



MidCentral District Health Board

Board Minutes

Meeting held on 28 September 2021 from 9.00am

(held via Zoom due to COVID-19 restrictions)

PART ONE

Members

Oriana Paewai (Acting Chair), Heather Browning, Vaughan Dennison, Lew Findlay, Norman Gray, Muriel Hancock, Materoa Mar, Karen Naylor, John Waldon, Jenny Warren.

Apologies

Brendan Duffy (Board Chair).

In attendance

Kathryn Cook, Chief Executive; Kelvin Billingham, Chief Medical Officer; Celina Eves, Executive Director, Nursing and Midwifery; Chiquita Hansen, Interim General Manager, Strategy, Planning and Performance; Gabrielle Scott, Executive Director, Allied Health; Tracee Te Huia, General Manager, Māori Health; Margaret Bell, Board Secretary.

In attendance (part meeting)

Jeff Brown, Clinical Executive, Te Uru Pā Harakeke; Judith Catherwood, General Manager, Quality and Innovation; Sarah Fenwick, Operations Executive, Te Uru Pā Harakeke; Graeme Gillespie, Advisor, Commissioning and Contracts; Emma Horsley, Communications Manager; Kelly Isles, Director of Strategy, Planning and Accountability; Jessica Long, Advisor, Planning and Accountability; Steve Miller, Chief Digital Officer; Darryl Ratana, Deputy Chief Financial Officer; Neil Wanden, General Manager, Finance and Corporate Services.

Media – 1

Unconfirmed minutes

1. KARAKIA

The meeting opened with the organisational karakia.

2. ADMINISTRATIVE MATTERS

2.1. Apologies

An apology was received and accepted from Brendan Duffy.

Materoa Mar advised she would need to leave the meeting between 10am and 11.30am.

2.2. Late items

There were no late items.

2.3. Register of Interests Update

No updates were advised.

2.4. Minutes of the Board meeting held on 17 August 2021, Part One

It was resolved that:

the Part One minutes of the 17 August 2021 Board meeting be approved as a true and correct record.

(Moved Vaughan Dennison; seconded Jenny Warren)

2.5. Matters arising from previous minutes

At the August meeting, the Board had asked that a letter be written to the Ministry of Health (the Ministry) to highlight issues faced by migrant GPs in gaining residency. A copy of the letter sent to the Ministry and the reply received had been included in the meeting papers for information.

2.6. Verbal report from the Deputy Board Chair

A press release had been issued congratulating Dr Curtis Walker, a MidCentral District Health Board (MDHB) general physician and kidney specialist, on his appointment to the Board of Health New Zealand. The Deputy Board Chair acknowledged the appointment of Awerangi Tamihere (Ngāti Kauwhata, Rangitāne) to the Māori Health Authority. She also noted that three current District Health Board Chairs had been appointed to the Board of Health New Zealand.

2.7. **Minutes of the Health and Disability Advisory Committee meeting held on 14 September 2021, Part One**

The Health and Disability Advisory Committee (HDAC) Chair provided an update on key issues from the meeting. He asked that an increased focus be placed on the needs of the disabled community.

It was resolved that the Board:

note the unconfirmed Part One minutes of the Health and Disability Advisory Committee meeting held on 14 September 2021.

(Moved John Waldon; seconded Heather Browning)

2.8. **Minutes of the Finance, Risk and Audit Committee meeting held on 7 September 2021, Part One**

It was resolved that the Board:

note the unconfirmed Part One minutes of the Finance, Risk and Audit Committee meeting held on 7 September 2021.

(Moved Vaughan Dennison; seconded Muriel Hancock)

2.9. **Manawhenua Hauora Chair's Report**

The appointment of Lady Tureiti Moxon to the Māori Health Authority was noted and welcomed.

It was resolved to:

note the report from the Manawhenua Hauora Chair on the Manawhenua Hauora hui held in August 2021

note the General Manager, Māori Health's response to the Chair's report.

(Moved Oriana Paewai; seconded John Waldon)

3. **STRATEGIC FOCUS**

Discussion in Part Two of the meeting.

4. **PERFORMANCE REPORTING**

4.1. **Chief Executive's Report**

The Chief Executive presented this report, which was taken as read.

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Positive feedback had been received from the Ministry of Health's Infrastructure Unit reviewing the MDHB's business case for the mental health unit. The Ministry has advised Ministers Little (Health) and Robertson (Finance) of this work and its potential as an exemplar. Board members acknowledged the work done by the team in developing the model of care and business case.

A Board member noted the Technical Advisory Services (TAS) report stated that "The PCI (Percutaneous Coronary Intervention) capacity required in the region is expected to grow slightly but not sufficient enough to warrant a significant growth in the development of PCI cath labs." The Chief Executive explained that a cardiac catheterisation laboratory (cath lab) at MDHB had been approved as part of the SPIRE (Surgical Procedural Interventional Recovery Expansion) project. The Hawke's Bay DHB's proposed cath lab had not been supported and would not proceed. Discussions were now taking place with Capital and Coast DHB on how to support MDHB to have an effective cath lab.

It was resolved that the Board:

note the update of key local, regional and national matters.

(Moved John Waldon; seconded Karen Naylor)

The Director of Strategy, Planning and Accountability joined the meeting.

4.2. **Board KPI Dashboard**

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

It was resolved that the Board:

note the areas highlighted in the KPI dashboard and associated commentary.

(Moved Muriel Hancock; seconded Norman Gray)

The Director of Strategy, Planning and Accountability left the meeting.

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer joined the meeting.

4.3. **Financial Update – August 2021**

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer presented this report, which was taken as read. They noted this report was based on the provisional budget and that if proposed budget changes were approved by the Board later at this meeting, the future phasing would be different. The recent COVID-19 Level 4 and Level 3 lockdowns had affected the ability to achieve planned care surgery targets and impacted IDFs (inter-district flows).

It was resolved that the Board:

note that the month operating result for August 2021 is a surplus before one-off items of \$0.542m, which is \$0.798m adverse to budget

note that the year to date operating result for August 2021 is a surplus before one-off items of \$1.420m, which is \$1.140m adverse to budget

note that year to date for August 2021 COVID-19 related contribution of \$0.149m and Holidays Act costs of \$0.922m have been incurred. Including these results in a year to date deficit after exceptional items of \$0.577m, which is \$0.816m adverse to budget

note that the total available cash and equivalents of \$38.777m as at 31 August 2021 is sufficient to support liquidity requirements

*note this is an interim finance report and that a full report will come to the Board for consideration at its November meeting.
(Moved Oriana Paewai; seconded Karen Naylor)*

4.4. **Finance Report – July 2021**

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer presented this report, which was taken as read.

It was resolved that the Board:

note that this report was endorsed by the Finance, Risk and Audit Committee at their 7 September meeting and no concerns were raised

note that the month operating result for July 2021 is a surplus before one-off items of \$0.817m, which is \$0.345m unfavourable to budget

note that the July 2021 COVID-19 related net costs are close to budget and Holidays Act related costs of \$0.512m have been incurred. Including these one-off costs results in a surplus after exceptional items of \$0.303m, which is \$0.276m adverse to budget

note that the total available cash and equivalents of \$37.623m as at 31 July 2021 is sufficient to support liquidity requirements

approve the July 2021 financial report.

(Moved Oriana Paewai; seconded Karen Naylor)

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer left the meeting.

Unconfirmed minutes

The General Manager, Quality and Innovation joined the meeting.

4.5. **Sustainability Plan Report**

The General Manager, Quality and Innovation presented this report, which was taken as read. She noted the significant progress that had been made on two business cases which were connected to the savings plan.

It was resolved that the Board:

note the Finance, Risk and Audit Committee endorsed this report at its September meeting, for the Board's consideration
note the progress in the implementation of the Sustainability Plan
approve the Sustainability Plan Benefits Framework
approve the approach and progress made to date on the Sustainability Plan 2020-2023.
(Moved Muriel Hancock; seconded John Waldon)

The General Manager, Quality and Innovation left the meeting.

The Chief Digital Officer joined the meeting.

4.6. **Te Awa Update – Digital Services Work Programme**

The Chief Digital Officer presented this report, which was taken as read and noted the positive response from staff to the online cyber security training. This had led to an increase in reported incidents and now that all email accounts had been migrated to Exchange Online, the Digital Services team were able to go directly to email boxes and delete any inappropriate emails.

It was resolved that the Board:

note the Digital Services work programme covering planned work for the 2021/22 financial year
note the progress since the last reporting period
note the national and regional activity that may impact on the planned work programme.
(Moved Muriel Hancock; seconded John Waldon)

The Chief Digital Officer left the meeting.

The Advisor, Strategy and Planning and the Director of Strategy, Planning and Accountability joined the meeting.

4.7. **Non-financial Monitoring Framework and Performance Measures – Quarter Four, 2020/21**

The Advisor, Strategy and Planning and the Director of Strategy, Planning and Accountability presented this report, which was taken as read.

A Board member noted that there was an inequity for Māori related to adolescent oral health. She asked that future reports show how this inequity was being addressed and whether it had improved. The Chief Executive advised that adolescent oral health was an area where MDHB had a positive equity perspective and the results were better for Māori than non-Māori, but that may be declining.

Management noted that the Ministry were now monitoring adolescent dental enrolments on a quarterly basis.

The Board noted the significant reduction in the prevalence of smoking by Māori women over the last quarter, as a result of the programmes being delivered by Te Ohu Auahi Mutunoa.

The Advisor, Strategy and Planning agreed to provide an update on colonoscopy wait times for the next quarter, particularly for non-urgent and surveillance colonoscopies. The Chief Executive noted that wait times had improved since the district moved back into COVID-19 Alert Level 2.

Under item 4.2.2 of the report, Children fully immunised by two years of age, the last sentence should read: "There has been a significant decline for Māori, from 83.4 percent (n.141/169) last quarter to 69.4 percent (125/180) in quarter four."

Acknowledgement

The Chief Executive noted this would be Chiquita Hansen's last Board meeting in her role as Interim General Manager, Strategy, Planning and Performance as she would be returning to her role as Chief Executive of THINK Hauora and taking on another new challenge. She acknowledged the support and contribution Chiquita had provided to the DHB during the team since the beginning of March 2021. Debbie Davies, the Operations Executive, Te Uru Kiriora, Primary, Public and Community Health would take on the Interim General Manager, Strategy, Planning and Performance role from 1 October 2021.

All Board members thanked Chiquita for her work, noting her huge workload which had included challenges from the health reforms transition and the COVID-19 vaccination programme and lockdown.

It was resolved that the Board:

note the summary report on Stellar and progress made in delivering MidCentral District Health Board's Annual Plan and performance expectations for the fourth quarter of 2020/21

note the mitigations in place for those performance measures or deliverables that were not meeting expectations for Quarter Four, 2020/21.

(Moved Vaughan Dennison; seconded Jenny Warren)

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The Advisor, Strategy and Planning and the Director of Strategy, Planning and Accountability left the meeting.

The Advisor, Commissioning and Contracts joined the meeting.

5. DISCUSSION/DECISION PAPERS

5.1. Schedule of Commitments for 2021/22

The Advisor, Commissioning and Contracts presented this report, which was taken as read.

The Deputy Board Chair noted that both THINK Hauora and Te Tihi o Ruahine Whānau Ora Alliance already used the Commissioning for Outcomes Framework model.

It was resolved that the Board:

note the process for the review and renewal of contracts ending on 30 September 2021

note the new Commissioning for Outcomes Framework

note several contract service lines have been identified by directorates as requiring significant change

note the Finance, Risk and Audit Committee endorsed the DHB entering local contracts for two years with providers as detailed in the Schedule of Commitments at its meeting on 7 September 2021

approve the DHB entering local contracts for two years with providers as detailed in the Schedule of Commitments.

(Moved Muriel Hancock; seconded Heather Browning)

Board member, Matoroa Mar and the Advisor, Commissioning and Contracts left the meeting.

The Operations Executive, Te Uru Pā Harakeke, Healthy Women, Children and Youth joined the meeting.

6. INFORMATION PAPERS

6.1. Midwifery Workforce Update

The Clinical and Operations Executives, Te Uru Pā Harakeke presented this report, which was taken as read. Three new graduate applications had been received to start in 2022. Staff morale was still variable but had improved over the last six months.

Board members noted the low response rate to maternity surveys. Management advised that the number of surveys conducted was expected to improve following the appointment of a permanent administrator.

Unconfirmed minutes

It was resolved that the Board:

note the current midwifery workforce position

note the key updates to the Midwifery Action Plan.

(Moved Muriel Hancock; seconded Karen Naylor)

The Operations Executive, Te Uru Pā Harakeke, Healthy Women, Children and Youth left the meeting.

6.2. **Nursing Workforce Update**

The Executive Director of Nursing and Midwifery presented this report, which was taken as read.

The Deputy Board Chair acknowledged that Bonnie Matehaere, Nurse Educator Māori had received the Te Runanga o Aotearoa Service Award for her outstanding service to nursing.

In response to questions about 'shifts below target', the Executive Director of Nursing and Midwifery explained that not every shift 'below target' was an 'unsafe shift'. A number of metrics are used, including the Variance Response Management (VRM) system. The Integrated Operations Centre and the Duty Nurse Manager worked closely with the nursing team in each clinical area to review staffing levels and put mitigations in place to ensure safe staffing. Staff are encouraged to submit a RiskMan report if they feel unsafe on a particular shift. Future reports to the Board would include a summary of mitigations for shifts 'below target' and the VRM response.

It was resolved that the Board:

note the nursing workforce report.

(Moved Lew Findlay; seconded Karen Naylor)

The General Manager, Quality and Innovation joined the meeting.

6.3. **Payments to Consumer Council Members**

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

It was resolved that the Board:

note the Cabinet Fees Framework requirements for payments to members of MidCentral District Health Board (MDHB's) Consumer and Clinical Council.

(Moved Oriana Paewai; seconded Karen Naylor)

The General Manager, Quality and Innovation left the meeting.

6.4. Board’s Work Programme

The report was taken as read.

A Board member asked what format would be used for the annual Board evaluation, which was on the work plan for November. It was agreed that the Board Chair would advise Board members of the process.

The triennial review of the Memorandum of Understanding between MDHB and Manawhenua Hauora was due to be completed in September 2021. Manawhenua Hauora had agreed this was not necessary, given the transition to Health New Zealand next year.

It was resolved that the Board:

*note the Board’s annual work programme.
(Moved Oriana Paewai; seconded Muriel Hancock)*

7. GLOSSARY OF TERMS

8. LATE ITEMS

No discussion.

9. DATE OF NEXT MEETING

Tuesday, 9 November 2021 – Board Room, MidCentral District Health Board, Gate 2 Heretaunga Street, Palmerston North.

10. 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 Board meeting | For reasons set out in the agenda of 17 August 2021 | |
| Combined Medical Staff and Executive Action Plan | To maintain effective conduct of public affairs through free and frank expression of opinions | 9(2)(g)(i) |

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| MDHB 2020/21 Draft Annual Report and Financial Statements | To maintain the effective conduct of public affairs through free and frank expression of opinions by or between or to Ministers of the Crown or members of an organisation or officers and employees of any public service agency or organisation in the course of their duty | 9(2)(g)(i) |
| Enable NZ 2020/21 Draft Annual Report | To maintain the effective conduct of public affairs through free and frank expression of opinions by or between or to Ministers of the Crown or members of an organisation or officers and employees of any public service agency or organisation in the course of their duty | 9(2)(g)(i) |
| Budget and Annual Plan 2021/22 Update | To maintain the effective conduct of public affairs through free and frank expression of opinions by or between or to Ministers of the Crown or members of an organisation or officers and employees of any public service agency or organisation in the course of their duty | 9(2)(g)(i) |
| Insurance Update 2021/22 Financial Year | To protect negotiations, including commercial and industrial | 9(2)(j) |
| Medical Air System Replacement and Upgrade | To protect negotiations, including commercial and industrial | 9(2)(j) |
| e-Referrals and e-Triage Business Case | To protect negotiations, including commercial and industrial | 9(2)(j) |
| e-Transcription and e-Communications Business Case | To protect negotiations, including commercial and industrial | 9(2)(j) |
| Ownership and Governance of Enable NZ | 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) |
| Board only time | No decision sought | |
| 'In Committee' minutes of the previous HDAC meeting | For reasons set out in the agenda of the 14 September 2021 meeting held with the public present | |
| Serious Adverse Events (SAC 1) Report | To protect patient privacy | 9(2)(a) |
| 'In Committee' minutes of the previous FRAC meeting | For reasons set out in the agenda of the meeting held on 7 September 2021 | |

(Moved Vaughan Dennison; seconded Muriel Hancock)

Part One of the meeting closed at 10.30am

Unconfirmed minutes

BOARD MINUTES

Confirmed this 9th day of November 2021

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Board Chair

Unconfirmed minutes