

WAIKATO DISTRICT HEALTH BOARD
Minutes of the Board Meeting
held on Wednesday 23 November 2016
commencing at 1.30 pm in the
Board Room, Hockin Building at Waikato Hospital Campus

Present: Mr B Simcock (Chair)
Mrs G Shirley
Ms C Beavis
Ms T Hodges
Ms S Mariu
Dr C Wade
Mr M Gallagher
Mr A Buckley
Mrs P Mahood

In Attendance: Dr N Murray (Chief Executive)
Mr B Paradine (Executive Director, Waikato Hospital Services)
Ms L Aydon (Executive Director, Public and Organisational Affairs)
Mr D Wright (Executive Director, Mental Health and Addictions Service)
Mr M Spittal (Executive Director, Community and Clinical Support)
Mrs M Chrystal (Executive Director Corporate Services)
Mr A McCurdie (Chief Financial Officer)
Ms T Maloney (Commissioner, Women's Health Transformation Taskforce)
Mr M ter Beek, (Executive Director, Operations and Performance)
Prof R Lawrenson (Clinical Director, Strategy and Funding)
Ms M Neville (Director, Quality and Patient Safety) for part of the meeting
Mrs J Wilson (Executive Director, Strategy and Funding)
Mrs S Haywood (Director Nursing and Midwifery)
Mr D Hackett (Executive Director, Virtual Care and Innovation)

ITEM 1: APOLOGIES FOR ABSENCE

Apologies for absence were received from Ms S Christie.

ITEM 2: INTERESTS

2.1 Register of Interests

The following changes to the Schedule of Interest Register were noted:

- Mrs P Mahood was no long a member of the Disability Support Advisory Committee at Lakes DHB
- Ms T Hodges was no long a member of the Community and Public Health Advisory Committee at Lakes DHB
- Mr M Gallagher was no long a member of the Member Hospital Advisory Committee at Lakes DHB
- Dr C Wade was no long a member of the Member Hospital Advisory Committee at Lakes DHB

2.2 Interest Related to Items on the Agenda

No conflicts of interest were foreshadowed in respect of items on the current agenda. There would be an opportunity at the beginning of each item for members to declare their conflicts of interest.

ITEM 3: MINUTES OF THE PREVIOUS MEETING AND MATTERS ARISING

3.1 Waikato District Health Board Minutes, 26 October 2016

**Resolved
THAT**

The part of the minutes of a meeting of the Waikato District Health Board held on 26 October 2016 taken with the public present were confirmed as a true and accurate record.

3.2 Committees

IWI Māori Council: 3 November 2016

**Resolved
THAT**

The Board received the minutes of IWI Māori Council held on 3 November 2016.

ITEM 4: CHIEF EXECUTIVE REPORT

The Chief Executive provided the Board with an update on:

- Update on Priority Programme Plans for the Strategy Implementation
- The psychiatrist (Mr Siddiqui) who has been charged with using false documents to gain employment at Waikato DHB. This matter is before the Hamilton District Court.

**Resolved
THAT**

The Board received the report.

ITEM 5: FINANCE REPORT

The Chief Financial Officer asked that his report for the month to 31 October 2016 be taken as read highlighting the following:

- The forecast was unfavourable to budget by \$4.3 million. The risks related to not achieving forecast included:
 1. Unbudgeted costs
 2. The impact of the required outsourcing to meet key targets
 3. The achievement of the budgeted savings or alternate savings
 4. The DHB's ability to extract favourable variances through the balance of the year to counter the current unfavourable YTD variance

- The provider was unfavourable to budget for October 2016:
 1. Revenue unfavourable to budget \$6.6m (2.3%) due to lower than planned Provider volumes.
 2. Employed personnel costs unfavourable to budget \$3.3m the dominant variances being within nursing and across all staffing groups due to annual leave.
The impact on costs of the RMO strike will be transacted in November 2016 but current information indicates that they are not expected to exceed 100k.
 3. Outsourced personnel unfavourable to budget \$3.8m – this related to medical locums (1.4m), Nursing (\$0.5) and admin/management contractors for the National Oracle Solution (NOS) project (\$1.8m) which had an offset in other revenue (1.6).
 4. Outsourced services were favourable at \$1.1m
 5. Clinical supplies were favourable at \$1.2m
 6. Infrastructure and non-clinical supplies were on budget at \$1.2m.
 7. Interest depreciation and capital charges were favourable to budget \$0.4m
- Acute cases excluding ED: episodes 1.3% below budget; case-weights 1.6% above budget
- Elective cases: episodes 11.4% below budget; case-weights 18.4% below budget
- Overall 4.0% below budget for cases and 4.6% below budget for case weights
- ED attends: YTD ED attends are 1.4% higher than the same period last year

It was noted that analysis was being done to ensure that the volume differences were clearly understood and the impacts managed.

- The result for the Funder was favourable due to favourable Provider payment costs
- The result for Governance was slightly favourable

**Resolved
THAT**

The financial statements of the Waikato DHB for the month to 31 October 2016 were received.

ITEM 6: PERFORMANCE REPORTING

6.1 Health Targets

The Health Targets report summarising performance was submitted for information.

Management noted:

- **Shorter stays in emergency department** – most recent result was 89.2%. The Board expressed their concern about the continued

failure to achieve this target. The CEO, Directors and Clinical Unit Leader had met to consider the ED Business Case, along with the progress made against the protocols to support improvement to the flow of acute patients.

- **Improved Access to Elective Surgery** – most recent result was 104%. A total number of 6,626 discharges for the period 1 July 2016 to 30 October 2016.
- **Faster Cancer Treatment** – The target was continuing to improve. The target for quarter one showed a result of 87.7%.
- **Increased immunisation for 8 month olds** – the most recent result of 93% for the three month period from 1 August 2016 to 31 October 2016. This was an increase from the previous quarter and highest result to date.
- **Better help for smokers to quit – primary care** - 87% was the most recent result.
- **Better help for smokers to quit – maternity** - 93% was the most recent result.
- **Raising healthy kids** - the DHB continued to work with PHOs and the Ministry of Health to ensure that pathways were followed and data captured to reflect activity.

Resolved

THAT

The Board received the report.

6.2 Provider Arm Key Performance Dashboard

The high level Provider Arm Key Performance Dashboard for October 2016 was submitted for the Board's information.

Clinical and Community Support

Management noted:

- **Breast Screening – Māori volumes**
Although the service was achieving the national average Māori coverage rate, it remained below target. The change to the new 'Support to Screening' providers had impacted on the existing providers.
- The remainder of the KPIs mentioned in the report were standard and not a cause for concern.

Mental Health and Addictions Service

Management noted:

- **Seclusion** – seclusion hours continued to show significant use throughout October. The total use was 700.8 hours against a target of 529 for adult mental health. Hours in Forensic dropped from 338.67 to 315.08 against a target of 347.

- **Inpatient occupancy** – showed a cohort of patients inappropriately placed in HRBC for extended periods of time. Analysis of the groupings had shown that the cohort falls under three broad headings:
 1. Predominantly younger men with significant alcohol and other drug problems, hard to engage, without family support and are not readily acceptable to other residential providers.
 2. Older adults or adult with aged related conditions or cognitive impairment who do not fit into residential support or rest home facilities.
 3. Younger people with cognitive impairment and behavioural disturbance.

Waikato Hospital Services

Management noted:

- **Long wait patients on outpatient waiting lists** – this KPI will be red for October. There had been successful adjustment of the threshold for access to spinal and foot and ankle subspecialties in orthopaedics to match our current less than planned capacity. Work continued to reduce the backlog and attain compliance prior to the end of January 2017 with particular attention to these two subspecialties.
- **Hospital Initiated elective theatre cancellations** – This KPI was impacted by the acute load. An increase in cancellations for orthopaedics was due to attempts to maximise orthopaedic theatre capacity for elective cases resulting in a slight increase for the month
- **Waiting time for acute theatre less than 24 hours** – this KPI was affected by and relying on the current recruitment initiatives for theatre nursing and orthopaedic surgery.
- **Waiting time for acute theatre less than 48 hours** - this KPI was affected by and relying on the current recruitment initiatives for theatre nursing and orthopaedic surgery.

Resolved

THAT

The Board received the report.

6.3 Strategy and Funding Key Performance Dashboard

The Strategy and Funding key performance dashboard was submitted for the Board's information.

Management noted:

- **IDF estimates** – The IDF flows for the first two months of 2016/17 showed an under-delivery of case weighted discharges of \$1.9m compared to the planned YTD budget.
- **AOD and Mental Health waiting times (% of new clients seen with 8 weeks of referral)** - wait times at 3 weeks for adults in AOD services continued to lag behind the target.

- **Proportion of older people waiting greater than 20 days for assessment or reassessment** – the average time for a DSL assessment in September was 1.8 working days.
- **Two year old immunisations** – this result remained static at 92%.

Resolved

THAT

The Board received the report.

ITEM 7: PLANNING

There were no items this month.

The Board acknowledged the significant contributions made by Paul Keesing who passed away recently.

ITEM 8: WAIKATO DHB POSITION STATEMENT AND POLICIES

There were no items this month.

ITEM 9: PAPERS FOR INFORMATION

Realising Employment through Active Coordinated Healthcare (REACH) Service

This report updated the Board on the progression of this new service and provided a patient story to illustrate the outcomes that had been evidenced to date.

Resolved

THAT

The Board received the report.

ITEM 10: NEXT MEETING

Date of Next Meeting

The next meeting to be held on Wednesday 14 December 2016, commencing at 1.30 pm in the Board Room, of Waikato DHB's Office on Level 9 of the KPMG Building on Alexandra Street, Hamilton.

BOARD MINUTES OF 23 NOVEMBER 2016

RESOLUTION TO EXCLUDE THE PUBLIC NEW ZEALAND PUBLIC HEALTH AND DISABILITY ACT 2000

THAT:

- (1) The public be excluded from the following part of the proceedings of this meeting, namely:

- Item 11: Minutes - Various
- (i) Waikato District Health Board for confirmation: Wednesday 26 October 2016 (Items taken with the public excluded)
 - (ii) Audit and Risk Management Committee: Wednesday 23 November 2016 – verbal update to be received – (All Items)
 - (iii) Midland Regional Governance Group: 4 November 2016 to be received (All Items)
- Item 12: Risk Register – Public Excluded
- Item 13: Chief Executive Report – Public Excluded
- Item 14: Woman’s Health Transformation Programme – Public Excluded
- Item 15: Operating Theatre Capacity – Public Excluded
- Item 16: Financial and Volume Analysis – Public Excluded
- Item 17: Mental Health & Addictions Services s99 (Mental Health Act) Inspection report Action Plan – Public Excluded
- Item 18: Replacement (3rd) General Computerised Tomography (CT) Scanner – Public Excluded

- (2) The general subject of each matter to be considered while the public is excluded, and the reason for passing this resolution in relation to each matter, are as follows:

GENERAL SUBJECT OF EACH MATTER TO BE CONSIDERED	REASON FOR PASSING THIS RESOLUTION IN RELATION TO EACH MATTER
Item 11 (i-iii): Minutes	Items to be adopted/ confirmed/ received were taken with the public excluded
Item 12: Risk Register	Avoid inhibiting staff advice about organisational risks
Item 13: Chief Executive Report	Negotiations will be required
Item 14: Women’s Health Transformation Programme Update	Negotiations will be required
Item 15: Operating Theatre Capacity	Negotiations will be required
Item 16: Financial and Volume Analysis	Negotiations will be required
Item 17: Mental Health & Addictions Services s99 (Mental Health Act) Inspection report Action Plan	Negotiations will be required
Item 18: Replacement (3 rd) General Computerised Tomography Scanner	Negotiations will be required

- (3) This resolution is made in reliance on Clause 33 of Schedule 3 of the NZ Public Health & Disability Act 2000 and the grounds on which the resolution is based,

together with the particular interest or interests protected by the Official Information Act 1982 which would be prejudiced by the holding of the whole or the relevant part of the proceedings of the meeting in public are as follows:

- Item 11:** As shown on resolution to exclude the public in minutes.
- Item 12:** Section 9(2)(c) of the Official Information Act 1982 – to avoid prejudice to measures protecting the health or safety of members of the public.
- Items 13 - 18:** Section 9(2)(j) of the Official Information Act 1982 – to enable the Waikato DHB to carry on negotiations without prejudice or disadvantage negotiations.