

Counties Manukau District Health Board

Minutes

of the meeting of the members of the Counties Manukau District Health Board held on Wednesday, 5 July 2006 at 1pm at the CMDHB Board Room, 19 Lambie Drive, Manukau City

Present: Mr Pat Snedden (Chair), Ms Miria Andrews, Mr Don Barker, , Mr Paul Cressey, Ms Jillian Dooley, Ms Airini Tukerangi, Mr Ross Keenan, Mr Bill Mudgway, Mr Bob Wichman, Anae Arthur Anae

Apologies: Mr David Collings, Mr Chris Mules

In attendance: Mr Stephen McKernan, Mr Ron Dunham, Mr Ron Pearson, Mrs Anna-Maree Harris

1. Welcome and apologies

The Chair welcomed members of the Board and representatives from the media to the meeting which opened at 1.00pm. The Chair noted the apologies from David Collings and Chris Mules. Arthur Anae opened the meeting with a prayer.

2. Ratification of previous minutes (7 June 2006)

Resolution:

The minutes of the Board meeting held on Wednesday 7 June 2006, having been circulated, were taken as read and confirmed with an amendment to the DiSAC Manawhenua reps noted and corrected.

Moved Ross Keenan **Seconded** Bob Wichman **Carried** Unanimously

3. Matters arising

There were no matters arising.

4. Presentation

Reflections and the challenges ahead - Stephen McKernan

This was Mr McKernan's last Board meeting and he took the opportunity to present some thoughts on CMDHB and some considerations for sector for the future.

§ CMDHB operates a performance improvement culture through its capture of data and use of management information. The focus on across organisation and service performance and action features strongly, along with a strong clinical governance. There has been a focus on ensuring staff have an understanding of the strategic direction, especially in the provider arm which has traditionally been less involved with strategic planning.

§ Service delivery has a team focussed approach and community feel.

§ Some of the highlights include:

- § Attracting, retaining and valuing staff – average turnover rate reduced from 16% to 10% pa
- § Reducing inequalities – Maori and Pacific health development
- § Elective surgery – performance against ESPIs. From 30 June 06 CMDHB is the first DHB to get approval on all ESPIs. This is an excellent achievement.
- § Chronic care management – sector recognition & improved health outcomes
- § Mental Health – improved access and innovative delivery methods are having a genuine impact
- § Primary care development
- § POAC & other acute demand initiatives
- § Reducing overhead expenditure

- § Intersectoral collaboration
- § Issues of long term focus include:
 - § Financial sustainability model
 - § Workforce planning initiatives
 - § Clinical Services Planning – 20 year view
 - § Local facility planning
 - § Regional service planning to ensure only one tertiary service at any one time
- § Focus for the sector includes:
 - § Increasing public expectation
 - § Competing demands and resource allocation – Population Based Funding, Future Funding Path
 - § Workforce development
 - § Preventing & managing chronic conditions
 - § Continuing implementation of the Primary Health Care Strategy
 - § Focussing on the “opportunity” rather than the “churn”
 - § The productivity debate

Mr McKernan noted that from here there is a need to challenge the way the sector is working, to continue to maintain a sense of urgency to deliver on our most important priorities and maximise opportunities for collaborative planning. The sector will also need to maintain the focus on reducing inequalities.

There was discussion around Ministry reporting requirements. The CEO noted that it was important to firstly agree the targets for example the selection of 20 system-wide indicators to be agreed and aligned with Boards and Chief Executives.

The Chair and Board members expressed their thanks and best wishes to Mr McKernan as he embarks on his new role as Director-General of Health.

5. Procedural issues

Committee memberships

CPHAC

Resolution

The Board:

Approved Elizabeth Farrell, Team Leader Public Health Nursing; and noted that Elizabeth Farrell is supported by the Primary Health Organisation Group (GPHO), and by the Primary Care Nursing Reference Group.

Moved Paul Cressey

Seconded Bill Mudgway

Carried Unanimously

DiSAC

The Board:

Approved the terms of reference for DiSAC which have been updated to exclude the responsibility of Health of Older People’s services in addition to any other amendments agreed by DiSAC at its recent meeting (refer updated terms of reference attached).

Noted the DiSAC Terms of Reference have not been reviewed or updated since October 2003, even though the Board had agreed to transfer the responsibility for Health of Older People’s services from DiSAC to the Community & Public Health Advisory Committee, after the devolution of these services from the Ministry of Health.

Moved Jillian Dooley

Seconded Bob Wichman

Carried Unanimously

PHAC

The Board:

Approved the extension of the term of Mrs Malia Hamani PHAC member to CPHAC to May 2007

Approved the extension of the term of Mr Nuku Rapana to HAC to May 2007

Moved Arthur Anae **Seconded** Don Barker **Carried** Unanimously

6. Chair's Report

The Chair advised that he was recently elected to the DHBNZ Chairs Executive, with Michael Ludbrooke appointed as Chair of this Group.

CEO recruitment is being managed by Right Consultants and Egi Global have been selected as the search agency. The chairs of the committees along with Dr Ian Brown (previous CMO at CMDHB) and Yvonne Kaepelli will be involved with shortlisting of candidates. Dr Brown and Ms Kaepelli will provide a clinical view to the process but will not be engaged in the voting process.

The Boardworks Board self assessment process is underway.

7. Chief Executive's Report

Key issues:

- Washup with the other DHBs is a priority and there was discussion around how to gauge the risk via timely information. Mr Keenan reported that this is also an issue for the other DHBs.
- Some valuable lessons were learnt during the RMO strike and some will be incorporated into daily routines
- ACC advised management that they will be moving from an historic bulk funding arrangement to an individual and actual basis. This requires DHBs to ensure they are capturing data on accident victims and the cost of their care correctly. Mr McKernan advised that CMDHB has the appropriate systems in place to ensure the risk is minimised.
- The fees rollout for the 45-64 age group has been agreed meaning a reduction of approximately \$27 per visit at interim practices.
- The DAP has been approved and distributed to the Minister for formal sign off. The SOI is already approved and signed off.
- Mr McKernan thanked Board members for their support during his four years at CMDHB, noting that it has been the most enjoyable experience of his working life. He leaves CMDHB on 28 July to commence as Director-General of Health on 31 July. Mr Ron Dunham, ex Bay of Plenty DHB CEO will be Acting CEO until an appointment is made.

Correspondence

Capital Charge exemption letter for donated assets – MoH

Mr Pearson noted that there will be a recalculation on capital charges for assets donated since 1 July 2005.

Meningococcal Vaccine Strategy thank you - MoH

Dr Jane O'Hallahan, Director, Meningococcal Vaccine Strategy recorded the Ministry's gratitude to the Board for the DHB's support during the immunisation programme.

DHB CFA 2005-06 Third Quarter Report – MoH

This letter from Anthony Hill, Deputy Director-General was tabled noting the Ministry's final assessment of the DHB for the third quarter. Overall CMDHB achieved predominantly A ratings.

Resolution

The Board received the report and correspondence.

Moved Pat Snedden

Seconded Ross Keenan

Carried Unanimously

Miria Andrews left the meeting

Mental Health and Addictions Action Plan – Mr Phil Grady, Programme Manager and Dr Sue Hallwright, General Manager Mental Health Development

Mr Grady and Dr Hallwright outlined the Mental Health and Addictions Action Plan 2006 – 2010 for CMDHB. The Blueprint funding received by CMDHB (15% of the national total) has enabled

the DHB to be virtually at national equity. Following the Government's commitment to a further two years of funding, the Mental Health and Addictions Plan signals a move from short-term to medium-term planning.

Its focus is on services reflecting our population's demographics and the provision of services 'at the top of the cliff' leading to a reduced need for residential/inpatient services and increased services in homes.

Key points:

- The focus of the Plan is an increased focus on peer support and peer-led services, services and support for community living, community and home/based alternatives to inpatient services. It will also include an increased focus on Maori, young people and aging services, along with early intervention.
- A reduction in the need for inpatient services, crisis services and respite care.
- Emphasis on collaboration between mental health and addictions services, child and young person's services, primary care, and other agencies.
- Expenditure aligns with: blueprint benchmarks, 50% access to kaupapa Maori services, Pacific people's services and continued use of planned underspend on service development.
- Dr Hallwright confirmed the need to increase the Maori workforce and this will be managed through initiatives using the planned underspend.

Resolution

The Board approved the Mental Health and Addictions Action Plan.

Moved Paul Cressey **Seconded** Airini Tukerangi **Carried** Unanimously

Planning and Funding

The report was noted.

Key issues:

- The Let's Beat Diabetes Social Marketing Strategy has been endorsed by Pou, PHAC and CPHAC. An advertising agency will develop creative concepts and resources, with Lauren Young and Associates supporting the positive profiling element of the programme.
- The Minister announced the availability of \$100m for capital and infrastructure support to 're-establish a seamless child and adolescent oral health service'. The Board and Committees remain concerned with oral health services and requested the Chief Planning and Funding Officer provide the report and actions as previously requested.

Resolution

The Board received the report.

Moved Jillian Dooley **Seconded** Arthur Anae **Carried** Unanimously

Financial Performance

The report was noted.

Key issues:

- As the year end approaches Mr Pearson reminded Board members that we are now able to carry forward underspend, unlike in previous years. The spend on priority initiatives will therefore be \$8m consisting of \$3m 'below the line' from previous year's surplus, plus \$5m from the current year's budget.
- Provider arm volumes are in excess of budget
- Pharmaceuticals are overbudget but remain in line with the forecast.
- The Regional Audit Manager is now in place
- There was discussion around holding volumes and increasing costs. The Chief Executive noted that extraordinary costs such as the pay jolt sometimes occur and that it is necessary to look at core surgical or core medical costs in any given year.

Resolution

The Board received the Financial Performance report

Moved Airini Tukerangi **Seconded** Don Barker **Carried** Unanimously

CHFA banking facility

Resolution

The Board accepted the changes to the signing authority on the CHFA loans effective immediately. From 5 July 2007 any two of the following people named are authorised to give any notice, sign any draw-down agreements and take any other action in relation to the agreement:

Patrick Snedden	Chairman
Ron Dunham	Acting Chief Executive
Ron Pearson	General Manager Finance & Commercial
Peter Tod	Group Financial Controller

Robert Paine and Anthony Hickmott are removed from signing authority on CM001 and replaced with Patrick Snedden and Peter Tod.

Stephen McKernan is removed from the signatory list on CM001 and CM002 and replaced with Ron Dunham.

Moved Ross Keenan	Seconded Arthur Anae	Carried Pat Snedden abstained from voting
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9. Community and Public Health Advisory Committee

Key issues:

- Mr Don Matheson, Deputy Director-General spoke to the last CPHAC meeting, complimenting the LBD work and discussed engagement between LBD and public planning.
- CPHAC are awaiting the KPIs and evaluation plan on the LBD Operational Plan and sign off is subject to such approval.

10. Disability Support Advisory Committee

Key issues:

- Presentation from the PATHS project team
- The co-ordinator job description is under development

12. Pacific Health Advisory Committee

The Committee requested information on the Sustainability Conference to assist with speaker confirmation.

13. Pou

- Pou endorsed the Maori Health, Pacific Health, Let's Beat Diabetes Social Marketing and Mental Health & Addictions Plans.
- Pou's inaugural meeting with PHAC took place. This was a positive meeting and is likely to become a regular quarterly occurrence.
- Procure presented to Pou, predominantly on SIA expenditure. It was suggested that the Procure Board meet with the CMDHB Board.

14. Finance & Audit

Next meeting is on 6 September.

15. Project Excel Towards 20.20

Key issues:

- Successful Burn Centre opening
- Fourth and fifth floors are being fitted out
- A presentation on the major project for tunnels and corridors will be made to the next Board meeting
- Projects are progressing on time and on budget.

16. Achievement Register

Noted the addition of ESPI achievement, DAP sign off and sign off on the Mental Health & Addictions Plan.

17. General Business

The Board Secretary is to update the Actions Summary to reflect current actions achieved and those still outstanding.

Arthur Anae left the meeting

Moved by Airini Tokerangi/Bob Wichman that the public and media be excluded from the Chief Executive's Report, Culverden Update, Risk Register, Regional Co-operation update (OIA s 9(2)(i), Standing orders Schedule 2 cl 2(g)) to enable the carrying out of commercial activities. The motion was carried unanimously.

The Board took a 10 minute break at 2.45pm.

The meeting was reopened to the public at 3.15pm.

The meeting closed at 3.15pm.

The next meeting of the Board will be Wednesday 2 August 2006 at Lambie Drive.

Signed as a true and correct record on 2 August 2006

Chair Mr Pat Snedden, Chairman

The minutes of the meeting of the Counties Manukau District Health Board of 5 July 2006 are approved.

Recommendation (moved Arthur Anae/seconded Ross Keenan)