

# MIDCENTRAL DISTRICT HEALTH BOARD

Minutes of the MidCentral District Health Board meeting held on 28 February 2017 at 10.00am at MidCentral DHB, Board Room, Gate 2 Heretaunga Street Palmerston North.

## PRESENT

Dot McKinnon(Chair)	Michael Feyen
Brendan Duffy (Deputy Chair)	Nadarajah Manoharan
Diane Anderson	Karen Naylor
Adrian Broad	Oriana Paewai
Barbara Cameron	Barbara Robson
Ann Chapman	

## IN ATTENDANCE

Kathryn Cook, Chief Executive Officer  
Neil Wanden, General Manager, Finance & Corporate Services  
Kenneth Clark, Chief Medical Officer (part meeting)  
Craig Johnston, General Manager, Strategy, Planning and Performance  
Janine Hearn, General Manager, People & Culture  
Stephanie Turner, General Manager, Maori & Pacific  
Gabrielle Scott, Executive Director, Allied Health  
Scott Ambridge, General Manager, Enable New Zealand  
Michele Coghlan, Acting Executive Director, Nursing & Midwifery  
Dennis Geddis, Team Leader, Communications  
Muriel Hancock, Director, Patient Safety & Clinical Effectiveness (part meeting)  
Vivienne Ayres, Manager, DHB Planning & Accountability  
Greig Russell, Medical Administration Trainee  
John Manderson, Programme Manager, Business Improvement  
Wayne Blissett, Director, Maori Strategy, Support & Operations

Public: 1 (part meeting)

Media: 1

In opening the meeting, the Chair thanked those who had attended the presentation earlier in the day, to Emma Lett physiotherapist, who won the Health Quality & Safety Commission's award "Open for Leadership", presented by the Hon Peter Dunne.

## 1 APOLOGIES

There were no apologies.

## 2 LATE ITEMS

There were no late items.

### **3 CONFLICT AND/OR REGISTER OF INTERESTS UPDATE**

#### **3.1 Amendments to the Register of Interests**

There were no amendments to the Register of Interests.

#### **3.2 Declaration of Conflicts in Relation to Today's Business**

No declarations of conflict in relation to today's business were declared.

### **4 MINUTES OF PREVIOUS MEETING**

#### **4.1 Minutes**

It was resolved:

*that the minutes of the previous meeting held on 13 December 2016 be confirmed as a true and correct record.*

#### **4.2 Matters Arising from the Minutes**

##### *2016/17 Capital Plan Update*

There was discussion regarding adding "only" to the second to last sentence under this heading, to read "Management confirmed that **only** \$500k for Ward 21 had been included in the 2016/17 capital plan." After discussion, it was agreed to leave the sentence as originally written. The figure of \$500k was the cost to be incurred this financial year as opposed to the scope of work which was a much larger sum of money.

##### *Record of Board and Committee Meetings*

The current practice when recording meetings of not noting comments from elected members or naming speakers was raised as being not particularly transparent. The Chair advised the procedure was similar to that of other DHBs, eg resolutions did not show who moved or seconded them. With regard to something a member particularly wanted to make a point about, then the member could be named.

### **5 BOARD COMMITTEES**

#### **5.1 Finance, Risk & Audit Committee**

It was resolved:

that the unconfirmed minutes of the meeting of the Finance, Risk & Audit Committee held on 31 January 2017 be received.

#### **5.2 Matters Arising**

##### *5.2.1 Health & Safety System*

In terms of the new Health and Safety at work legislation, the new law requires directors to be aware and to monitor programmes and policy as well as to verify them where appropriate. Ensuring this happened had been discussed at the last Finance Risk and Audit Committee meeting. It was suggested whilst this did not need to be resolved

at today's meeting, it should be included in the work plan for members. The CEO said this would be followed up at the next Finance, Risk & Audit Committee meeting.

A member noted these were unconfirmed minutes from that committee and that the Chair of that committee did not sit at the Board table. The member wondered if there was a timing issue in terms of having unconfirmed minutes in fairness to the Chair of that committee. It was noted the Board was only receiving the minutes, and that all the minutes were unconfirmed. The Chair said the issue would be discussed with the Chair of the Finance, Risk & Audit Committee.

### **5.3 Quality & Excellence Advisory Committee**

It was noted there had been two members of the public present at this meeting.

It was resolved:

*that the unconfirmed minutes of the meeting of the Quality & Excellence Advisory Committee held on 7 February 2017 be received.*

### **5.4 Matters Arising**

There were no matters arising from the minutes.

### **5.5 Healthy Communities Advisory Committee**

Two errors were noted in the minutes: item 6.4 second paragraph first sentence should read "There is excitement about Ko Ao Ka Awatea which is a partnering approach between the DHB, Central PHO and Te ~~Tihi~~ **WOSIDG**"; and item 6.6 first sentence should read "The Senior Portfolio Manager, Health of Older Persons, explained that the Ministry of Health **Social Development** has released the Disability Strategy". The minutes would be amended accordingly.

It was resolved:

*that the unconfirmed minutes of the meeting of the Healthy Communities Advisory Committee held on 7 February 2017 be received.*

### **5.6 Matters Arising**

There were no matters arising.

### **5.7 Enable New Zealand Governance Group**

It was resolved:

*that the unconfirmed minutes of the meeting of the Enable New Zealand Governance Group held on 7 February 2017 be received.*

### **5.8 Matters Arising**

There were no matters arising from the minutes.

## **6 WORK PROGRAMME**

In speaking to this report, the CEO noted there were some significant reviews happening at the moment, and that the development of the new committee structure and councils was a work in progress. The CEO asked members to advise if there was any difficulty with dates or meetings. A member advised that a month's notice did not give enough time for arrangements to be made. It was noted the Regional DHBs symposium would be held at Solway, Masterton.

It was resolved:

*that the updated work programme be noted.*

## **7 STRATEGIC & OPERATIONAL PLANNING**

### **7.1 Organisational Development Plan**

Oriana Paewai said the description "diversity groups" was good, as it was sometimes difficult to find a suitable name for the "other groups". Maori usual fell into "other categories", however the term "other groups" sometimes lost the focus of the Treaty relationship.

A member wondered whether there should be a glossary for clarity of nomenclature.

The issue of the new General Manager, People & Culture implementing this plan following the departure of the current General Manager was raised, particularly developing the comprehensive measurement framework following approval of the plan. Another concern raised was slippage as a result of the change, and whether sufficient resources were available given the financial pressures.

The General Manager advised the plan was owned by the Executive Team and organisation leaders. The Team had worked on the development of the plan so there was institutional knowledge, and implementing the plan should not be a problem. The financial constraints were known. The team was looking at how resources could be relocated for this work, and processes streamlined and efficiencies gained. The matter could be further discussed at the budget workshop following the board meeting.

Other feedback included the requirement for buy in, ownership and understanding of the plan, having measures that were easily understood by the community, and watching the morale of staff as it was hard going through change management. It was not always possible to have all staff happy.

It was resolved:

*that the Board approve the content of the draft Organisational Development Plan, and note that the final formatting of the plan will now be undertaken to align with the formatting and theming of our recently completed Strategy.*

### **7.2 Health and Safety System**

Management clarified that the workplace inspections related to a requirement of the organisation's health and safety representatives to do inspections every six months in clinical areas, and every 12 months in non clinical areas. Implementation of the hazard module had just been completed. This would link to the work site inspections. The

health and safety representatives had just completed their training which was why the measurement was only 20 percent.

Currently the Wellness Expo was for staff and would be held in the first week of November. Some thought had been given to the suggestion that this should be open to the public or key stakeholders, but the facility was not adequate for large numbers of people. If the expo was held off site, it would remove the focus on staff and their ability to attend during working hours. Board members were welcome to attend.

The health and safety of staff who worked remotely, eg district nurses, was raised. Management noted that one of the recommendations from the last ACC Partnership Plan was to have an efficient escalation plan in place for staff who worked remotely and may not return to work. There were a number of procedures in place for increasing their health and safety, depending on the service.

Management advised the Coordinated Incident Management System (CIMS) was well covered at an operational level but not quite so good at management level and above. There was a large number of committees and work was just beginning on ensuring learnings were disseminated around the committees. Attendance was good at the various meetings.

It was resolved:

*that the board received this report: that the health and safety system is recommended to the Board for approval; and that quarterly reporting commences in April with no further interim reports.*

### **7.3 Delegated Authority – Warehouse Lease, Palmerston North**

Management confirmed that whilst the commercial market had tightened, there were still a number of suitable facilities available in Palmerston North. The city was a good distribution hub so it had been decided to concentrate on finding suitable premises within Palmerston North.

It was resolved:

*that the report be received; delegated authority with respect to the lease and conditions for the Enable New Zealand Palmerston North warehouse facility, of up to 10 years (including renewals) be given by the Board of MidCentral District Health Board to the Chief Executive Officer, MidCentral District Health Board. (Moved Di Anderson, seconded Brendan Duffy)*

Wayne Blissett and Dr Kenneth Clark joined the meeting.

## **8 PERFORMANCE REPORTING**

### **8.1 CEO's Report**

Barbara Robson asked if she could see a diagram of the organisational structure, as she felt it was starting to look confusing.

Barbara Cameron declared her interest as a councillor, Manawatu District Council.

Ms Cameron felt there should be written communication asking for clarification of the Manawatu District Council's practice of water treatment. Management advised there

was engagement by the DHB's staff with local government. There were different levels of engagement, eg CEO to CEO, and public health officers also meet with the Council technical staff.

A member said she had received a significant amount of feedback on car parking following the last meeting. The member has asked for information on how much revenue was received from the car parking. The member also felt it would be good to know what the reduction in revenue would be if the free parking time was increased to one hour, as she felt consideration should be given to increasing the free time.

The CEO advised there was a range of opportunities available to help patients and families who required frequent parking etc, eg for visiting paediatric patients, cancer patients. Further discussion on this issue was deferred until the next report was received.

The six-monthly board-to-board hui would be held on 27 March, probably 10-12noon. It was suggested that if anyone had specific questions around orientation, they should let the Manager, Administration & Communications know.

Mr Feyen raised the issue of fresh water/rivers and health risks. He referred to the Manawatu River Leaders Accord as he felt the DHB should be taking a leadership role in that group. The CEO said the DHB did have responsibility around monitoring and advising Council on water issues and wanted to be a leader on health issues, but it had to be clear on its different roles.

It was resolved:

*that the Board received this report.*

## **8.2 Workforce Update**

The General Manager, People & Culture introduced this report. She confirmed exit interviews were done, but did not highlight any issues that might account for the increase in turnover.

Staff Safety Culture Survey - Management advised there had not been a much feedback from staff and the results had not provided the range of information needed from the last survey, so they were looking for a new tool. Surveying would still be important under the new organisational development plan, but it would be aligned with previously asked questions so it could be benchmarked. A timeframe would be decided as part of the measurement framework for the organisational development plan. The organisational development plan should demonstrate some measurable change before starting to measure it.

It was resolved:

*that the Board received this report*

## **8.3 Finance Report**

Management advised it was usual to carry capital expenditure approved but not spent in one year over to the next year. The level of carryover was usually similar from year to year.

It was resolved:

*that the Board received this report*

#### **8.4 Business Improvement Report**

A member queried when should management look beyond the hospital for cost savings or efficiencies and start looking at other areas, eg in the community. The CEO suggested this would be better discussed in the workshop following the board meeting.

Management were also asked about private/public partnership opportunities, and joint ventures. The CEO said this was an area that had already been explored, eg the Allied Laundry and Spotless contracts, and other collaborations with DHBs and laboratory services etc. However it was an area to continually be looking at as opportunities arose. This matter could also be discussed further in the workshop.

Management were asked about the Care, Capacity Demand Management programme, which could result in either an increase or decrease of resources, and where it was in the context of funding financial savings. Management said the Business Improvement Programme was more than a financial savings programme, and there was a real risk if the focus was just on savings. It was important to carefully scope and develop the various programmes of work, as savings would always be the outcome of well defined programmes of work.

It was resolved:

*that the Board received this report*

#### **8.5 Non-Financial Performance Indicators – Summary Report**

There was discussion on programmes currently supported financially by the DHB in the community, but not as a DHB service. Reference was made to the U-Kinetics Te Huianga Wairoa programme, which was apparently very successful particularly for people with heart problems. Management explained the DHB funded services rather than financial grants to organisations. There was a good level of communication back to the organisations concerned. It was suggested it could be a good idea for some site visits to some of the organisations including Enable.

It was resolved:

*that the Board received this report*

### **9 GOVERNANCE MATTERS**

The Chair suggested at future meetings trialling having items like minutes at the end of the order paper, and shifting ones like governance and Iwi partnership items to the beginning.

#### **9.1 Iwi Partner Minutes**

It was noted the orientation for new and possibly the longer serving board members would be discussed possibly at the Chair to Chair Hui on 7 March. A member asked if the date for the Board to Board Hui was confirmed for 27 March, as that was a Council

meeting day and unsuitable to members who were also Council members. Another member indicated he didn't have much time available that day either.

Ms Paewai advised orientation was aimed at new board members, but was open to anyone. It would take about two hours in the morning, eg 10-12noon. However, if the date did not suit the Council members, then Management would reconsider it.

It was resolved:

*the minutes of the meeting of the Iwi Partner held on 17 February 2017 be received*

## **9.2 Record of Board/Committee Meeting Policy**

The issue raised earlier in the meeting regarding resolutions was discussed. The CEO said previous practice was for the Chair to treat all recommendations as resolutions and seek someone to move and second them. The Chair thought recommendations were noted but when a decision was required, it would be a resolution. The CEO suggested given the potential restructuring of board meetings and the revision of this policy, that further consideration be given to the policy and it be brought back to the Board.

It was agreed that the CEO and Chair would reconsider the paper and provide a revised draft policy.

It was agreed that the Record of Board/Committee Meetings policy item be withdrawn (Diane Anderson/Karen Naylor).

## **9.3 Appointment to Board Committees Policy**

Management confirmed that there was a Code of Conduct and Procedures for the Board. Michael Feyen wondered if they should be included in the Board Committees Policy. The CEO said this policy was about the appointment of board committees. A copy of the Code of Conduct would be provided for him if desired.

Mr Feyen accepted that response but said he would abstain from voting on this resolution.

It was resolved:

*that the Appointment to Board Committees Policy be amended to reflect the current names of the Board's statutory committees, and that it be reviewed in three years.*

## **10 LATE ITEMS**

There were no late items.

## **11 DATE OF NEXT MEETING**

Tuesday, 11 April 2017 at 10am at MidCentral District Health Board Offices, Board Room, Gate 2, Heretaunga Street, Palmerston North.

## **12 EXCLUSION OF THE PUBLIC**



Unconfirmed Minutes