Application for an enforceable undertaking

May 2018

Part 4, Health and Safety at Work Act 2015

The commitments in this application are offered to WorkSafe New Zealand by

Name of entity or, partnership or individual applying for this undertaking Hawke's Bay District Health Board

New Zealand Government





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Application for an enforceable undertaking

Part 4, Health and Safety at Work Act 2015

The commitments in this application are offered to WorkSafe New Zealand by

Name of the person or persons who will be signing this undertaking in section 4:

Craig Climo, Interim Chief Executive Officer

On behalf of: Hawke's Bay District Health Board

Name of the entity giving this undertaking (if an individual or sole trader, leave blank complete in all other cases)

Hawke's Bay District Health Board

This enforceable undertaking is given on the day and date that it is accepted and signed by WorkSafe. The undertaking and its enforceable terms will operate as a legally binding commitment on the part of the person from the date it is given.

Do not refer to the victim by name in this document. Please refer to the victim/worker/employee/volunteer/or other term as appropriate.

WorkSafe respects your privacy and is committed to protecting personal information. The information provided in this document is for the purpose of an undertaking given to WorkSafe under Part 4 of the *Health and Safety at Work Act 2015*. This information will be managed within the requirements of both the *Privacy Act 1993 and the Official Information Act 1982*.

There is an expectation that WorkSafe will generally publish the undertaking in full on its website.

TERM	DEFINITION
Contravention	An action which offends against the <i>Health and Safety at Work Act 2015</i> and/or any Regulations made under it. It includes both health and safety contraventions. A contravention also includes an alleged contravention.
HSMS	A Health and Safety Management System.
Person	An individual who or a legal entity which has a duty under the <i>Health and Safety at Work Act 2015</i> and can give a written undertaking. The term includes individuals, each partner in a partnership, corporations, trustees of trusts, and crown organisations.
Health and Safety legislation	Health and Safety at Work Act 2015 and associated regulations.
Enforceable undertaking	An enforcement pathway that allows a duty holder to voluntarily enter into a binding agreement with WorkSafe. The agreement outlines actions the duty holder will undertake to address the contravention. It is expected to deliver activities which benefit workers, the wider industry or sector and/or the community as well as acceptable amends to any victim(s).

1. General information

1.1 Details of the person/persons/entity giving the undertaking

Name of person(s) making this undertaking: (in all cases complete with this 4)

Craig Climo, CEO

Description of the products and services provided by the business or undertaking:

The HBDHB is a central government-funded crown entity charged with delivering healthcare services to the Wairoa, Hastings, Napier City and Central Hawke's Bay Districts.

In cases where treatment is unavailable at HBDHB, our organisation arranges for patient transfer between tertiary providers in Auckland, Waikato, Wellington, and Christchurch.

Our services are offered at a range of locations. These include: Fallen Soldiers' Memorial Hospital [Hastings] Napier Health Centre [Napier] Wairoa Health Centre (Wairoa) Central Hawke's Bay Health Centre (Waipukarau) Springhill Addiction Centre [Napier] Warehousing facility [Hastings]

Name of entity: individual)

Hawke's Bay District Health Board (HBDHB)

Type of legal entity: (complete in all cases, for a second and the second secon

Crown entity

Nominated contact person:

Craig Climo

Physical address:

Hawke's Bay Fallen Soldiers' Memorial Hospital Omahu Road Private Bag 9014 Hastings 4156 Hawke's Bay

Postal address: (if

Hawke's Bay Fallen Soldiers' Memorial Hospital Private Bag 9014 Hastings 4156 Hawke's Bay

Work phone: 06 878 1690

Mobile phone: 027 234 0013

Email: craig.climo@hawkesbaydhb.govt.nz

Industry: Healthcare

Workers (enter numbers):

Full-time: 1129 Part time: 1775 Casual: 457

Comments:

1.2 Detail of the contravention

The HBDHB is charged with failing to comply with the duty to take reasonably practicable steps to ensure that the health & safety of other persons was not put at risk from work carried out as part of the conduct of our organisation, and that this failure exposed other persons to a risk of death or serious injury arising from falling from a lifter.

WorkSafe considers it was reasonably practicable for the HBDHB to have:

* ensured that an adequate risk assessment of the task of transferring patients was conducted, including consideration of the risk of fall, and whether the controls chosen to manage that risk offered the highest level of protection that was reasonably practicable;

* ensured the development, implementation and monitoring of an adequate, documented system of work for workers to use to assess and manage the risk of patients falling during transfer between medical facilities;

* adequately communicated information about the risk of patients falling to Skyline Aviation Ltd, and to have consulted with them as to the development and implementation of a system of work for the safe transfer of patients to and from the fixed wing air ambulances;

* adequately monitored Skyline Aviation Ltd's performance, including as to the safe transport of patients to and from its fixed wing air ambulances

These breaches refer to the Health & Safety at Work Act 2015, ss 36(2), 48(1), and 48(2)(c)

1.3 Detail the events surrounding the contravention

The patient was admitted to the Hawke's Bay Fallen Soldiers' Memorial Hospital in May 2018 with a reduced Glasgow Coma Scale (the most common scoring system used to describe the level of consciousness in a person) due to chronic subdural haematomas. The patient was transferred to Capital and Coast District Health Board (CCDHB) where the pressure was relieved through a procedure at the hospital, and he was discharged to return to HBDHB via fixed-wing air ambulance for on-going care. The patient was transported by Skyline Aviation.

On arrival at Hawke's Bay, the patient was moved from the aircraft to the patient lounge within the Skyline Aviation building to await transfer to the road ambulance. He was seated on the end of a patient lifter. During the process of being transferred to the road ambulance, he fell off the patient lifter, striking his head on the floor.

Following the fall, the patient returned to CCDHB. The patient sadly died shortly afterwards from a respiratory tract infection.

1.4 Detail any enforcement notices issued that relate to the contravention as detailed in term 1.2

DATE		NOTICE TYPE	NOTICE NUMBER	CONTRAVENTION OR PROHIBITED ACTIVITY	ACTION TAKEN IN RESPONSE TO NOTICE
11 / 04 / 2019 Summons [s28-29 of Criminal Procedure Act]		61106681	HSWA ss36[20], 48[1&2]		
1	1				
1	1				

1.5 Detail the rectifications to the workplace or work practices made as a result of the contravention (1.2), events (1.3) and the enforcement notices issued (1.4)

After the incident, an immediate ban was placed on use of the lifter, unless a patient is on a stretcher.

Since the incident occurred, the HBDHB has created a number of policies to ensure that this does not happen again. Specifically, these policies are: • The SW-PRO-00001 risk management procedure. This procedure describes how the DHB requires staff to identify hazards and complete a risk assessment, using the methodology in General Risk & Workplace Management Interpretive Guidelines: Part 2 issued by WorkSafe. • SW-SOW-00008 safe system of work for those staff using the lifter to transfer patients. This document describes the way the lifter is to be used when transporting patients. It lists the hazards and controls required to minimise risks to both staff and patients.

• SW-REG-00002 Safety & Wellbeing Risk Register has been updated for all flight activities. This register lists all hazards in the patient transport process, assesses the risks to patients and staff, and describes the controls required to eliminate &/or minimise risk of serious harm for both groups. • A new Flight Nurse Handbook SW-HAN-00002 has recently been completed, in consultation with St John Ambulance Service and Skyline Aviation Ltd. It includes a risk assessment for all equipment used by flight staff; safe systems of work that apply to patient transport, patient transport policies and procedures, flight nurse requirements, health and safety considerations, as well as all other information relating to flight nurse health, safety and wellbeing.

Training on the completed policies above is also taking place. Specifically: • 76% of flight staff have completed the training in relation to the SW-PRO-00001 risk management procedure. Training includes review of the procedure for hazard identification and risk assessment. It requires staff to take particular actions according to the level of risks identified. • 76% of flight staff have completed the training for SW-SOW-00008 in using the lifter to transfer patients. Training includes a review of safe system of work document, discussion about challenges using the equipment, as well as a practical demonstration of safe process.

All flight nurses have been given direct access to the resident HBDHB ICU specialists for advice if they are unsure whether a patient is at risk of harm on a flight. A Clinical Director has been appointed to support and ensure effective clinical oversight.

HBDHB has also appointed 2 additional full time FTEs to the flight nurse team. This will enable 24/5 coverage for patient transport. This means that the flight team will have permanent crewing to ensure equipment management and training of new starts can be completed, and will reduce the need for staff to work longer hours. In addition to this resource the DHB is also in the process of recruiting an experienced clinical nurse manager (Flight) who has a background and expertise in regards to the management of flight processes and teams.

In addition to this Skyline have & continue to appoint a number of additional loadmasters/crew, who are completely responsible for the loading and unloading of patients, thereby reducing the risk to both staff & patients and enabling the nurses to focus purely on the clinical needs of the patient.

1.6 Total amount of money spent on rectifications

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\$10,000 (approx) for developing of Flight Nurse Handbook \$500 for the printing of handbooks

3 x \$72,000 for additional flight nurses per 12 month period, on an ongoing basis Please reference appendices relating to 3.3-3.5 for further information

1.7 Detail the injury sustained or illness suffered by victim(s) or other(s) as a consequence of the contravention or, (as applicable) the *potential* for fatal injury or future fatal illness

As a direct result of the fall, the patient sustained head injuries and a cut to his leg. After the fall, the patient was transported back to CCDHB. While in hospital, he developed respiratory problems and an infection in his leg. He died as a result of the respiratory tract infection.

1.8 Detail any offer of amends or payments made to the victim(s) who sustained injury or suffered illness (the total monetary amount here is also to be included in the table at 3.12.3)

Describe the victim(s) relationship to you/the entity in question: (eg employce(s)/shareholder/director/family member/contractor, etc. If the has more than one dimension, for example a family

The victim was a patient of the DHB.

Detail offer of amends or payments:

On 24 May 2018, following the death of the patient at CCDHB, a HBDHB representative met with his daughter to pass on the DHB's condolences.

DHB representatives met with members of the patient's whanau on 31 May 2018 to explain what happened and the steps that the DHB was taking, including the process with the Coroner and the adverse event review. This meeting was an hour and a half long and amicable. A genuine and heartfelt apology was extended to the whanau on behalf of the DHB for the fall and the distress caused. The whanau acknowledged the DHB's response.

A further meeting was held between DHB representatives, a DHB kaumatua, and the whanau on 8 October 2018, after the adverse event report was ready.

1.9 Detail any consultation with the victim(s) as to their views on whether an enforceable undertaking would be an acceptable alternative to prosecution

We spoke with the patient's family on 7 October 2019 in regards to our application for an enforceable undertaking and the actions that we have and will be taking to ensure that we eliminate the risk of this happening again.

We asked the family for any feedback as to their views on whether an enforceable undertaking would be an acceptable alternative to prosecution, and in doing so sent them an email explaining the process, along with a copy of this draft application.

1.10 Detail any consultation with unions/sector/industry as to their views on whether an enforceable undertaking would be an acceptable alternative to prosecution

HBDHB has been working closely with Skyline Aviation, both on the steps taken to date and those proposed in this document. The DHB understands that Skyline Aviation supports its application for an enforceable undertaking.

There has also been wide discussion in regards to this event and the proposed enforceable undertaking at the following events:

* the national CEOs forum;

* the national DHB HR Directors meeting; and

* the Health and Safety Managers forums, both nationally and within the Central regions.

HBDHB has received the support of all those it has consulted with in respect of it seeking an enforceable undertaking as an alternative to prosecution.

1.11 Detail the support provided or proposed by the person to the victim(s), other(s)

DATE DESCRIPTION OF SUPPOR			DESCRIPTION OF SUPPORT	COMMENTS
24	/ 05	/ 2018	Meeting with victim's daughter at CCDHB to pass on DHB condolence	es
	/	1	Various phone calls with victim's daughter and son	Advising of internal investigation and progress
31	/ 05	/ 2018	Meeting with victim's whanau at DHB	As described at 1.8
8	/10	/ 2018	Meeting with victim's whanau at DHB	As described at 1.8
	/	/		
	/	/		
	/	1		
	/	1		
	/	1		
	/	1		
	/	/		
	1	1		

1.12 Detail any current HSMS implemented and maintained by the person

Describe how health and safety risks are managed, including types of procedures or policies or standards:

The HBDHB, as an employer and healthcare provider, takes the health and safety of its staff and patients very seriously. The HBDHB's Safety & Wellbeing Manager is responsible for implementing all elements of the health and safety management system. This role reports to the Executive Director for People & Quality, which in turn reports to the CEO.

Health and safety risk management at the DHB is directed by its Safety & Wellbeing Risk Management policy (SW-POL-00006). As part of that policy a high level procedure (SW-PRO-00001) directs the user to follow the process of risk management (which is described in the General Risk & Workplace Management - Interpretive Guidelines).

Where tasks are considered high risk, the organisation creates safe systems of work which describe how the task must be completed. A safe system of work document includes identifying all hazards, and setting out how these hazards are to be controlled. The safe system of work is then used as the training tool for the task.

A health and safety document management system is currently being created as a discrete entity, accessible to all staff via the HBDHB intra-net. The document management system will be the repository for all health & safety documents including but not limited to:

policies

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- procedures
- safe systems of work
- registers [including risk, legal compliance, health & environmental monitoring, training, corrective actions and so on]
- flowcharts
- guides
- forms
- templates
- manuals
- · Bow-tie risk analyses for main risks
- training documents.

This health and safety management system is being designed to meet AS/NZ4801:2004, and ISO 45001:2018 and it is the intention of the HBDHB to apply for accreditation against this standard

Engagement and consultation regarding risk management is via safety and wellbeing representatives for each area of the DHB. All representatives are required to attend 3 pieces of training:

- Duties and rights in the Health and Safety at Work Act
- · Introduction to Hazard Identification and Risk Management; and
- Introduction to Incident Investigation.

In addition, safety and wellbeing representatives attend external training relating to Unit Standard 29315 (which describes the role, functions, and powers of a health and safety representative). This is an agreed principle amongst all district health boards and related unions.

All safety and wellbeing representatives meet monthly at the safety and wellbeing committee; this includes members of the management team as well.

1.13 Detail the level of auditing undertaken on the HSMS, including compliance audits and audit frequency

During the last 18 months, there have been 2 full health and safety audits conducted by external entities.

The first was the ACC Partnership Programme audit in October 2018. It was the 2-year audit conducted to determine the HBDHB's provider status; ie primary, secondary or tertiary. The standard used for the audit is AS/NZ 4801:2001.

The HBDHB also commissioned an independent review of its health and safety management systems in December 2018. This audit was conducted by +IMPAC consultancy. The cost for this consultancy was \$20,584. Our practice was benchmarked against OSHAS 18001 and AS/NZ 4801:2002. In so far as hazard and risk management is concerned, +IMPAC found a number of areas for improvement, but also found that very good work had begun in formalising the risk assessment process when undertaking high risk tasks such as transporting patients by air.

More specifically, in relation to the air ambulance service, since the incident the DHB has completed an internal audit of its policies and procedures, and either created or updated documents to ensure safety expectations are clearly articulated; these documents are used as training tools. Specifically attention was given to:

- risk assessment and development of safe systems of work for all transport equipment used by the flight team
- clarification of the role, responsibilities, and authority of the flight nurse, the pilot, ambulance drivers, and medical specialists
- the checking of all flight nurses' training records, and development/delivery of training to address gaps
- review of health monitoring for flight nurses, including assessment of their physical capabilities for role [weight-bearing, physical dexterity in confined spaces, working in awkward body position]
- review of patient: flight nurse ratio for patient transport process
- review of documentation which accompanies patient; its fitness-for-purpose with respect to worker health, safety and wellbeing

1.14 Detail the consultation undertaken or proposed to be undertaken, in relation to this undertaking

Internal consultations between clinicians at the DHB have begun and will continue to occur in relation to the development of new policies for transporting patients. These policies will also be agreed with air-ambulance service providers, and disseminated to other DHBs.

Broader stakeholder engagement will also occur to enable the dissemination of any other information prepared and shared in accordance with this enforceable undertaking.

HBDHB Finance Risk and Audit Committee (a sub-committee of Board) have been regularly provided with updates on the incident, investigation findings, progress of recommendations being implemented and the process in regards to the undertaking application.

HBDHB is also working in collaboration with Skyline Aviation on the development of this EU application.

2. General terms

The person acknowledges and commits to the general terms set forth in the sub-terms below.

2.1 Acknowledgement that WorkSafe alleges a contravention occurred as detailed in term 1.2

The HBDHB acknowledges that WorkSafe considers that it failed to take all reasonably practicable steps to ensure the health, safety and wellbeing of others affected by its activities, and that it breached the Act.

The HBDHB acknowledges WorkSafe's allegations that it was reasonably practicable for the DHB to:

- ensure an adequate risk assessment procedure of the task of transferring patients be conducted; including consideration of the risk of fall, and whether the controls chosen to manage that risk offered the highest level of protection that was reasonably practicable;
- ensure the development, implementation, and monitoring of an adequate documented system of work for workers to use, to assess, and manage the risk of patients falling during transfer between medical facilities. Our focus was on clinical assessment of the patient;
- adequately communicate information about the risk of patients falling to Skyline Aviation Ltd; further, we had not consulted with them as to the development and implementation of a system of work for the safe transfer of patients to and from the fixed wing air ambulances;
- adequately monitor Skyline Aviation Ltd's performance, including as to the safe transport of patients to and from its fixed wing air ambulances

These breaches refer to the Health & Safety at Work Act 2015, ss 36(2), 48(1), and 48(2)(c)

2.2 Statement of regret that the contravention occurred

It is with profound regret that the HBDHB acknowledges its contribution to the patient's fall at Napier airport, and his subsequent death at CCDHB.

There were opportunities in the process of transporting the patient back to Napier where different decisions may have averted such an outcome. It is regretful that the staff member did not feel empowered to make those decisions. At the very least, the DHB's culture should have meant that the staff member felt able to defer to a consultant for advice, and we apologise that that was not the case.

We understand the hurt our actions have caused to the patient's whanau, and we wish to use the incident as a catalyst to make the necessary changes so that no other families across New Zealand experience this type of trauma.

2.3 Statement of the reasons why, on balance, the person considers this undertaking is the most appropriate response to the contravention

The HBDHB believes that an enforceable undertaking is the most appropriate response to the contravention, and will enable the DHB to ensure that the issues which contributed to the contravention are addressed. The DHB is deeply committed to ensuring the health and safety of its staff and patients, and would appreciate this opportunity to make a real investment to health and safety, within its limited health budget.

An enforceable undertaking would also, through the DHB's wider commitments, lead to greater consideration of the health and safety of those involved in the transport of unwell people, including patients themselves, throughout New Zealand.

An enforceable undertaking will help the HBDHB maintain its positive reputation in our community, by demonstrating a positive response to this very unfortunate event. The DHB's reputation is critical to the DHB's ability to successfully provide health care to its community.

2.4 Statement of commitment that the behaviour, activities and other factors which caused or led to the contravention has ceased and will not reoccur

The HBDHB is unreservedly committed to ensuring that the behaviour, activities and other factors which caused or lead to the incident have ceased and will not reoccur. This commitment can be seen in the substantial actions the DHB has taken to date, as detailed in this EU, with the aim of ensuring that staff working in the flight team have the proper resources and training to prevent this incident reoccuring.

More broadly, the DHB is committed to driving change to the way that our staff consider risk. The DHB is learning from this event, along with the ACC provider audit findings, and +IMPAC's review findings, to improve risk management on a broader scale within the DHB. Continuous improvements will be driven through training of both staff and management, information sharing through the safety and wellbeing committee, implementing an upgrade to our electronic risk management reporting framework and system and performance monitoring.

2.5 Acknowledgment of the policy published by WorkSafe for the acceptance of an undertaking

(write the name of the person(s) or entity giving the undertaking)

Craig Climo on behalf of the Hawke's Bay District Health Board

has read and understood the Enforcement Undertaking Operational Policy.

2.6 Acknowledgement that this undertaking will be published and publicised in full

(write the name of the person(s) or entity giving the undertaking)

Craig Climo on behalf of the Hawke's Bay District Health Board

acknowledges that the undertaking will, if accepted, be published on WorkSafe's website in full and referenced in WorkSafe material.

2.7 Statement of the person's ability to comply with the terms of this undertaking and meet the projected costs of the activities

(write the name of the person(s) or entity giving the undertaking)

Craig Climo on behalf of the Hawke's Bay District Health Board

has the financial ability to comply with the terms of this undertaking and have provided evidence by way of

(type of evidence provided)

2018 Annual Report

with this undertaking to support this declaration.

In the event of impending receivership, liquidation or sale of the entity, (write the name of the person(s) or entity giving the undertaking) N/A

will advise WorkSafe of the relevant circumstances and its capacity to comply with the outstanding terms of this undertaking.

2.8 Statement outlining any relationship between the person and any corporations, officers, employees, contractors, proposed beneficiaries of donations or scholarship or other recipient of financial benefit contained in this undertaking

As far as HBDHB is aware, it does not have a relationship with any persons or entities that will receive any financial benefit contained in this undertaking (besides the employees and future employees of HBDHB as set out in this EU).

2.9 Statement regarding Intellectual Property

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Craig Climo on behalf of the Hawke's Bay District Health Board

grants WorkSafe a perpetual, non-exclusive, worldwide and royalty-free licence to use, for any purpose, all Intellectual Property Rights in relation to any material developed as a result of this undertaking. This licence includes the right to use, copy, modify and distribute the materials.

2.10 Acknowledgement that the person may be required to provide a statutory declaration

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Craig Climo on behalf of the Hawke's Bay District Health Board

acknowledges that it may be necessary for WorkSafe to obtain a statutory declaration outlining details of any prior convictions (safety related) outside of New Zealand and that it will provide such declaration if required by WorkSafe

2.11 Statement of commitment from the person to participate constructively in all compliance monitoring activities for this undertaking

- 1. It is acknowledged that responsibility for demonstrating compliance with this undertaking rests with the person.
- 2. Evidence to demonstrate compliance with the terms will be provided to WorkSafe by the due date for each term.
- 3. The evidence provided to demonstrate compliance with this undertaking will be retained by the person until advised by WorkSafe, that this undertaking has been completely discharged.
- 4. It is acknowledged that any failure to meet the due date for an enforceable term will result in the matter being escalated and may lead to enforcement action.
- 5. It is acknowledged that WorkSafe may undertake other compliance monitoring activities to verify the evidence and compliance with an enforceable term, and cooperation will be provided to WorkSafe.
- 6. It is acknowledged that WorkSafe may initiate additional compliance monitoring activities, such as inspections, as considered necessary at WorkSafe's expense.
- 7. It is acknowledged that details of all seminars, workshops and training conducted by a non-registered training provider must be notified to WorkSafe, by email, at least one week prior. Notification should include time, date, location and the trainer/facilitator,

etc. the etc. person(s) defines a second second second

Craig Climo

3. Enforceable terms

The person acknowledges all activities set forth in the enforceable terms below must be auditable and include a date for completion and an estimated cost for each activity.

The person commits to performing the activities below diligently, competently and by the respective completion date.

3.1 A commitment by the person to perform activities that will ensure the ongoing effective management of risks to health and safety in the future conduct of its business or undertaking

Detail the management strategies to be employed that will satisfy and demonstrate to officer/s of the person that this commitment is being met:

The HBDHB is committed to a range of activities to ensure ongoing effective management of risks to health and safety. Specifically, we will take the following actions:

- Complete the health and safety document management system, and publish it so that all staff have full and continuous access on the nominated platform; this along with other planned changes will enable the DHB to apply for accreditation with ISO 45001:2018.
- Create a health & safety training matrix for all roles and functions to increase awareness of health and safety issues and to develop a positive health and safety culture
- Develop, cost, and implement a health and safety training program to ensure staff are aware of their obligations under the Health and Safety at Work Act 2015
- Develop a program that will enhance H&S leadership capability
- Increase our health and safety team's capacity (3.0 FTE from May 2019 to 5.0 FTE by September 2019)

Specifically in relation to the transport of passengers, the DHB will:

- create and implement a patient transport risk assessment tool that will be required for each patient when they are transported to/from other facilities
- ensure hazard identification/risk assessment training is mandatory for all flight staff, and that they are clear about their responsibilities and authority for both patient and their own health, safety and wellbeing
- purchase equipment that will provide for safer transfer between transport vehicles, and remove the need for high levels of manual handling currently required by flight staff [refer to section 3.4]

3.2 A commitment by the person to disseminate information about this undertaking to workers, and other relevant parties

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Dissemination will be achieved by doing the following:

The HBDHB commits to sharing this enforceable undertaking with the following stakeholders:

- The patient's whanau
- Staff involved in the incident
- All DHB's which participate with us in the transport of unwell people
- All DHB's health and safety practitioners
- · Consumer/user groups
- Skyline Aviation Ltd
- Ambulance services
- the New Zealand Nurses' Organisation (NZNO)

Further, the DHB will make the flight nurse handbook for fixed wing aircraft available to all DHB's.

When the enforceable undertaking is completed and formally signed off, the HBDHB will complete a report and ensure that all stakeholders named above, are included in the distribution of the report.

Dissemination will occur by: 30 / 01 / 2020

3.3 Activities to be undertaken to promote the objectives of the health and safety legislation that will deliver benefits for workers and/or work and/or the workplace

CTIVITIES	COST	TIMEFRAME
outline the activity and the expected outcomes	(\$)	
Appoint H&S champions [x2] and pay for them to attend training [US29315]	7319	by 30/06/2020
Have nurses involved in incident attend external hazard/risk assessment training; [US 17602]	1500	by 30/06/2020
Purchase of IPads [x3] on which to process patient transport plan so document travels with patient	3600	completed
Health and safety management system review [+IMPAC]	20584	completed
SO45001:2018 accreditation	25000	31/7/2021
Delivery of hazard identification/risk assessment training to all flight staff	3500	31/03/2020
Delivery of H&S duties including risk management to all management staff in Flight Team	3000	31/03/2020
Development and printing of flight nurse handbook which includes safe systems of work	15000	completed
Appointment of Medical Director to provide clinical oversight to the flight team	30000	Completed
Appointment of Clinical Nurse Manager (Flight)	110000	Completed
Appointment of 2 full time flight nurses	180000	completed
Summary of learnings from incident shared with all clinical staff, via Grand Round and Intranet	3000	30/01/2020
LoadMaster/Crew appointed (supporting transfer of patients across the region/nationally)	385000	Completed
Purchase mechanical lifters to replace manual lifters	115000	Completed

Total estimated cost of benefits for workers/others
\$ 902503

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3.4 Activities to be undertaken to promote the objectives of the health and safety legislation that will deliver benefits for the wider industry or sector

100.000 M

ACTIVITIES Outline the activity and the expected outcomes	COST (\$)	TIMEFRAME
Paper re incident/outcomes for health sector to be presented to the relevant professional organisations	7700	30/1/2020
Development & Agreement of national Patient Transport Plan - Risk Assessment standards	70000	30/07/2020
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	1. 1917 -	
Total estimated cost of benefits for industry	\$ 77,700	

3.5 Activities to be undertaken to promote the objectives of the health and safety legislation that will deliver benefits for community

ACTIVITIES	COST (\$)	TIMEFRAME
6-month placement for a newly-registered nurse to learn about H&S in patient transport	30000	30/11/2020
Provide funding for St Johns First Aid Programme for public (20 places)	3580	30/06/2020
Purchase and distribute 10 AEDs across the community (Schools, clubs and community centres)	24950	30/09/2020
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Total estimated cost of benefits for the community	\$ 58530	

3.6 Where WorkSafe considers appropriate in the circumstances, undertaking a SafePlus Onsite Assessment

Further information about SafePlus can be found here: worksafe.govt.nz/about-us/who-we-are/our-priorities/safeplus/about-safeplus

3.6.1 The suitability of a SafePlus assessment will be determined by the Enforceable Undertakings Panel when your application is considered.

3.6.2 In addition to the total cost below (3.7) all costs of a SafePlus Onsite Assessment will be met by the person making this undertaking. The fee charged for an Onsite Assessment is a commercial matter between your business and the SafePlus Accredited Assessors that you commission.

3.7 Minimum spend

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3.7.1 Craig Climo

commits to a minimum spend of \$ 900,000 for this undertaking.

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3.7.2 Craig Climo

agrees to spend any residual amount arising from an original term not being completed or being less costly than estimated in this undertaking. Agreement on how to spend this residual amount will be sought from WorkSafe

entity giving the analysis of the entity giving the

3.7.3 Craig Climo

Acknowledges the minimum spend comprises of the:

TOTAL COST	MINIMUM SPEND
Financial amends paid to victims (if applicable)	
Benefits to workers/others	902503
Benefits to industry	77700
Benefits to community	58530

Estimated	cost of the un	dertaking
failer of the second		-

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1,138,733

4. Execution

Authorised representative of an organisation

Undertaking given by (name of authorised representative) Craig Climo

In my own right and in my capacity as (eg President, Chairperson, etc) Chief Executive Officer

of (eg organisation name) Hawke's Bay District Health Board

On the (day) 20 day of (month) November 20 19 (year).

Signature of the gerson giving the undertaking:

5. Acceptance

This undertaking is accepted by WorkSafe.

On the (day) 16	day of (month) Dancay.	20,20 (year).
C'an al una aé sa marat	a contring the undertaking	
S-HU	epresentative: (General Manager, Wor	
Name of WorkSafe re	epresentative: (General Manager, Wor	kSafe (or delegate))

Head of Specialist Interenticis

Undertaking given before me:



Undertaking given before me:



and the	