

MINUTES Open

TARANAKI DISTRICT HEALTH BOARD

7 April 2011

2.30pm

Lounge 2 – The Restaurant

The Hub

Hawera

Present

Mary Bourke (Chair), Peter Catt (Deputy Chair), Ella Borrows Kura Denness, Karen Eagles, Flora Gilkison, Brian Jeffares, Pauline Lockett, Alison Rumball,

In Attendance

Tony Foulkes (Chief Executive), Simon Barrett (Group Financial Manager), Rosemary Clements (Acting General Manager Hospital and Specialist Services), Sandra Boardman (General Manager Planning, Funding and Population Health), Sue Carrington (Communications), Matua Ramon Tito (Kaumatua), Jenny McLennan (Minute Taker)

672.0 Declaration to Open Meeting

The meeting was opened at 2.30pm with a Karakia.

Miss Bourke extended a warm welcome to the South Taranaki people who had joined to observe the open section of the meeting.

Mr Ross Dunlop, South Taranaki District Mayor welcomed the Board and thanked them for holding their meeting in Hawera noting it was very much appreciated. Mr Dunlop looked forward to further meetings in the district.

Mr Dunlop expressed his appreciation of the efforts the health sector made in South Taranaki, and he was looking forward to ongoing support in the future.

673.0 Public Comment

The Chair invited comments from the public:-

673.1 Ms Nicolette Horvath

Ms Nicolette Horvath advised members that she travelled to Patea to see the doctor as it was not possible to see a doctor in Hawera within a two week period. During her last experience with the Hawera A&E department Ms Horvath advised she had a five hour wait, and advised that the system was letting people down. Ms Horvath further noted that it required a three-hour round trip to New Plymouth see a specialist for a 10 minute appointment and raised the options of visiting Specialists to Hawera. Ms Horvath advised that the use of the hospital bus was the last resort for her.

673.2 Mr Hugh Cunningham

Mr Cunningham requested that the Board reconsider the provision of termination of pregnancy services in the 2011/12 service planning noting that not all DHBs provided the service. Mr Cunningham further advised that since 1993 on an average 350 terminations were performed each year which equated to one per day. Mr Cunningham thanked the Board for their time.

673.3 Response from the Chair

Miss Bourke thanked both Ms Horvath and Mr Cunningham for their comments and welcomed the members of the public who were present for the open section of the meeting.

Miss Bourke introduced herself to the meeting and invited each Board Member to introduce themselves.

674.0 Apologies

Resolution

That the apology from Alex Ballantyne and Colleen Tuuta (Board Members) and George Thomas (General Manager Finance & Corporate Services) be received.

Bourke/Rumball

Carried

675.0 Conflict of Interest

The Conflict of Interest Register was circulated for members to review and sign. Miss Denness advised that her membership on the Midland Regional Network Trust, previously advised was to be noted.

676.0 Minutes of Previous Meeting

Resolution

That the Minutes of the Taranaki District Health Board 10 March 2011 be confirmed as a true and accurate record subject to the following amendment:-

Item 658.1

Mrs Boardman advised that there are differing reasons for lower immunisation rates and that while there were good results in the community there remains some areas in Taranaki that were not as supportive of immunisation.

Bourke/Gilkison

Carried

677.0 Board Committee Reports

677.1 Hospital Advisory Committee

Resolution

That the Taranaki District Health Board receive and note the draft minutes of the Hospital Advisory Committee meeting held 29 March 2011. Ms Lockett advised that she had not been present at the meeting.

Borrows/Catt

Carried

678.0 Matters Arising

678.1 Ambulance Services

In response to a question raised Mr Foulkes confirmed that the statement that *'All direct costs were transferred to St John this did not necessarily mean all overheads would be immediately saved'* was correct.

679.0 Chairman's Report

The Chairman advised that discussions regarding the closer collaboration between Midland DHBs had continued at the recent Midland Chair and CEO's meeting.

680.0 Management Reports

680.1 Chief Executive's Report

The Chief Executive took his report as read highlighting the following:

- In line with the new National Sector structure DHBs are moving work pertaining to Health Workforce, Procurement, Shared Services, Information and National Service Planning to the new sector agencies with DHBs looking forward to the benefits of these new agencies.
- Ministerial approval of Project Maunga was fantastic news for the whole Taranaki Community, with the tendering process currently underway. Mr Foulkes advised that it would be August before there would be any physical change apparent on the project site.
- Mr Foulkes welcomed community members present advising that it was great to be meeting in Hawera where the engagement of the Steering Group and with the greater community on the South Taranaki – Alive with Opportunities Project was positive and progressing well.
- Mr Foulkes highlighted the MOH/NHB Taranaki DHB Quarter Two 2010/11 Performance Overview, noting the delay in the reporting time line. It was noted that the report was developing into a useful scorecard and would be incorporated into the Board reporting framework.
Mr Foulkes noted there were areas for improvement advising that the Smokefree Liaison appointment would assist in improving the respective target.
- It was noted that further feedback had been provided to the Select Committee with a formal report expected from them to Parliament.
- Project Whakapai was progressing with regular reports to be available to the Board. Preliminary initial reports indicated that the meeting of targets was on track.

The Chair highlighted the Project Whakapai initiative noting that it was the first of its kind within the New Zealand health sector using the new tool and methodology.

Mr Foulkes added that the initiative provided the opportunity for a 'win/win' with an increase of staff whilst saving money. This was achieved by ensuring appropriate staffing numbers were in place with mechanisms and tools available to ensure any shortfalls were addressed quickly and within the resources available.

Discussion

- Mrs Eagles questioned whether the Smoking Heath Target data on the dashboard covered smokers as inpatient or all those who have contact with the hospital. It was noted that the target covered all those who had contact.
- Mrs Rumball noted the three day Clinical Workshop to be held in South Taranaki and sought clarity on who was involved in the workshop. Mrs Boardman advised that the Steering Group was continuing to collate information including a Health Profile.

Areas of consideration for the workshop include::

- What health services are needed and to use the services?
- Community patients:
 - What they think?
 - What they like?
 - What is missing?
 - What for the future?
- Access to GPs
- Transport
- Views of the public
- Requirements of local businesses

Mrs Boardman advised that the workshop would provide the opportunity to consider how to best provide the services required and how the various streams link together.

- GPs
- Practices
- Practice Nurses
- Rest Homes
- Pharmacists
- Visiting Specialists
- Hospital staff
- Community representation through key stakeholders - Council and Iwi
- National Perspectives – NHITB and NHB representation.

Mrs Boardman reported that the aim of the workshop was to consider service configuration and what service configuration should look like in the future, adding that the range of people participating in the workshop would provide an appropriate opportunity for the options available to be considered. A series of community meetings had also been arranged with different community groups at various times of the day and evening. This was to ensure that there was an extensive range of meeting opportunities available for the public.

Following the workshop and public meetings Mrs Boardman advised that all views would be gathered together and considered against the proposed model. The proposed model would also be assessed at a national level. Once any final adjustments and revision of the proposed model were complete the final proposal would provide a model that was sustainable and met the needs of the community. Mrs Boardman noted the challenges of the current timeframe.

Mrs Rumball questioned whether the timeframe would allow sufficient time for consideration and consultation of the proposed model by the Steering Group by the end of June. Miss Bourke advised that the Steering Group would consider the timeframe requirements at its next meeting.

Dr Catt advised that this was the first time that service configuration consideration had looked at the whole of the system including all publicly funded health services. Both hospital and GP services are included and not just either of them in isolation of the other. Dr Catt noted the uniqueness of this process and also the efforts of the people from South Taranaki and urged all of the community to be involved in the consultation process.

Mr Jeffares questioned the likelihood of the applying the same process within the greater Taranaki in future service planning and was advised that this was a future options.

- Dr Gilkison extended congratulations on the formal approval of the new facilities – Project Maunga and looked forward to the benefits of the capital investment exuding wellness within the community. Dr Gilkison noted that there remained the need for the Board to address the donation aspect of the Project.

Resolution

That the Taranaki District Health Board notes and receives the report and attachments of the Chief Executive.

*Bourke/Catt
Carried*

680.2 Finance and Corporate Services Report

Mr Barrett took the report as read highlighting a number of points:

- All three funded arms were positive against budget as at February end.
- Actual forecast was in line with budget forecast.

Discussion

- Ms Lockett questioned whether the anticipated Project Whakapai savings of \$1m were incorporated in the budget or in addition to budget. Mr Foulkes confirmed if the budget was met then the savings would have been achieved.
- Ms Denness noted with concern the tight financial cashflow position citing a \$3m cash position. Mr Barrett advised financial management, including term deposits meant that all three funded arms were where they should be in terms of the budget.

Resolution

That the Taranaki District Health Board notes and receives the General Manager Finance & Corporate Services report and attachments.

*Denness/Catt
Carried*

681.0 Date of Next Meeting

The next Board meeting was scheduled to be held on Thursday, 5 May 2011 in New Plymouth

682.0 Exclusion of Public

Resolution

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

- 1. To present Taranaki District Health Board Minutes pursuant to an earlier resolution publicly excluding the item
- 2. To present Minutes of Committee meetings pursuant to an earlier resolution publicly excluding the item.
- 3. To present Chief Executive's Report 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 out, 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).

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Chairman

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Date