

Counties Manukau District Health Board Hospital Advisory Committee

Minutes

of the meeting of the members of the Counties Manukau District Health Board Hospital Advisory Committee held on Tuesday, 22nd August 2006 at 9.00am at Middlemore Hospital, Meeting Room 2 & 3, Staff Centre

Present: Ms Airini Tokerangi (Chair), Mr Donald Barker, Mr Bob Wichman, Mrs Miria Andrews, Mr Paul Cressey, Mr David Collings, Mr Nuku Rapana

In attendance: Mr Ron Dunham, Mr Tony Hickmott, Mr Chris Fleming, Mrs Pauline Hanna, Mrs Dale Oliff, Mrs Christine Lockhart (Secretary)

Apologies: Mr Pat Snedden, Mr Arthur Anae, Mr Ron Pearson, Mr Bob Clark, Mrs Jo Cameron, Dr Don Mackie, Mr David Collings (lateness), Mr Nuku Rapana (lateness)

1. Welcome

The Chair welcomed all and present members including a welcome to Ron Dunham, Acting Chief Executive. Miria Andrews offered the karakia. The Chair acknowledged the passing of Te Arikinui Dame Te Atairangikaahu and condolences to the Whanau. There were two members of the public in attendance.

2. Apologies

Apologies were received from Mr Pat Snedden, Mr Arthur Anae, Mr Ron Pearson, Mr Bob Clark, Mrs Jo Cameron, Dr Don Mackie. Mr David Collings and Nuku Rapana for lateness.

Moved: Don Barker, **Seconded:** Nuku Rapana, **Carried:** Unanimously

3. Minutes of Previous Meeting

The minutes of the meeting held on 25th July were confirmed.

Moved: Don Barker, **Seconded:** Nuku Rapana, **Carried:** Unanimously

4. Matters Arising

- Dale Oliff advised a meeting was held with Peter Coolbear, Acting CEO, Manukau Institute Technology, Debbie Penlington, HOD Nursing, Ron Pearson, Ron Dunham and Dale Oliff to discuss the short term and long term planning for a campus on site at Middlemore Hospital. The outcome of the meeting was very positive and moving forward with all parties working together to build a Business Case, which will be presented to the main Board.

Action: Dale Oliff to keep HAC updated.

Action: Adnan Ali to present the ECLAOP presentation to the September HAC meeting.

- Chris Fleming to meet with Lauren Young and the Elective Services Steering Group to discuss how to communicate to the public the success of green ESPI's.
- Chris Fleming noted he has not received any feedback for the HAC on the "A Guide to Elective Surgery at Public Hospitals" pamphlet.
- Paul Cressey commented the need to be careful on communication and working of the pamphlet.

Action: Pauline Hanna to provide the IDF volume report to the September HAC meeting.

The Matters Arising be accepted.

Moved: Paul Cressey, **Seconded:** Bob Wichman, **Carried:** Unanimously

5. Procedural Issues

- Eru Thompson and Jo Cameron's membership is in front of POU at the present time.

Recommendation:

The Hospital Advisory Committee recommendation;

- To extend Eru Thompson and Jo Cameron membership to the Hospital Advisory Committee for 2 months.

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

6. Board Advisory Committee Verbal updates

Members provided Advisory Committee updates.

CPHAC: Paul Cressey provided an update.

Key Points:

- NASC Waiting List
- Health of Older People Action Plan
- Dental Health for young people

PHAC: Arthur Anae provided an update.

Key Points:

- Let's Beat Diabetes
- Dialysis Policy access of choice

DISAC: Miria Andrews provided an update.

Key Point:

- Regional meeting of 3 DHBs
- Disability Coordinator role in selection process
- Presentation on Access of New Buildings for Disability to be presented

POU: Miria Andrews provided an update:

Key Points:

- Southern Cross presentation postponed for PHAC and POU combined meeting

7. Open Committee Reports

7.1 GMs' Report

The report was taken as read and noted.

Key Points:

Kidz First/Womens Health

- Chris Fleming noted there are 2 National Strategy discussion documents Nursing and Midwifery workforce. The purpose of these discussion papers is to identify the action priorities for nursing and midwifery workforce. The paper's explore the population and service drivers influencing nursing and midwifery workforce development, provides a snapshot of the current nursing and midwifery workforce and identifies issues.
- Chris Fleming noted there is continued activity regarding the new women's prison with provisional support in place and establishment of processes to manage activity is well underway.

Surgical and Ambulatory Care

- **Elective Surgical Results** – Chris Fleming advised the results for the month of July were disappointing and the explanation of this are in two services.
 - Orthopaedics was simply a consequence of the number of SMOs on leave during the month. Steps have been put into place to ensure that the numbers of SMOs off at any one time are managed.
 - General Surgery concern is over the past 2 years progressively has seen a reduction in elective activity and an increase in acute activity. There has been a change in the way in which Cholecystotomies are being acutely. Clinical opinion is that our current practice is in the best interest of patients this has had the effect of moving WIES from elective into acutes. Chris Fleming advised if the outcomes can be validated and they are aligned with Health Round Table Best Practice we then believe the elective contract should be reduced and the acute contract increased to reflect the changed practice.

General Comment

The Hospital Advisory Committee noted their major concern that the volume catch-up cannot fall short. The message was reiterated from Hospital Advisory Committee to explore every opportunity, dig deep for solutions, and contemplate weekend activity.

Action: Chris Fleming to provide a robust action plan/report to include a strategy to the main Board meeting in October.

Medicine/Acute Care/Clinical Support Division

- The initiatives that are being undertaken in an attempt to minimise the impact of acute growth include;
 - Chronic Care Management – there has been a steady increase in patients accessing the CCM programme.
 - Primary Options Acute Care – referrals to POAC exceeded budget volumes by 156% in July with 88% of referrals being successfully managed in the community.
 - Medicine Acute Care Team have put additional SMO resources at the front of the hospital to assist in the early decision making in the acute admitting process and discharging back to primary care where appropriate.

The General Manager's Report was accepted

Moved: Paul Cressey, **Seconded:** Bob Wichman, **Carried:** Unanimously

7.3 Clinical/Quality Report

The report was taken as read and noted. Dale Oliff gave a summary of the Clinical/Quality Report.

- Counties Manukau DHB has been awarded three years Certification Status by the Ministry of Health. Informed by the Quality Health New Zealand that Counties Manukau DHB will receive the Accreditation report on Friday 25th August.
- The Hospital Advisory Committee suggested a letter from the Chair congratulating staff and published in the Connect Newsletter.

Action: Emma Bale to present the formal report to the September HAC meeting.

Action: Airini Tukurangi (Chair) to write a letter and forward to Lauren Young to be included in the Connect Newsletter.

The Clinical/Quality Report accepted.

Moved: Bob Wichman, **Seconded:** Miria Andrews, **Carried:** Unanimously

Justine Patterson arrived 10.15am

9. Presentations

Renal Replacement Therapy Policy

Justine Patterson provided a brief update on the Renal Replacement Therapy Policy.

- Counties Manukau DHB dialyses 25% of all patients receiving dialysis in New Zealand although we have approximately 10% of the NZ population.
- Renal Replacement Therapy (RRT) can be delivered in a variety of ways;
 - § Modalities of care – haemodialysis (HD)
 - § Peritoneal dialysis (PD)
 - § Transplantation
 - Transplantation is the preferred method of treatment
 - Haemodialysis – uses a blood filtering machine to clear waste products and excess fluid
 - Peritoneal Dialysis – uses the body's peritoneal lining of the abdomen to clear waste products

MOU with Cook Islands

Margie Fepulea'i provided a brief update on the MOU with Cook Islands.

- Regional Pacific Health Work responsibilities are;
 - MOU with Cook Islands since 2002 unfunded, rolled over 2004 and expires June 2006
 - Tripartite agreement between Niue government, NZAID and CMDHB since November 2005 of \$300,000 funding
 - Contract yet to be agreed with NZAID for Tonga and funded by NZAID
 - Samoa on hold at present
- CMDHB is committed to improving health of Pacific people within its geographical region

7. Open Committee Reports continued...

7.2 Financial Performance

The paper was taken as read and noted. Tony Hickmott summarised the financial performance.

Key Points:

- Despite the early start to winter July's result for the Provider Arm was a surplus of \$1,195 million for the month, a \$417k favourable variance against budget.
- The 2006/07 Contract Volumes as yet have not been finalised (IDFs).
- Personnel Costs under Key Financial Ratios and Analysis being investigated as there has been some movement.

7.4 healthAlliance Report

The report was taken as read and noted.

The Committee resolved (moved Bob Wichman/seconded Don Barker) that the public and media be excluded from the item on Radiology Review – Radiology Activity, Industrial Relations, FMP 2 Management Group Project Status Summary Report, Risk Register (OPIA s 9(2)(i), Standing orders Schedule 2 cl 2(g) to enable the carrying out of commercial activities. The motion was carried unanimously.

9. General Business

No General Business

Nuku Rapana closed the meeting with karakia. Meeting closed at 12.08pm.

10. Next Meeting

To be held Tuesday 26th September 2006 at 9.00am, Meeting Rooms 2 & 3, Level 2, Staff Centre, Middlemore Hospital.

Signed as a true and correct record on the 26th day of September 2006.

Chair: **Airini Tukerangi (Chair)**

Recommendation (moved **Bob Wichman/** seconded **Don Barker**)

The minutes of the meeting of Counties Manukau District Health Board Hospital Advisory Committee of 22nd August 2006 are approved.