



MINUTES Open

TARANAKI DISTRICT HEALTH BOARD

6 September 2007
Corporate Meeting Room 1
Base Hospital
David Street
New Plymouth

Present

Hayden Wano (Chairman), Peter Catt (Deputy Chairman), Alex Ballantyne, Kura Denness, Dan Devadhar, Jan Dunlop, Flora Gilkison, Tony Ruakere and John Young

In Attendance

George Thomas (GM Finance & Corporate Services), Joy Farley (General Manager Hospital Services), Sandra Boardman (GM Planning, Funding and Population Health), Christine Henare (Chief Advisor Maori Health), Debbie Taylor (General Manager Organisational Development and Communications), Pamela Hikuroa (PA to Board), Sue Carrington (Media Advisor)

530.0 Declaration to Open Meeting

The meeting was opened with a karakia.

531.0 Apologies

Tom Mulholland, Tony Foulkes (Chief Executive)

532.0 Conflicts of Interest

The following new interests were declared:

Kura Denness	Trustee Bayley Road Arts Trust
	Trustee Te Atiawa Settlements Trust

533.0 Minutes

Resolution

That the Minutes of the Taranaki District Health Board meeting held on 9 August 2007 be confirmed as a true and correct record.

Gilkison/Catt
Carried

533.1 Arising From Minutes

Smokefree

Noted that the New Plymouth District Council had adopted the proposal for smokefree environment, and although not enforceable was definitely a step in the right direction.

Star Garden System and Risks Around Lack of Manuals

Mr Thomas advised that this matter arose from the audit when it was ascertained that many of the procedures had not been documented. The provision of documented changes etc is now underway.

It was agreed that a full update on the status would be provided for the Board's information including anticipated completed date.

534.0 Board Committee Reports

534.1 Community and Public Health Advisory Committee

Dr Catt recommended to Board members the report to CPHAC which gave a full summary of the work undertaken over the past year.

Resolution

That the Taranaki District Health Board receives the unconfirmed minutes of the Community and Public Health Advisory Committee meeting held 28 August 2007 and notes recommendations contained therein.

*Catt/Ballantyne
Carried*

535.0 Management Reports

535.1 Chief Executive's Report

Mr Thomas took report as read, highlighting

- Marks start of the new financial year 07/08 with the financial challenges facing the provider arm in particular, being outlined.
- Health Targets - 10 key areas highlighted as key priorities going forward
 - Update on work undertaken by DHBNZ on behalf of the sector outlined.
 - Two new initiatives highlighted – Value for Money and Procurement which were gaining momentum to bring forward cost savings and efficiencies. The CEOs have agreed and committed to the projects and signed documentation to give effect to the sector working together to realise the potential.
 - As part of the collective procurement initiative it is estimated that there are potential savings of \$42m to be gained over the next couple of years.
 - Organisational Issues – DAP signed off and management progressing work in this area.
 - Facility Development – The business case which was approved last week by the Board has been forwarded to the National Capital Committee. The case will undergo peer review and we expect to hear back from the Committee over the next couple of months.
 - Financials
 - Results for the first month of the 07/08 financial year started on a positive note with an operational surplus \$112k. The trend from the

previous year continued with the Funder reporting a surplus but the Provider Arm reporting a deficit.

- It must be remembered that the DAP for 07/08 was prefaced by the fact that there was a cost to funding gap for the Provider and this is reflected in the result for the month. The upcoming year will be challenging for the DHB.

Discussion

Discussion took place on items raised in the report with the initiatives being undertaken by the sector being favourably noted. In response to a question around the procurement advantages being available to other providers contracted through the DHB, the Board was advised that the provider arms were targeted due to the high volume costs incurred but that the DHB currently provided a service to other providers, eg rest homes, for the bulk purchase of consumables and services, eg telecommunications. This would continue and it was hoped to develop further over time.

With respect to the PHO governance facilitation Mrs Boardman advised that this was a combination of published information and training sessions specifically designed for PHOs.

It was suggested that a report be provided through the Community and Public Health Advisory Committee on any risks to the DHB or significant resource implications arising from the material. It was also agreed that when available a copy of the publication be made available to Board members if required.

Financial

Board members expressed disappointment over the deficit situation for the Provider Arm and queried whether this was due to budgeting and phasing issues.

Mr Thomas advised that the major contributor was due to the cost to funding gap outlined in the 07/08 budget itself and was also influenced by prior period adjustments.

Ms Farley also advised that activity in orthopaedic lines had been greater than usual for the month which would have had some effect on the result.

Ms Farley also advised that the Day Surgery result was incorrect as the work undertaken at Southern Cross had not been recorded.

Resolution

That the Taranaki District Health Board receives and notes the Chief Executive's Report and management reports for July 2007.

*Gilkison/Catt
Carried*

536.0 Other Business

536.1 Information Systems Strategic Plan Presentation

Mrs Boardman gave an update on the Information Systems Strategic Planning process:

- Currently in process of developing an Information Systems Strategic Plan for 2008/10 which would be presented to the Board for approval in October.
- The plan was for the development of information and communications technology to meet the DHB's business needs.

- Currently analyzing current systems, how they work and producing a road map indicating where we want to be with our systems and how to get to that position.
- Aims of Plan –
- ensure the best possible utilisation of technology to deliver the strategic goals and objectives for the benefit of all our stakeholders.
- support departmental and service plans
- Support new facility development
- Assist management plan and investment decisions into the future
- Information systems at Taranaki DHB link into regional plans and strategies and sector wide plans
- The ISSP was to be supportive of the organisation.
- Current plan is out of date and has not been reviewed for two years.
- Due to rapid changing environment plan should be reviewed on an annual basis.
- Current plan is combined with HIQ and Capital and Coast
- TDHB requires own ISSP to support our strategic plan and aims
- Project has two sponsors –
- DHB – General Manager Planning and Funding
- HIQ – Darren Douglas
- Consultation with key stakeholders currently taking place
- Outline provided on how development process undertaken

Mrs Boardman noted that the plan would require to be brought in by a phased approach due to the capital outlay required and this will require considerable discussion between the various parts of the organisation.

General discussion took place with the Board being informed that it was not the intention to move away from the joint venture with Capital and Coast but there was the need for a separate strategic plan as our requirements were different to those of Capital and Coast. The TDHB was wanting the plan to be focused on integrated health care services to enable the delivery of our strategic aims rather than simply focusing on information technology requirements of a new facility which was the direction taken by Capital and Coast.

Mr Thomas also advised that the ISSP recognised the different stages of development between the joint venture partners and when both parties reach a common platform the opportunity for synergies and joint collaborative investment would be able to occur for the benefit of both parties. HIQ continued to provide financial benefits but greater opportunities would be available in the future.

Ms Gilkison advised that she had a fundamental disagreement with the ISSP as she did not hear any comment on how the plan linked into the organisation design. Ms Gilkison advised that in her view the ISSP was an 'enabling' strategy and this did not come through in the presentation.

Mrs Boardman advised that she also agreed that the ISSP was an 'enabler' and would clarify this position in the paper for presentation to the October meeting.

537.0 Date Next Meeting

The next meeting is scheduled to be held on 11 October in New Plymouth.

538.0 Exclusion of the Public

Resolution

That the Taranaki District Health Board excludes the public from the meeting on the basis of the following matters:

1. *To present Taranaki District Health Boards Minutes pursuant to an earlier resolution publicly excluding the item.*
2. *To present Committee minutes pursuant to an earlier resolution publicly excluding the item.*
3. *To present report from Compensation and Appointments Committee in that the public conduct of the meeting would be likely to result in the disclosure of information where the withholding of the information is necessary to:*
 - (h) *enable the DHB, Board or Board Committee holding the information to carry on, without prejudice or disadvantage, negotiations (including commercial and industrial negotiations).*
4. *To present report on Internal Audit Arrangements in that the public conduct of the meeting would be likely to result in the disclosure of information where the withholding of the information is necessary to:*
 - (g) *enable the DHB, Board or Board Committee holding the information to carry on, without prejudice or disadvantage, commercial activities.*
 - (h) *enable the DHB, Board or Board Committee holding the information to carry on, without prejudice or disadvantage, negotiations (including commercial and industrial negotiations).*
5. *To present report on NZNO MECA in that the public conduct of the meeting would be likely to result in the disclosure of information where the withholding of the information is necessary to:*
 - (h) *enable the DHB, Board or Board Committee holding the information to carry on, without prejudice or disadvantage, negotiations (including commercial and industrial negotiations).*

*Denness/Young
Carried*

The Chairman before adjourning the meeting, acknowledged the recent and sudden passing of John Dempsey, Principal Health Protection Officer. John had given over 40 years service to the DHB and was well known within the organisation and wider community. The sympathies of the Board, Management and Staff were extended to his family.

The meeting adjourned at 3.35pm to reconvene at 3.50pm

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Chairman

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Date