

MIDCENTRAL DISTRICT HEALTH BOARD

Minutes of the MidCentral District Health Board meeting held on 5 November 2013 at 10.05am
at MidCentral District Health Board Offices, Board Room, Gate 2, Heretaunga Street,
Palmerston North

PRESENT

Phil Sunderland (Chair)
Diane Anderson
Lindsay Burnell
Jack Drummond

Kate Joblin
Karen Naylor
Richard Orzecki
Barbara Robson

Unconfirmed Minutes

IN ATTENDANCE

Adrian Broad, Board Member Elect
Murray Georgel, Chief Executive Officer
Mike Grant, General Manager, Planning & Support
Scott Ambridge, General Manager, Enable New Zealand
Nicholas Glubb, Operations Director, Specialist Community & Regional Services
Lyn Horgan, Operations Director, Hospital Services
Jill Matthews, Principal Administration Officer
Jason Keall, Communications Officer
Chiquita Hansen, Director, Primary Health Care
Helene Carbonatto, Executive Programme Director
Vivienne Ayres, Planning & Accountability

Public (1)
Media (0)

Opening the meeting, the Chairman welcomed Adrian Broad, Board Member elect. He noted that Mr Broad had completed a confidentiality agreement and would remain for the full meeting.

The Chairman advised the meeting was the last board meeting for the 2010-13 term. He paid tribute to retiring member Jack Drummond. The Chair stated Dr Drummond had joined the Board in 2001 and had served as Hospital Advisory Committee since that time. Mr Sunderland paid tribute to Dr Drummond's performance and the expertise he had provided to MDHB. The support of Dr Drummond's wife, Evelyn, was also recognised.

It was resolved:

that the Board thank Dr Jack Drummond for the services he had provided to MidCentral DHB and wish him and his wife, Evelyn, all the best for the future.

The motion was carried by acclamation.

Dr Drummond thanked the Board for its good wishes and stated he would follow the DHB's progress with interest.

1. APOLOGIES

Apologies were received from Board Members Barbara Cameron, Ann Chapman and Pat Kelly. An apology for lateness was received from Lindsay Burnell.

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 in relation to the business before the meeting.

4. MINUTES OF PREVIOUS MEETING

4.1 Minutes

It was resolved:

that the minutes of the previous meeting held on 24 September 2013 be confirmed as a true and correct record.

4.2 Matters Arising from the Minutes

There were no matters arising from the minutes.

5. BOARD COMMITTEES

5.1 Group Audit Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Group Audit Committee held on 24 September 2013 be received and the recommendations contained therein approved.

5.2 Matters Arising

There were no matters arising from the minutes.

5.3 Hospital Advisory Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Hospital Advisory Committee held on 15 October 2013 be received and the recommendations contained therein approved.

5.4 Matters Arising

There were no matters arising from the minutes.

5.5 Community & Public Health Advisory Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Community & Public Health Advisory Committee held on 15 October 2013 be received and the recommendations contained therein approved.

5.6 Matters Arising

There were no matters arising from the minutes.

5.7 Disability Support Advisory Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Disability Support Advisory Committee held on 15 October 2013 be received and the recommendations contained therein approved.

5.8 Matters Arising

There were no matters arising from the minutes.

6. WORK PROGRAMME

The CEO discussed the forthcoming reports and sought feedback from the Board on any new requirements.

It was noted that the centralAlliance meeting scheduled for 11 November was now to be a face-to-face meeting.

It was resolved:

that the updated work programme for 2013/14 be noted.

7. STRATEGIC MATTERS

7.1 Master Health Service Planning – Strategic Assessment

The Board noted the changes which had been made to the Strategic Assessment.

The CEO advised that a member had provided management with some typographical changes which were required and these would be actioned.

It was resolved:

that the strategic assessment be approved and submitted to the Capital Investment Committee.

Helene Carbonatto left the meeting.

8. OPERATIONAL REPORTS

8.1 CEO's Report

8.1.1 *National Patient Survey*

Management confirmed that the national patient survey would be based on the patient experience indicators developed for the Health Quality & Safety Commission. It was noted that the survey was being trialled by three or four DHBs.

8.1.2 *centralAlliance Strategic Plan*

The CEO advised that Whanganui DHB's Board had supported the concept of a Strategic Plan for the centralAlliance. Some discussion had occurred regarding an earlier completion date if possible.

8.1.3 *Ambulatory Care Facility*

The CEO advised this piece of work was unlikely to be completed in time for the Hospital Advisory Committee and so a recommendation would be submitted to the Board in order to keep the momentum going. However, indicative information would be provided to HAC to seek its views and this would include the purpose, potential cost, and opportunities for the future.

It was noted that the longer term planning work being done under the Master Health Service Plan included models of care. A member emphasised the need to be aware of the impact of any change on primary health care, such as costing shifting from the hospital to the community, citing an example from another DHB area.

8.1.4 *Annual & Long Service Leave*

The CEO advised that the annual and long service leave liability had increased four days across five years. Management was working with services to reduce the number of people with leave balances in excess of two years. It was noted that leave entitlements for many staff had increased during this period also.

The issue of buying-out leave was raised. The CEO advised this was a possibility, however the focus was on ensuring staff could take leave regularly. If leave was bought out, it was only when the employee still had leave remaining which they could take at a future date.

The adequacy of staffing levels was then raised. Management advised it endeavoured to provide adequate staffing levels at all times. Cover was provided for annual leave where appropriate, and taking into account demand. Problems were experienced in some areas where there were long standing vacancies and there was a need to provide essential service cover. This situation did restrict the ability for leave to be taken.

The orthopaedic situation was questioned and management advised this was really driven by one member's involvement with the NZ Orthopaedic Association. The level of involvement was more than half time and was fully paid by MDHB.

Management advised that forward planning was required to manage annual and long service leave, and while the organisation endeavoured to grant leave requests, it could not always do so at short notice. Leave arrangements for Christmas 2013 were already in place, and the focus was on enabling as many staff as possible take summer leave. Where opportunities for spot leave arose, this was conveyed to staff.

8.1.5 *Enable New Zealand*

The CEO introduced Scott Ambridge, newly appointed General Manager of Enable New Zealand.

8.1.6 Financial Position

The CEO advised the DHB's financial position was adverse to budget but management was confident the position would return to budget.

8.1.7 Email Privacy and Security

The Board noted the new measures in place and questioned if the retraction of emails was recorded. If so, how often did staff need to retract email. Management undertook to look into this.

It was resolved:

that the report be received.

9. GOVERNANCE ISSUES

9.1 Quality Account (Final Draft)

The draft quality account was received and the Board expressed their appreciation for the work involved. Members were complimentary regarding the style, content, and breadth of the report. The language used was regarded as very suitable and management paid tribute to the input of John Hannifin, consumer advisor in this regard.

It was suggested that the official status of the Quality Account should be raised so they were recognised as an accountability document, in the same way as the Annual Report was seen. It was noted that many of the measures within the Quality Account were qualitative in nature, rather than quantitative.

Lindsay Burnell entered the meeting.

A change to the accounts was requested regarding breast and cervical screening coverage rates to, "more Maori women participate in breast and cervical screening".

The involvement of primary health care in the development of the Quality Account was complimented by the Board. It was noted that MDHB's QA were unique in this regard.

It was resolved:

that the Board approve the final draft Quality Account for publication, and,

that in future the possibility of appending the Quality Account to the DHB's Annual Report when tabled in Parliament be explored.

Chiquita Hansen and Vivienne Ayres left the meeting.

9.2 Central Region's Technical Advisory Service

9.2.1 Annual Update

Management advised that the possibility of a regional internal audit facility was being explored and a report would be presented to the Board's Group Audit Committee in the future, possibly in December 2013.

It was resolved:

that the report received.

9.2.2 Annual General Meeting

The CEO advised that the accounting treatment of costs associated with the Central Region's Information Systems Strategy (CRISP) had been further considered. These costs were to be treated as operational costs rather than capital. The amount involved was approximately \$2m. While this amount was significant for TAS, there was no need to adjust the owner DHBs' annual accounts as the amount for them was not considered material in light of their turnover. It was noted that this issue had not been picked up in the previous year's audit as the level of expenditure incurred had been minimal.

The future CRISP expenditure was discussed, and management advised that more detail would be known in the future. The timeline and cash flow for CRISP were currently under review, including the ongoing impact of the need to operationalise costs rather than capitalising them.

The issue of MDHB's shareholder's representative at the annual general meeting was raised and it was suggested it may be more appropriate for the Chair to represent MDHB. The Chair advised he was willing to attend if available, but felt strongly that the CEO had a more intricate knowledge of TAS matters and was the best representative.

The original assumption to capitalise CRISP costs was raised, and questioned whether, with the benefit of hindsight, it had been the appropriate decision. The General Manager, Planning & Support advised the accounting treatments were consistent for some time. The Programme Management Office probably had not been good overseers of the situation. This was something for TAS and the Regional Governance Group to take cognisance of going forward. Ernst & Young and Deloitte had provided advice.

The results for increasing youth access of youth addiction services was noted with disappointment.

Barbara Robson noted her interest as a member of the Regional Consumers Representatives Forum. She expressed her disappointment that the forum had been omitted from the list of executive groups. This went against the current direction within the sector for increasing cognisance of the patient experience. She requested this message be conveyed to the TAS CEO.

Members stated the interest MDHB's board had in TAS and its strategic business into the future, and would be watching it carefully. It was agreed this message be conveyed to the TAS Board at the AGM. The Chair advised that there was also an opportunity at a forthcoming meeting of the Regional Governance Group to interrogate the TAS Board and he would ensure this message was conveyed at that forum also.

The Board noted that Mary Bonner's term of the Board was to end in December and questioned whether a consumer representative was being considered. The Chair advised this matter was currently under consideration by the RGG.

It was resolved:

that this report be received; and

that Murray Georgel, CEO be appointed as MidCentral DHB's proxy at the Central Region's Technical Advisory Service Limited's annual general meeting in December 2013 and that he be instructed to support the recommendations as included in the Draft Notice of Annual General Meeting (undated).

9.3 Allied Laundry Services Limited – Retention of Profits

It was resolved:

that approval be given to Allied Laundry Services Limited retaining \$177,258 profit from the 2012/13 financial year.

9.4 Policies

It was resolved:

that the Board's Appointment to Board Committees, and Record of Board and Committee Meetings Policies be noted, and reviewed in three year's time.

9.5 2013 DHB Elections

It was resolved:

that the report be received, and that current membership of the Group Audit Committee continue through until 31 December 2013.

Murray Milner entered the meeting.

9.6 Manawhenua Hauora

9.6.1 2013/14 Work Programme

Richard Orzecki advised Manawhenua Hauora was hosting a Maori Leadership hui on the 19th November. Minister Turia was keen to attend. Invitations were being sent to board members of Whanganui DHB and MidCentral DHB.

It was resolved:

that the report be received.

9.6.2 Minutes

Manawhenua Hauora's question around car parking revenue was raised and Richard Orzecki advised this had been subsequently answered.

The issue of paid car parking generally was then debated and members considered it was timely for a review, including the benefits achieved. The CEO advised that in accordance with the car parking policy, he had requested a review of the charges. The results would be reported in the new year.

The CEO advised that the key driver for paid car parking was to address the parking difficulties incurred by patients and visitors. In this respect, the programme had been very successful. There had also been reinvestment back into parking, with additional parks and security.

It was resolved:

that the minutes be received.

10. LATE ITEMS

There were no late items.

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11. DATE OF NEXT MEETING

Tuesday, 17 December 2013, 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> <ul style="list-style-type: none"> • <i>Hospital Advisory Committee, 15 October 2013</i> • <i>Community & Public Health Advisory Committee, 15 October 2013</i> 	<i>For the reasons set out in the Committees' order paper of 15.10.13 meeting held with the public present</i> <i>For the reasons set out in the Committees' order paper of 15.10.13 meeting held with the public present</i>	
<i>Strategic Matters</i> <ul style="list-style-type: none"> • <i>2014/15 Annual Planning</i> • <i>CRISP Negotiations</i> • <i>ICT Strategy & Terms of Reference</i> 	<i>Subject of negotiation</i> <i>Subject of negotiation</i> <i>Subject of negotiation</i>	<i>9(2)(j)</i> <i>9(2)(j)</i> <i>9(2)(j)</i>
<i>Operational Matters</i> <ul style="list-style-type: none"> • <i>Contracts Update</i> 	<i>Subject of negotiation</i>	<i>9(2)(j)</i>

Confirmed this 17th day of December 2013.

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 Chairman