

**Minutes of the Meeting of the Hospital Advisory Committee
held in the Board Room, 19 Lambie Drive, Manukau
on Wednesday 3rd September 2003 at 2.00pm**

Present: Mr Lindsay Smith (Chair), Mrs Jo Cameron, Ms Maxine Moana-Tuwhangai, Dr Charles Small, Dr Juliet Walker Mr Bob Wichman

In attendance: Dr Ian Brown, Ms Dale Oliff, Mr Chris Fleming, Mr Tony Hickmott, Ms Elisabeth Harding (Board Secretary)

Apologies: Ms Ailua Fatialofa, Mr Ross Keenan, Ms Pare Rauwhero, Mr Paul Cressey, Mr Ron Pearson

1. Welcome

The Chair welcomed Committee members. No members of the public were present.

2. Apologies

Apologies were received from Ms Ailua Fatialofa, Mr Ross Keenan, Ms Pare Rauwhero, Mr Paul Cressey and Mr Ron Pearson.

3. Minutes of Previous Meeting

The minutes of the meeting held on 6th August 2003 were confirmed.

Moved: Mr Bob Wichman, **Seconded** Ms Jo Cameron, **Carried** unanimously

4. Matters Arising

There were no matters arising.

5. Procedural Issues

There were no procedural matters.

8. Operational report

8.1 GMs' Report

The paper was taken as read. Issues arising:

- Overall the month was reasonably positive.
- The closure of theatres for upgrading has led to a reduction in the ACC elective surgery volumes. It is expected that these volumes will be picked up later this year.
- Cardiology outpatients: Background information has been provided to Board members. This issue indicated a systems failure of internal processes and auditing regarding the planned appointment processes. A letter has been sent to all patients involved and GPs. A clinical review has indicated that there is no direct link between the systems failure and adverse patient outcomes. A systems audit is currently being undertaken. Additional cardiology outpatient sessions will be held to allow these patients to be seen. Other services have also been reviewed and it has been ascertained that a similar problem has not occurred elsewhere. It was noted that this failure was found as a result of internal audit and not as a consequence of a patient complaint.
- Residential accommodation: Mr Bernard Te Paa, GM Maori Health joined the meeting at 2.15 pm to update Members on the accommodation provided at Te Whare Rapu Ora. This matter had been discussed earlier in the day at the MHAC. The provision of this accommodation, although outside the organisation policy, was driven by the need to provide some accommodation for supporting people during an acute inpatient (less than seven days). The facility was not culturally specific and generally was used by those from outside the Auckland metro region. MHAC has requested a business case for the Board regarding the upgrade of the facility. Dr Juliet Walker requested that this also be developed in conjunction with PHAC. It was noted that where people qualified under the accommodation policy, funding could be applied to the facility if people preferred to stay at Te Whare Rapu Ora rather than a motel. Mr Te Paa left the meeting at 2.30pm.
- Elective Service Project: this is a pilot project to test the electronic referral tool from primary to secondary care. Further information was requested about the provider selection. If the pilot is successful it is anticipated that it will be rolled out.
- Burns: this has been referred to the Chief Executive to try to resolve the outstanding matters.

- Women's health: the increased share of LMC services was noted.
- Mental Health: Further clarification was requested regarding the mental health under spend and the delays in the intensive secure rehabilitation beds. Further information was also requested about the provision of mental health services to children.
- Disability Support services: further information was sought about DSS subcontracted respite volumes for older people (refer item 8, page 8).

7.2 Financial performance

Key issues:

- Overall services are on target for the month.
- FTE volumes are close to budget.
- Volumes are up 2% on the same period for last year, births are 9% greater and renal dialysis 12% greater than the same period last year.
- Further work is being undertaken in the region regarding issues relating to funding for non-resident antenatal and birth care.

7.4 Clinical/Quality Report

Congratulations were given to the Infection Control team on the work they were doing to bring down the infection rate.

Key issues (Dr Ian Brown):

- Pulmonary haemorrhage (Otago): All evidence indicates that this is a by chance cluster. The DHBs have been asked by the Ministry to look retrospectively at patient deaths. To date no pattern is emerging. It was noted that there had not been an increase in the number of people arriving at ED as a result of the publicity.
- Clinical indicators: Progress is being made on the cross services issues but there were still concerns such as vascular access for renal patients.
- Readmission to Tiaho Mai: further information requested.
- The high level of medical discharges was noted (page 64) and further information sought.
- Women's health data: historically there have been problems with compiling this data. These issues are currently being considered. Women hold their patient notes throughout their pregnancy until 6 weeks post delivery.

Ms Dale Oliff provided an overview of nursing initiatives.

- Rural nursing: a framework is being developed in conjunction with the Ministry and Nursing Council to develop a framework for nurses working in rural areas with sole GP practitioners.
- Nurse of the Future: This initiative is being developed in conjunction with Manukau Institute of Technology. The object is to increase the training experience for second and third year student nurses in the wards, outpatients and primary care. CMDHB will be the first in NZ to progress down this path. The starting point will be the development of the curriculum, which will be developed with consumer input. CMDHB will be involved in the student selection process. The Committee endorsed the practical nature of this approach.
- An update was provided about the role of enrolled nurses. A pragmatic approach was being taken with the focus being on supporting enrolled nurses in the acute care setting. Other considerations include looking at bridging programmes, scope of practice and support and education. Enrolled nurses were being advised of the process.

7.4 Health Alliance

No update was provided.

7.5 Strategic issues

- **Parking:**
 - Meetings with the Unions are ongoing to try and reach a resolution, with a further meeting planned 4 September.
 - The car parking company has provided a revised and improved layout.
 - Progress is slow but steady.
 - There is confidence that this matter will be resolved by the end of September.

- **Creche:**
 - There has been full resolution of all the issues subject to approval of the draft agreement. The subcontractor is due to start work 15th September .
 - CMDHB will own the infrastructure and building, with the crèche having a lease arrangement to use the facility. The Ministry of Education has provided most of the funding for the improvements. It was noted that this was the relocation of the existing crèche rather than a new crèche.
 - There were some concerns about the staff no longer having access to the pool and gym facilities. Further information was requested about services for staff.

6. Terms of reference

The Board is looking at the interface between the different advisory committees. Priority areas for HAC include:

- Mental Health Services (provided by CMDHB)
- Acute demand management (in conjunction with CPHAC)
- Elective surgery
- Metro Auckland issues (Health Alliance)
- Provider arm cost containment
- Quality
- Facilities development
- Workforce development

It was also considered that HAC had a role in considering revenue opportunities for the provider arm to satisfy the needs of the community at the best possible price. HAC also had a responsibility to ensure adequate funding in the provider arm, highlighting areas of under funding, while recognising the potential impact that primary health funding had on the demand for secondary services.

A work plan for HAC will be developed for the next twelve months.

The Committee resolved (moved Mr Bob Wichman/seconded Dr Charles Small) that the public and media be excluded from the items on radiology capital expenditure, industrial relations, private surgery and the risk register (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 meeting was reopened to the public at 4.25 pm. No members of the public were present.

8. General Business

There was no general business.

9. Next Meeting

Note the next meeting which was scheduled to be held Wednesday 1st October will now be held 8th October 2003 at 2.00pm at Lambie Drive.

The meeting closed at 4.30pm.

Signed as a true and correct record on the day of2003.

Chair:
Mr Lindsay Smith

Recommendation (moved/ seconded)

The minutes of the meeting of Counties Manukau District Health Board Hospital Advisory Committee of 3rd September 2003 are approved.