



MidCentral District Health Board

Board Minutes

Meeting held on 14 December 2021 from 9.00am

PART ONE

Members

Brendan Duffy (Board Chair), Heather Browning, Vaughan Dennison, Lew Findlay, Norman Gray, Muriel Hancock, Materoa Mar, Karen Naylor, Oriana Paewai, John Waldon, Jenny Warren.

Apologies

Nil

In attendance

Kathryn Cook, Chief Executive; Kelvin Billingham, Chief Medical Officer (and Clinical Executive, Te Uru Kiriara); Debbie Davies, Interim General Manager, Strategy, Planning and Performance (and Operations Executive, Te Uru Kiriara); Celina Eves, Executive Director, Nursing and Midwifery; Emma Horsley, Communications Manager; Gabrielle Scott, Executive Director, Allied Health; Margaret Bell, Board Secretary.

In attendance (part meeting)

Jeff Brown, Clinical Executive, Te Uru Pā Harakeke; Judith Catherwood, General Manager, Quality and Innovation; Sarah Fenwick, Operations Executive, Te Uru Pā Harakeke; Jess Long, Advisor, Planning and Accountability; Steve Miller, Chief Digital Officer; Darryl Ratana, Deputy Chief Financial Officer; Neil Wanden, General Manager, Finance and Corporate Services.

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1. KARAKIA

The meeting opened with the organisational karakia.

2. ADMINISTRATIVE MATTERS

2.1. Apologies

Nil.

2.2. Late items

COVID-19 Response – Air Purification Systems

Late paper related to COVID-19 response. To be discussed in Part Two under the Official Information Act section 9(2)(j) – to protect negotiations, including commercial and industrial.

2.3. Register of Interests Update

John Waldon

- No longer contracted to UCOL.
- Appointed as Research Advisor Māori to Massey University, commencing 17 January 2022.

2.4. Minutes of the Board meeting held on 9 November 2021, Part One

It was resolved that:

the Part One minutes of the 9 November 2021 Board meeting be approved as a true and correct record.

(Moved Muriel Hancock; seconded John Waldon)

2.5. Matters arising from previous minutes

It was noted that planning for long-term car parking arrangements at Palmerston North Hospital was dependent on several planned areas of redevelopment, including the acute mental health unit and Acute Services Block. A traffic engineering review would be carried out in conjunction with delivery of these projects and car parking plans would be developed to ensure access was available for patients as close as possible to where they needed to attend for treatment.

Unconfirmed minutes

2.6. Verbal report from the Board Chair

The Board Chair acknowledged the effort made by the Chief Executive and her team over the past year, which had been particularly challenging for the health sector. He noted the extraordinary level of collaboration with other health providers to implement the COVID-19 vaccination programme to the community.

2.7. Minutes of the Health and Disability Advisory Committee meeting held on 23 November 2021, Part One

The Health and Disability Advisory Committee Chair noted that although the meeting had welcomed Stephen Paewai as the interim chair of the Consumer Council, he also wished to acknowledge the contribution made by the outgoing chair, Gail Munro.

It was resolved that the Board:

note the unconfirmed Part One minutes of the Health and Disability Advisory Committee meeting held on 23 November 2021.

(Moved John Waldon; seconded Vaughan Dennison)

2.8. Minutes of the Finance, Risk and Audit Committee meeting held on 30 November 2021, Part One

It was resolved that the Board:

note the unconfirmed Part One minutes of the Finance, Risk and Audit Committee meeting held on 30 November 2021.

(Moved Oriana Paewai; seconded Vaughan Dennison)

2.9. Manawhenua Hauora Chair's Report

The Manawhenua Hauora Chair advised that the second part of Te Tiriti o Waitangi training, 'Wall Walk', was being planned for Friday 28 January 2022. As a minimum of 30 attendees was required, invitations would be sent to members of the Board, Committees and Manawhenua Hauora. Participants would be allocated into groups before the training and there would be some preparation work to be completed. Board members advised that due to existing commitments, they would prefer the session to be held in the afternoon.

It was resolved to:

note the report from the Manawhenua Hauora Chair on the Manawhenua Hauora hui held on 15 November 2021

note the General Manager, Māori Health's response to the Chair's report.

(Moved Oriana Paewai; seconded Materoa Mar)

3. STRATEGIC FOCUS

No discussion at this meeting.

4. PERFORMANCE REPORTING

4.1. Chief Executive's Report

The Chief Executive presented this report, which was taken as read. She provided an update on the impact of the COVID-19 Vaccination Order, which required all health and disability sector employees to have received their first COVID-19 vaccination by 11.59pm on 15 November 2021. As at today's date, the employment of 31 staff was expected to be terminated, comprising 14 who were definitely not going to be immunised and 17 who were undecided.

A Board member asked about the organisation's readiness to have patients with COVID-19 admitted to hospital. The Chief Executive explained that a recent Ministry of Health (the Ministry) audit of COVID-19 resilience found that MidCentral District Health Board's (MDHB) plan was an exemplar. The strength of relationships and partnerships with THINK Hauora, Manawhenua Hauora and the Ministry of Social Development were vital in developing and implementing the COVID-19 resilience plan. The public health response was to ensure people with COVID-19 were supported by primary care providers to isolate in their own home. A range of pathways was in place for patients who may need hospital care, including those who needed dialysis or cancer care. More than 300 nurses have completed an online intensive care module. Infrastructure issues were being addressed, including the quality and flow of air throughout the hospital. Even though there were no cases of COVID-19 in the community at present, the COVID-19 Coordination Centre had been 'stood up' yesterday. As 'Living with COVID-19' was not an emergency situation, there was no need to set up an Incident Management Team.

The General Manager, Finance and Corporate Services responded to a comment regarding traffic build up on Ruahine Street with cars unable to access the Emergency Department (ED) area. As part of the Emergency Department Observation Area/Medical Assessment and Planning Unit (EDOA/MAPU) project, the disability parks at the front of ED had been relocated and were expected to be in place again by 24 December. The traffic flow and some parking arrangements around that part of the site would be changed. As for other hospitals in the country, the area in front of ED should be for drop offs only.

A Board member asked whether the Youthline service to support young people and their whānau who are being supported by Child and Adolescent Family Services had taken the Māori population into consideration. It was agreed to provide further details of the new service at the February 2022 Board meeting.

It was resolved that the Board:

note the update of key local, regional and national matters.

(Moved Muriel Hancock; seconded Jenny Warren)

4.2. Financial Update – October 2021

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer presented this report, which was taken as read.

The General Manager, Finance and Corporate Services noted that the November 2021 result showed a positive variance of \$593k against budget, reflecting additional revenue from the Ministry. The year to date operating result was \$574k adverse to budget. Although there was likely to be some minor disruption over December 2021/January 2022, it was expected that the year-end budget would be achieved.

The Deputy Chief Financial Officer outlined the trends relating to provider community payments, nursing costs, locum costs, clinical supplies and infrastructure. Planned care was adverse to budget in August and September due to the COVID-19 lockdown and Ministry funding received to offset this would appear in the November financials. The favourable variance in Corporate and Professional Services included facilities, hotel costs and software maintenance. Costs relating to software projects recently approved by the Board were not yet showing in the accounts.

It was resolved that the Board:

note that the month operating result for October 2021 is a surplus before one-off items of \$0.622m, which is \$0.137m favourable to budget

note that the year to date result for October 2021 is a deficit before one-off items of \$1.370m, which is \$1.167m adverse to budget

note that year to date for October 2021 COVID-19 related contribution of \$0.148m and Holidays Act costs of \$1.895m are \$1.148m and \$0.438m favourable to budget, respectively. Including these results in a year to date deficit after exceptional items of \$3.117m, which is \$0.581m adverse to budget

note that the total available cash and equivalents of \$40.968m as at 31 October 2021 is sufficient to support liquidity requirements

note this is an interim finance report and that a full report will be provided to the February 2022 meeting for the Board's consideration.

(Moved Oriana Paewai; seconded Karen Naylor)

4.3. Finance Report – September 2021

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer presented this report, which was taken as read.

It was resolved that the Board:

note that this report was endorsed by the Finance, Risk and Audit Committee at their November meeting for Board consideration

note that the month operating result for September 2021 is a deficit before one-off items of \$3.351m, which is \$0.162m adverse to budget

note that the year to date operating result for September 2021 is a deficit before one-off items of \$1.992m, which is \$1.304m adverse to budget

note that year to date for September 2021 COVID-19 related contribution of \$0.150m and Holidays Act costs of \$1.478m have been incurred. Including these, the year to date deficit after exceptional items is \$3.320m, which is \$0.883m adverse to budget

note that the total available cash and equivalents of \$31.454m as at 30 September 2021 is sufficient to support liquidity requirements

note that the revised budget is being reported against from September 2021

approve the September financial report.

(Moved Oriana Paewai; seconded Karen Naylor)

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer left the meeting.

The General Manager, Quality and Innovation joined the meeting.

4.4. **Sustainability Plan Report**

The General Manager, Quality and Innovation presented this report, which was taken as read.

It was resolved that the Board:

note the Finance, Risk and Audit Committee endorsed this report at its November meeting, for the Board's consideration

note the Sustainability Plan benefits baseline and monitoring dashboard and trend analysis

note October 2021 indicates savings of \$293,897 year to date

approve the approach and progress made to date on the Sustainability Plan 2020-2023.

(Moved Lew Findlay; seconded Heather Browning)

The General Manager, Quality and Innovation left the meeting.

The Chief Digital Officer joined the meeting.

4.5. **Te Awa Update – Digital Services Work Programme**

The Chief Digital Officer presented this report, which was taken as read.

It was resolved that the Board:

note the Digital Services work programme covering planned work for the 2021/22 financial year

note the progress since the last reporting period

note the national and regional activity that may impact on the planned work programme.

(Moved Muriel Hancock; seconded Vaughan Dennison)

The Chief Digital Officer left the meeting.

The Advisor, Planning and Accountability joined the meeting.

4.6. **Non-Financial Performance Measures – Quarter One, 2021/22**

The Interim General Manager, Strategy, Planning and Performance and the Advisor, Planning and Accountability presented this report, which was taken as read. It was agreed that an update on child oral health and immunisations would be provided to the next Health and Disability Advisory Committee meeting in March 2022.

A Board member asked what was being done to address issues relating to Shorter Stays in the Emergency Department (ED). The Chief Executive noted that the length of stays in ED were often due to lack of hospital beds and the EDOA and MAPU projects would improve hospital capacity. A weekend discharge pilot sponsored by the Ministry had commenced. An update on the development of a flexible acute flow unit at Palmerston North Hospital would be provided by the Operations Executive, Te Uru Arotau, Acute and Elective Specialist Services later in the meeting.

It was resolved that the Board:

note the progress and performance for the first quarter of 2021/22 against its commitments and accountabilities to Government as identified in the 2021/22 Annual Plan and the Non-Financial Monitoring Framework and Performance Measures for DHBs

note the Ministry of Health's summary report for Quarter One 2021/22 is available on the Stellar platform

endorse the mitigation activities in place for those performance measures or deliverables that were not meeting expectations for Quarter One.

(Moved Oriana Paewai; seconded Karen Naylor)

The Advisor, Planning and Accountability left the meeting.

5. DISCUSSION/DECISION PAPERS

5.1. Combined Medical Staff Association and Executive Action Plan

The Chief Executive presented this report, which was taken as read. She noted the report had been provided to the Chair of the Combined Medical Staff Association (CMS) for feedback. In response to questions about ongoing actions, the Chief Executive advised that the action to 'Prepare a list of current meetings and level of engagement' would be discussed at the next Medical Reference Group meeting; and that CMS had not asked that the Executive and CMS meet again.

It was resolved that the Board:

note the Combined Medical Staff Association (CMS) and Executive Action Plan.

(Moved Muriel Hancock; seconded Vaughan Dennison)

The Clinical and Operations Executives, Te Uru Pā Harakeke, Healthy Women, Children and Youth joined the meeting.

5.2. Midwifery Workforce Update

The Clinical and Operations Executives, Te Uru Pā Harakeke presented this report, which was taken as read. They advised that a trigger escalation plan was in development to address the shortage of midwives through to the end of January 2022. This included considering other supports to ease the pressure on the midwifery workforce. Due to shortages, it was increasingly difficult to enable staff to take annual leave.

The Board Chair thanked management for their efforts in addressing the midwifery shortage, including having senior executives working alongside staff in clinical areas. Significant incentives had been provided for people to work in midwifery, but recruitment was a challenge nationally.

A Board member noted that under health and safety legislation, the Board was responsible for ensuring that all practical steps were being taken to address the situation. This included having confidence in reports provided by management and that appropriate mitigation plans were in place.

It was resolved that the Board:

note the current midwifery workforce position

note the key updates to the Midwifery Action Plan.

(Moved Heather Browning; seconded Muriel Hancock)

The Clinical and Operations Executives Te Uru Pā Harakeke left the meeting.

5.3. **Nursing Workforce Update**

The Executive Director, Nursing and Midwifery presented this report, which was taken as read. She noted that the Nightingale Challenge had been established globally as part of the International Year of the Nurse in 2020. This was an initiative to develop and celebrate nurses aged under 35 years. It was postponed due to the COVID-19 resurgence and had now taken place. Those nominated within MDHB completed the Leading an Empowered Organisation programme, which is an investment in them as young leaders.

It was resolved that the Board:

note the Nursing Workforce Report.

(Moved Muriel Hancock; seconded John Waldon)

The General Manager, Quality and Innovation joined the meeting.

5.4. **Consumer and Clinical Councils – Terms of Reference**

The General Manager, Quality and Innovation presented this report, which was taken as read. She noted that the Councils were participating in national work around the health sector reforms to ensure that the consumer voice continued to be heard.

The following amendments suggested by Board members would be included in the revised Terms of Reference:

Clinical Council

Add: The Clinical Council Chair will be a member of the Finance, Risk and Audit Committee.

Clinical Council and Consumer Council

Amend: The Chair will be appointed on the recommendation of the Chief Executives of MDHB and THINK Hauora, *in consultation with Manawhenua Hauora.*

The General Manager, Quality and Innovation advised that details of the eight Enterprise Clinical Governance Groups would be available on the Stellar platform.

It was resolved that the Board:

approve the changes made to the Terms of Reference for the Consumer and Clinical Councils.

(Moved Jenny Warren; seconded Norman Gray)

The General Manager, Quality and Innovation left the meeting.

5.5. **MidCentral DHB's Alcohol Position Statement**

The Clinical Executive, Te Uru Kiriora, Primary, Public and Community Health presented this report, which was taken as read.

It was resolved that the Board:

note the Position Statement on Alcohol was endorsed by the Health and Disability Advisory Committee at its November meeting

approve the MidCentral District Health Board's Position Statement on Alcohol.

(Moved Lew Findlay; seconded Karen Naylor)

6. **INFORMATION PAPERS**

6.1. **Board's Work Programme**

The report was taken as read.

It was resolved that the Board:

note the Board's annual work programme.

(Moved Heather Browning; seconded Lew Findlay)

7. **GLOSSARY OF TERMS**

No discussion.

8. **LATE ITEMS**

No discussion.

9. **DATE OF NEXT MEETING**

Tuesday, 15 February 2022 – Board Room, MidCentral District Health Board, Gate 2 Heretaunga Street, Palmerston North (*subject to any COVID-19 restrictions*).

BOARD MINUTES

10. EXCLUSION OF PUBLIC

It was resolved:

that the public be excluded from this meeting in accordance with the Official Information Act 1992, section 9 for the following items for the reasons stated:

Item	Reason	Ref
'In Committee' minutes of the previous Board meeting	For reasons set out in the agenda of 9 November 2021	
Replacement of Instrument Washers in Sterile Services Unit	To protect negotiations, including commercial and industrial	9(2)(j)
Patient Transfer Services Contract Renewal	To protect negotiations, including commercial and industrial	9(2)(j)
Mosaiq as a Service Business Case	To protect negotiations, including commercial and industrial	9(2)(j)
Next Generation Computing Business Case	To protect negotiations, including commercial and industrial	9(2)(j)
COVID-19 Response – Air Purification Systems	To protect negotiations, including commercial and industrial	9(2)(j)
Health Sector Reforms – Transition Plan for MDHB	To maintain the constitutional conventions for the time being which protect the confidentiality of advice tendered by Ministers of the Crown and officials	9(2)(f)(iv)
Workshop – Allied Health	To maintain the effective conduct of public affairs through free and frank expression of opinions	9(2)(g)(i)
Minutes of Remuneration Committee meeting held on 9 December 2021	To protect personal privacy	9(2)(a)
Chief Executive's Employment	To protect personal privacy	9(2)(a)
Board only time	No decision sought	
'In Committee' minutes of the previous Health and Disability Advisory Committee meeting	For reasons set out in the agenda of the 23 November 2021 meeting held with the public present	
Serious Adverse Events (SAC 1) Report	To protect patient privacy	9(2)(a)
'In Committee' minutes of the previous Finance, Risk and Audit Committee meeting	For reasons set out in the agenda of the meeting held on 30 November 2021	

(Moved Vaughan Dennison; seconded John Waldon)

Part One of the meeting closed at 11am

Unconfirmed minutes

BOARD MINUTES

Confirmed this 15th day of February 2022

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Board Chair

Unconfirmed minutes