MIDCENTRAL DISTRICT HEALTH BOARD

Minutes of the Health & Disability Advisory Committee meeting held on 1 September 2020 from 9.00am in the Board Room, Gate 2, Heretaunga Street, Palmerston North

PART 1

PRESENT:

John Waldon (Chair) Brendan Duffy Heather Browning Vaughan Dennison Lew Findlay Muriel Hancock Materoa Mar Gail Munro Karen Naylor Oriana Paewai Jenny Warren

ATTENDEES:

Kathryn Cook, Chief Executive
Dr Kelvin Billinghurst, Chief Medical Officer.
Tracee Te Huia, General Manager, Māori Health
Gabrielle Scott, Executive Director, Allied Health
Celina Eves, Executive Director Nursing & Midwifery
Judith Catherwood, General Manager, Quality & Innovation
Jennifer Free, Committee Secretary

IN ATTENDANCE - PART MEETING:

Lyn Horgan, Operations Executive, Acute and Elective Services
Dr Jeff Brown, Clinical Executive, Women, Children & Youth
Sarah Fenwick, Operations Executive, Women, Children & Youth
Dr Claire Hardie, Clinical Executive, Cancer Screening Treatment & Support
Cushla Lucas, Operations Executive, Cancer Screening Treatment & Support
Debbie Davies, Operations Executive, Primary, Public, Community Health
Scott Ambridge, Operations Executive, Mental Health & Addictions
Dr Vanessa Caldwell, Clinical Executive Mental Health & Addictions
Andrew Nwosu, Operations Executive, Healthy Ageing & Rehabilitation
Dr Syed Zaman, Clinical Executive Healthy Ageing & Rehabilitation
Michelle Riwai, General Manager, Enable NZ

- 1 x Media
- 2 x Public
- 2 x Comms

1. KARAKIA

The meeting opened with the Organisational Karakia.

2. ADMINISTRATIVE MATTERS

2.1 Apologies

No apologies received. Norman Gray was not present.

2.2 Late Items

There were no late items.

2.3 Conflicts and/or Register of Interests Update

No conflicts were declared.

2.4 Minutes of the previous meeting

It was resolved:

that the Part One minutes of the meeting held on 21 July 2020 be approved as a true and correct record. (Moved Karen Naylor; seconded Vaughan Dennison)

2.5 Matters arising from the previous minutes

At the last meeting there was a request to find out more about Community Allied Health and assistive technology assessment wait lists, length of wait lists, impact on hospital length of stay, allied health child assessments and access to audiology. The Executive Director, Allied Health agreed to report back to the next Committee meeting.

3. PERFORMANCE REPORTING

3.1 Update for April/May 2020

The individual cluster reports were considered and the following points discussed:

Te Uru Rauhī, Mental Health & Addictions: The report was taken as read. The Clinical and Operations Executives highlighted there had been a slow but steady reduction in acute readmissions. The work around the NGO (non-Government organisation) partnerships continued to build relationships across the sectors providing specialist support.

Te Uru Whakamauora, Healthy Ageing & Rehabilitation: The report was taken as read. The Clinical and Operations Executives discussed the number of initiatives implemented to improve inpatient flow and the work around the integrated pathway for management of hip fracture patients, patient fall rate variances etc.

Te Uru Kiriora, Public, Primary & Community Health: The report was taken as read. The Chief Medical Officer and the Operations Executive highlighted the following areas. At the current Alert Level 2, the opportunity costs of COVID were highlighted, as staff were redirected from other duties. Surveillance testing was being held with a pop up COVID-19 testing centre in Levin today, with testing being focused on higher risk populations. It was noted that over eighteen thousand tests have been completed across the district with over three thousand Māori and 600 Pasifika. And primary care consultation levels had returned to pre COVID rates.

Te Uru Mātai Matengau, Cancer Screening, Treatment and Support: The report was taken as read. The Clinical and Operational Executives reported that overall progress with annual plan initiatives was on track. The regional linear accelerators in Hastings and New Plymouth was discussed. It was noted that while the model of service for these outreach sites was largely agreed, the construction of the required new buildings, to be built by the regional DHB's, will take longer than originally anticipated and go-live dates are as yet unclear. The Operations Executives agreed to provide more information at the next meeting. Also noted was the availability of internationally-based

riggers. Riggers who are essential for the installation of the Linacs will be required to auarantine.

Te Uru Pā Harakeke, Healthy Women Children and Youth: The Clinical and Operational Executives presented the report, which was taken as read. The Clinical Executive acknowledged the significance and symbolism of gifted Māori names for principle areas in Block C with a ceremony and blessing led by Pae Ora Paiaka Whaiora, suitably timed around Matariki. The Operations Executive highlighted the ongoing midwifery workforce risk, however confirmed a robust plan was in place and that the Department are working with the New Zealand College of Midwives, MERAS and the Midwifery Council regarding mitigation strategies. The Housing NZ Programme pilot had now finished with under 16 year olds benefitting all being Māori. Further intersectoral work specific to localities and communities is now needed to ensure value and permanence of these benefits, and whether the programme or variations are appropriate in our COVID-19 world.

Te Uru Arotau, Acute & Elective Services: The report was noted as read. The Operations Executive Te Uru Arotau, Acute & Elective Services reported there was good progress being made in the ESPIs, especially ESPI2. The medications management programme was positive, with a new innovation to improve medicine management for Māori and Pasifika patients with gout.

It was resolved that the Committee

endorse the progress made by the Directorates in June/July 2020 note the changes to the performance overview reflecting the transition from 2019/20 plans to the 2020/21 financial year. (Moved Karen Naylor; seconded Vaughan Dennison)

3.2 Enable New Zealand Report to 31 July 2020

The General Manager presented the report which was taken as read. Overall performance was tracking well post-COVID lockdown and the Enablement Programme was back on track. The Sensory Playroom was discussed and it was reported the demand was high. The overall availability of data by ethnicity was discussed. The General Manager indicated that as Enable NZ do not deliver service directly to disabled people that is was difficult to get consistency in data across the various services and therefore ethnicity data could not be relied on as accurate. Contract owners such as the Ministry set the requirements for data capture for each service and that these vary from contract to contract.

Further information about the Enable New Zealand planning process was discussed and it was noted that the Enablement Programme Workplan formed the basis of the organisations Operational Plan. Enable New Zealand report to both this Committee and Finance Risk and Audit Committee (FRAC) for different matters.

It was resolved that the Committee:

endorse the Enable New Zealand Report to 31 July 2020. (Moved Vaughan Dennison; seconded Muriel Hancock)

3.3 Pae Ora Paiaka Whaiora Progress Report

The report was taken as read. The General Manager presented the report. An overall update on the directorate was given with a discussion on the review of the services, wellbeing plans and the innovative approach and research around the smoking

cessation programme and the root cause as to why there were addictions. Te Tiriti o Waitangi (The Treaty) training was raised and the Board would be asked to notify the team about what they wanted to get out of their forthcoming training, what didn't work and what changes were recommended. It was noted there was a Board to Manawhenau Hauora Board hui taking on place 29 September 2020.

It was resolved that the Committee:

endorse the progress report by Pae Ora Paiaka Whaiora. (Moved John Waldon; seconded Muriel Hancock)

4 DECISION/DISCUSSION PAPERS

4.1 Ōtaki Health and Wellbeing Plan Update

Angela Rainham, Project Manager, Strategy Planning & Performance presented the report which was taken as read. There had been significant progress made in several areas of the Wellbeing Plan.

There was discussion around the engagement of the Board in localities and it was confirmed by the Board Chairman that the engagement in the localities through the health and wellbeing groups was the preferred method.

There was discussion around the membership of the health and wellbeing groups and the Chief Executive noted she had met with the Chairman of the local group and plans were being made to strengthen Māori membership of the locality group.

It was resolved that the Committee:

endorse the progress that had been made in relation to the Ōtaki Te Mahere Hauora (the Ōtaki Health and Wellbeing Plan). (Moved John Waldon; seconded Muriel Hancock)

4.2 Community Pharmacy Services Commissioning

The Advisor, Commissioning and Contracts and the General Manager, Strategy, Planning and Performance presented the report. The report was for endorsement to enable the policy to be approved by the Board. It was noted this policy would support the Board in the decision making around future provision of pharmacy services in the district.

It was proposed the policy could be strengthened to include Te Tiriti o Waitangi commitments and definitions of holistic care.

It was resolved that the Committee:

with the amendments proposed, endorse for the Board's consideration the Community Pharmacy Services Commissioning Policy for Board approval

note that approval by the Board of the Community Pharmacy Services Commissioning Policy ends the moratorium on issuing new contracts for community pharmacy providers. (Moved Karen Naylor; seconded Vaughan Dennison)

5 INFORMATION PAPERS

5.1 Committee's Schedule and Work Programme

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

It was noted the Committee and Board work programmes were under review. There was discussion about the approach to receiving feedback on the approach and the Chief Executive indicated this would be iterative, with Board and Committee members providing feedback as the approach was developed and implemented.

It was resolved that the Committee:

note the schedule for Committee meetings in 2021 which have been approved by the Board

note the 2020/21 work programme is under review and will be presented at the next meeting after approval of the Board

note the review underway to develop a contemporary reporting and work programme commensurate with the role of the Health and Disability Advisory Committee's Terms of Reference. (Moved Muriel Hancock; seconded Brendan Duffy)

6 LATE ITEMS

There were no late items.

7. DATE OF NEXT MEETING

13 October 2020, Board Room, MidCentral District Health Board, Gate 2 Heretaunga Street, Palmerston North.

8. 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	For reasons set out in the order	
Health & Disability Committee	paper of 21.07.20	
previous meeting"		

Part 1 of the meeting closed at 12.19pm

Confirmed this 13th day of October 2020.	
Chairperson	