

MIDCENTRAL DISTRICT HEALTH BOARD

Minutes of the MidCentral District Health Board meeting held on 15 May 2012 at 10.05am at Horowhenua Health Centre, Liverpool Street, Levin

PRESENT

Phil Sunderland (Chair)
Diane Anderson
Lindsay Burnell
Ann Chapman
Kate Joblin

Pat Kelly
Karen Naylor
Richard Orzecki
Barbara Robson

Unconfirmed Minutes

IN ATTENDANCE

Murray Georgel, Chief Executive Officer
Mike Grant, General Manager, Planning & Support
Jill Matthews, Principal Administration Officer
Dennis Geddis, Communications Officer
Lyn Horgan, Operations Director, Hospital Services
Nicholas Glubb, Operations Director, Specialist Community & Regional Services
Bob Brown, Financial Services Manager
Craig Johnston, Senior Portfolio Manager, Primary Health
Andrew Ivory, Member, Community & Public Health Advisory Committee

Public (10)
Media (1)

1. APOLOGIES

An apology was received from Jack Drummond.

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 conflicts were declared.

4.2

4. PUBLIC FORUM

4.1 Questions from the Public

The following matters were raised by members of the public:

- The Horowhenua Sub-Region, NZ College of Midwives raised the issue of recruitment to a regional women's health service as outlined in the proposed model of care which had been the subject of a public engagement process. Management advised that the matters raised in the paper largely related to the serious issues affecting the obstetric and gynaecology specialist medical workforce. However, supporting recruitment to other disciplines was also important. MidCentral DHB had been successful in recruiting midwives to its hospital-based service, and for the first time in some time was fully staffed and was sustaining interest in positions as they became vacant.
- Local users of hospital services expressed concern at the lack of support services available to them post hospital-discharge, particularly transport to follow-up GP appointments and to pick up medications. Access to information regarding available support services was not considered easy. Management advised it would take this feedback into account in terms of its discharge planning. It noted some services, such as transport, were outside the DHB's area but it was important its patients were supported in obtaining information regarding support services.
- A woman expressed concern that she had not received an appointment for a specialist service. Management undertook to look into this matter. The process for accepting and acknowledging referrals to specialist services was outlined.
- The Horowhenua Grey Power spokesperson noted the current economic situation and congratulated the DHB for what it had done to support and enhance local health services. Initiatives such as the "fruit in schools", community-based cardiology and respiratory services, and the introduction of older persons services were cited. Suggestions for further enhancements and/or means of easing current challenges were made:
 - : use of "navigators" to assist people, particularly older people, bridge the gap between health and social services.
 - : reduced fees for GP services so as to improve access to this care.
 - : improved access to repeat prescriptions through reduced fees.
 - : a streamlined processes for getting test results for people whose results were "normal" – currently people had to go back to the surgery to get the results. It was noted that for some people there was no charge for this follow-up clinic attendance and for others, there was.
 - : increased awareness re the transport assistance allowance.
- The Horowhenua Sub-Region, NZ College of Midwives asked whether the proposed model of care for women's health would result in women being discharged early from hospital, and, whether it was possible for access to Te Whare Rapuora to be improved by replacing standard charge with a koha and relaxing the eligibility criteria. The CEO advised the Regional Clinical Director, Women's Health Services had stated early discharge of women would not occur, with discharge from hospital occurring on clinical grounds. The issues around accommodation and Te Whare Rapuora would be addressed in the paper being prepared for the Board's consideration.

Barbara Robson, Mike Grant, Craig Johnston and Lyn Horgan left the meeting.

5. MINUTES OF PREVIOUS MEETING

5.1 Minutes

It was resolved:

that the minutes of the previous meeting held on 3 April 2012 be confirmed as a true and correct record.

Barbara Robson re-entered the meeting.

5.2 Matters Arising from the Minutes

There were no matters arising from the minutes.

Mike Grant re-entered the meeting.

6. BOARD COMMITTEES

6.1 Hospital Audit Sub-Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Hospital Audit Sub-Committee held on 3 April 2012 be received and the recommendations contained therein approved.

6.2 Matters Arising

Follow-up information regarding the issue of district nursing cover in Pahiatua was requested by a member and management undertook to get back to her outside the meeting.

Kate Joblin left the meeting.

6.3 Hospital Advisory Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Hospital Advisory Committee held on 24 April 2012 be received and the recommendations contained therein approved.

6.4 Matters Arising

There were no matters arising from the minutes.

6.5 Community & Public Health Advisory Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Community & Public Health Advisory Committee held on 24 April 2012 be received and the recommendations contained therein approved.

6.6 Matters Arising

6.6.1 Central Primary Health Organisation

The Committee Chair invited board members to join the Community & Public Health Advisory Committee at its next meeting to hear the Central PHO's presentation. All members would have full speaking rights.

Kate Joblin and Lyn Horgan re-entered the meeting.

6.6.2 *Health of Older People*

The pending report from Dr Judy McGregor, Human Rights Commission regarding the health of older people and residential care was noted.

6.7 **Enable New Zealand Governance Group**

It was resolved:

that the unconfirmed minutes of the meeting of the Enable New Zealand Governance Group held on 24 April 2012 be received and the recommendations contained therein approved.

6.8 **Matters Arising**

6.8.1 *E-Commerce and Digital Communication Programme*

The CEO advised written support for this business case had recently been received from the Director-General of Health.

6.8.2 *Conflict of Interest*

For members' information, Richard Orzecki clarified the conflict of interest he had declared at the Committee meeting regarding the Enable New Zealand trademark. Mr Orzecki did not have a direct interest in the company involved, Enable Network. That company was a contracted provider to Government to provide broadband services. Mr Orzecki was a member of a Government advisory group re broadband services.

7. **STRATEGIC MATTERS**

7.1 **2011/12 Annual Plan**

7.1.1 *Fiscal Responsibility: Update*

Management confirmed that the costing work being done around treatment options related to evidence-based treatment options being used by clinicians. The aim was to ensure clinicians were aware of cost factors in considering and choosing treatment options. It was agreed examples of these treatment options being provided in a future update.

The CEO advised that the "national clinical governance and engagement project" was a nationwide survey of DHBs' clinical staff. The survey, which was being co-ordinated by the University of Otago, emanated from the "in good hands" survey held previously. The survey opened on 15 May and would run until 8 June. It would canvass staff around clinical participation, leadership and governance. More information would be provided to the Board via the workforce report scheduled to be submitted to committees in June.

Management advised the new initiative around long service was a staff recognition programme.

A member noted that many of the safe, quality care initiatives were focused on "inpatient services" and questioned whether priority should be given to returning the patient to home. Some services appeared to do this discharge planning well, and others not. The CEO advised the DHB needed to be mindful of feedback it received regarding post-hospital care. He noted that many concerns related to social service issues and MDHB's role in ensuring easy access to that information was something it needed to focus on.

Management confirmed that one of the key risks identified by the Board was fiscal sustainability. The level of risk may reduce in future years. This report identified some of the actions being taken to mitigate the risk. It was noted that the DHB's internal auditors had recently reviewed MDHB's financial recovery programme and its report would be submitted to the Group Audit Committee in June 2012.

The development of the Investment Plan was discussed, particularly the process and timing for obtaining regional input. It was noted that many staff were involved in regional initiatives and were bringing this view to the Investment Plan. It was agreed that a high level overview of MDHB's investment planning should be provided to other DHBs via the Central Region's DHB Chairs and CEOs' forum. It was further agreed that when the Investment Plan options paper was presented to the Board (scheduled for December 2012), the Board could then determine what further engagement and/or consultation was required with regional, general public, and other stakeholder groups.

The formal regional approval process for large investments, including IT investment, were noted.

It was resolved:

that the report be received.

7.1.2 Further Maturity of Business Continuity and Disaster Recovery Capability Framework

The General Manager, Planning & Support updated members on work done around "acceptable data loss". An independent firm, Datacom, had assessed MDHB's IT systems and infrastructure. The findings promoted the concept of a dashboard by which the senior leadership team could regularly assess IT services. The dashboard would look at things like the percentage of planned up-time and planned down-time.

Management advised that the target date of end May for completing the seven outstanding business continuity plans remained, and everyone was working to this date.

It was resolved:

that the report be received.

8. OPERATIONAL REPORTS

8.1 CEO's Report

8.1.1 National Health Committee

It was noted that the "health technology assessments" assessed identified technologies to determine whether these were worthy of investment to make available as an intervention, diagnostic tool, etc. A member questioned how the assessment was undertaken, eg research.

8.1.2 Health Benefits Limited

The CEO advised that Allied Laundry Services Limited would be participating in the Expression of Interest process. HBL had advised ALSL it did not have to submit an EOI as it was within the provider range.

It was resolved:

that the report be received.

8.2 Staff Safety Culture Survey

Members noted that the outcomes of the survey would be reported to the Board in July.

It was resolved:

that the report be received.

9. GOVERNANCE ISSUES

9.1 Review of Financial Reporting Arrangements

The proposed changes to financial reporting were supported by the Board. The following additional changes were requested:

- Proposed graphs to include a forecast line.
- A table of forecast to be included, including a brief description of how the forecast is calculated.
- Proposed information regarding demand driven, uncapped areas (age residential care and pharmaceuticals) to be augmented by contextual information, ie these are high risk areas.
- Investment table to be collapsed down to show the value and weighted average interest rate for on-call, short and long term investments.
- Capital expenditure report to be simplified, collapsed down, and to include forecast capital works and funding.
- Ensure “consolidated” tables of financial position and performance were clearly identified as such.
- Statements showing financial performance by division to include more detail along the lines of the consolidated tables.
- Ensure graphs were well formatted so they could be easily read and understood.
- Hospital Advisory Committee financial information to include details of patient transport along the lines of that reported to Hawke’s Bay DHB.

It was further agreed that information around how the national travel and accommodation policy was funded be provided to the next HAC meeting, eg top-sliced or included in base funding.

The CEO confirmed that the regional report regarding travel and accommodation would be provided to the Board once available.

Richard Orzecki advised he had recently attended a meeting of Maori board members in Wellington, and had raised the issue of Tairāwhiti DHB’s decision re cancer service. Specifically, he had expressed concern at the lack of consultation with MidCentral DHB regarding the financial impact of the decision. The two Tairāwhiti DHB members in attendance had agreed the process could have been better.

It was resolved:

that the report be received.

9.2 Manawhenua Hauora

9.2.1 Minutes

It was noted that the minutes related to Manawhenua Hauora’s March meeting and that it had met since that time – 7 May.

It was resolved:

that the minutes be received.

9.2.2 2011/12 Work Programme: Update

The Chair advised he and the CEO had recently met with the Chair and Deputy Chair, Manawhenua Hauora. This had been the regular six-monthly review meeting. The update against the current work programme had been supported, as had the proposed work programme for 2012/13 and the renewal of the Memorandum of Understanding.

It was resolved:

that the work programme for 2011/12 be noted.

9.2.3 2012/13 Work Programme

The CEO advised that the work programme contained the three priority areas identified by Manawhenua Hauora.

It was resolved:

that the 2012/13 work programme be approved.

9.2.4 Triennial Review of Memorandum of Understanding

The Chair advised that in discussion with Manawhenua Hauora's Chair and Deputy Chair arrangements for the annual board-to-board hui had been made. This would take place on 30 July, being Manawhenua Hauora's meeting date and would be held at MDHB's board offices. The hui would likely commence at 12 noon.

It was resolved:

that the Memorandum of Understanding between MidCentral DHB and Manawhenua Hauora be re-signed for a further three year period commencing at the 2012 get-together of Boards.

9.3 Enable New Zealand Annual Reporting Requirements

It was resolved:

that pursuant to section 211(3) of the Companies Act 1993, the annual report of Enable New Zealand Limited for the year ended 30 June 2012 shall incorporate the financial statements and auditor's report thereon and exclude information specified in any of the paragraphs (a) and (d) to (j) of subsection (1) of that section.

9.4 2011/12 Work Programme

The CEO drew members' attention to forthcoming events, noting that the annual hui with Manawhenua Hauora was now scheduled for 30 July 2012.

Members' noted the approach made to the Health Safety & Quality Commission regarding governance training for DHB members.

The CEO advised that a tour of the new linear accelerator would occur once the new machine was in place.

The possibility of training around audit was raised. The Chairman advised that matter had been considered by the Board when setting the 2012 training and development programme. At that time it had not been considered a priority. The Board could re-look at audit training when establishing the 2013 programme.

It was resolved:

that the updated work programme for 2011/12 be noted.

9.5 2012/13 Reporting Framework

In presenting the proposed Reporting Framework for 2012/13, the CEO stressed the importance of this document for management. It was a critical tool in ensuring management met the Board's reporting requirements.

The uncertainty around regional service planning arrangements was noted. The CEO advised that it was proposed two versions of the draft Plan would be provided to the Hospital Advisory and the Community & Public Health Advisory Committees. The first version would likely be a high level summary of assumptions and priorities.

Richard Orzecki, in his role of Chair, Regional Maori Relationship Board Forum, advised that this group was looking at the possibility of a regional Maori health plan to serve as an over-arching document for the six DHBs to use in developing their annual plans. They were discussing this concept and possible processes with the regional Chairs and CEOs.

It was noted that a lot of work was done through regional committees, and that there was potential for DHB board members to be better informed of these activities. It was further noted that the Technical Advisory Service provided quarterly updates for DHB boards. It was agreed this matter be taken on board.

The new arrangements for considering the DHB's annual planning assumptions were supported.

It was resolved:

that the 2012/13 reporting framework be approved.

10. LATE ITEMS

There were no late items.

11. DATE OF NEXT MEETING

Tuesday, 26 June 2012, MidCentral District Health Board Offices, Board Room, Gate 2, Heretaunga Street, Palmerston North.

12. 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:

<i>Item</i>	<i>Reason</i>	<i>Ref</i>
<i>"In Committee" Minutes of the Previous Meeting</i>	<i>For reasons stated in the previous agenda</i>	
<i>"In Committee" Minutes of Committee Meetings:</i> • <i>Hospital Advisory Committee, 24 April 2012</i>	<i>For the reasons set out in the Committee's order paper of 24.4.2012 meeting held with the public present</i>	

<ul style="list-style-type: none"> • <i>Community & Public Health Advisory Committee, 24 April 2012</i> 	<i>For the reasons set out in the Committee's order paper of 24.4.2012 meeting held with the public present</i>	
<i>Strategic Issues:</i> <ul style="list-style-type: none"> • <i>2012/13 Annual & Regional Plans</i> 	<i>Under negotiation</i>	<i>9(2)(j)</i>
<i>Operational Issues:</i> <ul style="list-style-type: none"> • <i>CEO's Report: legal services contract, and, national and regional planning (including CRISP Gateway Review report and regional shared service organisation)</i> • <i>Shared Commercial Banking and Treasury Services Contract</i> • <i>Insurance Contract</i> 	<i>Subject of negotiation</i> <i>Under negotiation and subject of competitive tender process</i> <i>Under negotiation and subject of competitive tender process</i>	<i>9(2)(j)</i> <i>9(2)(j)</i> <i>9(2)(j)</i>

Confirmed this 26th day of June 2012.

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Chairman