

DHB Board Office

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Re: Complaints made against DHB staff over the past three years

Thank you for your Official Information Act request of 4 September 2018 seeking the following of Waitemata District Health Board (DHB):

All incoming and outgoing information – including emails, memos, texts, call transcripts, audio, video, reports, letters – relating to complaints made against District Health Board staff across the country over the past three years. - Can the information be broken down into districts and by complaint type: ie. bullying, sexual harassment, assault etc. Also, how many complaints were investigated, how many are still ongoing, the results of those investigations, how many people were charged by police/sentenced/fired/had their employments ended as a result.

On 13 September, the DHB sought clarification as to whether your request related to bullying and harassment only, or also to complaints made by patients about their care. You confirmed the request was for information on bullying, sexual harassment and harassment only. The following information relates to the Waitemata DHB catchment. For the purposes of the request, Waitemata DHB is using the following definitions for sexual harassment, harassment and bullying.

1. Sexual harassment

- (a) direct or indirect request for sexual intercourse, sexual contact, or any other form of sexual activity that contains—
 - (i) an implied or overt promise of preferential treatment
 - (ii) an implied or overt threat of detrimental treatment
 - (iii) an implied or overt threat about the present or future employment status of that employee; or
- (b) by
 - (i) the use of language (whether written or spoken) of a sexual nature; or
 - (ii) the use of visual material of a sexual nature; or
 - (iii) physical behaviour of a sexual nature that directly or indirectly subjects the employee to behaviour that is unwelcome or offensive.

2. Harassment

Harassment is where another person engages in a pattern of behaviour that is directed against that other person; where that pattern of behaviour includes doing any specified act to the other person on at least two separate occasions within a period of 12 months.

3. Bullying

Bullying is a repeated behaviour that is persistent (occurs more than once) and can involve a range of actions over time.

The following, before I respond to your specific questions, is some contextual information that may assist your understanding of the scale of our services and our workforce.

Waitemata DHB serves the largest population of any district health board in New Zealand, currently standing at around 630,000 people. Waitemata DHB has a workforce of more than 7,500 staff spread across more than 80 sites. In addition to caring for our own population, we also provide regional services in forensic psychiatry and child disability services. We are also the metropolitan Auckland provider of child and adolescent dental services and community alcohol and drug services.

Bullying and harassment behaviours are not acceptable to our DHB. All complaints are taken seriously and our commitment is to foster an environment where everyone feels safe and supported in line with our organisational values. Complaints are followed up through our standard organisation investigation processes. Safety and privacy are managed throughout the process and the DHB ensures access to support and advice. We apply these processes consistently to all complaints and strive to ensure they are applied compassionately.

We have set out below the steps the DHB takes when investigating a complaint or allegation that may lead to disciplinary outcomes. In instances of potential misconduct, parties involved are interviewed and/or statements are collated and meetings are held to discuss the allegations with the employee and their representative. Follow-up meetings are held to discuss initial findings and what actions may be taken, with the final decision confirmed in writing. Additional support is offered and this can be in the form of skill development or employee counselling. In determining appropriate actions in response to an allegation, the DHB considers the following:

- what actions and behaviours are considered unacceptable to the DHB
- the nature of the issue e.g. seriousness and frequency of occurrence
- actions taken in other similar circumstances
- the weight of information provided
- the timeliness in which the matter has been raised.

In answer to your question, please see attached Appendix One - a summary of complaints of sexual harassment, harassment and bullying at Waitemata DHB across three years. Waitemata DHB is withholding the provision of requested incoming and outgoing information under Section 9(2) (a) of the Official Information Act to protect the privacy of employees, as it relates to their on-going employment and professional career; and the patient, as it relates to their care. In our view, the public interest in the information does not outweigh the need to protect the employee's privacy.

I hope this information satisfies your request. You are entitled to seek a review by the Ombudsman about our decision to withhold information. The Office of the Ombudsman can be contacted on 0800 802 602 or www.ombudsman.parliament.nz.

Waitemata DHB, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released. If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider this.

Yours sincerely,

Fiona McCarthy
Director Human Resources

Waitemata District Health Board

Appendix One: Summary of complaints of bullying, sexual harassment and harassment at Waitemata DHB by year.

All incident investigations listed here are completed

September 2015 – August 2016

Type of complaint	Summary of allegations	Status of complaint and Outcomes
Bullying	Patient's husband felt his wife was being bullied out of hospital. Patient's husband wanted the patient to stay in care until he had viewed private care facility. With a social workers involvement the patient was told they could stay until the requested date.	Incident was followed up with the nurse involved. Manager met with employee to discuss allegations. Further investigation not deemed necessary. Staff member completed a reflection exercise to apply learnings in the future.
Bullying	Allegations of bullying behaviours against colleague – unreasonable expectations, tone and language.	Formal investigation completed. Bullying allegations not substantiated. Interpersonal issues identified from both parties. Letter of expectation to senior staff member and relationship building support made available.
Bullying	Allegations of inappropriate communication with colleagues.	Manager met with employee to discuss allegations. Further investigation not deemed necessary. Letter of expectation issued.
Bullying	Allegations of inappropriate communication with colleagues.	Formal investigation completed. Finding of inappropriate behaviour. Letter of expectation issued.

September 2016 – August 2017

Type of complaint	Summary of allegations	Status of complaint and Outcomes
Bullying	Allegation of exclusionary behaviour.	Formal investigation completed. Employee acknowledged how behaviour could have impacted on colleague and apologised. Letter of expectation issued.
Bullying	Allegations of public humiliation and lack of collegial support.	Formal investigation completed. Overall finding that bullying threshold not met but two individual issues of concern substantiated. Letter of expectation issued and improvement process implemented.
Bullying and racial harassment	Allegations of constant criticism, unreasonable expectations and inappropriate communication with colleagues.	Formal investigation completed. Overall finding that bullying threshold not met but one individual issue of concern substantiated. Verbal warning issued and performance improvement plan established.
Bullying and racial harassment	Complaints from five employees – disparaging comments and behaviour.	Formal investigation completed. Some allegations substantiated and overall finding of bullying behaviour. Final written warning issued and robust plan agreed with employee to address concerns.

Bullying	Allegations of derogatory language.	Formal investigation completed. Allegations substantiated. Verbal warning issued.
Bullying	Allegation of physical assault from colleague.	Formal investigation completed. Allegation not substantiated.

September 2017 – August 2018

Type of complaint	Summary of allegations	Status of complaint and Outcomes
Bullying	Allegations of inappropriate communication.	Formal investigation completed. Some allegations substantiated. Verbal warning issued.
Bullying	Allegations of inappropriate communication and standing over from colleague	Formal investigation completed. Allegations of bullying not substantiated but issues related to communication and language identified. Letter of expectation issued and mediation support offered.
Bullying	Allegations of inappropriate communication and striking colleague.	Formal investigation completed. Allegations of striking colleague upheld. Employee dismissed.
Sexual Harassment	Patient claims health care assistant assaulted them and made sexually suggestive gestures.	CCTV footage and evidence of witnesses present at time showed clearly that claims were untrue.