

**Minutes of the Board Meeting of the Wairarapa DHB  
Held in the Board Room, WDHB, Blair Street, Masterton,  
Tuesday 22 April 2008, at 9.00am in the Board Room**

Present: Janine Vollebregt (Deputy Chair), Perry Cameron, Vivien Napier, Helen Kjestrup, Fiona Samuel, Yvette Grace, Pamela Jefferies, Doctor Liz Falkner (lateness), Trish Taylor (lateness)

In attendance: David Meates (Chief Executive), Joy Cooper (Director Planning and Funding), Eric Sinclair (Chief Financial Officer), Maree Day (Minute Taker)

**1. Apologies**

Bob Francis (Board Chairman) – apology noted and sustained.  
Stephanie Turner (Director Maori Health) – noted.

Ms Kjestrup and Ms Samuel advised they have some updates for the Interest Register. These changes will be made by the Board Secretary.

Ms Vollebregt (Deputy Chair) chaired this meeting.

**2. Conflicts of Interest**

Nil.

**3. Minutes from the Last Board Meeting Held 25 March 2008**

**Resolved:**

THAT THE MINUTES FROM THE LAST BOARD MEETING HELD 25 MARCH 2008 BE CONFIRMED AS A TRUE AND ACCURATE RECORD.

**Matters Arising:**

- The CFO has not yet received a response from the Masterton District Council in regards to the road alignment of Te Ore Ore and Blair Streets.
- A meeting is to be held on 30<sup>th</sup> April to discuss the Ambulance Contract. An update will be provided at the May meeting.

**4. Chairman's Report**

**Resolved:**

THAT THE CHAIRMAN'S REPORT NUMBERED D839 BE RECEIVED.

**5. CEO's Report**

The CEO spoke to his report.

- SMO and more recently RMO negotiations have caused major distractions in the past month.
- Work continues to finalise the 2008/09 DAP and SOI. Good feedback was received from the Ministry of Health.
- The YTD financial result is \$419K adverse to budget. Some accruals have been released. Up to 224 elective caseweights (\$800 - \$900K) are due to be invoiced. It is recognised that to achieve a breakeven result for the DHB that some balancing between Funder and Provider will be required to recognise the significant increased level of activity in Wairarapa hospital.
- A facilitated Aged Care workshop was held which Martin Taylor attended. This was the first time he had been asked to engage in such a process which went very well. There is a need to look nationally at the entire aged care contract.

- A lot of work is ongoing in terms of cancer service provision. Investigations are underway to look at a local chemotherapy service. Once more details come to hand a decision will be made as to whether this should be pursued further.
- A needle exchange location has been approved. There was a level of frustration around finding a suitable site.
- Theatre utilisation was low due to the statutory Easter holidays which weren't taken out of the equation.
- The weekend Urology blitz was extremely successful, particularly from a quality initiative perspective.
- The Nurses / Midwives MECA has been ratified.
- The DHB is investing heavily in the development of its middle management which was identified as a gap within the cultural survey.
- The DHB website is being upgraded. The new website should be live within the next month.
- The PSA agreement does include medical typists. The DHB is complying with the rules of the PSA MECA however it is noted that the rates of pay in some areas are not attractive. Mrs Jefferies asked that clerical staff salaries be given priority as it is a risk group for the DHB.
- The newly upgraded payroll system includes an employee kiosk component providing management and staff with more detailed reports. The system also allows for more consistent performance review reports to be produced that contain detailed information. By the end of November the entire upgrade should be up and running.
- The Central Region Maori Directorates are embracing all leadership and management developments, and this approach is proving to be a key enabler for regional work activities with all areas leveraging off one another.
- It is understood Counties Manukau DHB is doing some excellent work in terms of recruitment and retention that is aimed at schools and in particular supports and encourages Maori and Pacific Islanders into the health sector. The CEO will check that the regional work is linking in with the national framework.
- Ms Grace referred to Janice Wenn's resignation as Chair of Te Iwi Kainga and noted the Director Maori Health remains comfortable that the timeline for the first draft of the Cultural Competency Framework tool remains on track.
- The CEO advised the GM Hospital Services is accountable for all services through the provider arm, this includes Maori provider services. Ms McLean therefore links with the Maori Directorate (that includes the Maori Health Committee) very regularly. The Maori Health Committee report through to HAC and have made vast improvements in terms of increased service awareness, provider arm policies and procedures, along with cultural changes in how staff deal with individuals. These are just some of the strong components that are now coming through. Mrs Jefferies reported that HAC is taking a specific interest in Maori accessing Hospital services. There has been a reduction of Maori using ED who are now using primary care services more appropriately. The focus of outcomes for Maori continues to increase. The Health Needs Assessment work will provide a clearer picture of where the key focus needs to be going forward. It may be timely to do a customer satisfaction survey on Maori Health services within the provider arm to see what numbers are coming through and what further improvements can be made.
- The Wairarapa DHB has received a year's accreditation from the Nursing Council of NZ for its DHB professional development and recognition programme. It was hoped a longer time frame would be obtained however the drawback was the low up take of nurses to this programme in the last 2 years. A lot of development work is ongoing in terms of Nursing workforce.
- It was asked whether previous staff are given opportunities in terms of new nursing roles particularly as a number of Health Care Assistants and Enrolled Nurses were made redundant when the restructure and move into Wairarapa Hospital occurred. The CEO advised the Nursing Council defines the scope of practice for a Health Care Assistant and Enrolled Nurses. These tasks are then

accredited and must be supervised by a Registered Nurse. There are different drivers and accountabilities that sit within these rules, some of which vary around the country.

- A real positive is the number of students who continue to enrol for the Bachelor of Nursing programme. The commencement of the Nurse Educator will help provide support to student nurses.
- Nurse Practitioner, Nancy Williams must continue to work as a Practice Nurse until her formal registration is processed through the Nursing Council. Ms Grace commented Maori were not been included as part of Mrs Williams' recruitment process. The Board expressed the importance and need for Ms William's profile to continue to be raised and emphasised as the longer she remains out of her Nurse Practitioner role, the more likely she is to loose credibility within the community.
- Biomedical Services NZ Limited continues to secure a number of new contracts. The number of national contracts for rest homes and larger organisations is very encouraging and is a big part of Biomedical's overall strategy and more aggressive Business Plan.
- The Wairarapa DHB decided not to put in a request for proposal for the Health Impact Assessment Support Learning Unit as at this time it has three other pilots to deal with.
- Library / Learning Centre. WBS has asked for a Government Guarantee to enable lending to be secured. Further details on this will follow.

**Resolved:**

THAT THE BOARD RECEIVE THE CHIEF EXECUTIVE'S REPORT NUMBERED D840.

**6. Financial Report**

The CFO spoke to the Financial Report for the period ended 31 March 2008.

- The YTD financial position is \$420,000 adverse to Plan. There is flexibility going forward with some additional funds and accruals coming through.
- The cash position is comfortable as the \$6m has been drawn down, of which \$4.5m has been invested with ASB. Although the Board suggested this money be invested with ANZ at its last meeting, the ASB rate came in more favourable with a term deposit rate of 9.1%, compared to the ANZ rate of 8.99%. The ASB rate is also based on a compounding quarterly interest rate. This brings about an improvement to the Wairarapa DHB's financials of at least \$5,000 per annum. The cash position shown doesn't build in the sale of Masterton Hospital. The CHFA meet tomorrow to consider the request from the WDHB in terms of a scope change to enable the sale funds to be used for the community health facility.
- A letter from the MOH has been received which relates to depreciation funding that is to be repaid as an equity payment. The same kind of payment applied last year when a payment was made. The MOH has requested this year's payment be made before June 2008. Board approval on the repayment of equity in line with MOH funding is required.
- Electricity spend has flattened, although slightly increased with higher use of heating coming through moving into winter. The timing is being sorted to install the buffer tanks, and once installed should bring the costs down.
- Bank CPI rates have been advised at 3.7% whereas FFT levels that DHBs are funded at sit at 2.5% for CPI. With the labour index added in, and taking into account the DHB's funding rate for inflation being lower than the current level, DHB funding levels are too low. This creates added pressure on finding further efficiencies and rising cost pressures, particularly when fuel prices and a number of consumables are increasing.
- The CFO has had discussions with Spotless Service NZ Limited in terms of wage matters for its staff. Following the last Board Meeting the Wairarapa DHB paid just over \$30K to Spotless Services NZ Limited for its workers for the current financial year. However Spotless declined the payment and repaid it back to the DHB. Since then an agreement between both parties has been reached. Spotless Services NZ Limited has made it clear there is a funding gap and has asked DHBs to submit all invoices to them. The Government funded an additional \$10m to go into this settlement. The Wairarapa DHB's contract with Spotless Services NZ Ltd is a 5 + 5 year contract with Spotless

owning all of the kitchen equipment. The agreement that has been reached by the parties will now be worked through.

10.08am - Liz Falkner attended the meeting.

**Resolved:**

THAT THE BOARD:

- (1) RECEIVES THE FINANCIAL REPORT FOR THE PERIOD ENDED MARCH 2008 NUMBERED D841.
- (2) APPROVES THE REPAYMENT OF EQUITY TO THE VALUE OF \$3,320.00 ON 20<sup>TH</sup> JUNE 2008.
- (3) APPROVES AN INVESTMENT OF \$4.5M WITH ASB BANK.

## **7. Committee Reports**

### **CPHAC**

This Committee met on Tuesday 15<sup>th</sup> April 2008.

- The importance of public awareness in terms of the Nurse Practitioners' skills and competences was raised.
- The Kura Clinic has not been operating for a period of time. This matter is to be taken up with the Wairarapa Community PHO.
- The committee felt stronger community communication was needed in terms of the breast examination mobile bus being in Masterton which is at its new site by Whaiora Whanui. In particular, examination rates for Maori and Pacific Islanders need to be improved.
- The needle exchange site has been confirmed and noted by the Committee.
- The IDF position was noted.
- Investigation for a local chemotherapy service in the Wairarapa is underway.
- A presentation was received on the Long Term Conditions Project.
- A coordinator is to be appointed in the Wairarapa to coordinate green prescriptions.

**Resolved:**

THAT THE BOARD RECEIVE THE REPORT OF THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE FOR APRIL 2008.

### **HAC**

The Committee met on Tuesday 15<sup>th</sup> April 2008.

- The provider arm continues to perform well over its contracted performance target.
- A lot of work was undertaken by the GM Hospital Services to ensure the Urology blitz ran so smoothly.
- The MOH required the provider arm to offer its services before they funded the WDHB for its additional, additional electives. There was no serious update on this however the additional funding was still achieved.
- Care Plans are being prepared. This was one action out of four corrective actions that came through the certification report.
- ED admissions are being constantly monitored. The DHB will have a FACEM here from the beginning of July and this person is to be tasked with examining ED attendances in detail. The DHB has a legal obligation to assess everyone that comes into ED and cannot turn people away. Wairarapa Hospital's ED must look at its own practices. Practices in other areas must also be reviewed such as AAU as there are flow on affects from other areas.

- There is a national shortage of midwives. In NZ the current training requirement for RNs to become midwives is three years. An alternative is for RNs to do a 12 month training course in the UK and then come back to work in NZ as a Midwife. There is a disconnect in terms of workforce planning and training developments for nursing. The Wairarapa is not experiencing the same shortages that exist in other parts of the country. When a mother checks in to give birth at Wairarapa Hospital it is recorded whether they were admitted by a Lead Maternity Carer, GP or a Midwife. Detailed papers providing this and other information can be provided to Board members. A lot of lead in time is required in order for major changes to be made by the Midwifery Council.

**Resolved:**

THAT THE BOARD RECEIVE THE REPORT OF THE HOSPITAL ADVISORY COMMITTEE FOR APRIL 2008.

**8. Regional Clinical Services Plan Update**

The Central Region Combined Board Meeting is to be held on 12 May 2008 in Palmerston. 90% of the focus will be on the RCSP. The Draft RCSP, along with two companion documents; the Horizon Scan and the Emergency Future Scan will be sent out to Board members around 7<sup>th</sup> May before the meeting.

The MOH are starting work on the development of a National Clinical Services Plan. Mrs Vollebregt expressed concern that primary care often gets left out. The CEO advised a sense of how strongly primary care comes through will be evident when the Draft Plan is released.

**Resolved.**

THAT THE BOARD NOTE THE APRIL 2008 REGIONAL CLINICAL SERVICES PLAN UPDATE FOR CENTRAL REGION DHB CEOS AND BOARDS AND NOTE THE COMBINED CENTRAL REGION BOARDS MEETING IS TO BE HELD ON 12<sup>TH</sup> MAY 2008.

**9. 2006/07 Financial Review of the Wairarapa DHB**

This summary report was tabled in Parliament.

**Resolved:**

THAT THE BOARD NOTE THE APRIL 2006/07 FINANCIAL REVIEW REPORT OF THE WAIRARAPA DISTRICT HEALTH BOARD.

Meeting closed: 10.35am.

Meeting recommenced: 11.00am

**10. Presentation – Staff Enhancement Programme**

Bruce McGregor (GM Human Resources) and Carol McDonald (Organisational Development Strategist) attended the meeting.

The focus of this work is about encouraging people to behave in creative ways and think differently. It is important that appreciation for creativity is shown. Team collaboration plays a big role in this work.

Ms McDonald is producing a quarterly Patient Journey Newsletter to highlight initiatives that people are undertaking.

A number of accomplishments are recognised through performance appraisals and often staff receive recognition by way of a letter, flowers, acknowledgements at team meetings etc.

Key points to consider in terms of criteria for any staff enhancement programme are as follows:

- Keep it simple.
- Immediate praise and reward.
- Be creative.
- Clear goals / expectations.
- Encourage team results.
- Long term verses short term (long term is more easily forgotten / short term means short term and immediate / spontaneous.
- Not subject to great analytical / decision making processes.
- Determine life span.
- Requires complete and equal management involvement and consistency.

One of the biggest challenges for management is to ensure they are listening. Mrs Jefferies would like to see a DHB wide focused programme that goes from the bottom upwards. She further suggested it recognise cost reduction, increases in revenue, improved innovation and efficiency. A weekly award could be incorporated. Mrs Vollebregt commented leadership can occur with any individual in an office, and doesn't necessarily have to come from a Manager. Board members felt the programme must be about building a culture of appreciation. They also asked that any programme not just focus on the hospital, but be DHB wide.

Mr McGregor advised there are a number of different components the programme must capture and at the same time the sub cultures that exist in the organisation must not be forgotten.

Compliments always get filtered through to the right people.

The GM Human Resources will bring back a report in three months time.

#### **11. Move into Confidential Business at 11.30am**

THAT THE PUBLIC BE EXCLUDED FROM CONFIDENTIAL BUSINESS ITEMS LISTED WITHIN THE BOARD MEETING AGENDA PURSUANT TO THE FOLLOWING:

- TO ENABLE THE BOARD TO DELIBERATE IN PRIVATE ON ITS RECOMMENDATIONS.

#### **12. Report Back from Confidential Business**

The following resolutions were passed in confidential business as follows:

##### **Confidential Minutes from the Meeting Held 25<sup>th</sup> March 2008**

###### **Resolved:**

THAT THE CONFIDENTIAL MINUTES FROM THE LAST BOARD MEETING HELD 25<sup>TH</sup> MARCH 2008 BE CONFIRMED AS A TRUE AND ACCURATE RECORD.

##### **CPHAC Confidential Report**

###### **Resolved:**

THAT THE BOARD RECEIVE THE CONFIDENTIAL REPORT OF THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE FOR APRIL 2008 NUMBERED D846.

##### **Urology Services**

###### **Resolved:**

THAT THE BOARD:

- (1) **APPROVES** THE ESTABLISHMENT OF A UROLOGY SERVICE CONTRACT AT AN ANNUAL VALUE OF \$185,924.00 PLUS GST FOR UP TO 5 YEARS.
- (2) **NOTE** THAT THE WAIRARAPA DHB CONTRACTS THE SERVICES OF UROLOGY ASSOCIATES TO PROVIDE A TOTAL ELECTIVE UROLOGY SERVICE AND THAT KPI'S WILL INCLUDE:

- MAINTAINING ESPI COMPLIANCE WITH AN ADDITIONAL 1% BUFFER ZONE
- MAINTAINING A 1-2 OR LESS RATIO OF FSA'S TO FOLLOW-UPS
- AN AGREED PERCENTAGE REDUCTION IN CYSTOSCOPIES PERFORMED IN OT
- MEETING ALL CONTRACTED AND ADDITIONAL VOLUMES
- AN AGREED NUMBER OF SESSIONS FOR GP'S AND PRESENTATION AT CLINICAL SOCIETY IF REQUIRED
- NEXT DAY OP NOTES AND 3 DAY LETTER TURNAROUND.

### **Audit & Risk Committee Meeting Update**

#### **Resolved:**

THAT THE BOARD:

- (1) NOTE THE UPDATE PROVIDED FROM THE LAST AUDIT & RISK COMMITTEE HELD 4<sup>TH</sup> APRIL 2008.
- (2) APPROVE THE BOARD CHAIRMAN SIGN THE AUDIT ARRANGEMENTS LETTER FOR THE 2007/08 FINANCIAL YEAR ANNUAL AUDIT AND ASK THAT THE LETTER BE SENT.

### **Asset Management and Capital Planning Update**

#### **Resolved:**

THAT THE BOARD:

- (1) RECEIVE THE REPORT ON ASSET MANAGEMENT AND CAPITAL PLANNING UPDATE.
- (2) NOTE THAT FURTHER ANALYSIS WILL BE COMPLETED OVER THE NEXT 2 MONTHS ON THE ASSET INFORMATION AND RELATED FINANCIAL PROJECTIONS.
- (3) NOTE THAT THE FINAL PLANS WILL BE BROUGHT BACK TO THE BOARD IN JULY.
- (4) NOTE THAT A NUMBER OF HIGH RISK ITEMS HAVE BEEN PURCHASED OR ARE ON ORDER AND THAT HIGH RISK ITEMS UNDER REVIEW ARE CAPTURED IN THE CURRENT CAPEX PLAN.

### **Sale of Blair Street Houses**

#### **Resolved:**

THAT THE BOARD:

- (1) RECEIVE THIS REPORT
- (2) APPROVE THE SALE AND DISPOSAL OF THE FOLLOWING BUILDINGS IN LINE WITH THE OFFER RECEIVED:
  - HOUSE AT 13 BLAIR ST
  - FLATS 15/17 BLAIR ST., INCLUDING STAND ALONE GARAGE.
  - FLATS 19/21 BLAIR ST., INCLUDING STAND ALONE GARAGE
  - 12 BEDROOM BLOCK (FLAT) CURRENTLY STORED AT REAR OF OLD CAMPUS
- (3) NOTE THAT THE REMOVAL OF THESE HOUSES WILL MAKE AVAILABLE BARE LAND READY FOR FINAL SITE PREPARATION AND CONSTRUCTION

### **Remedial Issues Update**

#### **Resolved:**

THAT THE BOARD NOTE THE WAIRARAPA HOSPITAL DEVELOPMENT CURRENT PROJECTS AND REMEDIAL ISSUES UPDATE FOR APRIL 2008.

### **ASMS Settlement for a Collective Employment Agreement**

THAT THE BOARD:

- (1) **NOTE** THE ADVICE FORM THE MINISTRY OF HEALTH REGARDING THE FINANCIAL IMPLICATIONS OF THE PROPOSED ASMS SETTLEMENT
- (2) **NOTE** THE TIMELINES FOR RATIFICATION AND SIGNING OF THE AGREEMENT

- (3) **AGREE** TO RATIFY THE PROPOSED MULTI EMPLOYER COLLECTIVE AGREEMENT WITH ASMS DATED 4<sup>TH</sup> FEBRUARY 2008 AND NOTE THE BOARD'S CONCERN IN TERMS OF AFFORDABILITY GOING FORWARD IN THAT THE FUNDING GAP IS \$264K OVER AND ABOVE WHAT IS SHOWN WITHIN THE 2008/09 WAIRARAPA DHB DAP AND NOTE THIS INCREASES TO \$360K FOR THE TERM OF THE MECA AFTER TAKING INTO ACCOUNT THE MINISTRY FUNDING. HENCE THE REASON FOR A LETTER TO BE WRITTEN TO THE MOH.
- (4) **AGREE** THAT THE DHB SHOULD FORMALLY NOTIFY THE MOH OF ITS CONCERNS REGARDING FUNDING AND THAT THE BOARD'S DECISION TO RATIFY THIS AGREEMENT HAS TAKEN INTO ACCOUNT
- A. THE MINISTRY'S UNDERTAKING THAT IT WILL TAKE THIS INTO CONSIDERATION WHEN ADVISING THE MINISTER ON THE FUNDING PACKAGE FOR THE 2009/10 YEAR
  - B. THE NEED FOR THE HEALTH SECTOR TO GET A LONG TERM EMPLOYMENT CONTRACT SETTLED AFTER TWO YEARS OF NEGOTIATIONS.

### **Palliative Care**

THAT THAT BOARD:

1. **NOTE:** THE DHB PUT OUT A REQUEST FOR PROPOSALS FOR PROVISION OF SPECIALIST PALLIATIVE CARE SERVICES IN DECEMBER 2007 AND ONE RESPONSE WAS RECEIVED.
2. **NOTE:** THE SOLE RESPONSE TO THE REQUEST FOR PROPOSALS FOR SPECIALIST PALLIATIVE CARE PROVIDERS WAS WITHDRAWN ON 8 MARCH 2008, AND THIS ENDED THE TENDER PROCESS.
3. **NOTE:** FOLLOWING WITHDRAWAL OF THE SPECIALIST PROVIDER'S PROPOSAL, DHB STAFF REVIEWED THE MODEL AND IDENTIFIED OTHER OPTIONS FOR ENSURING SERVICE COVERAGE.
4. **NOTE:** DHB STAFF IDENTIFIED THAT ALL ELEMENTS OF A COMPREHENSIVE SERVICE COULD BE PROVIDED BY WAIRARAPA BASED SERVICE PROVIDERS EXCEPT FOR SPECIALIST MEDICAL INPUT, AND PROPOSED A WAIRARAPA PALLIATIVE CARE PARTNERSHIP BE ESTABLISHED, SUPPORTED BY AN AFFILIATED SPECIALIST PALLIATIVE CARE PROVIDER.
5. **NOTE:** ON 7 APRIL 2008 THE DHB BOARD CHAIR, DEPUTY CHAIR, CHIEF EXECUTIVE AND DIRECTOR PLANNING AND FUNDING MET WITH TE OMANGA DEPUTY CHAIR, THREE OTHER TE OMANGA TRUSTEES, AND THEIR CHIEF EXECUTIVE AND ADVISED THEM OF THE DHB'S PREFERENCE TO CONTINUE TO ACCESS SPECIALIST MEDICAL PALLIATIVE CARE SERVICES FROM TE OMANGA.
6. **NOTE:** STAFF FROM THE DHB AND TE OMANGA MET ON 14 APRIL AND REVIEWED THE OPERATIONAL REQUIREMENTS OF THE PALLIATIVE CARE SERVICE MODEL AND BUSINESS CASE AGREED BY THE BOARD IN OCTOBER 2007, IN RELATION TO THE WAIRARAPA PALLIATIVE CARE PARTNERSHIP PROPOSAL AND HAVE AGREED HOW ROLES AND RESPONSIBILITIES SHOULD BE ALLOCATED BETWEEN THEM.
7. **AGREE** IN PRINCIPLE TO THE CONCEPT OF THE WAIRARAPA PALLIATIVE CARE PARTNERSHIP AND PROPOSED ARRANGEMENTS FOR ROLES AND RESPONSIBILITIES OF THE PARTNER ORGANISATIONS, AS THE BASIS FOR NEGOTIATION OF DETAILED FORMAL ARRANGEMENTS BETWEEN THE PARTIES AND NOTES THAT THE PARTNERSHIP WILL COMPRISE: TE OMANGA; WAIRARAPA DHB; AND WAIRARAPA COMMUNITY PHO.
8. **AGREE** IN PRINCIPLE THAT (SUBJECT TO A CONTRACT BEING AGREED) TE OMANGA WILL PROVIDE SPECIALIST MEDICAL INPUT AND EXPERT CLINICAL ADVICE TO THE PARTNERSHIP; WAIRARAPA DHB WILL PROVIDE SPECIALIST AND GENERALIST NURSING FOR PATIENTS IN HOSPITAL AND THE COMMUNITY, AND GENERALIST MEDICAL INPUT FOR PATIENTS IN HOSPITAL; AND THE PHO WILL PROVIDE GENERALIST MEDICAL INPUT FOR PATIENTS IN THE COMMUNITY.

9. **NOTE:** THE WAIRARAPA PALLIATIVE CARE PARTNERSHIP WILL LIAISE AND WORK WITH OTHER STAKEHOLDERS AND SERVICE PROVIDERS, INCLUDING AGED CARE SERVICES, NGOS, MAORI PROVIDERS, VOLUNTARY AND COMMUNITY ORGANISATIONS.
10. **NOTE:** THERE WILL BE A TRANSITION PERIOD BETWEEN CURRENT SERVICE PROVISION AND FULL IMPLEMENTATION OF THE NEW MODEL WHERE TE OMANGA STAFF WILL WORK ALONGSIDE LEAD PALLIATIVE CARERS AND COMMUNITY NURSES TO PROVIDE ONE-ON-ONE BUDDYING.
11. **AGREE IN PRINCIPLE AND DIRECT** MANAGEMENT TO NEGOTIATE THE NECESSARY CONTRACTUAL ARRANGEMENTS FOR APPROVAL WITH TE OMANGA, AND INVESTIGATE POSSIBLE ARRANGEMENTS FOR ESTABLISHMENT OF THE PARTNERSHIP AND REPORT BACK TO THE BOARD IN MAY AND JUNE.
12. **AGREE** THAT MANAGEMENT ARRANGE A WORKSHOP FOR THE BOARD AND A SMALL GROUP OF DHB STAFF TO DISCUSS THE NEWLY PROPOSED PALLIATIVE CARE MODEL.
13. **NOTE** THE EMAIL DATED 22 APRIL 2008 FROM BIDDY HARFORD, CHIEF EXECUTIVE OFFICER OF TE OMANGA HOSPICE DATED 22 APRIL 2008.

**Remuneration Strategy for Staff Employed on Individual Employment Agreements at Wairarapa DHB**

**Resolved:**

THAT THE BOARD RECEIVE THE REPORT ON THE REMUNERATION STRATEGY FOR STAFF EMPLOYED ON INDIVIDUAL EMPLOYMENT AGREEMENTS AT THE WAIRARAPA DHB NUMBERED D854.

**Wairarapa DHB's DAP and SOI 2008/09**

**Resolved:**

THAT THE BOARD NOTE THE LETTER FROM THE MOH DATED 11<sup>TH</sup> APRIL 2008 AND NOTE MANAGEMENT IS ADDRESSING THE REQUIRED ACTIONS IN ORDER TO FINALISE THE 2008/09 DAP AND SOI.

**Mrs Pamela Jefferies left the room.**

**Wairarapa DHB's Library / Learning Centre**

**Resolved:**

THAT THE BOARD:

- (1) NOTE THE UPDATE PROVIDED IN REGARDS TO THE LIBRARY LEARNING CENTRE AND NOTES THE CFO WILL APPROACH THE GREYTOWN TRUST LANDS TRUST AND DO FURTHER INVESTIGATION WORK ON LENDING OPTIONS.
- (2) NOTE THAT A FURTHER UPDATE WILL COME BACK TO THE BOARD.

Meeting closed: 2.55pm

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Bob Francis - Board Chairman

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Date