

Nelson Hospital visit 14 March 2025

Due to MO:	12 March 2025	Reference	HNZ00081660
To:	Hon Simeon Brown, Minister of Health		
From:	Lexie O'Shea, Group Director Operations, Nelson Marlborough		
Copy to:	n/a		
Security level:	In Confidence	Priority	Routine
Consulted	n/a		

Contact for phone discussion (if required)

Name	Position	Telephone	1st contact
Lexie O'Shea	Group Director Operations	9(2)(a)	x

Attachments

Appendix 1: Runsheet / logistics overview

Appendix 2: Fact sheet

Appendix 3: Press release (to be sent separately)

About the event

Purpose	<p>Minister Brown will be visiting Nelson Hospital and will have an opportunity to meet with infrastructure staff about the Nelson Hospital re-development.</p> <p>This will be followed by a tour of the hospital and an opportunity to meet the local team.</p>
Date	Friday 14 March 2025
Time	The visit will be approximately 10.20am-12.30pm
Venue	Nelson Hospital, Waimea Road, Nelson
Health New Zealand Te Whatu Ora attendees	<p>Infrastructure and Investment Group (IIG):</p> <p>Jeremy Holman – Chief of Infrastructure and Investment</p> <p>Peter Bramley – Senior Responsible Officer, Nelson Hospital Redevelopment</p> <p>Katherine Snook – Portfolio Manager, Te Waipounamu</p> <p>Margo Kyle – General Manager, National Health Facility Planning</p> <p>Liz Thompson – Project Director, Nelson Hospital Redevelopment</p> <p>Hospital Specialist Services:</p> <p>Martin Keogh – Deputy Chief Executive Te Waipounamu</p> <p>Lexie O’Shea – Group Director Operations - HSS, Nelson Marlborough</p> <p>Nick Baker – National Clinical Chief Health Service Delivery Planning (HSDP)</p> <p>Steve Low – Chief Medical Officer, Nelson Marlborough</p> <p>Sandy McLean-Cooper – District Chief Nurse, Nelson Marlborough</p> <p>Hilary Exton – District Chief Allied Health, Scientific & Technical, Nelson Marlborough</p> <p>Julia Goode – Te Waipounamu Regional Media Lead</p>
Media	No media are expected.

Background

1. This event briefing provides you with information to support your visit and tour of Nelson Hospital on 14 March.
2. The tour of the hospital will be the second part of the visit and will take place after a meeting to discuss the Nelson Hospital redevelopment.
3. The tour will include visiting ED, surgical outpatients and – if time permits – the newly refurbished paediatric outpatients / infant, child, adolescent mental health services (ICAMHS) department.

Current Nelson Hospital

4. Nelson Hospital is based in central Nelson.
5. Health NZ Nelson Marlborough provides healthcare services to a population of around 169,700 people across the Nelson, Tasman and Marlborough regions (22,700 square kilometres). Its population is aging and is expected to grow 9.6% by 2040/41. Nelson Hospital is the largest of two secondary hospitals in the Nelson Marlborough region.
6. Nelson Hospital includes:
 - 24/7 Emergency Department
 - Combined Intensive Care and Coronary Care Unit (ICCU)
 - Special Care Baby Unit
 - Medical and Surgical Wards
 - Children's Ward
 - Assessment, Treatment and Rehabilitation Ward
 - Medical Admitting and Planning Unit (MAPU)
 - Radiology including MRI, CT, Ultrasound, and Intervention Radiology
 - Outpatients Clinics
 - Maternity care
 - Inpatient Psychiatric Services.
7. On average, there are 90 presentations to the Nelson Emergency Department each day.
8. There are around 3,000 Health NZ staff working across the Nelson Marlborough district.
9. In 2025, 31 nurse graduates started their careers in the Nelson Marlborough district.

Overview of health target performance

10. As a district we're doing well in Shorter Stays in ED and Immunisation Coverage, having met the milestones, and we are very close to reaching the milestone for Faster Cancer Treatment. We have more work to do to ensure people in Nelson Marlborough have faster access to First Specialist Appointments and Surgery.

Data for the week ending 2 March

National target	Nelson Marlborough
Shorter stays in emergency departments (ED): 95% of patients admitted, discharged or transferred from an ED within 6 hours	84.4%
Shorter wait times for first specialist assessment: 95% of patients wait less than 4 months for a first specialist appointment	45.0%
Shorter wait times for elective treatment: 95% of patients wait less than 4	45.0%

months for elective treatment.	
Faster cancer treatment: 90% of patients receive cancer management within 31 days of the decision to treat.	81.7%
Improved immunisation: 95% of children fully immunised at 24-months of age	81.4%

11. We have a number of initiatives underway to improve our health target performance, including:

- Urology weekend clinics planned for 15/16 March, 173 patients booked including FSAs, cystoscopy and follow-up;
- Monitoring data accuracy, ensuring outpatient information is updated in a timely way;
- Meeting with clinicians on the pending tests process for outpatient referrals, this will ensure only patients suitable for an outpatient appointment are on the FSA wait list;
- Wairau surgeons coming to Nelson to undertake FSA appointment with intention of patients having surgery in Wairau hospital;
- Self-referral of symptoms guideline introduced across all medical / surgical specialities;
- Adjusted operating theatre time for gynaecology service, freeing up two theatre lists per month;
- Review of surgical waiting lists continue to be undertaken in Eyes, Vascular, Gynaecology to additional identify patients suitable for outsourcing;
- Contacting Nelson patients to find suitability to travel to Blenheim for surgery.

Upcoming investments/initiatives

12. Nelson Hospital Redevelopment (Project Whakatapuranga)

You have recently received Cabinet Papers for Nelson Hospital Redevelopment (DBC) which provides more detail about this project. You will be shown the master plan during your visit to the Nelson Hospital.

13. New Ophthalmology Outpatient Centre

The fully refurbished \$4.45 million Ophthalmology Outpatient Centre, set to open in June, will enhance patient care by offering additional clinical space and enabling more clinicians to treat patients more quickly. The increased capacity and improved flow will lead to shorter wait times for first specialist assessments. The expanded facility will accommodate additional medical staff and technicians, ensuring a more efficient and effective service for patients. An additional 2.1 FTE medical staff and 1.5 FTE technicians will be able to be accommodated when the facility opens at the end of June.

14. Wāhi Oranga Refurbishment

The \$6.5 million refurbishment of Wāhi Oranga, scheduled for completion in the first half

of 2025, directly benefits patients by providing a safer, more welcoming environment. The new design focuses on reducing seclusion rates by offering a better-managed admissions area for high-dependency patients. This updated space will improve the overall patient experience by following trauma-informed care principles, creating a less distressing atmosphere, and enhancing engagement with staff which aims to reduce length of patient stays. A new, secure area for police arrivals further contributes to a safer environment. Additionally, the facility will gain one high-dependency bed (going from four to five), increasing capacity for patients requiring intensive care.

15. Emergency Department (ED) Expansion

The current \$10.6 million expansion of the Emergency Department (ED) funded from baseline depreciation, will directly benefit patients by increasing treatment spaces from 23 to 29, meeting the growing demand for emergency services and ensuring shorter stays in Emergency Departments. The ED expansion precedes planned redevelopment of Nelson Hospital.

Revised demand modelling and the ongoing expansion of the ED eliminate the need for a large Acute Services Building as initially planned. As a result, the Nelson Hospital Redevelopment Detailed Business Case (DBC) focuses on prioritising medical and surgical beds, delivering a new five-storey inpatient unit, an Energy Centre, refurbishments of existing buildings, and seismic strengthening — ensuring the project meets demand much sooner.

Construction began in October 2024 S9(2)(g)(i)

This upgrade will provide faster and more efficient care, improving patient flow and reducing wait times. Exciting new features will include two dedicated mental health interview rooms, an additional triage room, a whānau room, patient toilets, and upgraded staff spaces, all designed to improve comfort and efficiency. The new dedicated isolation area and mental health assessment area enabling the specialised mental health team to be based on site, enhancing care for those with mental health needs. The expanded ED will feature a new fast-track area for ambulatory patients, streamlining rapid care and discharge to ensure a smoother and quicker experience. Staff spaces will be thoughtfully reconfigured to enhance confidentiality and support our growing team, creating a more efficient and comfortable work environment. We will also enhance cultural appropriateness by improving accommodations for whānau and reducing crowding, ensuring a more welcoming and supportive environment for everyone.

This project is being delivered by the regional infrastructure team and showcases how regional and national delivery functions work together synergistically to meet diverse operational needs.

16. New Paediatric Outpatient Unit

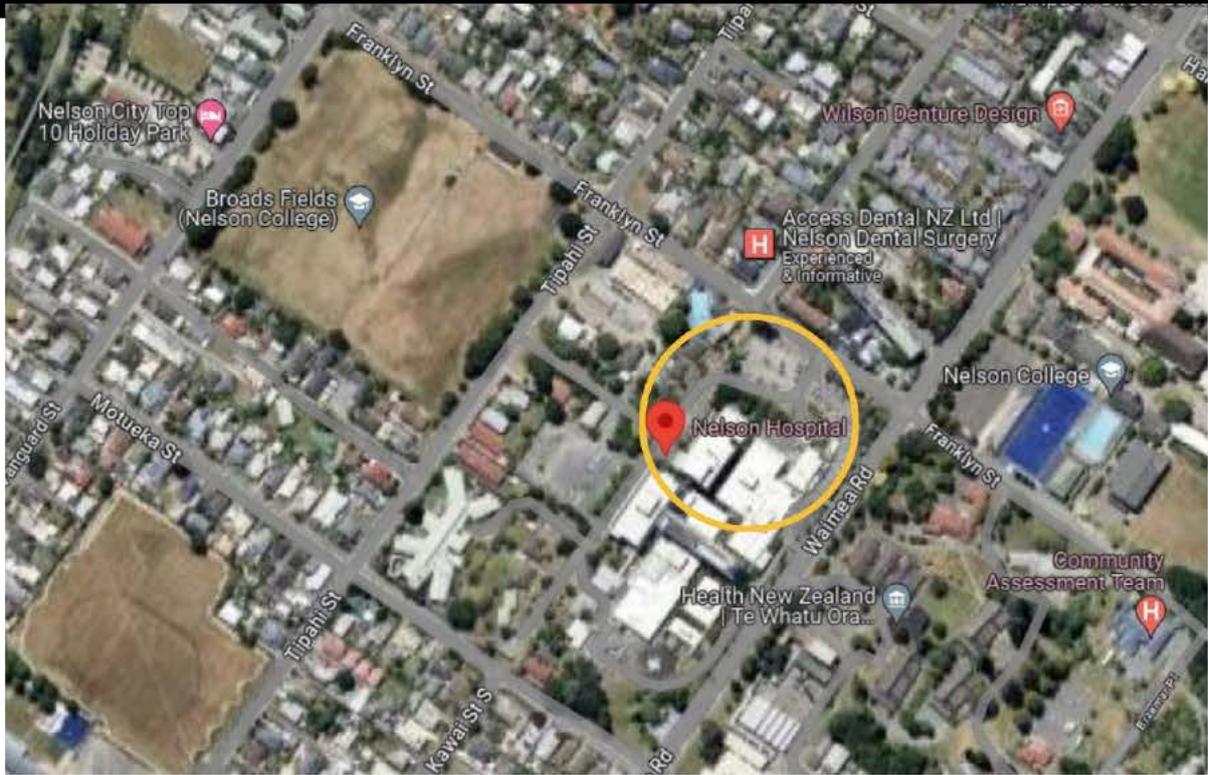
Following a \$5 million upgrade, the new Paediatric Outpatient Unit provides a dedicated, child-friendly space designed to support the unique needs of young patients. The unit, now co-located with youth mental health services, offers 10 clinical rooms, a treatment room, and shared spaces that foster a collaborative approach to care. This co-location enables better continuity of care, as clinicians can work together more effectively on cases, benefiting both patients and families. Additionally, the increased space, including an extra clinic room and enhanced procedure facilities, ensures a more comfortable and

supportive environment for young patients and will hopefully reduce wait times.

Appendix 1: Runsheet and location map for Nelson Hospital visit, 14 March

Time	Details	Minister's Office notes
10:20am	<p><u>Arrives at main entrance Nelson Hospital</u></p> <p>Meet outside main foyer (staff to meet at 10.05am)</p> <p>Jeremy Holman (Chief of Infrastructure & Investment), Martin Keogh (DCE), Peter Bramley (SRO) to meet Minister at entrance</p> <p><u>Address:</u></p> <p>Nelson Hospital, Tipahi Street, Nelson)</p> <p>Car parking is available outside the Hospital (car park to be cordoned off by Orderlies)</p> <p>Contact: Liz Thompson: 9(2)(a)</p>	
10:20am– 10:25am	<p><u>Welcome</u></p> <p>Paora Mackie (Senior Advisor in HMS H&SS) will speak for Minister Brown</p> <p>Te Rā Morris (HMS Hauora Māori Relationship Lead) will speak on behalf of the hospital and receive the Minister.</p> <p>Contact: Liz Thompson: 9(2)(a)</p>	
10:30-10:55am	<p><u>Infrastructure Conversation</u></p> <p>Presentation/discussion on Nelson Hospital Redevelopment</p> <p><u>Address:</u></p> <p>Meeting Room, Level 4, George Manson Building, Nelson Hospital</p> <p>In attendance: Jeremy Holman (Chief of Infrastructure & Investment), Martin Keogh (DCE), Peter Bramley (SRO), Katherine Snook (Portfolio Manager, Te Waipounamu), Liz Thompson (Project Director), Margo Kyle (title TBC)</p> <p>Contact: Jess Hayward: 9(2)(a)</p> <p>Liz Thompson: 9(2)(a)</p>	
10:55-11.15am	<p><u>Infrastructure tour of hospital</u></p> <ul style="list-style-type: none"> • Starting at George Mason ward 10 • Site of new Inpatient Unit • Carpark <p>Minister to be taken to meeting room in Percy Brunette building</p>	

	Contact: Jess Hayward: 9(2)(a)	
11.20-11.50am	<p><u>Closed Session with Regional DCE and/or GDO and Clinicians</u></p> <p><i>Meeting Room, Percy Brunette Building, Nelson Hospital</i></p> <p>In attendance: Martin Keogh (DCE), Lexie O'Shea (GDO), Nick Baker (National Clinical Chief Health Service Delivery Planning (HSDP)), Steve Low (CMO), Sandy McLean-Cooper (District Chief Nurse), Hilary Exton (District Chief Allied Health, Scientific & Technical)</p> <p>Contact: Lexie O'Shea: 9(2)(a) Gaylene Corlett (EA): 9(2)(a)</p>	
11:50 – 12:30pm	<p><u>Tour of Nelson Hospital</u></p> <ul style="list-style-type: none"> • Percy Brunette – Surgical Outpatients • Emergency Department • ICAMHS (if time allows). <p>In attendance: Martin Keogh (CDE), Lexie O'Shea (GDO), Nick Baker ((National Clinical Chief Health Service Delivery Planning (HSDP)), Sandy McLean-Cooper (District Chief Nurse)</p> <p>Contact: Lexie O'Shea, 9(2)(a) Gaylene Corlett: 9(2)(a)</p>	
12:30pm	<i>Minister departs</i>	





Appendix 2: Fact sheet covering key issues/risks for the hospital and the region

Issues/risks for the region

Staffing

In Nelson Marlborough there has been some difficulty recruiting the ICU/Anaesthetic (dual role), and there have been longstanding vacancies in the physician group.

Recently Te Waipounamu Deputy Chief Executive Martin Keogh met with the union (ASMS) and senior clinicians to hear their concerns and develop a collaborative approach to respond to recruitment and staffing challenges.

As part of this consultation, an additional 6 FTE of General Surgical registrars and 2.6 FTE of SMOs across a number of specialities have been approved for Nelson Marlborough.

In Nelson, we also have an additional medical oncology advanced registrar funded by central cancer funding and an additional medical oncologist through collective Te Waipounamu new drug funding.

Urology

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Nelson Marlborough has a higher rate of urologists per 100,000 than many other centres, so we are not currently recruiting.

Urology Super Saturday & Sunday clinic, 15 and 16 March

We have a great initiative underway this weekend which is fantastic news for people waiting for a urology procedure.

Urology Associates from Canterbury are providing First Specialist Appointments (FSA) and some procedures for people from the Nelson Marlborough district. There will be five Urologists, nurses and admin support coming to run the clinics.

Nelson Marlborough has a backlog of people who have been waiting for urology care, so in a recent review of non-contact FSAs, (file reviews) 275 people were cleared from the waiting list.

The Urology Associates team have reviewed the current waiting list and identified who needs to be seen, who needs a diagnostic test before being seen, and who can be referred back to their GP with a treatment plan.

The Super Saturday & Sunday Squad will see a further 100-plus people in person – this will help reduce clinical risk for those who have been waiting outside the recommended time for a First Specialist Appointment or a procedure.

They have booked a mixture of FSAs and overdue follow ups to be carried out over the weekend, including cystoscopies and transrectal ultrasound scan (TRUS) and biopsies checking for prostate cancer.

Local staff will also be working over the weekend to help ensure the days run smoothly.

Appendix 3: Press Release

To be sent separately