

**Minutes of the Board Meeting of the Wairarapa DHB
Held in the Board Room, WDHB, Blair Street, Masterton,
Tuesday 24 March 2009, at 9.00am in the Board Room**

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

In attendance: Joy Cooper (Acting Chief Executive), Eric Sinclair (Chief Financial Officer), Stephanie Turner (Director Maori Health), Simon Everitt (Acting Director Planning and Funding) Alan Shirley (Chief Medical Officer), Tracy O'Neale (Board Secretary)

Public Forum

Mr Bill Dalziell and Mrs McLean attended the meeting and addressed the Board regarding their observations and personal experiences whilst receiving treatment at Wairarapa and Wellington Hospital Oncology Departments.

Both Mr Dalziell and Mrs McLean had observed an increase in clinics and were concerned that the pressure of these additional clinics could overwhelm the sole Oncology Nurse. Both were happy with the service they receive at the Hospital and felt the Oncology Nurse did a marvellous job but they had experienced some difficulty contacting the Nurse at times.

Mr Dalziell requested the Board consider a back up for the Nurse or some extra resource in this area.

Joy Cooper, Acting CEO, responded to the concerns. The DHB recognises and is very conscious there is a resource gap in this area. Boosting the resourcing of Oncology Nursing is a focus for the DHB and is included in the District Annual Plan.

A formal response will be sent to Mr Dalziell and Mrs McLean and copied to the Board. The Chairman thanked them both for taking the time to raise their concerns with the Board.

Mr Dalziell and Mrs McLean left the meeting at 9.10am.

1. Apologies

No apologies were received.

2. Conflicts of Interest

There were no conflicts of interest noted in relation to the agenda.

3. Minutes from the Last Meeting of the Board

Resolved:

THAT THE MINUTES FROM THE LAST BOARD MEETING HELD 24 FEBRUARY 2009 BE CONFIRMED AS A TRUE AND ACCURATE RECORD.

4. Minutes from the Special Meeting of the Board

Resolved:

THAT THE MINUTES FROM THE SPECIAL MEETING HELD 3 MARCH 2009 BE CONFIRMED AS A TRUE AND ACCURATE RECORD.

5. **Matters Arising**

- Road Alignment – The Board requested the CFO write again to Masterton District Council to ask whether the Te Ore Ore Road and Blair Street alignment is on their programme for 2009/10.
- Kura Clinic - A meeting with the key agencies has taken place. A collaborative, integrated approach is needed if the Clinic is to be successful.

Resolved:

THAT THE BOARD

1. **RECEIVES** THE MATTERS ARISING SCHEDULE NUMBERED D983.

6. **Chairman's Report**

The Chairman will speak to his report in the Confidential Business section of the agenda.

Perry Cameron joined the meeting at 9.20am.

7. **Acting Chief Executive's Report**

The Acting CEO, Joy Cooper, spoke to her report highlighting key points.

- The Wairarapa and Hutt Valley DHB Executive Teams have met for strategic discussions around the potential for Wairarapa to do electives, public health services, shared work and shared functions. The discussions were positive and the DHBs have agreed to meet regularly in the future to look at ways to work smarter and effectively together.
- The breakeven financial result for February was achieved through an increase in revenue for electives.
- Initial feedback from the Ministry on the DAP is very positive.
- A Board to Board meeting with the PHO is proposed for 4.00pm on 30 April.
- Some thought will be given as to whether it is practical to undertake both accreditation and recertification this year. A paper will come to the next Board meeting.
- Negotiations with the NDU have been successful with an offer now out for ratification.
- The Model of Care is going well, Management are keen to roll the model out to seven days a week and hope to work with the NZNO towards this.
- The first RCSP Steering Group Meeting was held in February attended by Helen Pocknall, Stephanie Turner and Bruce McGregor. The first priority for the group is to set up a clinical reference group. The Board raised concerns again about the lack of progress made and agreed more pressure is needed to get things underway. Mike Grant, RCSP Project Director, will be asked to attend the next Board meeting.
- 100% of HPV consent forms have been received from schools.
- Fluvax vaccinations for Board members will take place on 16 April between the CPHAC and HAC meetings.
- Energy consumption at Wairarapa Hospital can be removed from the strategic issues list.
- District Strategic Plan (DSP) should be added as a strategic issue.

Resolved:

THAT THE BOARD RECEIVES THE ACTING CHIEF EXECUTIVE'S REPORT NUMBERED D984.

8. Financial Report

Eric Sinclair, CFO, spoke to the Financial Report to 28 February 2009.

- The result for YTD 28 February 2009 was (\$1,900k) deficit. The deficit for the month was (\$42k). Management and staff continue to work on cost management strategies, some gains have been made but there is still a lot of work to do to keep to forecast.
- The cashflow position is extremely tight and is likely to remain so for some time.
- A meeting with the CHFA is scheduled for next week to discuss their offer for the hospital; feedback from the meeting will come to the Board.
- The Board discussed the variances and commentaries in the financial report. There were a number of reasons for the consistent under budgeting. A new budgeting process has been put in place this year with managers and clinicians taking a more active role in the preparation of budgets.

Resolved:

THAT THE BOARD RECEIVES THE FINANCIAL REPORT FOR THE PERIOD ENDED FEBRUARY 2009 NUMBERED D985.

9. Committee Reports

Disability Support Advisory Committee – 10 March 2009

Committee Chair, Janine Vollebregt, spoke to the report of the March Committee meeting.

- The Committee received a report summarising the work of the ARC Models of Care working group.
- The Slice of Time survey of residents in care is a helpful data collection process, it is interesting to note the decrease of 10% from 2007 to 2009 in long term residents receiving DHB subsidies.
- A recent review of Wairarapa stroke services showed the DHB achieved on most but did not meet all stroke guideline targets. A work plan has been agreed.
- The Committee discussed Maori carers at home, why they are not accessing support services and how the DHB can support these people in a better way. Simon Everitt will do some work around this and report back to the Committee.

Resolved:

THAT THE BOARD RECEIVES THE REPORT OF THE DISABILITY SUPPORT ADVISORY COMMITTEE – MARCH 2009.

CPHAC Committee

Committee Chair, Bob Francis, spoke to the report of the February Committee meeting.

- The draft 2009/10 DAP was submitted on time.
- Rita Onofa and Lisa Burch gave an overview of the B4 School checks service. The Committee noted the considerable amount of work going on.
- There is a lot of effort going into improving the uptake of Fluvax

Resolved:

THAT THE BOARD RECEIVES THE REPORT OF THE COMMUNITY AND PUBLIC HEALTH ADVISORY MEETING – MARCH 2009.

HAC Committee

The Committee Chair, Pamela Jefferies, spoke to the report of the February Committee Meeting.

- An analysis is underway to determine whether any IDFs could have been done at Wairarapa DHB.
- Information from the Central Cancer network is slow to be issued. The Committee suggested the PHO could assist in cancer identification via a survey of local GP practices to determine numbers of patients with cancer in each ethnic group.

Resolved:

THAT THE BOARD RECEIVES THE REPORT FROM THE HOSPITAL ADVISORY COMMITTEE MEETING - MARCH 2009.

Te Iwi Kainga

Yvette Grace provided a verbal update from the meeting held on 19 March.

- Iwi Kainga requested the Maori Health Plan form part of the 2009/10 DAP.
- The issues at Taku Wahi were raised. Action will be taken by Joy Cooper.
- Format and protocols for the arrival of the new CEO will be taken in hand by Iwi.
- Carers in the Maori and Pacific community are not accessing support groups, an education programme could be looked at.

10. Board Terms of Reference

- Minor changes are required to the Board's Terms of Reference, namely the addition of Liz Mellish to the Board's membership, the removal of the sponsor's name and the removed of the names of those who attend Board meetings, designated positions will remain.
- The frequency of meetings could be less specific and the Public Form should be included in the TOR.

Resolved:

THAT THE BOARD APPROVES THE REVISED BOARD TERMS OF REFERENCE.

Alan Shirley, Chief Medical Officer, Helen Pocknall, Director of Nursing, Anne McLean, General Manager Hospital Services and Cate Tyrer, Manager Quality and Risk joined the meeting at 10.45am.

Due to time constraints for certain attendees the order of the agenda was changed to address the following items next on the agenda:

- Sentinel Events presentation
- Item 12. - In Good Hands
- Item 5. - Revised Financial Plan and Cost Savings (under confidential business).

Sentinel Events Presentation

Anne McLean introduced Cate Tyrer, Manager Quality and Risk, to the Board.

Cate Tyrer presented the local lessons learnt from the Serious and Sentinel Events report released by the Ministry of Health.

Cate provided background on some of the work taking place in relation to achieving a consistent definition of a serious event, communication with families, WDHB's participation in the QIC National Incident Management Programme, reviewing of reportable events data, trialling the National Medication Chart Standards and current and planned quality improvements for WDHB around clinical management.

Copies of the presentation can be made available to Board members.

The Board thanked Cate for her presentation and noted her report.

Cate Tyrer left the meeting at 11.10am.

12. In Good Hands

Helen Pocknall provided background to the document "In Good Hands – Transforming Clinical Governance in New Zealand".

The report was put together based on information provided to the Ministerial Task Group on Clinical Leadership by the Government.

The draft report was submitted to the Minister of Health in February and released on 12 March. Helen took the Board through the recommendations made in the report as they refer to the DHB.

There is an opportunity to move forward and driving clinical leadership will be a key role of the new CEO.

Questions like what will clinical leadership look like in the health sector in five years, what will it mean for the patient and what need steps to be taken to get there all need to be considered.

The Board noted the report and noted the subject will come back to the Board meeting in May.

Helen's presentation can be made available to Board members.

Move into Confidential Business

Resolved:

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

1. TO ENABLE THE BOARD TO DELIBERATE IN PRIVATE ON ITS RECOMMENDATIONS.
2. WITHHOLDING OF INFORMATION IS NECESSARY TO MAINTAIN THE EFFECTIVE CONDUCT OF PUBLIC AFFAIRS THROUGH THE FREE AND FRANK EXPRESSION OF OPINIONS BY OR BETWEEN OR TO MEMBERS OR OFFICERS OR EMPLOYEES OF ANY LOCAL AUTHORITY.

Move into Open Business

Human Resources Information System (HRIS)

Bruce McGregor, General Manager Human Resources, Noel Horne, AMS Account Manager, and Colin Pretorius, AMS HR Systems Consultant, attended the meeting and presented to the Board.

Noel Home introduced AMS and gave an overview of the systems WDHB uses including the Actor rostering system, the time and attendance system and the optimisation component of the rostering system.

The Board will receive feedback on the systems as they are implemented.

11. Q2 Report to MOH

- A summary of WDHB's quarterly reporting to the Ministry of Health for the quarter 2 period of 2008/09 is provided to the Board for information.
- The DHB did not achieve its ASH targets, work is currently taking place to drill down into the data.
- The Board noted that the data reported to the Hospital Advisory Committee is live data, the data provided in the Q2 report is to June 2008.
- Jim Primrose, ASH Champion, will be asked to visit the DHB to discuss ASH targets.
- The DHB needs to show improvement in three areas, elective discharges, immunisation at 6, 12 and 18 months and local iwi / Maori engagement in DHB decisions and strategies.

Resolved:

THAT THE BOARD RECEIVES THE Q2 REPORT TO MOH NUMBERED D990.

Move into Confidential Business

Resolved:

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

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Report Back from Confidential Business

The Chairman reported back the following resolutions that were passed on confidential business as follows:

Financial Planning for 2009/10 Strategic Overview

Resolved:

THAT THE BOARD:

1. **NOTES** THE ORGANISATION IS ON TRACK TO REACH 30 JUNE 2008 WITH A YEAR-END DEFICIT NO GREATER THAN \$2M
2. **NOTES** THERE WILL BE BIGGER FINANCIAL CHALLENGES IN 2009/10
3. **NOTES** GROWTH IN FUNDING FOR DHBS OVER RECENT YEARS, WHILE SUBSTANTIAL, HAS NOT KEPT PACE WITH GROWTH IN PROVIDER ARM COSTS, AND HAS NOW SLOWED

4. **NOTES** THE MINISTER OF HEALTH'S FIRM EXPECTATION THAT DHBS WILL MAINTAIN CURRENT LEVELS OF ACCESS TO SERVICES, REDUCE WAITING TIMES, AND ACHIEVE FINANCIAL BREAK EVEN WITHIN THEIR CURRENT FUNDING ALLOCATIONS
5. **NOTES** THE SCALE OF EXPENDITURE REDUCTION REQUIRED TO ACHIEVE FINANCIAL BREAK EVEN
6. **AGREES** THAT A NEW WAIRARAPA CLINICAL SERVICES PLAN BE DEVELOPED TO INFORM DECISIONS ABOUT HOW TO PROVIDE SERVICES THAT ARE FINANCIALLY AND CLINICALLY SUSTAINABLE WITHIN THE FUNDING ENVIRONMENT FORECAST FOR THE NEXT THREE YEARS
7. **ASKS** MANAGEMENT TO GIVE PRIORITY TO THE COMPLETION OF A NEW WAIRARAPA CLINICAL SERVICES PLAN AND PUT IN PLACE THE RESOURCES AND PROCESSES REQUIRED TO DELIVER THIS
8. **AUTHORISES** PRICEWATERHOUSE COOPERS BE CONTRACTED TO UNDERTAKE A REVIEW OF THE DHB'S CORPORATE AND PLANNING AND FUNDING SERVICES.

Confidential Board Meeting

Resolved:

THAT THE CONFIDENTIAL MINUTES FROM THE LAST MEETING HELD ON 24 FEBRUARY 2009 BE CONFIRMED AS AN ACCURATE RECORD.

Confidential Special Board Meeting

Resolved:

THAT THE CONFIDENTIAL MINUTES FROM THE SPECIAL MEETING HELD ON 3 MARCH 2009 BE CONFIRMED AS AN ACCURATE RECORD WITH MINOR AMENDMENT.

Confidential Chairman's Report.

Resolved:

THAT THE BOARD RECEIVES THE CHAIRMAN'S REPORT NUMBERED D991.

Draft Statement of Intent for 2009/10

Resolved:

THAT THE BOARD:

1. **APPROVES** THE FIRST DRAFT OF THE STATEMENT OF INTENT FOR 2009/10 (SOI), INCLUDING THE STATEMENT OF SERVICE PERFORMANCE
2. **AGREES** FOR MANAGEMENT TO SEND THE FIRST DRAFT OF THE 2009/10 SOI TO THE MINISTRY OF HEALTH BY 25 MARCH 2009
3. **NOTES** THE FINAL DRAFT OF THE SOI WILL COME TO THE BOARD FOR APPROVAL IN MAY.

Simon Everitt left the meeting at 2.30pm

Contract Approval

Resolved:

THAT THE BOARD:

1. **RECEIVES** THE REPORT ON CONTRACT APPROVAL
2. **NOTES** THE PROCUREMENT PROCESS THAT HAS BEEN UNDERTAKEN FOR THE SUPPLY OF DISPOSABLE SURGICAL DRAPES AND GOWNS
3. **APPROVES** THE CHIEF EXECUTIVE TO EXECUTE THE CONTRACT DOCUMENTATION WITH REM SYSTEMS LTD.

Health Management System Collaborative

Resolved:

THAT THE BOARD:

1. **RECEIVES** THE HEALTH MANAGEMENT SYSTEM COLLABORATIVE PAPER
2. **NOTES** THAT THE HEALTH MANAGEMENT SYSTEMS COLLABORATIVE (HMSC) IS A HIGH PROFILE INITIATIVE OF STRATEGIC NATIONAL IMPORTANCE WITH A COMPLEX PROCUREMENT COMPONENT. THE INITIATIVE IS NOT SIMPLY ABOUT REPLACING AN OLD HOSPITAL SYSTEM BUT ABOUT CHANGING THE SHAPE OF HEALTHCARE DELIVERY FOR THE NEXT 15-20 YEARS
3. **NOTES** THE CURRENT STATUS OF THE INITIATIVE WHICH INCLUDES: A GOVERNANCE STRUCTURE AND TERMS OF REFERENCE FOR THE COLLABORATION HAS BEEN APPROVED IN PRINCIPLE; THE RFI EVALUATIONS HAVE BEGUN AT EACH DHB; A LOCAL EVALUATION PANEL HAS BEEN ESTABLISHED WITH A RANGE OF REPRESENTATIVES INCLUDING SENIOR MEDICAL OFFICERS, GENERAL PRACTITIONERS, NURSING, ADMINISTRATORS, SERVICE MANAGERS, PUBLIC HEALTH AND INFORMATION TECHNOLOGY
4. **NOTES** THAT THE HMSC INITIATIVE WILL DELAY THE REPLACEMENT OF THE GALEN PATIENT ADMINISTRATION SYSTEM AND WE NEED TO COMMIT TO EXTENDING THE LIFE OF THE PRODUCT VIA A CONTRACTUAL AGREEMENT WITH ISOFT. THIS DOES NOT MEAN THAT WE WILL STOP OTHER INITIATIVES IN THE ISSP AS IT IS IMPORTANT THAT WE CONTINUE THE EMR PROGRAMME OF WORK IN PARALLEL TO THE HMSC.

Additional Agenda Item - Pacific Radiology Limited – Service Agreement – Report tabled.

Resolved

THAT THE BOARD:

1. **NOTES** PACIFIC RADIOLOGY LIMITED (PRL) HAS PROVIDED SERVICES TO WAIRARAPA DISTRICT HEALTH BOARD FOR THE PAST FIVE YEARS AND THAT PROVISION OF THE SERVICES HAS BEEN WHOLLY SATISFACTORY, WITH EXCELLENT WORKING RELATIONSHIPS DEVELOPED
2. **AGREES** THAT THE DHB WILL NEGOTIATE A NEW AGREEMENT WITH PRL FOR A THREE YEAR TERM TO 30 JUNE 2012
3. **NOTES** THE EXISTING FORM OF CONTRACT WITH PRL DOES NOT COMPLY WITH THE OPERATIONAL POLICY FRAMEWORK FOR DHBS AND THAT A NEW CONTRACT FORM WILL BE DEVELOPED THAT DOES COMPLY.
4. **APPROVES** THE ARRANGEMENTS AGREED WITH PRL FOR NEW PRICES AND PAYMENTS TO APPLY FROM 1 APRIL 2009
5. **AUTHORISES** THE CHIEF EXECUTIVE TO EXECUTE THE NEW SERVICE AGREEMENT WITH PRL.

CEO Remuneration

Resolved:

THAT THE BOARD:

1. **AUTHORISES** THE CHAIRMAN TO CONTINUE NEGOTIATING THE EMPLOYMENT AGREEMENT AND REMUNERATION PACKAGE WITH THE CEO WITHIN THE TERMS NOTED ABOVE AND SEEK FINAL CONFIRMATION FROM THE BOARD IN
 - a) APRIL - REMUNERATION PACKAGE AND EMPLOYMENT AGREEMENT
 - b) MAY - PERFORMANCE CRITERIA INCLUDING KPIS.

Meeting closed: 3.30pm

Bob Francis – Chairman

Date