

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, 26th September 2006 at 9.00am at Middlemore Hospital, Meeting Room 2 & 3, Staff Centre

- Present:** Ms Airini Tukerangi (Chair), Mr Arthur Anae Mr Donald Barker, Mr Bob Wichman, Mrs Miria Andrews, Mr Paul Cressey, Mr David Collings
- In attendance:** Mr Ron Dunham, Mr Don Mackie, Mr Tony Hickmott, Mr Chris Fleming, Mrs Pauline Hanna, Mrs Dale Oliff, Mrs Christine Lockhart (Secretary)
- Apologies:** Mr Pat Snedden, Mr Ron Pearson, Mr Bob Clark, Mr Nuku Rapana, Mr David Collings (lateness), Dale Oliff (lateness)
-

1. Welcome

The Chair welcomed all and present members. There were no public in attendance. Arthur Anae offered the karakia.

2. Apologies

Apologies were received from Mr Pat Snedden, Mr Nuku Rapana, Mr Ron Pearson, Mr Bob Clark. Mr David Collings and Dale Oliff for lateness.

Moved: Arthur Anae, **Seconded:** Miria Andrews, **Carried:** Unanimously

3. Minutes of Previous Meeting

The minutes of the meeting held on 22nd August were confirmed.

Moved: Bob Wichman, **Seconded:** Don Barker, **Carried:** Unanimously

4. Matters Arising

- ECLAOP presentation deferred.
- Airini Tukerangi in the process of liaising with Lauren Young for the inclusion of the congratulation letter in the Connect Newsletter.

The Matters Arising be accepted.

Moved: Bob Wichman, **Seconded:** Arthur Anae, **Carried:** Unanimously

5. Procedural Issues

5.1 Disclosure of Interest

- Arthur Anae disclosed his interest in Counties Manukau Sports.

6. Board Advisory Committee Verbal updates

Members provided Advisory Committee updates.

POU: Miria Andrews provided an update:

Key Points:

- Southern Cross presentation for PHAC and POU was reasonably received and the design of the hospital was discussed.

- Fit for Purpose presentation by Sharon Shea and Wayne Williams, an analysis on Maori Health Providers looking at building the capacity of Maori Health providers.
- Maori Health Plan Rollout starts 2nd week October of 3 meetings

CPHAC: Paul Cressey provided an update.

Key Points:

- NASC & Age Residential Care Moratorium presentation by Jenni Coles. Endorsed by CPHAC and being presented to the Board Meeting.

7. Open Committee Reports

7.1 GMs' Report

The report was taken as read and noted.

Key Points:

Kidz First/Womens Health

- The July/August winter trend for 2006 shows a flat 2 months rather than the August spike of earlier years across Paediatric Medicine and Emergency Care.
- The implementation of antenatal HIV screening and its impact on an already overloaded maternity workforce. Airini Tukerangi commented that Womens Health needs to be mindful of overloading the workforce. Ron Dunham advised this is a MoH initiative which will be rolled out through the country. Miria Andrews commented that the Maori midwifery workforce is quite significant and how can this be rebuilt?
- Paul Cressey commented on the Sustainability Workshop and that there were fantastic presentation by the schools.

Action: Nettie Knetsch to present on the complete picture around complexity, birthing population, midwifery shortage also what the recruitment strategy a multi prong approach on short and long term is for the November meeting.

Action: Pauline Hanna to provide ethnicity breakdown on birthing population as soon as information is available.

Surgical and Ambulatory Care

- **Elective Surgical Results** – Chris Fleming advised the results marked an improvement compared with the previous month. Total elective output increased from 721 WIES to 961 WIES an increase of 33.4%. Negotiated sub contracts with eternal providers for 200 cataracts with delivery times on or before 31st January 2007. Request for Proposals sent out to several private providers for a number of procedures being those with greatest need.
- Exploring the possibility of extra lists in the evening and on weekends. General Surgery has already expressed an interest in weekend work, but has some concerns about stress related issues in General Surgery. Chris Fleming commented private sector subcontracting would come at a price and would need to be discussed at board level.

David Collings arrived at 9.35am.

- Paul Cressey commented that Orthopaedics is very positive and good to see in the report the thresholds are down. The Minister expects us to deliver on the certainty of providing surgery within 6 months. Well done very positive outlook.
- Chris Fleming presenting the Elective Services presentation to the board on Wednesday 4th October.

Action: Chris Fleming to present the presentation at the next HAC.

Medicine/Acute Care/Clinical Support Division

- August saw the highest patient throughput in Emergency Care recorded for the past 5 years with a total of 7100 patients for the month or 229 per day.
- Angela Pedder (Chief Executive of the Royal Devon and Exeter NHS Foundation Trust) visited CMDHB on 16/17 August. Angela led a number of workshops and discussions within CMDHB and gave a good overview what is happening in UK in particular leading major change initiatives on improving the quality of patient care and reducing delays for patients. It is now planned to identify delays within CMDHB that prevent the right patient, in the right place, getting the right care and at the right time and to make ongoing incremental change by addressing these and is called 'A Better Way'.

General Comments

- Arthur Anae suggested providing a 'magnet' out in the community for patients rather than them coming into the hospital and could the SIA funding be used.
- Paul Cressey commented we need to bite the bullet and provide a GP facility in Emergency Care.
Action: Paul Cressey to bring this up at the next CPHAC meeting.

Recommendation:

The Hospital Advisory Committee recommendation;

- Don Mackie to facilitate a meeting with Tom Bracken, Alan Moffitt, Chris Mules, Dale Oliff, and Brad Healey to discuss having a General Practice in Emergency care.

Pat Frengley arrived 10.00am

7.3 Clinical/Quality Report

Report of the External Auditor of Clinical Standards was taken as read and noted.

- Pat Frengley provided a brief summary of the Clinical Indicators red and orange traffic lights and was satisfied with the explanations provided on the following;
 - ED Triage Seen by Time Category 2 managed to stay above threshold only last 3 quarters.
 - Histology Reports a technical matter. Clinical Directors have taken ownership and driving individuals.
 - Unplanned Re-admissions to ICU have remained above threshold for 2 consecutive quarters. An Analysis is planned.
 - Radiology reporting all categories improving.
 - 60% of the Hospital-Acquired Bloodstream Infections occurring in Renal Services. An initiative underway to reduce these numbers.
 - CAPD Peritonitis Incidence has improving trend and clear strategies.
- **Credentiailling** – Pat Frengley advised the group report for Plastic and Reconstructive Surgery raised concerns at several levels. No assessment of quality and safety issues for patients was included. Pat Frengley noted Hospital Advisory Committee may wish to request such information through the Chief Medical Officer.
- Don Mackie and Chris Fleming advised there is a review of Plastic Service Department by an independent clinician Dr Swee Tan, Hutt Valley DHB and will be looking at time restriction of credentiailling. The Plastic Review will be presented to HAC once finalised.
- **Electronic Discharge Summary** – Pat Frengley raised the errors occurring in the Electronic Discharge Summary and the absence of a High Dependency Unit. Don Mackie advised there is a project team which has clinical and IS representation to address and fix this IT technical issue.

Action: Don Mackie to provide ongoing feedback regarding the Electronic Discharge Summary.

9. Presentations

Accreditation

- Emma Bale provided a brief update on Accreditation and provided the full copy of the Accreditation Continuum to each Hospital Advisory Committee member. The summary of the continuum was not available at the time of the Hospital Advisory Committee meeting and will be distributed to members when it is available. The organisation's services were rated against the Quality Health NZ (QHNZ) standard acute care 2001 v2. The ratings are from 1 to 7; 1 being poor and 7 being excellent achievement. CMDHB has retained the seal of Quality with three years for certification and three years accreditation status.

Action: Emma Bale to distribute the Accreditation Summary to the Hospital Advisory Committee when it is available.

IDF Volumes

Pauline Hanna presented on the IDF volumes and provided a brief update.

- Adult intervention rate 1.14
- Child intervention rate 1.12

Action: Pauline Hanna to provide a quarterly update on volumes to HAC.

General Comments

- Paul Cressey raised the question how does this compare from last year? To incorporate the information into the HAC report. We should be marketing our successes.
- Arthur Anae raised the question what are we doing to get this information out to the public?
- Ron Dunham advised the chair held a meeting with local reporters providing them with CMDHB successes and marketing CMDHB.
- Arthur Anae requested ethnicity breakdown on CMDHB population using Emergency Care.

Action: Link the request of ethnicity breakdown into the meeting being organised by Don Mackie.

Moved: Arthur Anae, **Seconded:** David Collings

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 a very busy month, August's results for the Provider Arm was only a Deficit of \$427k for the month, a \$485k favourable variance against budget and \$902k favourable variance YTD.
- Nursing External Bureau costs for the Hospital Provider Arm was \$202k compared with \$180k for the same period last year, which was mainly used to cover sick leave and vacancies. Nursing Bureau Pre-books for September and October are a concern and are being reviewed currently.
- Payroll issues continue to be a concern. With the new payroll team in place, progress is however being made on reducing the outstanding issues and process improvements strategies.
- Clinical Supplies was unfavourable for the month directly reflecting the increased clinical activity.

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 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

Arthur Anae closed the meeting with karakia. Meeting closed at 11.45am.

10. Next Meeting

To be held Tuesday 24th October 2006 at 9.00am, Meeting Rooms 2 & 3, Level 2, Staff Centre, Middlemore Hospital.

Signed as a true and correct record on the 24th day of October 2006.

Chair: **Airini Tukerangi**

Recommendation (moved **Arthur Anae**/ seconded **Bob Wichman**)

The minutes of the meeting of Counties Manukau District Health Board Hospital Advisory Committee of 26th September 2006 are approved.