

MINUTES OF A PUBLIC MEETING OF BOARD MEMBERS OF NELSON MARLBOROUGH HEALTH HELD IN SEMINAR CENTRE ROOM 1, BRAEMAR CAMPUS, NELSON HOSPITAL ON 23 OCTOBER 2018 AT 1.00PM

Present:

Jenny Black (Chair), Alan Hinton (Deputy Chair), Stephen Vallance, Allan Panting, Patrick Smith, Jenny Black (Marlb), Dawn McConnell, Judy Crowe, Brigid Forrest, Craig Dennis

In Attendance:

Peter Bramley (Chief Executive), Cathy O'Malley (GM Strategy Primary & Community), Eric Sinclair (GM Finance Performance & Facilities), Lexie O'Shea (GM Clinical Services), Nick Baker (Chief Medical Officer), Stephanie Gray (Communications), Gaylene Corlett (Minute Secretary)

Apologies:

Gerald Hope

Karakia:

Patrick Smith

SECTION 1: PUBLIC FORUM / ANNOUNCEMENTS

Nil.

SECTION 2: APOLOGIES AND REGISTRATIONS OF INTEREST

Moved: Brigid Forrest
Seconded: Stephen Vallance

RECOMMENDATION:

THAT APOLOGIES AND REGISTRATIONS OF INTEREST BE NOTED.

AGREED

SECTION 3: MINUTES OF PREVIOUS MEETING

Moved: Brigid Forrest
Seconded: Stephen Vallance

THAT THE MINUTES OF THE MEETING HELD ON 25 SEPTEMBER 2018 BE ADOPTED AS A TRUE AND CORRECT RECORD.

AGREED

3.2 Action Points

Item 1 – H&S Report: Work on H&S dashboards is ongoing. Awaiting new GM P&C (starting end of January).

Item 2 – Consumer Council Recruitment and TOR: Council will go to market for replacement Council member. Completed.

Item 3 – Care Foundation: Report from Clare Haycock (GM Care Foundation) to be forwarded to Board. Completed

3.3 Correspondence

Nil.

SECTION 4: DECISION

4.1 2019 Meeting Dates

Discussion was held on the proposed meeting dates for 2019. It was agreed to move the October meeting date to the following Tuesday (3 November) and the November meeting four weeks after that (1 December).

The HAC meeting recommended to the Board that the statutory advisory committee meetings be combined each month. The Board endorsed this recommendation.

Moved: Jenny Black (Marlb)

Seconded: Dawn McConnell

RECOMMENDATION:

THAT THE BOARD:

- 1 ENDORSES THE RECOMMENDATION FROM THE HOSPITAL ADVISORY COMMITTEE TO COMBINE THE STATUTORY ADVISORY COMMITTEE MEETINGS**
- 2 ENDORSES THE 2019 BOARD AND ADVISORY COMMITTEE MEETING DATES NOTING THE CHANGE TO THE OCTOBER AND NOVEMBER BOARD MEETING DATES.**

AGREED

SECTION 5: CHIEF EXECUTIVE'S REPORT

Report noted.

Discussion held on the Models of Care programme noting the eight workstreams are starting to surface ideas for transformation. Increasingly we will need the MOC team to have an oversight of the health care system, as it is developing and evolving, and will keep providing the key principles and drivers to deliver health care differently – need to be guardians of the health care system. Do not want to stifle evolution and change, but need to have a framework around it to ensure we are doing the right thing. Noted a

communications person has been recruited to start sending out messages and updates on the MOC programme.

Discussion held on influenza noting we had a light season. It was queried whether the influenza vaccination is needed, however it was noted that the influenza cases treated was the strain that was vaccinated for.

Discussion was held on the good news stories in the CE report. **It was requested that** they be placed in a separate section of the report so Board members could refer to them easily. It was also suggested they be placed in Connections and sent to the Minister.

Discussion held on the increase in funding for renovations at Alexandra Hospital. It was noted there is a shortage of D6 (dementia) beds, with a query raised if we are upgrading Alexandra Hospital could we make more rooms available. Noted NMH is looking at options both short and long term. Alexandra is an acute hospital and not designed for long term patients. The preferred option is to commission D6 beds in the community. In the short term an existing provider can provide more beds in Nelson.

Noted within CAMHS the waitlist for Wairau appears high. **It was requested that** the CE investigate and report back at the next meeting on what the average wait time is until they are seen.

Discussion held on colonoscopy and the current backlog with surveillance scopes. It was noted diagnostic scopes are actioned within MOH timeframes. Discussion held on the Bowel Screening Programme including the numbers of those who have received scopes, and those that have received treatment.

Noted seclusion hours is high, however this is largely driven by one person who needs to be secluded for his own, other clients, and staff safety. It is acknowledged this is not the best environment for the person and NMH is working with the Ministry of Health to find a better place.

Moved: Allan Panting
Seconded: Judy Crowe

RECOMMENDATION:

THAT THE BOARD RECEIVES THE CHIEF EXECUTIVE'S REPORT.

AGREED

SECTION 6: CONSUMER COUNCIL CHAIR'S REPORT

Noted.

SECTION 7: UPDATES:

8.1 Models of Care Programme

Discussion held on improved access to diagnostics.

The change towards Equity from vulnerable populations was commended.

Discussion held on the Health Care Homes project noting five practices are involved.

8.2 Indicative Business Case

Susie Keegan, Senior Manager Infrastructure team of EY, attended for this item

Engaging with clinical leads and HODs to help inform the IBC. Four workstreams have been developed; Health Needs Assessment refresh, clinical services, pre design master planning work, wrapping a business case around this information (decision making process).

Over the last month have undertaken engagement with various work groups.

Discussion held on the IBC workstream. **It was requested that** the GM Finance Performance & Facilities send the Board more information on the Investment Logic Mapping (ILM) to ensure a better understanding of what this is, and the strategic business case.

Currently on schedule to meet the April deadline.

SECTION 8: FINANCIAL REPORT

The financial results for the first quarter shows a small deficit of \$289k which is favourable to the plan by \$72k. This is a pleasing result for the first quarter, and sets us up well for the remainder of the financial year.

Moved: Alan Hinton
Seconded: Dawn McConnell

RECOMMENDATIONS:

THAT THE BOARD RECEIVES THE FINANCIAL REPORT.

AGREED

SECTION 9: CLINICAL GOVERNANCE REPORT

Noted.

SECTION 10: FOR INFORMATION

Noted.

SECTION 11: GENERAL BUSINESS

Nil.

Public Excluded

Moved: Craig Dennis
Seconded Patrick Smith

RECOMMENDATION:

THAT the Board resolve itself into a Committee of the whole and that in terms of the NZ Public Health & Disability Act 2000, the public be excluded while the following items are considered:

- ***Minutes of a meeting of Board Members held on 25 September 2018 (Clause 32(a) Third Schedule NZ Public Health & Disability Act 2000)***
- ***DHB Chair's Report - To protect information that is subject to a delegation of confidence (Clauses 32(a) and (b) Third Schedule NZ Public Health & Disability Act 2000)***
- ***DHB Chief Executive's Report - To protect information that is subject to a delegation of confidence (Clauses 32(a) and (b) Third Schedule NZ Public Health & Disability Act 2000)***

Resolutions from the Public Excluded Meeting:

The Board approved the following resolutions in the Public Excluded section of the Board meeting:

- Minutes of Previous Meeting – APPROVED
- Chair's Report – RECEIVED
- Decision: Asset Management Capital Planning – APPROVED
- Decision: Adoption of FY17/19 Annual Report – APPROVED
- Decision: Integrated Laboratory Services Contract – APPROVED
- Decision: Microsoft Licencing Agreement – APPROVED
- CEs Report – RECEIVED
- H&S Report – RECEIVED

Meeting closed at 2.20pm.