

MIDCENTRAL DISTRICT HEALTH BOARD

Minutes of the MidCentral District Health Board meeting held on 17 June 2008 at 10.05 am at the MidCentral DHB Offices, Board Room, Gate 2B Heretaunga Street, Palmerston North

PRESENT

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

Dennis Emery
Jim Jefferies
Stephen Paewai
Barbara Robson
Ormond Stock

IN ATTENDANCE

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

Manawatu Primary Health Organisation:

- Colin McJannett, Chair
- Nicky Hart, Manager

Public (10)
Media (2)
Staff (1)

The meeting opened with a karakia.

1. APOLOGIES

There were no apologies.

2. LATE ITEMS

There were no late items.

3. CONFLICT AND/OR REGISTER OF INTERESTS UPDATE

3.1 Amendments to the Register of Interests

Barbara Robson advised two new interests:

- Interim Consumer Representative, Safe Medicines Management Programme's Steering Committee

- Short-term contract with the Office of the Health & Disability Commissioner for provision of advice on the establishment of an expanded consumer advisory group.

3.2 Declaration of Conflicts in Relation to Today's Business

Jim Jefferies and Ormond Stock declared an interest in agenda item, 6.3, Minutes of the Hospital Advisory Committee, clause 7.7 re Increase in Funding for Elective Services. Their interest related to their role as Chairman and Board Member respectively of Aorangi Hospital. They advised they would leave the meeting for this item.

Barbara Robson declared her interest as a member of the Safe Medicines Management Group in respect of items:

- 8.1, CEO's Operating Report, Update from DHBNZ re Quality Improvement Committee activities
- 6.3, Minutes of the Hospital Advisory Committee, clause 7.1, Quarterly Quality Update

4. PUBLIC FORUM AND MANAWATU PHO PRESENTATION

4.1 Questions from the Public

The following issues were discussed:

- current status of the disposal of the Kimberley Centre property.
- importance of ensuring management reports, where appropriate, used objective data and research to support new proposals. The example stated was use of crisis intervention teams in mental health.
- MDHB's strategy for dementia, local service arrangements for people with dementia, and education and support for caregivers and family members. It was noted that as part of the roll-out of MDHB's psychogeriatric strategy, planned future activities were around access to cognitive enhancing drugs, and training opportunities for staff. Support and education for family members and care givers was largely provided by community organisations, although MDHB's strategy did include increase provision of information.
- the possibility of amending registration and enrolment practices with GPs and Primary Health Organisations (PHOs) respectively to enable access to reduced fees for people unable to secure a GP. It was noted that enrolment practices were set by the Ministry of Health and were aimed as increasing access to primary care services. The Ministry, PHOs and DHBs closely monitored access and amendments were now being made, such as the co-payment pharmacy initiative being extended to include hospital prescriptions.
- disclosure of enrolled patient information to PHOs, particularly whether or not the PHO enrolment form required amendment to be more explicit in this regard.
- charges for after-hours primary health care.

4.2 Presentation from Manawatu Primary Health Organisation

The Manawatu PHO's Chair and Manager gave a presentation on the PHO's achievements for 2007. Key points included:

- access to general practice services had increased.
- the proportion of adults unable to see a GP when they needed to in the previous 12 months (for any reason) halved from 2002/03 to 2006/07.
- as at December 2007 98,681 people had enrolled with the Manawatu PHO. Based on the 2006 census, this equated to around 94% of the total population. It was noted that of these enrolments, around 1% lived outside the PHO's catchment, thus reducing the level of local enrolments.
- the PHO had assessed the unenrolled population by ethnicity and age group.
- Maori accounted for 12% of enrolments.

- people over aged 65 years used PHO services significantly more than other age groups.
- general practice consultations numbered over 270,000 in 2007, slightly down on previous years. The reason for this reduction had yet to be further explored, but could possibly be linked to the availability of new disease state services.
- Maori have similar utilisation rates for GP services to non-Maori across most age groups, and increased utilisation overall.
- the PHO had commenced implementation of components of MDHB's disease state plans.
- use of the chronic care service (which went across all disease state areas) and diabetes service was increasing. Maori utilisation was around 22%.
- respiratory, cardiac, cancer and mental health initiatives were yet to get underway
- the Care Plus service implementation was lower than target, but efforts in this area would continue. Feedback from other areas indicated this service was beneficial.
- the PHO has implemented a Performance Management System and was doing well in all 13 target areas. Five indicators had not been achieved, but were very close to target.
- in respect of the "valid NHI" indicator, the number of invalid NHIs was not statistically significant. Over 98% of NHIs were valid.
- the Diabetes Get Checked programme had shown significant improvement in the first five months of 2008. The PHO had taken over this contract in late 2007.
- the PHO's expenditure for 2007 was around \$14m, of which the majority (\$10.5m) was used for general practice (first contact) services.
- Over the next 12 months the PHO would be focusing on enrolments and its newly launched 0800 GP Waiting List service, mental health services, business planning, sustainable prices, and sustainable and generational change at a whanau / family level.

The Chairman thanked the PHO for its interesting presentation, and the work they were doing for the community.

Members of the PHO left the meeting.

5. MINUTES OF THE PREVIOUS MEETING

5.1 Minutes

It was resolved:

that the minutes of the previous meeting held on 20 May 2008 be confirmed as a true and correct record.

5.2 Matters Arising from the Minutes

There were no matters arising from the minutes.

6. BOARD COMMITTEES

6.1 Funding Audit Sub-Committee

It was resolved:

that the unconfirmed minutes of the meeting of the Funding Audit Sub-Committee held on 20 May 2008 be received and the recommendations contained therein approved.

6.2 Matters Arising

There were no matters arising from the minutes.

6.3 Hospital Advisory Committee

Jim Jefferies and Ormond Stock declared their interest in section 7.7 re Increase in Funding for Elective Services. Their interest related to their role as Chairman and Board Member respectively of Aorangi Hospital. The Board did not wish to discuss this aspect of the minutes and so the members remained.

It was resolved:

that the unconfirmed minutes of the meeting of the Hospital Advisory Committee held on 3 June 2008 be received and the recommendations contained therein approved.

Jim Jefferies and Ormond Stock abstained from voting.

6.4 Matters Arising

6.4.1 Reconfiguration of Child & Adolescent Oral Health Services

The CEO advised the Ministry of Health was considering MDHB's business case and had requested some further information/clarification. MDHB had made it clear it would only proceed if it received the approval it required. Communication with staff regarding the current status was raised and management advised that it would ensure they were informed if they had not already been advised.

Mike Grant left the meeting.

6.4.2 Quality Improvement Committee Initiatives

A member suggested it would be useful to receive an overview of the QIC initiatives. It was noted that a summary had been provided previously and that further regular reports were proposed as part of the 2008/09 reporting framework. It was further noted that the QIC Chair had attended Whanganui DHB and this had been useful.

6.4.3 Urology Services

Management undertook to advise the Board, via the Hospital Advisory Committee, of the level of additional work from Wairarapa and Whanganui DHB areas was planned in light of the new urologist capacity.

6.4.4 Rev Kahu Durie

The Board acknowledged the work of Rev Kahu Durie who was now retiring.

6.5 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 3 June 2008 be received and the recommendations contained therein approved.

6.6 Matters Arising

There were no matters arising from the minutes.

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 6 May 2008 be received and the recommendations contained therein approved.

6.8 Matters Arising

6.8.1 Children's Hearing Aid Fund

Management clarified that the risk associated with the demand driven funding rested with the Ministry of Health, not Enable New Zealand.

6.8.2 Socrates

The General Manager, Enable New Zealand advised that progress was being made nationally in addressing the issues associated with this new information system.

6.8.3 Supportlinks

The General Manager, Enable New Zealand advised that referrals for this service were increasing. This was consistent with the ageing population.

Enable New Zealand and the Funding Division were in discussion regarding future capacity and volumes.

Mike Grant re-entered the meeting.

7. OPERATIONS REPORTS

7.1 CEO's Report

7.1.1 Corporate & Commercial Service Activities

The Board noted management's intention to explore the concept of collective corporate and commercial support services for Wairarapa, Whanganui and MidCentral DHBs. The DHBs' CEOs would present a joint business case to the three Boards in due course.

The Board requested that this business case be accompanied by a report detailing the implications for MidCentral DHB, including planned strategies and investment.

7.1.2 Procurement

The General Manager, Corporate Services confirmed that procurement practices at all DHBs were being reviewed by the Office of the Auditor-General. The first step in this process was a comprehensive self-assessment.

7.1.3 Year End Financial Forecast

The CEO advised that while the current result was adverse to budget, a better-than-budget result was forecast for the full financial year.

The high risk for the future was future costs increasing in comparison to future revenue.

7.1.4 DHBNZs' Key Priorities:

- *Information*

The draft national electronic health record architecture for sector discussion was noted. It was suggested that this project include consumer representation. The CEO undertook to pass this suggestion on to DHBNZ.

- *Communication and Reporting*

DHBNZ's planned review of its website was noted. It was suggested there was opportunity for a greater public perspective. The CEO undertook to pass this suggestion on.

- *Value for Money*

The proposal to join the Health Roundtable was discussed. Members noted the value the establishment of a NZ Chapter would provide, but that this would require buy-in from all DHBs. The CEO advised that MDHB intended to participate, however it was uncertain whether all DHBs felt the same and this would impact MDHB's decision.

It was resolved:

that the report be received.

8. STRATEGIC ISSUES

8.1 2008/09 District Annual Plan & Statement of Intent

Management advised that all matters raised by the Ministry of Health had now been resolved. MidCentral DHB's 2008/09 District Annual Plan and Statement of Intent would now be submitted for the Minister of Health's endorsement.

Management further advised that the issue of the accounting treatment of Enable New Zealand's revenue would be further considered outside of the annual plan process. It was noted that this revenue was around \$40m, and not \$40k as stated in the report.

It was resolved:

that the report be received.

8.2 2008/09 Capital Expenditure Plan

It was resolved:

that the capital programme contained in management's report dated 27 May 2008 be noted, and that individual capital expenditure applications continue to follow the established approval process.

8.3 2007/08 District Annual Plan: Update re Governance/Corporate Deliverables

It was resolved:

that the report be received.

8.4 Planning with Territorial Authorities

It was resolved:

that the report be received.

9. GOVERNANCE ISSUES

9.1 2007/08 Work Programme

It was resolved:

that the updated work programme for 2007/08 be noted.

9.2 Annual Reporting Requirement for Enable New Zealand Limited

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 2008 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.

9.3 2008/09 Reporting Framework

The reporting framework was supported. The Board supported management's intention to streamline reports. If members had specific concerns regarding a report prior to the meeting, they could email these to the CEO, or, to the General Manager concerned with a copy to the CEO.

It was noted that a report on the Regional Clinical Services Plan was due in August 2008. Further reporting arrangements would be agreed at that time.

It was resolved:

that the reporting framework and work programmes for 2008/09 as contained in the CEO's report dated 9 June 2008, be approved.

10. LATE ITEMS

There were no late items.

11. DATE OF NEXT MEETING

Tuesday, 15 July 2008, MidCentral District Health Board Offices, Board Room, Gate 2B, 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:

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<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>Minutes of Board Committees</i> <ul style="list-style-type: none"><i>Hospital Advisory Committee, 3 June 2008</i><i>Community & Public Health Advisory Committee, 3 June 2008</i>	<i>For the reasons set out in the Committee's order paper of 3.6.2008 meeting held with the public present</i> <i>For the reasons set out in the Committee's order paper of 3.6.2008 meeting held with the public present</i>	
<i>Appointment of External Committee Members</i>	<i>To protect personal privacy</i>	<i>9(2)(a)</i>
<i>Bates Estate</i>	<i>Under negotiation</i>	<i>9(2)(j)</i>

Confirmed this 15th day of July 2008.

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Chairman