

Te Whatu Ora | Health New Zealand – Nelson Marlborough

– Progress on required actions

Te Whatu Ora | Health New Zealand – Nelson Marlborough underwent an accreditation assessment as a provider of prevocational medical training on 10 and 11 October 2024.

The overall outcome of the assessment for Te Whatu Ora | Health New Zealand – Nelson Marlborough accreditation was ‘**substantially met**’.

Te Whatu Ora | Health New Zealand – Nelson Marlborough is currently accredited for prevocational medical training until 31 March 2029, subject to satisfactorily addressing the required actions listed below.

Update: In February 2026, as part of the transition to the new accreditation of prevocational medical training framework, Council updated required actions that will sit at a different or multiple levels under the new framework.

	Required actions on accreditation	Standard	Status
1	<p>Nelson Marlborough must develop a strategic plan for the ongoing development and support of high quality prevocational medical training and education, which sets out that high standards of medical practice, education and training are recognised as a local priority.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Strategic priorities, accountability, and policy – Strategic priorities</p> <p>1.1.1: The district training provider has a strategic plan for ongoing development and support of high quality prevocational medical training and education, which reflects the training organisation's strategic priorities.</p>	
2	<p>Nelson Marlborough must ensure its strategic plan for prevocational medical training addresses and integrates Māori health and health equity in the prevocational training programme.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Strategic planning and governance – Strategic planning</p> <p>1.1.2: The district training provider addresses Māori health and health equity as part of its commitment to high quality prevocational education and training.</p>	
3	<p>Nelson Marlborough must ensure it has the mechanisms to plan, develop, implement, and review the intern training programme.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Organisational and operational structures – The context of intern training</p> <p>2.1.1: The district training provider demonstrates that it has the mechanisms in place to plan, develop, implement, and review the intern training programme.</p>	

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4	<p>Nelson Marlborough must ensure that the training programme is underpinned by sound medical educational principles.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Organisational and operational structures – Educational expertise</p> <p>2.3.1: The district training provider demonstrates that the intern training programme is underpinned by sound medical educational principles.</p>	
5	<p>Nelson Marlborough must establish appropriate relationships with external organisations, including Māori health providers, to support the intern training programme.</p> <p><i>Due to be addressed: 15 September 2027</i></p> <p><i>Report on progress due: 15 September 2026</i></p>	<p>Organisational and operational structures – Relationships to support medical education</p> <p>2.4.1: There are effective working relationships with external organisations involved in training and education.</p> <p>2.4.3: There are effective partnerships with Māori health providers to support intern training and education.</p>	
6	<p>Nelson Marlborough must ensure that in coordinating the delivery of the training programme across its sites, that all interns receive an equivalent training and educational experience.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Organisational and operational structures – Relationships to support medical education</p> <p>2.4.2: The district training provider coordinates the local delivery of the intern training programme or collaborates in such coordination when it is part of a network programme.</p>	
7	<p>Nelson Marlborough must ensure that interns receive the supervision and opportunities to:</p> <ul style="list-style-type: none"> • enhance their skills, understanding and knowledge of hauora Māori • develop their cultural safety and cultural competence • deliver patient care in a culturally-safe manner. <p><i>Due to be addressed: 15 September 2027</i></p> <p><i>Report on progress due: 15 September 2026</i></p>	<p>The intern training programme – Programme components</p> <p>3.1.4 – The district training provider has processes that ensure that interns receive the supervision and opportunities to:</p> <ul style="list-style-type: none"> • enhance their skills, understanding and knowledge of hauora Māori • develop their cultural safety and cultural competence, and • deliver patient care in a culturally-safe manner. 	

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8	<p>Nelson Marlborough must ensure an effective and efficient structured handover process from the night medical team to the daytime clinical teams.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>The intern training programme – programme components</p> <p>3.1.8: There are procedures in place for structured handovers between clinical teams and between shifts (morning, evening, nights and weekends) to promote continuity of quality care. The district training provider ensures that interns understand their role and responsibilities in handover.</p>	
9	<p>Nelson Marlborough must ensure that interns can attend at least two thirds of formal education sessions across both training sites.</p> <p><i>Due to be addressed: 15 September 2027</i></p> <p><i>Report on progress due: 15 September 2026</i></p>	<p>The intern training programme – Formal education programme</p> <p>3.3.2: The intern training programme ensures that interns can attend at least two thirds of formal education sessions, by structuring the formal education sessions so that barriers to attendance are minimised.</p>	
10	<p>Nelson Marlborough must ensure that the formal education programme provides content on hauora Māori and tikanga Māori, and Māori health equity, including the relationship between culture and health.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>The intern training programme – Formal education programme</p> <p>3.3.4: The formal education programme provides content on hauora Māori and tikanga Māori, and Māori health equity, including the relationship between culture and health.</p>	
11	<p>Nelson Marlborough must implement a process to review and update formalised orientation material for each clinical attachment.</p> <p><i>Due to be addressed: 15 September 2027</i></p> <p><i>Report on progress due: 15 September 2026</i></p>	<p>The intern training programme – Orientation</p> <p>3.4.2: Orientation, including written descriptions, is provided at the start of each clinical attachment, ensuring familiarity with key staff, systems, policies, and processes relevant to that clinical attachment.</p>	

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12	<p>Nelson Marlborough must ensure the CMO (or delegate) has oversight of the prevocational educational supervisors to assist them in effectively fulfilling the obligations of their role.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Assessment and supervision – Supervision – Prevocational educational supervisors</p> <p>4.2.3: There is oversight of the prevocational educational supervisors by the CMO (or delegate) to ensure that they are effectively fulfilling the obligations of their role.</p>	
13	<p>Nelson Marlborough must have a system to ensure clinical supervisors undertake relevant training in supervision and assessment as soon as practicable (within 12 months) after appointment as a clinical supervisor.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Assessment and supervision – Supervision – Clinical supervisors</p> <p>4.3.3: Clinical supervisors undertake relevant training in supervision and assessment as soon as practicable after beginning their supervisory role. This must be within 12 months of appointment as a clinical supervisor.</p>	
14	<p>Nelson Marlborough must ensure that systems are in place to ensure that clinical supervisors meet with interns at the beginning, middle and end of each attachment, and record these meetings in ePort in a timely manner.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Assessment and supervision – Feedback and assessment</p> <p>4.4.1: Systems are in place to ensure that regular, formal feedback is provided to interns and documented in ePort on their performance within each clinical attachment, including end of clinical attachment assessments. This should also cover the intern’s progress in completing the goals in their PDP and the intern’s self-reflections against the 14 learning activities.</p>	

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15	<p>Nelson Marlborough must establish processes and systems to monitor the intern training programme, that includes input from interns and supervisors. This must include mechanisms to enable interns to provide anonymous feedback:</p> <ul style="list-style-type: none"> • about their education experience on each clinical attachment • on their PESs, RMO unit staff and others involved in intern training. <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Monitoring and evaluation of the intern training programme</p> <p>5.1.1: Processes and systems are in place to monitor the intern training programme with input from interns and supervisors.</p> <p>5.1.2: There are mechanisms in place that enable interns to provide anonymous feedback about their educational experience on each clinical attachment.</p> <p>5.1.4: There are mechanisms in place that enable interns to provide anonymous feedback on their prevocational educational supervisors, RMO unit staff and others involved in intern training.</p>	
16	<p>Nelson Marlborough must establish a process to routinely evaluate clinical supervisor and prevocational educational supervisor effectiveness taking into account feedback from interns.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Monitoring and evaluation of the intern training programme</p> <p>5.1.5: The district training provider routinely evaluates supervisor effectiveness taking into account feedback from interns.</p>	
17	<p>Nelson Marlborough must establish a process to ensure the currency of accredited clinical attachments.</p> <p><i>Due to be addressed: 15 September 2026</i></p>	<p>Implementing the education and training framework – Establishing and allocating accredited clinical attachments</p> <p>6.1.1: Processes and mechanisms are in place to ensure the currency of accredited clinical attachments.</p>	