

MINUTES OF A PUBLIC MEETING OF BOARD MEMBERS OF NELSON MARLBOROUGH HEALTH HELD IN THE MENTAL HEALTH ADMINISTRATION BUILDING MEETING ROOM, BRAEMAR CAMPUS, NELSON HOSPITAL ON 24 JANUARY 2016 AT 1.35PM

Present:

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

In Attendance:

Peter Bramley (Acting CE), Nick Baker (CMO), Eric Sinclair (GM Finance & Performance), Pam Kiesanowski (DONM), Christine Nolan (Acting GM Clinical Services), Cathy O'Malley (GM Strategy Primary & Community), Stephanie Gray (Communications), Gaylene Corlett (Minute Secretary)

Apologies:

Jenny Black (Marlb)

Karakia:

Patrick Smith

SECTION 1: PUBLIC FORUM / ANNOUNCEMENTS

Samantha Gee, Nelson Mail

SECTION 2: APOLOGIES AND REGISTRATIONS OF INTEREST

Updates/additions to be forwarded to the Minute Secretary.

Moved: Patrick Smith

Seconded: Alan Hinton

RECOMMENDATION:

THAT APOLOGIES AND REGISTRATIONS OF INTEREST BE NOTED.

AGREED

SECTION 3: MINUTES OF PREVIOUS MEETING AND CORRESPONDENCE

Moved: Patrick Smith

Seconded: Alan Hinton

THAT THE MINUTES OF THE MEETING HELD ON 22 NOVEMBER 2016 BE ADOPTED AS A TRUE AND CORRECT RECORD.

AGREED

3.2 Action Points

Item 1 – Completed

Item 2 – Completed

SECTION 4: CHIEF EXECUTIVE'S REPORT

NMH's financial performance remains on track with a year to date surplus of \$919k, which is \$164k favourable to budget. It was noted NMH is one of only four DHBs in surplus. Against the revised MOH budget (a further \$1m of savings as an efficiency target), we are \$160k unfavourable to budget. New investment funding has been released this year in ICU, ophthalmology service, primary care (Maori health and mental health).

4.1 Key Issues to Note

Noted during 21 December and 8 January 1 in 4 presentations to ED were from out of town patients. A review of the summer plans is being conducted to gain learnings, including resourcing of staff for both hospital and primary care.

Earthquake

Pre Christmas concerns were raised around psychosocial issues, however MOH provided funding to assist with this. NMDHB received funding to target community primary care and hospital services. Focus has been on Murchison to see if increased vehicle traffic would have an impact on health services, however at this stage it has not. Inter-agency collaboration is working very well. Need to maintain support services for at least another 4-6 months in Kaikoura, Ward, Seddon and outlying areas. Two navigators have been put in place to liaise with families, Iwi, small communities to assist in navigating services as needed. They are also working on preparedness of maraes etc to ensure they are able to provide emergency accommodation if needed in the future.

Resident Doctor Strike

Two thirds of NMH doctors went on strike, resulting in 47 elective procedures being postponed and 37 outpatient appointments postponed. NMH is committed to safe working practices, and we have been working to get rosters that are safe and sustainable. It was noted this is a training environment and it is complex to roster, as ensuring we have cover 24/7, it does put pressure on rosters. As far as we know we are compliant. The Board requested the GM Clinical Services convey their thanks and appreciation to those staff members, especially HODs, that stepped up during the strike period.

Consumer Council

Advertising for members of the Consumer Council was conducted over the Christmas period. Interviews will be held at the end of February.

Ophthalmology Service

Focus continues on a variety of initiatives to improve eye services. We are developing new models of care to ensure this backlog does not occur again in the future. We are also investigating how we can provide this service with a different workforce, rather than

what we have done in the past, eg Nurses performing intra-ocular injections to free up specialist time.

Information Technology

HCS go live date is 13 February, with preparation being undertaken with the clinical teams. HCS will provide the platform for a number of initiatives that will provide value, including electronic laboratory and radiology sign off.

There has been a further delay from our vendor for PICs (now March 2018). An update will be provided at the February meeting outlining impacts of the delay, including any financial implications.

4.2 Performance Information

NMDHB At A Glance

Noted.

Moved: Dawn McConnell

Seconded: Brigid Forrest

RECOMMENDATION:

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

AGREED

SECTION 5: FINANCIAL REPORT

The operating result for the six months is a surplus of \$919k, which is \$164k ahead of plan but behind the MOH efficiency adjuster. Earthquake costs are approximately \$150k.

It was noted traditionally in December sick leave spikes, however this year it is the lowest in the last 6 years.

Discussion held on the Mental Health/DSS budget noting they are separated and treated as separate business units. DSS is behind budget largely through the delay in houses coming on-stream. Mental Health is favourable to plan due to contracts not meeting volumes and vacancies in the service. It was noted that part of this surplus will be used for initiatives arising from the recent Mental Health review.

Treasury Management

Following on from discussions between MOH, Treasury and DHBs around the structure of the balance sheets of DHBs, and particularly the split between debt and equity, an agreement was reached between the MOH and Treasury for all core debt/loan funding to be converted to equity in February 2017. The Board agreed that the Board Chair and Deputy Chair sign the loan termination agreement for the transfer.

Moved: Gerald Hope
Seconded: Dawn McConnell

RECOMMENDATIONS:

THAT THE BOARD:

- 1 RECEIVES THE FINANCIAL REPORT
- 2 ENDORSES THE BOARD CHAIR AND DEPUTY CHAIR SIGN THE LOAN TERMINATION AGREEMENT.

AGREED

SECTION 7: CLINICAL GOVERNANCE REPORT

The report and the NMDHB Quality At A Glance were noted.

Moved: Judy Crowe
Seconded: Alan Hinton

RECOMMENDATIONS:

THAT THE BOARD RECEIVES THE CLINICAL GOVERNANCE REPORT.

AGREED

Public Excluded

Moved: Patrick Smith
Seconded: Alan Hinton

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 22 November 2016 (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
- CEs Report – RECEIVED

Meeting closed at 2.35pm.

CORRESPONDENCE

Date Received	From	Title
09/01/2017	Springlands Pharmacy	Invitation for CE to open new Pharmacy
09/01/2017	Ombudsmans Office	Publication of OIA complaints data
13/02/2017	Ministry of Health	Earthquake Relief Package