

**Minutes** of the meeting of the Safe Surgery NZ Advisory Group  
Held on 25 July 2018

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- Present:** Prof Ian Civil – Chair (SSNZ Clinical Lead)  
Rosaleen Robertson (Southern Cross Hospitals and NZPSHA)  
Caroline Gunn (Consumer representative)  
Miranda Pope (Canterbury DHB, Perioperative Nurses College NZNO)  
Dr Mike Stitely (Royal Australian and NZ College of O&G)  
Prof Justin Roake (Canterbury DHB)  
Dr Leona Wilson (ANZCA, CCDHB)  
Dr Nicola Hill (Royal Australasian College of Surgeons)
- Guest:** Victoria Aliprantis (Chief of Clinical Risk and Quality, Southern Cross Hospitals)  
Muriel McIntrye (Coordinator Risk and Quality, Southern Cross Hospitals)
- HQSC team:** Gary Tonkin, Owen Ashwell, Maree Meehan-Berge, Katie Monteith (minute taker)
- Apologies:** Dr Michael Wadsworth (Registrar Medical Officer)  
Dr Peter Jansen (ACC)  
Bob Henderson (Human factors expert and psychologist)
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The meeting commenced at 10.00am

**1. Welcome and apologies**

The Chair welcomed Dr Nicola Hill, new member of the advisory group representing the Royal Australasian College of Surgeons. The Chair and Programme team were onsite at the Commission office, all other members attended the by the meeting by zoom.

**2. Minutes and actions from the 5 April 2018 meeting**

The minutes were approved. The actions list was considered. All items have been progressed or completed.

**Action:** the approved 5 April meeting minutes will be placed on the Commission website.

**3. Progress report**

The safe surgery monthly report to the June 2018 (end of financial year) was received and discussed. Quality Hub has now contracted with all 20 DHBS and the University of Auckland team has completed the contracted online teamwork and communication training, and auditing recalibration resources.

**Action:** The advisory group would like to acknowledge Kaylene Henderson and Jenny Weller, for delivering services beyond their contractual obligations.

The representative for Southern Cross Hospitals queried the fee difference between private hospitals and DHBs for use of the reporting tool. Southern Cross Hospitals to approach Quality Hub and discuss with the Senior Portfolio Manager if needed.

The quarter one 2018 Quality Safety Marker (QSM) report has been published on the website. The latest QSM results were discussed. Some disappointment was expressed with the results, which may be a reflection of the programme having a low profile in those DHBs.

There are eight outlier DHBs. It was acknowledged that there are multiple reasons for the results and each DHB has its own issues. It is likely that recorded briefings may not yet fully represent the extent of briefings actually taking place. The overall total is not a fair representation of the current progress.

**Action:** the programme team will send a letter to DHB CMOs outlining their results and advising of the areas each DHB needs to focus on.

The idea of making consumers more aware of the (already publicly available) reporting was raised. This could include nudge approaches and how to use the data in a constructive way.

**Action:** The consumer representative agreed to work with the Commission's Partners in Care team and progress these ideas with the consumer network.

Briefings were acknowledged to be an important part of the programme. A quality measure associated with briefings might be needed in future, which would also help to further raise awareness of the programme. There is currently no validated marker. The focus could be on leadership.

**Action:** The RACS representative will research this further and report back to the group.

#### **4. HealthCERT meeting update**

The Senior Portfolio Manager updated the advisory group on the Learning and Improvement Group's workshop with HealthCERT in April. The workshop was well attended by a range of auditors from the different Designated Audit Agencies. The Commission provided an overview of programme activities and areas of focus; and what we expect hospitals will have in place to implement the programmes effectively. The auditors talked about their processes they go through and the information they collect.

**Action:** Senior Portfolio Manager has a follow-up meeting with HealthCERT scheduled for Tuesday 31 July.

#### **5. Programme Plan 2018/19**

The Senior Portfolio Manager outlined the finalised programme plan to the advisory group, which included their input from the April meeting.

Work is grouped under four key workstreams – Support DHB delivery through expert advice, tools and guidance; consistent measurement and analysis; alliances & networks; and raising awareness. Once live, the online auditor recalibration tools will need guidelines for the DHBs. A minimum of yearly but even better, recommend twice yearly recalibration is recommended.

Measurement of the impact of the programme will include a third repeat of the culture survey in 2019. The clinical lead will continue to support hospitals, visiting surgical teams where needed. Developing articles for college publications will continue into 2018/19. The advisory group did not feel there was a need to undertake further analysis of the outcome markers this year.

There are barriers to speaking up that are not obvious to individuals. Whiteboard animations have been developed to identify and address these barriers. Working with the colleges is another opportunity to address this. The programme aligns with the RACS Operating with Respect programme.

**Action:** the Senior Portfolio Manager and RACS representative to further discuss how to work with colleges.

Regional workshops and a targeted awareness campaign will be the key activities of 2018/19. Funding has been secured for an awareness raising campaign. Workshops will likely be held March next year, with a focus on briefings. The Programme Coordinator will lead this work. Ideally the speakers will be health related and recognisable to the people we want to attend the workshops. The awareness campaign should promote 'speaking up for safety'.

**Action:** advisory group members will email the Senior Portfolio Manager any ideas or contacts related to the regional workshops.

**Action:** the Programme Coordinator will research international campaigns then options will be discussed with the Commission's communications team.

**Action:** the programme team will provide progress reports on the work programme to the advisory group throughout the year.

## **6. NetworkZ update**

Training for the third cohort (next year's cohort) has begun, ACC has agreed to fund the second half of the programme. Maintaining momentum will be the key challenge. The Major Trauma Network is supporting the use of NetworkZ in emergency departments at Wellington Regional Hospital and Nelson Hospital.

## **7. Other business**

The former Project Manager informed the group it was her last meeting and that she had appreciated working with everyone. Her large contribution to the programme was acknowledged by all and the Chair thanked her for their positive working relationship.

**Action:** the Programme Coordinator will send out a doodle poll to the group to finalise a date for November's advisory group meeting.

The meeting finished at 12.00pm.