

Table 17669 (2026). Infection Prevention and Control–Related Corrective Actions Issued to Public Hospitals (April 2023–April 2026)

Public hospital district	Audit type	Audit start date	Criterion	Audit finding	Initial progress reporting due date
Health New Zealand - Te Whatu Ora Te Toka Tumai Auckland	Surveillance	24/09/2024	5.3.3	There are plans to improve compliance of antimicrobial stewardship; however, except for paediatric services, there was no evidence of current monitoring and evaluation of antimicrobial usage across the organisation, to ensure appropriate use.	20/05/2025
Health New Zealand - Te Whatu Ora Hauora A Toi Bay of Plenty	Certification	4/07/2023	5.2.8	The infection prevention and control team are not consistently consulted in relation to site development/building projects in a timely and consistent manner.	1/01/2024
Health New Zealand - Te Whatu Ora Hauora A Toi Bay of Plenty	Surveillance	26/02/2025	5.2.8	The infection prevention and control team are not consistently consulted in relation to site development/building and refurbishment projects in a timely and consistent manner.	30/07/2025
Health New Zealand - Te Whatu Ora Hauora A Toi Bay of Plenty	Partial Provisional	8/12/2025	5.2.8	The infection prevention and control team are not consistently consulted in a timely or systematic manner in relation to site development, building, and refurbishment projects.	24/05/2026
Health New Zealand - Te Whatu Ora Hauora A Toi Bay of Plenty	Partial Provisional	8/12/2025	5.5.4	Records were not available to demonstrate how laundry services are being monitored for effectiveness.	22/08/2026
Health New Zealand - Te Whatu Ora Hauora A Toi Bay of Plenty	Partial Provisional	8/12/2025	5.5.5	There is not a reliable process to ensure the IPC team are involved with oversight of the facility testing and monitoring programme for the built environment.	24/05/2026
Health New Zealand - Te Whatu Ora Waitaha Canterbury	Surveillance; Partial Provisional	2/05/2023	5.3.2	The AMS guidelines in use were not current.	24/12/2023
Health New Zealand - Te Whatu Ora Waitaha Canterbury	Certification	1/07/2024	5.3.1	The AMS programme is not suited to the increasing complexity and demands of the district-wide service. It is not able to produce optimal data to reflect the prescribing patterns and antimicrobial use across the district.	20/12/2024
Health New Zealand - Te Whatu Ora Waitaha Canterbury	Certification	1/07/2024	5.3.3	The effectiveness of the AMS programme and monitoring of antimicrobial prescribing, dispensing and administration has not been undertaken to the expected level, due to pressures on the existing service and team members.	20/12/2024
Health New Zealand - Te Whatu Ora Capital, Coast, Hutt Valley	Certification	8/09/2025	5.5.1	Hazardous substances were not all stored safely and securely and in compliance with current legislation.	28/11/2026
Health New Zealand - Te Whatu Ora Counties Manukau	Surveillance	24/07/2024	5.2.9	While aspects of the previous finding for CSSD (Counties Manukau) have been addressed, ongoing improvements are required. a. There were no process controls or policy to support the reprocessing of RMDs in satellite sites outside of hospitals. b. There was no education or oversight for staff in outlying areas on	30/12/2024

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				processing and tracking of RMDs. c. Theatres continue to use sleeves/sheaths for camera heads due to the cost of purchasing these cameras. There is a purchase plan in place to be implemented over several years. d. The HSO risk assessment policy for non-conforming RMDs is yet to be developed. e. Work is required to address the requirements of the current health and non-health care related facilities standard (AS 5369 - 2023).	
Health New Zealand - Te Whatu Ora Te Matau a Māui Hawke's Bay	Surveillance	5/06/2024	5.2.2	There is no updated infection prevention control plan for 2024.	27/01/2025
Health New Zealand - Te Whatu Ora Te Matau a Māui Hawke's Bay	Surveillance	5/06/2024	5.3.3	Monitoring the quality and quantity of antimicrobial prescribing, dispensing, and administration is not able to be completed across all areas due to lack of clinical pharmacist capacity and use of paper-based medication records.	27/01/2025
Health New Zealand - Te Whatu Ora Lakes	Partial Provisional	23/09/2024	5.5.3	The new facility has yet to undergo the final 'cleans' to ensure a safe environment for patients and staff. This was planned for later in the week of the audit.	Prior to occupancy
Health New Zealand - Te Whatu Ora Te Pae Hauora o Ruahine o Tararua MidCentral	Partial Provisional	17/06/2025	5.2.1	There was no IPC representation at the unit level.	Prior to occupancy
Health New Zealand - Te Whatu Ora Te Pae Hauora o Ruahine o Tararua MidCentral	Partial Provisional	17/06/2025	5.5.3	There were IPC risks which required addressing to ensure the safety of the environment for whaiora.	Prior to occupancy
Health New Zealand - Te Whatu Ora Te Pae Hauora o Ruahine o Tararua MidCentral	Surveillance	26/08/2025	5.2.2	Records are not available to demonstrate that the infection control programme has been reviewed and reported on annually.	26/04/2026
Health New Zealand- Te Whatu Ora Nelson Marlborough	Surveillance	15/10/2024	5.3.1	The antimicrobial stewardship programme has not yet been developed or implemented.	22/06/2025
Health New Zealand - Te Whatu Ora South Canterbury	Partial Provisional	21/08/2023	5.5.1	1. Hazardous substances are not fully secured and are accessible to unauthorised people. 2. A material data sheet is not available for one product in use.	25/12/2023
Health New Zealand - Te Whatu Ora Southern	Surveillance	10/07/2023	5.1.1	Infection control screening was not consistently evidenced in patient care documentation.	24/09/2023
Health New Zealand - Te Whatu Ora Southern	Partial Provisional	25/06/2024	5.2.7	The IPC CNS has been involved with modifications to the renovation and purchase of fittings and has provided IP expertise. Several aspects to reduce the risk of infection have been identified by the IPC CNS but have yet to be addressed. This included handwashing equipment, shortening of a shower hose, laundry and the cleaners' room areas alterations.	Prior to occupancy
Health New Zealand - Te Whatu Ora Southern	Partial Provisional	25/06/2024	5.5.3	Cleaning arrangements to ensure the environment is clean and there are safe and effective cleaning processes are to yet to be arranged.	Prior to occupancy

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Health New Zealand - Te Whatu Ora Southern	Certification	18/11/2024	5.3.3	The AMS committee is unable to evaluate the use of antimicrobials due to the present IT system not being able to provide the required data. The accuracy of data provided has been questioned.	17/05/2025
Health New Zealand - Te Whatu Ora Tairāwhiti	Surveillance	18/06/2024	5.3.2	While an AMS policy has been developed, further work is necessary to ensure implementation occurs, is understood by prescribers and utilises agreed antimicrobial guidance.	8/02/2025
Health New Zealand - Te Whatu Ora Tairāwhiti	Surveillance	18/06/2024	5.3.3	Evaluation of the effectiveness of the AMS programme and associated training is yet to occur.	8/02/2025
Health New Zealand - Te Whatu Ora Tairāwhiti	Surveillance	18/06/2024	5.4.3	There is inconsistent recording and handover of the MDRO status of patients admitted to the hospital via ED.	10/11/2024
Health New Zealand - Te Whatu Ora Tairāwhiti	Partial Provisional	7/11/2024	5.3.2	Ensure the AMS policy implementation occurs, is understood by prescribers and utilises agreed antimicrobial guidance.	8/07/2025
Health New Zealand - Te Whatu Ora Tairāwhiti	Partial Provisional	7/11/2024	5.3.3	Evaluation of the effectiveness of the AMS programme and associated training is yet to occur.	8/07/2025
Health New Zealand - Te Whatu Ora Tairāwhiti	Partial Provisional	7/11/2024	5.4.3	There is inconsistent recording and handover of the MDRO status of patients admitted to the hospital via ED.	8/07/2025
Health New Zealand - Te Whatu Ora Tairāwhiti	Partial Provisional	7/11/2024	5.5.5	There was no infection control plan or initial walk around plans available to view at the time of audit, and there had not been any plan for the clean-dirty flow assessment within the unit and the removal process for hazardous wastes.	Prior to occupancy
Health New Zealand - Te Whatu Ora Taranaki	Surveillance	21/05/2024	5.2.9	The 'TDoc' system to track reusable surgical instruments to the individual patient has been purchased but has not been implemented due to IT complexities at a regional and national level.	15/01/2025
Health New Zealand - Te Whatu Ora Taranaki	Surveillance	21/05/2024	5.4.3	The IPC team have not been reporting ethnicity data when analysing surveillance data.	15/01/2025
Health New Zealand - Te Whatu Ora Taranaki	Partial Provisional	12/02/2026	5.2.2	There is a lack of resources in the unit to ensure compliance to the standards.	16/09/2026
Health New Zealand - Te Whatu Ora Waikato	Surveillance	19/03/2024	5.2.9	The current surgical instrument tracking system does not enable the tracking of all surgical instruments to end-patient use, except in the case of neurology patients.	13/11/2024
Health New Zealand - Te Whatu Ora Waikato	Surveillance	19/03/2024	5.3.3	There remains limited ability to monitor that antimicrobials are used in accordance with organisation guidelines and good antimicrobial stewardship.	15/08/2024
Health New Zealand - Te Whatu Ora Waikato	Partial Provisional	27/11/2024	5.3.3	There remains limited ability to monitor that antimicrobials are used in accordance with organisation guidelines and good antimicrobial stewardship.	1/05/2025
Health New Zealand - Te Whatu Ora Te Tai o Poutini West Coast	Certification	15/07/2025	5.3.1	There was no current AMS programme for Te Tai o Poutini. There was access within the transalpine network to advice and support and laboratory	26/12/2025

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				diagnostic testing reports to optimise the use of antimicrobials; however, in the absence of a formal agreement, there were limited specialist governance and oversight of the programme locally.	
Health New Zealand - Te Whatu Ora Te Tai o Poutini West Coast	Certification	15/07/2025	5.3.3	There was no evidence of formal monitoring of indication and duration of antimicrobial prescribing within the general ward.	26/03/2026

Note:

- Data was extracted from the Provider Regulation and Monitoring System (PRMS) reporting database as at 29 April 2026.
- Data includes any audits completed in PRMS at the time of data extraction.
- Progress reporting due dates are established when the schedule of conditions is issued following an audit.