



Ensuring that we provide high quality, safe care that meets the needs of our diverse communities is of the highest importance to Southern DHB. We recognise the trust the community places in us to deliver care that is both excellent and safe, and we take this responsibility very seriously.

As part of meeting this commitment, New Zealand DHBs are expected to report to their communities on their quality and safety performance to the community. We are pleased to provide this snapshot summary, and further information is available in our Annual Report 2017/18: Quality and Performance Account at www.southernhdb.govt.nz

This year we have implemented a number of initiatives that will improve health care for our people – from the roll-out of the National Bowel Screening Programme, to better supporting rural and remote midwives through our primary maternity system of care, to opening a new gastroenterology unit and getting started on redeveloping Lakes District Hospital. We also continue to have challenges, and redoubling our efforts to ensure good clinical systems that reduce delays and value patients' time is a clear focus for the year ahead.

Of course no initiative, and no measure, stands alone. High quality care requires the whole health system to

work together. That is why we are committed to building the more integrated health care system our communities have asked for.

We appreciate the efforts of all our 4,600 staff, and health care partners and providers from across the district, as they work to serve our community with high quality care every day.

Kathy Grant, Commissioner
Chris Fleming, Chief Executive Officer

Health Targets

Raising Healthy Kids:

	Q1	Q2	Q3	Q4
Target	>95%	>95%	>95%	>95%
SDHB	92%	97%	99%	96%
NZ	92%	98%	98%	98%

Improved Access to Elective Surgery:

	Q1	Q2	Q3	Q4
Target	100%	100%	100%	100%
SDHB	98%	99%	99%	100%
NZ	104%	102%	102%	103%

Increased Immunisation:

	Q1	Q2	Q3	Q4
Target	>95%	>95%	>95%	>95%
SDHB	94%	95%	94%	94%
NZ	92%	92%	92%	91%

Shorter Stays in Emergency Departments:

	Q1	Q2	Q3	Q4
Target	>95%	>95%	>95%	>95%
SDHB	93%	92%	90%	90%
NZ	91%	93%	91%	91%

Faster Cancer Treatment:

	Q1	Q2	Q3	Q4
Target	>90%	>90%	>90%	>90%
SDHB	86%	89%	90%	85%
NZ	92%	92%	91%	91%

Better Help for Smokers to Quit - Primary:

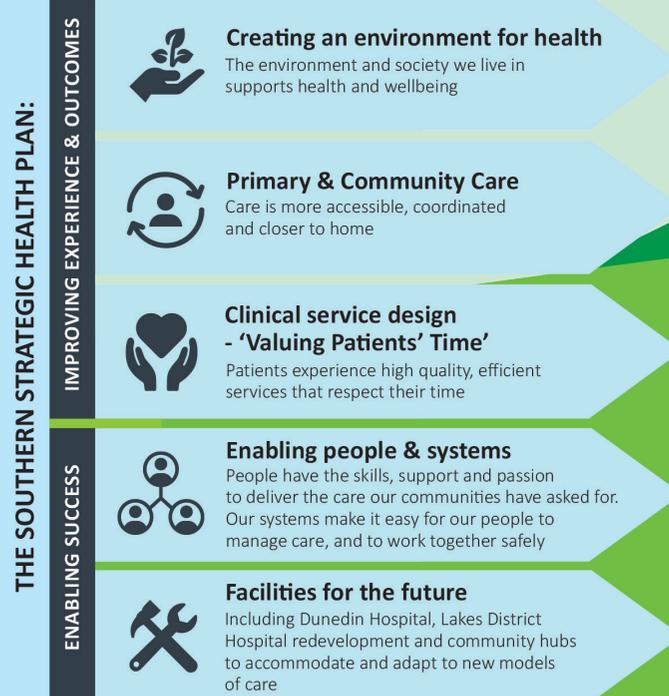
	Q1	Q2	Q3	Q4
Target	>90%	>90%	>90%	>90%
SDHB	91%	91%	91%	91%
NZ	89%	88%	89%	90%

Our journey towards a high quality, coordinated health system

What have our people asked for?

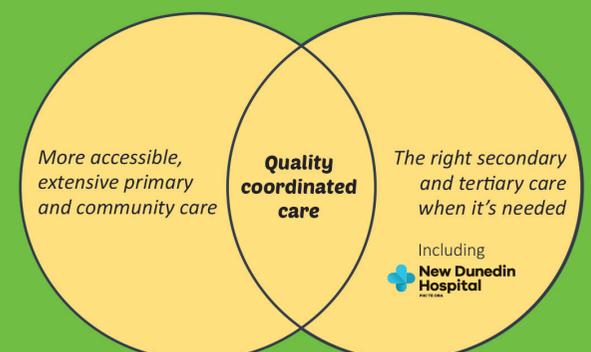
- Better coordinated care across providers, with less wasted time
- Care closer to home
- Communication that makes sense and is respectful
- A calm, compassionate and dignified experience
- High quality, equitable health services and outcomes.

How will we get there?



By 2026: We work in partnership to build:

A health enabling society within which we deliver:



So that our people:

- are healthier and take greater responsibility for their own health
- stay well in their own homes and communities
- with complex illness have improved health outcomes.



Improving our system - highlights in 2017/18

Southern DHB and WellSouth's Primary and Community Care Strategy and Action Plan was launched, reshaping services



The Speak Up programme, promoting a positive workplace culture, exceeded 2,500 participants

The National Bowel Screening Programme was launched for the Southern district



New gastroenterology department opened

The planned rebuild of the new Dunedin Hospital, and central city site, was announced



The number of teenagers who have never smoked continues to rise

The Home as my First Choice initiative was launched, promoting options for older people wanting to stay in their homes



Southern DHB met the Faster Cancer Treatment target for the first time

The Oranga-Pepi programme was introduced, to improve whānau awareness of entitlements for newborn babies, so they can get the best start in life



Resource consent was gained for redevelopment of Lakes District Hospital

62,356km²



The Southern district has a population of **326,280** residents, the majority living in Dunedin and Invercargill

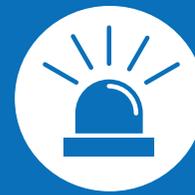
Our population is slightly older when compared to the national average **.54,860** people are aged 65 and over



3,379 babies were born in the Southern district last year



4,655 staff were employed at Southern DHB



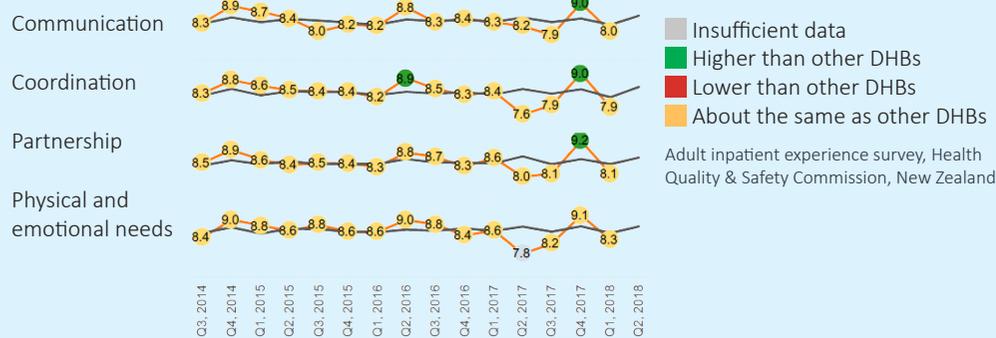
There were **84,110** presentations to Emergency Departments

13,219 elective surgeries and procedures were performed



Patient experience survey

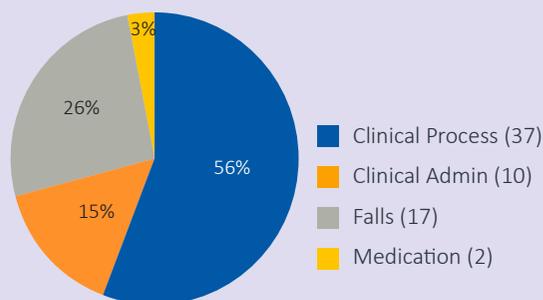
Compared with NZ Average **Score out of 10 by domain**



What have we learned from our serious adverse events?

Every year we report events where outcomes have not been as expected, so we can learn from these and aim to reduce the likelihood of them occurring.

What were the main groups of SAEs in 2017/18?



Pressure Injuries

Southern DHB was a pilot site for the Health Quality & Safety Commission (HQSC) to develop more accurate data relating to the incidence of pressure injuries. A review template was developed and every patient has an individualised plan of care to minimise further harm and aid wound healing.

Recognition and response for deteriorating patients

Delays in the recognition and response of patients whose conditions were deteriorating led to three adverse events. There was an immediate assessment of the processes that were in place, an awareness campaign, and educational tools including quick reference cards were developed.

Falls

We continue to aim for zero falls. We have improved our documentation of patient care assessments to better identify those at risk of falls, moving from 83 per cent of patients assessed in 2016/17 to 93 per cent in 2017/18.

Medication

Southern DHB reported two serious adverse events relating to medication this year. Both have been reviewed with corrective actions put in place.

Clinical administration

Delay and failure to follow up has resulted in 10 adverse events. This needs to be a major area of focus for the coming year and is an important driver behind a

comprehensive programme of clinical service redesign initiatives, aimed at valuing patients' time. This will consider a range of administration processes and clinical practices to improve patient journeys through our health system.

Always Report & Review (ARR)

We have reported 18 events as per a new policy process to report particular events, such as incorrect details on a referral to radiology, regardless of the outcome. Immediate actions have been put in place with policy, procedures and 'Safety Signpost Alerts', and further analysis of individual events.

Ophthalmology

In 2016 we carried out an external review as we sought to ensure the safety and sustainability of this service. We have either implemented or made progress on most of the recommendations from the external review. The number of those waiting for longer than 1.5 times the recommended timeframe has now been reduced to zero at Southland Hospital for several months, and significantly reduced at Dunedin Hospital, reaching zero on occasions. We still need to finalise a sustainable model so we can cope with the ongoing increase in demand for this service.