



MidCentral District Health Board

Health and Disability Advisory Committee Minutes

Meeting held on 27 April 2021 from 9.00am

PART ONE

Members

John Waldon (Committee Chair), Brendan Duffy (Board Chair), Heather Browning, Vaughan Dennison, Lew Findlay, Muriel Hancock, Meroa Mar (Deputy Committee Chair), Gail Munro, Karen Naylor, Oriana Paewai, Jenny Warren.

In attendance

Kathryn Cook, Chief Executive; Judith Catherwood, General Manager, Quality and Innovation; Celina Eves, Executive Director, Nursing and Midwifery; Chiquita Hansen, Interim General Manager, Strategy, Planning and Performance; Rory Matthews, Interim Director, Office of the Chief Executive; Gabrielle Scott, Executive Director, Allied Health; Margaret Bell, Board Secretary.

In attendance (part meeting)

Scott Ambridge, Operations Executive, Te Uru Rauhi; David Andrews, Acting General Manager, Enable New Zealand; Wayne Blissett, Operations Executive, Pae Ora Paiaka Whaiora; Dr Jeff Brown, Clinical Executive, Te Uru Pā Harakeke; Dr Vanessa Caldwell, Clinical Executive, Te Uru Rauhi; Mariette Classen, Consumer Experience Manager; Debbie Davies, Operations Executive, Te Uru Kiriora; Sarah Fenwick, Operations Executive, Te Pā Harakeke; Pauline Holland, Planning and Integration Lead, Te Uru Whakamauora; Lyn Horgan, Operations Executive, Te Uru Arotau; Kelly Isles, Director of Strategy; Sam Kilmister, Communications and Social Media Advisor; Andrew Nwosu, Operations Executive, Te Uru Whakamauora; Angela Rainham, Locality and Intersectoral Development Manager; Alison Russell, Planning and Integration Lead, Te Uru Kiriora; Lee Welch, Improvement Advisor, Quality and Innovation.

Media – 0; Public – 2

1. KARAKIA

The meeting opened with the organisational karakia.

2. ADMINISTRATIVE MATTERS

2.1. Apologies

An apology from Norman Gray was received and accepted.

2.2. Late items

There were no late items.

2.3. Register of Interests Update

The following updates to the Register of Interests were advised.

Oriana Paewai

Remove

- Chief Executive Officer, Rangitāne o Tamaki nui a Rua
- Coordinating Chair, Te Whiti ki te Uru
- Member, Governance Board, Te Ohu Auahi Mutunga (TOAM)
- Member, Before School Checks (B4SC) Collective
- Committee member, Nga Kaitiaki o Ngāti Kauwhata Inc
- Member, Project Alliance Board, Te Ahu a Turanga Manawatū-Tararua Highway
- Member, Pā Harakeke CAG
- Member, MDHB Māori Alliance Leadership Team (MALT)
- Member, UNISON
- Member, Alliance Leadership Steam (ALT), THINK Hauora

Add

- Member, Governance Board, Mana Whaikaha

Chiquita Hansen

Add

- Employed by THINK Hauora as Chief Executive and seconded to MDHB as Interim General Manager, Strategy, Planning and Performance 6/10ths
- Husband is employed by MDHB
- Executive member of General Practice New Zealand (GPNZ)
- Executive member of Health Care Home Collaborative

2.4. **Minutes of the 16 February 2021 meeting, Part One**

It was resolved that:

the Part One minutes of the 16 February 2021 Health and Disability Advisory Committee meeting be approved as a true and correct record.

(Moved John Waldon; seconded Muriel Hancock)

2.5. **Matters arising from previous minutes**

No discussion.

3. **STRATEGIC FOCUS**

Discussion to be held in Part Two of this meeting.

4. **DIRECTORATE WITH CLUSTER FUNCTIONS REPORTING**

4.1. **Directorate Dashboard**

The Operations Executive, Te Uru Arotau presented this report, which was taken as read.

Management offered to provide more detail in future reports about the challenges being faced by MidCentral DHB's (MDHB) workforce. The Health, Safety and Wellbeing reports presented to the Finance, Risk and Audit Committee (FRAC) and the Board already included the number of reported incidents of staff shortages.

The Operations Executive, Te Uru Arotau, explained the 'home warding' principles that would be used to improve acute medical inpatient flow.

4.2. **Te Uru Whakamauora – Healthy Ageing and Rehabilitation**

The Operations Executive and the Planning and Integration Lead, Te Uru Whakamauora presented this report, which was taken as read.

The Older People's Acute Assessment and Liaison Unit (OPAL) Community Services business case would be re-presented to the July Board meeting. Robust financial data needed to be gathered before the business case was presented to the Organisational Leadership Team (OLT) and FRAC.

The Executive Director, Allied Health noted that community Occupational Therapists (OT) used Ministry of Health guidelines to assess referrals. Non-urgent referrals had been reviewed and it was found that not everyone needed a complex assessment. The Operations Executive advised analysis was being carried out to see whether people on the community OT waiting list were presenting at the Emergency Department.

4.3. **Te Uru Rauhi – Mental Health and Addiction Services**

The Operations Executive and Clinical Executive, Te Uru Rauhi presented this report, which was taken as read.

The Request for Proposal for the Horowhenua Community step up service was expected to be completed in May or June 2021. This iwi-led service was part of an overall model of care for an acute response that would support alternatives to ward admission if possible.

The Clinical Executive advised that the proportion of Māori engaged with or needing the Opioid Substitution Treatment service was relative to need in the community.

The Acting General Manager, Enable New Zealand, joined the meeting

4.4. **Te Uru Arotau – Acute and Elective Specialist Services**

The Operations Executive, Te Uru Arotau presented this report, which was taken as read.

Board members noted the increased levels of senior staff in the Emergency Department (ED) and acknowledged the successful recruitment effort. The Operations Executive explained there would now be two Senior Medical Officers (SMOs) in ED on weekend mornings, and that SMOs would work until 2am rather than midnight. Nurse Practitioners provided continuity and were able to support the Resident Medical Officer workforce.

In response to a question, it was confirmed that MidCentral DHB met quarantine costs for clinicians recruited from overseas.

4.5. **Te Uru Kiriora – Primary, Public and Community Health**

The Operations Executive and the Planning and Integration Lead, Te Uru Kiriora presented this report, which was taken as read.

The Operations Executive advised that MDHB's COVID-19 vaccination programme was at 138 percent of target, and one-third of border workers had received their second dose of the vaccine.

A low number of women took up the cervical screening opportunity at the second Te Whara Tapa Whā Hauora Day held at the Poutu Marae in Shannon. A Committee member noted the numbers were not important, and that reaching any woman who had not previously been screened was a success. It was important to provide mobile services in the community.

4.6. **Te Uru Mātai Matengau – Cancer Screening, Treatment and Support**

The Operations Executive, Te Uru Mātai Matengau presented this report, which was taken as read.

Committee member, Vaughan Dennison, joined the meeting.

4.7. **Te Uru Pā Harakeke – Healthy Women, Children and Youth**

The Operations Executive and the Clinical Executive, Te Uru Pā Harakeke presented this report, which was taken as read.

The report on the Midwifery Review carried out by Emma Farmer (Director of Midwifery, Waitemata DHB) had been received and minor factual changes were required. The report would be presented to the Board when finalised.

Board members would receive an invitation to the official opening of the Milk Bank, being held on Wednesday 19 May.

Family violence intervention screening rates had improved over the last six months. Future reports will include data showing the baseline and progress made, including by ethnicity.

The base fee for providing ultrasound scans had risen slightly over the last 10 years. One provider had introduced a \$40 surcharge to cover costs, and others were expected to introduce a surcharge from July. This was a national trend. It was noted that the surcharge was not applied to Community Services Card holders.

It was resolved that the Committee:

note the areas highlighted in the dashboard and associated commentary.

(Moved Karen Naylor; seconded Jenny Warren)

The Consumer Experience Manager and the Improvement Advisor, Quality and Innovation joined the meeting.

5. PERFORMANCE REPORTING

5.1. Enable New Zealand Report

The Acting General Manager, Enable New Zealand presented this report, which was taken as read. As Enable New Zealand carries out a lot of housing modifications, discussions had been held with architects and builders to understand the ongoing issues around potential shortages of building materials and labour.

It was resolved that the Committee:

endorse the Enable New Zealand Report to 31 March 2021.

(Moved Maderoa Mar; seconded Muriel Hancock)

5.2. Pae Ora Paiaka Whaiora Report

The Operations Executive, Pae Ora Paiaka Whaiora presented this report, which was taken as read. The Pae Ora Team was at capacity, which reflected MDHB's commitment to an authentic Te Tiriti o Waitangi relationship.

It was resolved that the Committee:

note the progress update for the Pae Ora Paiaka Whaiora Directorate.

(Moved John Waldon; seconded Karen Naylor)

5.3. Quality and Safety Dashboard

The Consumer Experience Manager and the Improvement Advisor, Quality and Innovation presented this report, which was taken as read.

In accordance with MDHB's Variance Management Response Guidelines, incidents where harm has occurred or could have occurred should be reported. All incidents were reviewed by the service. As part of the risk review process, the Principal Risk Officer also reviewed all incident reports against risks. Workforce shortages and notifications were included in workforce reports to FRAC and the Board. All Serious Adverse Events were reviewed to see whether any workforce issues were a contributory factor.

A Committee member noted that Figure 4.2.1 'Total Incidents by Month' did not show whether the incidents related to a particular problem area or cluster. The General Manager, Quality and Innovation advised that any trends or 'hot spots' would be identified in the narrative of future reports.

It was resolved that the Committee:

note the content of the Quality and Safety Dashboard
endorse the improvement activities planned for the next quarter.
(Moved Karen Naylor; seconded Jenny Warren)

6. DISCUSSION/DECISION PAPERS

6.1. Regional Services Plan Implementation, Quarter Two 2020/21

The Director of Strategy presented this report, which was taken as read.

It was resolved that the Committee:

note the final draft Regional Services Plan for 2020/21 was submitted to the Ministry of Health in December 2020 and has not yet been formally approved by the Minister of Health
note the progress made on implementing the central region's national and regional priority programmes for the second quarter of 2020/21.
(Moved Muriel Hancock; seconded Vaughan Dennison)

6.2. Locality Health and Wellbeing Plans – Triennial Update

The Locality and Intersectoral Development Manager presented this report, which was taken as read.

Some Committee members commented that the Palmerston North Safety Advisory Board (PNSAB) was not the best organisation to engage with. The Locality and Intersectoral Development Manager provided reassurance that PNSAB was not the only connection with the Palmerston North community.

The Chief Executive noted the recent announcement on the Government's response to the Health and Disability System Review included a focus on understanding the needs of local communities. MDHB was already well advanced with locality planning and this work should continue.

MDHB had asked iwi to develop their own health and wellbeing plans to highlight their wants and needs. MDHB would work with iwi and Pae Ora Paiaka Whaiora to ensure its locality plans complemented and built on the iwi goals. This approach meant that DHB boundaries were not imposed on iwi.

It was resolved that the Committee:

note the progress that has been made through the locality work over the last three years

note the points of interest in each locality

endorse the suggested future direction of the locality work.

(Moved Oriana Paewai; seconded Jenny Warren)

The Director of Strategy and the Locality and Intersectoral Development Manager left the meeting

6.3. **Ka Ao, Ka Awatea – Annual Progress Report**

The Operations Executive, Pae Ora Paiaka Whaiora presented this report, which was taken as read. He noted the Government's announcement in response to the Health and Disability System Review, which included the establishment of a Māori Health Authority. This meant that future planning for implementation of Ka Ao, Ka Awatea after 2022 may start earlier than planned.

It was resolved that the Committee:

note the report on forward implementation of Ka Ao, Ka Awatea Strategy Refresh 2020-22.

(Moved John Waldon; seconded Karen Naylor)

6.4. **Māori Health Equity Dashboard – Adult Health Indicators**

The Operations Executives from Te Uru Kiriora, Te Uru Arotau and Te Uru Mātai Matenga presented this report, which was taken as read.

A Committee member asked that all Māori Health Equity Dashboard reports be included in a folder on the Stellar platform.

It was resolved that the Committee:

note the equity position for each of the indicators

note the analysis, discussion and proposed next steps to improve Māori health equity and further strengthen MidCentral District Health Board's commitment to Te Tiriti o Waitangi

endorse the Te Ara Angitū report.

(Moved Vaughan Dennison; seconded Heather Browning)

7. INFORMATION PAPERS

7.1. Locality Plan Progress Report – Palmerston North

The report was taken as read.

It was resolved that the Committee:

note the progress that has been made in relation to the Te Papaioea Te Mahere Hauora (Palmerston North Health and Wellbeing Plan).

(Moved Vaughan Dennison; seconded Materoa Mar)

7.2. Committee's Work Programme

The report was taken as read.

It was resolved that the Committee:

note the update on the Health and Disability Advisory Committee's work programme.

(Moved John Waldon; seconded Vaughan Dennison)

8. GLOSSARY OF TERMS

No discussion.

9. LATE ITEMS

There were no late items.

10. DATE OF NEXT MEETING

Tuesday, 13 July 2021 – Board Room, MidCentral District Health Board, Gate 2 Heretaunga Street, Palmerston North

Low Findlay asked that his apology for the July meeting be recorded.

11. 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 Health and Disability Advisory Committee meeting	For reasons set out in the agenda of the 16 February 2021 meeting held with the public present	
Health and Disability System Review	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)
Serious Adverse Events (SAC 1)	To protect patient privacy	9(2)(a)
Consumer Story – Workshop	To protect patient privacy	9(2)(a)

(Moved Vaughan Dennison; seconded Lew Findlay)

Part One of the meeting closed at 11.08am

Confirmed this 13th day of July 2021

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Committee Chair

Unconfirmed minutes