.

Onboarding

Within HR Core there is the ability to configure onboarding / offboarding workflows, assign courses, send reminders, and provide new colleagues access to their own onboarding portal before their start date at St George's.

Reporting

There are reporting capabilities (also available to managers for their areas) that include headcount, turnover, diversity, ethnicity, etc. for their own department.

Recruitment

Our recruitment module includes branded external and internal careers portals, integration with external job boards (Seek) and the ability to create talent pools.

The integrated nature of the system allows for a seamless and consistent candidate experience, regardless of whether a candidate is hired and onboarded or not.

We can select unsuccessful candidates to remain in our talent pool if we see potential for them to be suitable for other jobs. Candidates that have accepted offers have their relevant profile and job information automatically passed over to the Onboarding module so that the onboarding process can commence immediately and again is seamless.

Learning Management

We are currently implementing and finalising St George's Hospital People Hub – Learning module. This module allows us to keep track of our colleagues' training needs, course completion rates and compliance requirements. We have created learning workflows which are allocated once the Onboarding process has been completed. The learning workflow includes the relevant mandatory and / or clinical competency requirements of the various roles.

Our courses include policy acknowledgements, documents relating to the learning topic, instructor-led training, eLearning content, journal clubs, clinical competencies and if relevant, booking and completing assessments. External training, e.g., training completed through HealthLearn is also recorded. We can assign Continuous Professional Development (CPD) plans to colleagues where this is relevant, and they can track their progress. Within the Learning module there is very comprehensive reporting.

Performance Management

The next module we will implement is Performance Management - due to begin mid-2023.

This will be configurable to our requirements and will include goal setting capabilities, competency models and development plans.

Our first Performance Planning and Review template will be the Nurse's Three-Yearly Nursing Council Review.

Marie Russell closed the meeting with Karakia at 11:00 am



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Terms of Reference - NZPSHA Nursing and Clinical Leaders Group

Terms of Reference

Core Functions:

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

Structure

Summary of NZPSHA Representation on External Sector Groups – August 2023

	Organisation:	Name of External Group:	NZPSHA Representative:	Member Hospital / Position:
1.	HQSC:	HQSC Patient Deterioration Leadership Group (new work programme called Shared Goals of Care)	Watching brief currently through NZPSHA executive quality portfolio, Philippa Pringle.	Chief Operating Officer, Mercy Hospital Dunedin / NZPSHA Executive
2.		HQSC Strategic IPC Advisory Group (SIPCAG)	Lynne Downing Lynne.Downing@royston.co.nz	Quality Co-ordinator, Infection Preventionist, Royston Hospital / Evolution Healthcare
3.		HQSC Medication Safety Expert Advisory Group (MSEAG)	Joanne Beachman Joanne.Beachman@mercya.scot.co.nz	Pharmacy and Allied Services Manager, MercyAscot
5.	ACC:	ACC Strategic Infection Advisory Group	Catherine Robbins	The group may have ceased, no formal advice from ACC.
7.	EGGNZ:	Endoscopy Guidance Group Committee (NZPSHA MoU with Endoscopy Guidance Group signed January 2019)	Sarah Harcus Sarah.Harcus@gracehospital.co.nz	MercyAscot
8.	Ministry of Health:	Surgical Mesh Urogynae Roundtable	Maree Cassidy Feedback through NZPSHA Executive	Chief Nurse, MercyAscot / NZPSHA Executive
9.		National Credentialing Committee	Liam Wilson Feedback through NZPSHA Executive	Surgeon, Grace Hospital
13.	Intravenous Nursing New Zealand:	IVNNZ Inc	Ally Hale	IPC, Bidwill Hospital, Timaru Ally Hale's initial term ended. Ally happy to continue on until a new representative is appointed.
14.	PANNZ:	Paediatric Anaesthesia Network NZ	Philippa Pringle Feedback through NZPSHA Executive	Chief Operating Officer, Mercy Hospital Dunedin / NZPSHA Executive
15.	Sepsis NZ:	Working Group for National Sepsis Action Plan	No representative, ongoing work on this group to be advised	

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

Name of external working group / EAG:	SIPCAG Te Rōpū Tohutohu Rautaki Ārai Mate, Whakahaere
Organisation (e.g. HQSC, ACC):	HQSC
NZPSHA member representative:	Lynne Downing
NZPSHA member hospital:	Royston Hospital
Working group meeting date:	Tuesday, 6 June 2023

**For NZPSHA Executive and wider membership:
Key feedback points (and their relevance to the private sector):**

SIPCAG revised terms of reference have been finalised:

Dr Rawiri McKree Jansen has been appointed as co-chair along with Greg Simmons

Healthcare-associated Infection point prevalence survey:

- Te Tāhū Hauora will be adding a question about infections to patient feedback surveys
- NZPSHA member hospitals could consider adding infection surveillance questions to their surveys

National infection services:

The Minister of Health has recently announced the concept of national clinical networks to lead and drive national standards and models of care, that new networks may replace existing networks and that infection services will be included in the first tranche.

HQSC:

Nikki Grae gave an overview of the new name and logo for Te Tāhū Hauora Health Quality & Safety Commission, and that Dr Peter Jansen is the new CEO.

The Australasian Society of Infectious Diseases (ASID):

The ASID conference will be held in Wellington in March 2024

Accident Compensation Corporation (ACC):

The "Know your IV lines" programme is concluding. ACC will be looking for planned improvement processes from governance groups, and will be seeking organisations to participate in the next programmes – an opportunity for NZPSHA hospitals to participate.

Engaging with consumers:

Te tikanga mō te mahi tahi a ngā hinonga hauora ki ngā kiritaki me ngā whānau

The code of expectations for health entities' engagement with consumers and whānau (the code) sets the expectations for how health entities must work with consumers, whānau and communities in the planning, design, delivery and evaluation of health services.

This code is required by the Pae Ora (Healthy Futures) Act 2022 and is underpinned by the health sector principles. All health entities must act in accordance with the code and are required to report annually on how the code has been applied.

The health sector principles incorporate Te Tiriti o Waitangi (the Treaty of Waitangi) principles identified by the Waitangi Tribunal in its Hauora Inquiry. These include the principles of tino rangatiratanga (self-determination), ōritetanga (equity), whakamaru (active protection), kōwhiringa (options) and pātuitanga (partnership).[\[1\]](#)

This code does not replace the Code of Health and Disability Services Consumers' Rights (Code of Rights).^[2] The Code of Rights specifies important rights that providers must uphold when delivering services directly to consumers, and the code of expectations sets requirements for how health entities must work with consumers, whānau and communities in the planning, design, delivery and evaluation of health services.

You can read the full code of expectations in a variety of formats [here](#).

National Infection Services Network update:

A link to the recording can be found [here](#)

Proposed functions of a national infection services network:

Feedback is requested by [Survey Monkey](#)

The next SIPCAG meeting will be held Wednesday, 25 October 2023