

10 August 2023

S9(2)(a)

Your request for Official information, reference: HNZ00023679

I refer to your Official Information Act request received on 27 June 2023 in which you specifically requested the following:

- ***A copy of the internal review of Southland's Mental Health, Addictions, and Intellectual Disability Service that was carried out in March.***

Under Section 16 of the OIA Act where the information requested by any person is comprised in a document, that information may be made available in 1 or more of the following ways:

(e) by giving an excerpt or summary of the contents;

We provide you with the summary document in Appendix A (pages 2-8).

- **A copy of any internal correspondence among the southern directorate leadership team.**

We provide you with the internal correspondence among the Southern Directorate Leadership Team in Appendix B (attached).

Information is withheld from these documents under section 9(2)(a) of the Act – to protect the privacy of natural persons.

How to get in touch

If you have any questions, you can contact us at hnzOIA@health.govt.nz.

If you are not happy with this response, you have the right to make a complaint to the Ombudsman. Information about how to do this is available at www.ombudsman.parliament.nz or by phoning 0800 802 602.

As this information may be of interest to other members of the public, Te Whatu Ora may proactively release a copy of this response on our website. All requester data, including your name and contact details, will be removed prior to release.

Ngā mihi



Hamish Brown
Interim Lead Hospital and Specialist Services
Southern

Appendix A: Summary Document

Te Whatu Ora Southern: Mental Health, Alcohol, and Intellectual Disability Services (MHAID): Southland Hospital Review March – April 2023

Summary Report: 12 July 2023

Background

In March 2023 an internal review of the Southland Hospital Mental Health Services was commissioned by Te Whatu Ora Southern Directorate Leadership Team (DLT) following concerns raised by clinicians regarding workplace culture, communication, working relationships, respect for colleagues, models of care, and the impacts of workforce shortages.

More than 30 staff were interviewed over four days in March and April 2023.

The Review's authors reported on consistent themes.

The Review's authors made some recommendations (Appendix 1). The DLT and wider Te Whatu Ora Southern Leadership team is very committed to moving forward and improving Southland Hospital MHAID service.

Note: individual consumers care was out of scope for this review.

Context

The Invercargill Acute Mental Health Unit is a 16-18 inpatient bed facility on the Southland Hospital site. It is collocated with the Adult Community Services and is part of the wider Adult Community/Child Adolescent and Family services for the Invercargill and Southland population (approximately 134,000).

Directorate Leadership Team

We are very grateful for our staff's hard work, commitment, and dedication to the Southland Hospital MHAID services. We know it has been a very tough time for our staff and we want to acknowledge this.

We appreciate staff raising their concerns and taking part in this review process.

We have taken this review very seriously and are committed to improving the Southland Hospital MHAID service for our staff, patients and their whānau.

We acknowledge there have been many challenges for this service for several years in particular the impacts of the COVID-19 pandemic and ongoing staff vacancies across the health care system and the effects these have had on our staff.

We are committed to act quickly to improve the service, staff wellbeing and experiences, and relationships within the service and the wider MHAID community.

We have held several staff meetings to present the report and give staff the opportunity to talk through any questions or comments.

Te Whatu Ora has staff wellbeing services available to all staff:

VITAE our free external and confidential Employee Assistance Programme:

ph: 0508 664 981 (24/7) email: assistance@vitae.co.nz

Our sharepoint links to websites for mindfulness, wellbeing and mental health support services: [Wellbeing support \(sharepoint.com\)](#)

Please reach out to the following key contacts if you have any questions or need support.

Human Resources (HR):

- Libby Wilson, Organisational Development Specialist/HR Partner, Invercargill, Libby.Wilson@southerndhb.govt.nz
- Ross Hanson, HR Manager Operations and Business, Dunedin, Ross.Hanson@southerndhb.govt.nz

Mental Health Addiction and Intellectual Disability (MHAID) Directorate Leadership Team:

- Adell Cox, Director of Allied Health MHAID, Adell.Cox@southerndhb.govt.nz
- Evan Mason, Medical Director MHAID, Evan.Mason@southerndhb.govt.nz
- Mel Green, Director of Nursing MHAID, Mel.Green@southerndhb.govt.nz
- Steve Bayne, General Manager MHAID, Steve.Bayne@southerndhb.govt.nz

Summary

Below is a summary of the main themes from the Southland Hospital Review March – April 2023 document.

Culture

1. Staff said the current culture and poor relationships within the inpatient unit has an impact on patients and their whānau, and that this was unsustainable.
2. Many staff said they felt 'burnt out' and dreaded coming to work each day.
3. The workplace was frequently described as toxic.
4. Staff said the culture of the inpatient unit was having a profound impact on staff morale and the general atmosphere in the unit.
5. Staff identified that things have become worse in the last 1-2 years.

Working relationships

6. Relationships between clinicians are strained.
7. All professional groups expressed concern about lack of clarity about who does what, individual roles and the accountability of key workers, social workers, nurses and SMOs.
8. Many staff felt their opinions were undervalued and ignored.
9. Staff described a lack of respect generally for other's professional opinions and often raised concern that their own observations, clinical judgement, and input into Multi-Disciplinary Team (MDT) meetings were ignored, questioned, or marginalised.
10. Some meetings were described as dysfunctional and uncomfortable.
11. There were some claims of bullying within professional groups and between professional groups.
12. Poor communication was perceived as an issue by many staff. This included the way things were communicated between clinicians themselves, as well as lack of communication from management.
13. Many staff from all disciplines felt they were not able to work effectively with their colleagues because either their professional opinions were dismissed or based on their observations of what had happened with peers in meetings.
14. Some clinicians described good support when complaints were raised with management either verbally or in written form; but others said there was no change when complaints were raised.
15. Inpatient staff describe a less experienced workforce than in the past.
16. Staff vacancies in the service further exacerbate the difficulties for staff, patients and their whānau.
17. The use of virtual attendance at meetings following the COVID-19 related change in practice continues to have a negative impact on the team and interpersonal relationships.

Current model of care and service delivery

18. The model of care in deployment of medical time is seen by staff as a key contributor to the problems the service is having, and potentially also key to the solutions.
19. An integrated model of SMO deployment has been in place since 2007. A decision was made during the COVID-19 pandemic to move quickly from this longstanding integrated model to a dedicated SMO model for the inpatient unit. The service has moved back to an integrated model this year. Staff vacancies, both nursing and SMO, have compounded the problems.

20. Nursing staff observed benefits from the dedicated model, and wish to retain it. The SMO group largely support the integrated model. Both argue for the benefits to patient care of their preferred model.
21. A clear commitment to one model is now needed.

Clinical Governance and Clinical and Professional Leadership

22. Since late 2022/early 2023, there is no clear medical leadership at inpatient team or at Invercargill services level.
23. Leadership on the floor to the nursing team needs to be strengthened.
24. Although some staff were aware of a clinical governance approach of some type, none had knowledge of what occurred in clinical governance meetings.
25. It is felt that senior leadership is needed again following the departure of the Clinical Director.

General

26. Some staff expressed they feared coming to work due to risk of physical assault from patients but also dreaded the atmosphere between colleagues.
27. Occupancy of more than 100% has been a longstanding problem for the inpatient unit.
28. The daily morning meeting on the unit is intended to help manage patient flow and discharge; and help manage occupancy. Staff report this meeting is not working well, that communication between clinicians can be unprofessional and attendance is now poor.
29. Intensive community support is difficult, and alternatives to admission are limited.
30. The Safewards model of care was implemented in 2018. At the time it seemed to be rolled out well and staff were adequately orientated to it. However, this has eroded overtime.
31. The inpatient unit is no longer smokefree. During the COVID lockdown, patients were allowed to smoke in the courtyard, and this has continued post lockdown. Enforcing the no-smoking policy on the ward no longer appears to be consistent and patients have been observed smoking and vaping in bedrooms and in the corridors. There is a general sense that staff cannot manage this effectively and staff perceive limited support from the leadership team.
32. Illicit drug use is a growing concern for many staff. Staff feel overwhelmed and unable to manage the risk of illicit drug use by patients on leave; to manage the use of illicit drugs on the ward, the flow of drugs into the ward, and the consequences of intoxicated patients on the unit. They are concerned this increases the risk of violence to staff and other consumers. Some nursing staff believe police should support them more and do more when consumers are reported using illicit drugs on the unit. They believe there are no consequences for consumers using illicit drugs. There seems to be a lack of leadership and support regarding the effective management of the use of illicit drugs on the unit.

Appendix 1: Recommendations from the Southland Hospital Review March – April 2023 and updates 7 July 2023

The DLT and wider Te Whatu Ora Southern Leadership team is very committed to moving forward and improving Southland Hospital MHAID service.

1. Clinical leadership

There is an urgent need for increased physical presence of experienced and effective senior clinical leadership (nursing and medical), across the Southland service, as well as greater presence of DLT. Senior medical leadership is particularly critical.

Update 7 July 2023:

- The implementation of an additional position of a Nurse Consultant role to provide further clinical leadership. **S 9(2)(a)** commenced in this full-time role on 1 May.
- We have created an additional 0.5FTE interprofessional leadership role to further support local leadership. **S 9(2)(a)** started in this role on 19 June.
- We are in the process of finalising Allied Health Leadership.
- Strong medical leadership is clearly required, and I want to reassure you that this is a priority. Several meetings have taken place already and Southern is also actively recruiting for Senior Medical Officers.

2. Occupancy and bed numbers

A decision is needed about the number of inpatient beds available, and process developed to keep to this maximum occupancy. The responsibilities for this must be shared by inpatient and community teams, both committed to move people in and out of the unit prioritised by need; with robust mechanisms to have these discussions and an escalation pathway for exceptions.

Update 7 July 2023:

- We acknowledge the effects of maximum occupancy in the inpatient unit on staff and the community and the importance of a consistent and robust admission and discharge process.
- We are working through establishing processes around improved flow, particularly we the inpatient unit reaches 16 tangata whaiora. This is a matter of urgency and involves both the inpatient unit and community services.
- We are reviewing and benchmarking current bed numbers and acknowledge the effects of existing vacancies on our ability to provide safe care for unwell tangata whaiora.
- A review of tangata whaiora who have been in the inpatient unit for extended periods is underway.

3. Model of Care and Clinical Governance

The DLT should decide on the model of care, acknowledging the reality of different views by different professional groups. The reviewers suggest the service implement the dedicated model of care for SMO deployment.

If this is not favoured then a hybrid approach is another option with 1-2 SMOs working on both the inpatient and community teams, and the other SMOs all working full time with the community teams. This is the model used in Dunedin.

Update 7 July 2023:

- We have commenced a multi-disciplinary leadership group which meets weekly.
- We are developing a governance structure and framework that enables us to work together in an open and transparent way that provides opportunities for staff to participate in solutions to improve service delivery. This is being supported by Te Whatu Ora Southern's Quality and Governance team.

4. Medical roles

Explore the viability of a registrar for the inpatient unit. Currently house officers are allocated but their focus is largely on physical health needs. A registrar would assist with continuity of care.

Update 7 July 2023:

- Recruitment is underway for a MOSS.
- A GP locum will be in the IMHU on Fridays from 7 July.
- We are working with the RMO office to have a House Officer on the Inpatient Unit as soon as we can and talking with the training committee about a Registrar.

5. A Restorative Process

A restorative process is needed, in particular for nursing staff, SMO's and management. There has been harm to staff, and this is unlikely to respond only to improved processes in the future. Any harm needs to be addressed specifically.

Update 7 July 2023:

- Placeholder invites have been sent out for a team day with inpatient unit staff for 2 August.
- There are further plans for a team day with the community team.
- Everyone deserves to come to work and feel safe, supported, and confident in their role. Our Southern core values are kind, open, positive and community. Tension, conflict, and distrust among the team is not tenable to improve a safe workplace culture. We see the team days as an opportunity to begin this process.
- Staff can also reach out to Steve Bayne, Evan Mason, Adell Cox or Mel Green.
- Staff can also access support through VITAE our external and confidential Employee Assistance Programme (0508 664 981 or email: assistance@vitae.co.nz).

6. Review HR Support Services

Ensure effective processes are in place for leadership and management to ensure effective processes are in place to address staff's specific grievances and complaints. Staff need to feel able to speak up. Performance management processes may sometimes be needed. Further training around this may be required.

Update 7 July 2023:

- Southern has clear performance management processes in place.
- We are all responsible for providing a safe and supportive working environment.
- We encourage staff to speak up if they have concerns.

7. Alleged bullying.

Review policy, process and resources to explicitly address alleged bullying.

Update 7 July 2023:

- Southern takes bullying concerns very seriously and has clear processes in place.
- Southern's Code of Conduct and Integrity Policy is here: [Code of Conduct and Integrity.doc \(sharepoint.com\)](#)
- Southern's Effective Working Relationship Policy is here: [Effective Working Relationships \(staff complaint process\).docx \(sharepoint.com\)](#)
- I encourage staff to speak with their manager and/or HR if they have concerns.

8. Enhanced MDT

Consider opportunities to increase allied health presence in the inpatient setting to develop more of a true MDT, introduce different perspectives and develop a shared structured ward programme. Consider participation by consumer and whānau /family advisor in the MDT meetings.

Update 7 July 2023:

- We acknowledge the MDT meeting process is not working as it should and invite staff to work with us on developing a more succinct and empowering MDT meeting structure.
- We are starting with the team days and rebuilding collegial relationships as we look towards developing the MDT process.

9. Smoke Free Policy & Illicit Drug Policy

Review the smoke free policy and procedures and support the inpatient team to effectively manage these expectations.

Review processes around management of illicit drugs in the inpatient unit (policy and procedures) and support the inpatient team to manage these expectations.

Update 7 July 2023:

- The policies/guidelines have been reviewed and we are talking with clinicians about these policies/guidelines as we work towards implementing them in the inpatient unit.
- We have made a commitment to the Ombudsman about the fence for the outdoor area to ensure it is more secure so that tangata whaiora have opportunity to be outside. Building and property have been contacted about this work.

From: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>

Sent on: Monday, May 29, 2023 11:36:49 PM

To: Jane Wilson <Jane.Wilson@southerndhb.govt.nz>; Kaye Cheetham <Kaye.Cheetham@southerndhb.govt.nz>; Karen Billingham <Karen.Billingham@southerndhb.govt.nz>; Tanya Basel <Tanya.Basel@southerndhb.govt.nz>; Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>

CC: David Gow <David.Gow@southerndhb.govt.nz>; Evan Mason <Evan.Mason@southerndhb.govt.nz>; Adell Cox <Adell.Cox@southerndhb.govt.nz>; Mel Green <Mel.Green@southerndhb.govt.nz>; Steve Bayne <Steve.Bayne@southerndhb.govt.nz>

Subject: follow up from this mornings meeting re Southland Review.

Thanks again for your support and advice on this. Thought I'd send through a summary of our discussion/action:

- Verbal feedback being provided by Evan and another DLT clinical leader to staff this Thursday. Kate providing talking points.
- Emphasis on working together with staff on making improvements.
- Kate has drafted a comms plan, DLT will provide input then share with this group.
- Kate will prepare a summary of the report for sharing with staff
- Steve to lead sharing of verbal feedback and summary with unions
- Toni will contact Lead Reviewer re finalising the report
- Staff able to be identified in the report need specific support and process prior to releasing full report.
- Requirement to strengthen clinical governance across Southland services, DLT to seek support from Hywel/David for this

Let me know if I've forgotten anything.

Ngā mihi.

Toni Gutschlag

**Executive Director of Mental Health, Addictions & Intellectual Disability
Southern District**

Internal DDI: 55473 | [S 9\(2\)\(a\)](#) | waea pūkoro: [S 9\(2\)\(a\)](#) | imēra: toni.gutschlag@southerndhb.govt.nz
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From: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>

Sent on: Wednesday, May 24, 2023 8:54:57 PM

To: Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>
CC: Karen Billinghamurst <Karen.Billinghurst@southerndhb.govt.nz>; Tanya Basel <Tanya.Basel@southerndhb.govt.nz>
Subject: FW: Southland Review Final 10 May 2023
Urgent: High

S 9(2)(a)

Follow up:

Hi Kate,

We discussed this just before your leave but I have a horrible feeling I didn't send it on to you.

The plan is to start sharing the report with staff next Thursday which is when Evan and Steve are next down in Invercargill.

Seeking your advice on the best way of doing this. It's a large report – are we best to share it in its entirety or develop a summary?

I imagine we will need to prepare a media statement in case needed?

Karen and Tanya, copying you in for visibility as likely to be OIA'ed and identifies lots of concerns re staff wellbeing.

Steve and his team are working on the response plan and have been connecting with ELT clinical leaders on this.

Ngā mihi.

Toni Gutschlag

**Executive Director of Mental Health, Addictions & Intellectual Disability
Southern District**

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From: Mary Windle <Mary.Windle@southerndhb.govt.nz> on behalf of Toni Gutschlag
Sent on: Wednesday, July 12, 2023 2:24:54 AM
To: Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>

CC: Adell Cox <Adell.Cox@southerndhb.govt.nz>; Robyn Ross <Robyn.Ross@southerndhb.govt.nz>
Subject: FW: Southland Review Final 10 May 2023
Attachments: FW Southland Review Final 10 May 2023.eml (78.57 KB)

Afternoon,

Just going through Toni's old emails sent/received and I only have the two emails, this one and one from Clive Bensemann.

Will send them through now.

Thanks Mary

From: Sarah Murphy <Sarah.Murphy@southerndhb.govt.nz>
Sent: Saturday, June 10, 2023 1:09 PM
To: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>
Subject: Fwd: Southland Review Final 10 May 2023

Hi Toni,
Here is the word document for the Southland review.

Thanks,
Sarah Murphy

Get [Outlook for iOS](#)

From: Mary Windle <Mary.Windle@southerndhb.govt.nz> on behalf of Toni Gutschlag
Sent on: Wednesday, July 12, 2023 2:25:47 AM
To: Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>
CC: Adell Cox <Adell.Cox@southerndhb.govt.nz>; Robyn Ross <Robyn.Ross@southerndhb.govt.nz>
Subject: FW: Southland review

This is the other email.

Thanks Mary

From: Clive Bensemann (CMDHB) <Clive.Bensemann@middlemore.co.nz>
Sent: Thursday, June 1, 2023 12:08 AM
To: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>
Subject: Fwd: Southland review

Hi Toni

FYI in case your DLT contact you. I tried but couldn't talk with Sarah so have emailed her and I think progressed things as we discussed. But Sarah has also flagged this for your DLT.

Apologies that my being overseas has complicated things a little.

Sent from my iPhone

Begin forwarded message:

From: Sarah Murphy <Sarah.Murphy@southerndhb.govt.nz>
Date: 31 May 2023 at 6:40:31 PM AWST
To: Me Green <Mel.Green@southerndhb.govt.nz>, Adell Cox <Adell.Cox@southerndhb.govt.nz>, Steve Bayne <Steve.Bayne@southerndhb.govt.nz>, Evan Mason <Evan.Mason@southerndhb.govt.nz>
Cc: "Clive Bensemman (CMDHB)" <Clive.Bensemman@middlemore.co.nz>, Rosalind Turner <Rosalind.Turner@southerndhb.govt.nz>
Subject: Southland review

Hi

Clive Bensemman contacted me tonight from Perth enquiring about the Southland review document we submitted. He had been speaking with Toni who asked for a word copy of the document as HR wanted to anonymise it.

I believe you may be speaking to the Southland team tomorrow about the review so wanted to check whether you were aware of this and check whether this had already been completed?

Thanks,

Sarah

Get [Outlook for iOS](#)

From: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>
Sent on: Thursday, May 25, 2023 4:34:52 AM
To: Mary Windle <Mary.Windle@southerndhb.govt.nz>
CC: Steve Bayne <Steve.Bayne@southerndhb.govt.nz>; Evan Mason <Evan.Mason@southerndhb.govt.nz>; Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>; Karen Billinghamurst <Karen.Billinghurst@southerndhb.govt.nz>; David Gow <David.Gow@southerndhb.govt.nz>; Jane Wilson <Jane.Wilson@southerndhb.govt.nz>; Kaye Cheetham <Kaye.Cheetham@southerndhb.govt.nz>; Tanya Basel <Tanya.Basel@southerndhb.govt.nz>
Subject: meeting request please
Urgent: High

Hi Mary,

Please can you arrange a 30 min meeting for as early as possible next week with the people on this email?

It's regarding the Southland inpatient review report, next steps and comms.

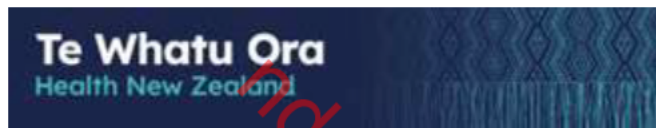
Thanks

Ngā mihi.

Toni Gutschlag

**Executive Director of Mental Health, Addictions & Intellectual Disability
Southern District**

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From: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>
Sent on: Thursday, May 25, 2023 3:04:50 AM
To: Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>
CC: Karen Billingham <Karen.Billingham@southerndhb.govt.nz>; Tanya Basel <Tanya.Basel@southerndhb.govt.nz>; Kate Roff <Kate.Roff@southerndhb.govt.nz>; Steve Bayne <Steve.Bayne@southerndhb.govt.nz>
Subject: RE: Southland Review Final 10 May 2023

Yesterday I asked Steve and Evan to start preparing to share verbal info when down next week just because there is a lot of anticipation about the report.

As far as I know this hasn't been communicated to staff yet.

Agree there needs to be a comprehensive plan

Apologies I was meant to send this through earlier and thought I had. Better to get everything lined up first.

Ngā mihi.

Toni Gutschlag

**Executive Director of Mental Health, Addictions & Intellectual Disability
Southern District**

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Kind – Manaakitanga | Open – Pono | Positive – Whaiwhakaaro | Community – Whanaungatanga

From: Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>
Sent: Thursday, May 25, 2023 2:03 PM
To: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>
Cc: Karen Billinghamurst <Karen.Billinghurst@southerndhb.govt.nz>; Tanya Basel <Tanya.Basel@southerndhb.govt.nz>; Kate Roff <Kate.Roff@southerndhb.govt.nz>
Subject: RE: Southland Review Final 10 May 2023

Hi Toni,

I've bought in Kate Roff here too. We've had a brief discussion and agree we need a comprehensive communications plan as there are multiples risks.

- What is the timing here? We need some time to develop a communications plan around this report factoring in both internal and external audiences. We can prioritise this but wanted to check if Evan and Steve's plan to speak with the team next Thursday part of an overall plan or commitment?
- For Southern staff, we are recommending an executive summary document for staff based on some of the findings in the report. Sharing of the full report could compromise some staff.
- We definitely need a media statement and reactive key messaging.
- We would also need to prepare some communications for patients and their families.
- It would good to understand what Evan and Steve are planning to speak to staff about. We can assist with some key messaging and presentation slides and recommend focusing on the next steps (assume this is this response plan mentioned below?).

Happy to discuss.

Warm regards,

Kate Mackersy
Communications Team Leader
Te Whatu Ora Southern

waea pūkoro: S 9(2)(a) | imēra: kate.mackersy@southerndhb.govt.nz

Te Whatu Ora – Health New Zealand

From: Kate Mackersy
Sent: Thursday, May 25, 2023 10:29 AM
To: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>
Cc: Karen Billinghamurst <Karen.Billinghurst@southerndhb.govt.nz>; Tanya Basel

<Tanya.Basel@southerndhb.govt.nz>

Subject: RE: Southland Review Final 10 May 2023

Hi Toni,

No, I haven't seen this and appreciate you sharing this.

We will need a comms plan for this. I will come back to you asap with some recommendations.

Warm regards,

Kate Mackersy

Communications Team Leader

Te Whatu Ora Southern

waea pūkoro S 9(2)(a) Īmēra: kate.mackersy@southerndhb.govt.nz



Te Whatu Ora – Health New Zealand

From: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>

Sent: Thursday, May 25, 2023 8:55 AM

To: Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>

Cc: Karen Billinghamhurst <Karen.Billinghurst@southerndhb.govt.nz>; Tanya Basel

<Tanya.Basel@southerndhb.govt.nz>

Subject: FW: Southland Review Final 10 May 2023

Importance: High

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I imagine we will need to prepare a media statement in case needed?

Karen and Tanya, copying you in for visibility as likely to be OIA'ed and identifies lots of concerns re staff wellbeing.

Steve and his team are working on the response plan and have been connecting with ELT clinical leaders on this.

[Ngā mihi.](#)

Toni Gutschlag

Executive Director of Mental Health, Addictions & Intellectual Disability
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Kind – Manaakitanga | Open – Pono | Positive – Whaiwhakaaro | Community – Whanaungatanga

From: Mary Windle <Mary.Windle@southerndhb.govt.nz>
Sent on: Thursday, May 25, 2023 10:40:15 PM
To: Steve Bayne <Steve.Bayne@southerndhb.govt.nz>; Evan Mason <Evan.Mason@southerndhb.govt.nz>; Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>; Karen Billingham <Karen.Billingham@southerndhb.govt.nz>; David Gow <David.Gow@southerndhb.govt.nz>; Jane Wilson <Jane.Wilson@southerndhb.govt.nz>; Kaye Cheetham <Kaye.Cheetham@southerndhb.govt.nz>; Tanya Basel <Tanya.Basel@southerndhb.govt.nz>
Subject: Southland Review Final
Attachments: Southland Review Final 10 May 2023.docx (60.42 KB)

Morning all,

I'm needing to set up a time with leaders now that everyone is back from annual/sick leave. Which of the following times works to attend a 30-minute meeting? Please see the link [View/vote in browser](#)

Kind regards,

Mary Windle

Personal Assistant to the Executive Director of Mental Health, Addictions & Intellectual Disability (Toni Gutschlag)
Southern District

Internal DDI: 55991 | S 9(2)(a) | S 9(2)(a) | Email: mary.windle@southerndhb.govt.nz
Wakari Hospital, 369 Taieri Road, Dunedin | Private Bag 1924, Dunedin 9054 | Internal Mailbox 100

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From: Toni Gutschlag <Toni.Gutschlag@southerndhb.govt.nz>
Sent on: Tuesday, May 30, 2023 4:24:46 AM
To: Adell Cox <Adell.Cox@southerndhb.govt.nz>; Evan Mason <Evan.Mason@southerndhb.govt.nz>; Mel Green <Mel.Green@southerndhb.govt.nz>; Steve Bayne <Steve.Bayne@southerndhb.govt.nz>
CC: Kate Mackersy <Kate.Mackersy@southerndhb.govt.nz>
Subject: Urgent Action required please - re Southland review and thursday's meeting
Urgent: High

S 9(2)(a)

Follow up: Follow up
Start date: Tuesday, May 30, 2023 12:00:00 AM
Due date: Tuesday, May 30, 2023 12:00:00 AM

Hi team,

Please see attached draft comms plan and key messages for the Thursday forum, thank you Kate for developing this.

It needs your urgent input please, particularly around the timeframe for development of the summary report (I don't think asking the chair of the panel will work as is currently overseas), and on the Where to from Here section on page 8.

All other feedback welcomed too.

Under the Official Information Act 1982