

MIDCENTRAL DISTRICT HEALTH BOARD

Minutes of the MidCentral District Health Board meeting held on 21 April 2009 at 10.08 am at MidCentral District Health Board Offices, Board Room, Gate 2B, Heretaunga Street, Palmerston North

PRESENT

Ian Wilson (Chair)
Diane Anderson
Lindsay Burnell
Graeme Campbell
Ann Chapman

Dennis Emery
Jim Jefferies
Stephen Paewai
Barbara Robson
Ormond Stock

IN ATTENDANCE

Murray Georgel, Chief Executive Officer
Stuart Wilson, General Manager, Corporate Services
Lareen Cooper, General Manager, MidCentral Health
Mike Grant, General Manager, Funding Division
Heather Browning, General Manager, Enable New Zealand
Jill Matthews, Principal Administration Officer
Susan Moore, Communications Officer
Jeff Small, Group Manager, Commercial Services

Public (2)
Media (1)

1. APOLOGIES

An apology was received from Jack Drummond, Board Member

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.

3.2 Declaration of Conflicts in Relation to Today's Business

Ormond Stock and Jim Jefferies recorded their interest as Board Member and Chairman respectively, Aorangi Hospital. This interest related to several agenda items regarding elective services. It was agreed management of this conflict be determined as and when it arose during the meeting.

Ann Chapman recorded her interest in agenda item 6.1, Information Systems Strategic Plan Update. This report contained a reference to a Telecom health network product in which her son could be involved. It was agreed this interest did not present a conflict, and the member could participate in the discussions.

4. MINUTES OF THE PREVIOUS MEETING

4.1 Minutes

It was resolved:

that the minutes of the previous meeting held on 17 March 2009 be confirmed as a true and correct record, subject to the following amendments being made:

- *Item 5.4.1, spelling of statins to be corrected.*
- *Item 6.2, the words, "it was agreed that the" to be deleted.*
- *Item 7.1.1, final paragraph to read, "The Hospital Advisory Committee Chair ...".*

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 17 March 2009 be received and the recommendations contained therein approved.

5.2 Matters Arising

There were no matters arising from the minutes.

5.3 Community & Public Health Advisory Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Community and Public Health Advisory Committee held on 7 April 2009 be received and the recommendations contained therein approved.

5.4 Matters Arising

There were no matters arising from the minutes.

5.5 Hospital Advisory Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Hospital Advisory Committee held on 7 April 2009 be received and the recommendations contained therein approved.

5.6 Matters Arising

5.6.1 Mobile Surgical Services

The Chairman advised the DHB's CEO, Medical Director and himself had met with Mobile Surgical Services' Managing Director and Consultant Advisor. A wide ranging discussion was held relating to the mobile surgical bus visiting Horowhenua and Dannevirke. Further

discussions were to occur over the next two weeks. All were hopeful that these discussions would lead to services being resumed at the earliest opportunity.

5.6.2 Colposcopy “Did Not Attend” Rates

The importance of promoting “self responsibility” for attending clinic appointments was noted. Management confirmed that double-bookings were used as appropriate to offset expected DNAs.

5.6.3 Dannevirke-based Outpatient Clinics

The CEO confirmed that all clinic schedules were regularly reviewed, including the Dannevirke outpatient clinic schedule. This could mean the three Dannevirke-based clinics recently stopped could re-commence at a future date. However, at this current time no promises could be made in this regard. MidCentral DHB did not wish to mislead people, and to infer clinics would soon recommence would be misleading.

The importance of open, honest communication was agreed by all members.

The CEO confirmed that a simple cost-benefit analysis had been undertaken. This showed that for no additional cost to MidCentral Health, additional services could be provided. The benefits being an additional 44 people per month receiving assessment.

5.6.4 Norovirus Outbreak

The General Manager, MidCentral Health advised that eight rest home facilities and Palmerston North Hospital has norovirus cases. Palmerston North Hospital’s infection control department was optimistic that the outbreak was nearing an end.

5.6.5 Managing Medical Patients

The General Manager, MidCentral Health advised four strategies were being implemented to manage medical patient volumes during winter months:

- Establishing a Medical Assessment Unit. The unit was scheduled to open in July and would enable medical patients to be streamed.
- Reconfiguration of medical and surgical wards, reducing the spread of medical patients throughout Palmerston North Hospital.
- Increasing the number of surgical beds.
- Extending the PEDAL team service by providing GPs with a rapid response assessment service for people in homes. This would assist, particularly with the management of elderly people.

6. STRATEGIC ISSUES

6.1 Information Systems Strategic Plan: Update

6.1.1 Patient Management Information System Replacement

The Board noted the extended timeline for replacement of the patient management system due to the collaborative approach being undertaken. The benefits of a collaborative approach were noted.

The General Manager, Corporate Services advised there was some risk associated with the extended timeframe for replacement of the patient management system. This risk was being managed.

A member considered that the NZ health sector should have the ability to develop software to meet the sector's needs, noting that this would require a cultural change.

The governance structure of the collaborative approach was discussed, and it was suggested that alternative models be considered to minimize the risks associated with the current "committee-style" approach.

Management advised that independent project management was in place.

It was resolved:

that the report be received.

6.2 centralAlliance

The Minister of Health's support for the centralAlliance was noted.

The centralAlliance sub-committee Chair noted the difficulties in advancing the centralAlliance while district annual planning was taken place. Despite this, management had made some progress.

The CEO advised that costs associated in establishing the centralAlliance were not being formally recorded at the present time. This would need to occur if significant costs were involved.

It was noted that the respective Boards' iwi partners had been unable to meet to date. This was a timing issue, due to changes in the Whanganui DHB's iwi board.

The establishment of a work programme for the alliance was supported. The CEO advised that this was currently underway and would be reported to the Board in due course.

It was resolved:

that the report be received.

6.3 Manawhenua Hauora

It was resolved:

that the minutes be received.

7. OPERATIONS REPORTS

7.1 CEO's Report

7.1.1 Monitoring Effectiveness of Maori Governance Frameworks

The timeframe for delivery of this national research study was noted.

7.1.2 Associate Ministers of Health

The Associate Minister of Health arrangements were noted.

7.1.3 *Health Select Committee*

The focus of the Select Committee's survey was discussed and concern expressed it was very detailed and did not appear to encompass DHB responsibilities.

The reduction in the number of survey questions from the previous year was noted.

7.1.4 *Central Region DHBs' Board Members' Forum*

The Chairman advised that the regional Chairs/CEO group had determined the annual forum scheduled for May 2009 be postponed. A new date had yet to be set. He further advised that he had put forward MidCentral DHB's desire for the forum to take place.

It was noted that the forum's postponement was based on a desire by the regional Chairs to have a better understanding of where the Regional Clinical Services Plan was at, and the information which would be put forward to the combined boards to ensure the best return for their time.

A question was posed as to whether the timeline for the forums should be set by governance rather than the execution of a plan.

7.1.5 *Regional Clinical Services Plan*

The plastic surgery business case aimed at addressing the backlog of women for delayed-reconstructive breast surgery was noted. The General Manager, Funding Division advised there were around 60 women involved, and of these approximately 25 were from MidCentral DHB's district. He advised that the business case would be available in due course on the Central Region's Technical Advisory Service website.

Hutt Valley DHB was implementing the business case and would be contacting the women involved. The General Manager, Funding Division advised that there may be some delay in the implementation.

7.1.6 *District Strategic Plan*

The CEO anticipated that a revised district strategic planning timeline would be presented to the Board in July.

7.1.7 *Financial Position*

The CEO confirmed that achievement of year end budget was being targeted.

The Board agreed that it needed to consider the level of cash it held against forecast capital expenditure requirements and current interest rates. It was noted that this would form part of the district annual plan discussions.

The Chairman advised he understood discussions around the DHBs' capital charge regime were occurring at central Government level.

It was resolved:

that the report be received.

5.6

8. GOVERNANCE ISSUES

8.1 2008/09 Work Programme

It was resolved:

that the updated work programme for 2008/09 be noted.

9. LATE ITEMS

There were no late items.

10 DATE OF NEXT MEETING

Tuesday, 19 May 2009, Manawatu District Council, 135 Manchester Street, Feilding.

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:

<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, 7 April 2009</i><i>Community & Public Health Advisory Committee, 7 April 2009</i>	<i>For the reasons set out in the Committee's order paper of 7.4.09 meeting held with the public present</i> <i>For the reasons set out in the Committee's order paper of 7.4.09 meeting held with the public present</i>	
<i>2009/10 draft District Annual Plan</i>	<i>Under negotiation with the Ministry of Health</i>	<i>9(2)(j)</i>
<i>2009/10 draft Statement of Intent</i>	<i>Under negotiation with the Ministry of Health</i>	<i>9(2)(j)</i>

Confirmed this 19th day of May 2009.

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Chairman