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| MEETING DETAILS |
| **Date and time:** | 9.35am to 2.35pm Friday 12 August 2016 |
| **Venue:** | Ministry of Health, Room 2-08, 1 The Terrace, Wellington |

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| Committee Members |
| Murray Leikis (Chairperson), Rachael Walker, Tonya Kara, Kay McLaughlin, Fredric Doss, John Schollum, Ian Dittmer, Chris Hood, Nick Cross, Max Reid, Annette Pack, Kimberley Reimers, Mardi Thompson |
| **Apologies** | Mardi Thompson |
| **By Invitation** | Oliver Poppelwell, Ministry of Health |
| **Minutes Taken By** | Annette Pack |

| **No.** | Item | Discussion/Action | **Responsibility** |
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| Minutes |
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| General Business |
| 1. | Introduction | The Chair opened the meeting and welcomed Catherine Tracy to NRAB. An apology was received from Mardi Thompson. |  |
| 2 | Review of the Board minutes recorded at the previous meeting held on **13 May 2016** | The previous NRAB minutes were accepted and will be added to NRAB’s webpage.Open actions from the previous meeting were discussed.* Open Action 2: Recruitment process for NRAB vacancy: Completed and closed.
* Open Action 3: Letter of thanks to John Collins on occasion of his retirement: Completed and closed.
* Open Action 4: EOI process for vacancy on Pharmac’s Transplant Immunosuppressant Subcommittee. Completed and closed. The outcome of the appointment process is not yet known.

Other open actions are included in agenda items (below) and identified as carried forward or closed. |  |
| 2 | NRAB Structure, Composition, and Function | Murray advised that he would not seek another term as Chair following expiry of his current term in November 2016. Members present at the meeting were asked to indicate their interest in the role.**Decision**: The Group agreed that Ian Dittmer would be the next Chair of NRAB (proposed Kay, seconded Frederic). However, as Ian will be away for NRAB’s November meeting, Murray will chair this meeting. Murray also represents a Large Renal Centre on NRAB and is an ex officio member representing the ANZSN New Zealand Chapter. Murray will continue to attend NRAB meetings as ANZSN representative.**Decision**: The Group agreed to seek another NRAB member representing a large Renal Centre.**Action:** Seek expressions of interest from large Renal Centres for a new member (Murray).A decision on whether Tonya will seek a second term will be deferred until NRAB’s first meeting of 2017, by which time an additional paediatric nephrologist will be in post in Starship Hospital. | **Murray Leikis** |

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| Regional Roundup |
| 3 | NorthernCentralSouth Island | Auckland DHB: * Demand for in-centre dialysis is increasing. Planning continues for a new dialysis centre.
* More children are needing paediatric dialysis, which has implications for staffing of dialysis units.
* The Transplant Centre has been allocated an extra live donor transplant theatre list each month and has accessed other theatre slots not being utilised by another service. The number of live and deceased transplants in 2016 will exceed 2015 volumes, although there has been no increase in Renal SMO staffing levels.

Counties Manukau DHB: * Early implementation issues at the new dialysis unit in Mangere (partnership between Diaverum and Counties Manukau DHB) have been worked through. The DHB is now receiving good reporting from the unit.
* A fixed term contract between Counties Manukau DHB and the Ministry has extended the Live Kidney Donation Aotearoa Programme for a further year, which will enable learnings from the programme to be shared with other DHBs.
* A fourth community dialysis house for independent patients has been opened. The community house model is possible through the DHB’s partnership with the Auckland Kidney Society (which owns the houses and manages the operation).
* A business case for the upgrade and expansion of the Acute Dialysis Unit has been developed and will be considered through the DHB’s capital planning process.
* The urgent PD programme is working well and will be reported at ANZSN’s meeting in October.
* A new policy developed by DHB management will change the current access to dialysis for ineligible people. NRAB intends to monitor the implementation of the Policy as people denied access to dialysis in CMDHB may present at other DHBs.

Waikato DHB* The Renal Service has developed a business case for a seventh SMO to address increasing patient caseload.

MidCentral DHB & Whanganui DHB:* A nurse practitioner from MidCentral DHB will work part time in Whanganui.
* A Renal Services Plan for MidCentral DHB which makes recommendations on service and capital improvements has been completed by an external consultant and will be considered by the DHB’s Board. Redevelopment or replacement of the current dialysis unit would need be considered as part of MidCentral DHB’s campus planning. The latest Plan follows an internal report in 2013 and a report by the Central Region’s Renal Clinical Leaders. These plans identified risks relating to space, health and safety, privacy and infection control in the current unit that have not been addressed.

**Action:** Write to MidCentral DHBCEO about the DHB’s response to the recently completed Renal Services Plan (Murray).Hawke’s Bay DHB:* The new dialysis unit, which will include office space for clinical and administrative staff, will be commissioned by the end of November 2016.

Capital & Coast DHB:* A new SMO at 0.8FTE has been appointed from January 2017. In the interim, additional MOSS-led clinics have been scheduled.

Canterbury DHB:* Canterbury DHB has agreed to provide vascular surgeon support for local surgeons at Nelson Marlborough
* Capital planning for a new in-centre dialysis centre to replace the existing earthquake damaged unit continues.
* The Renal CD has resigned his post, but will continue as a SMO.
* A consequential vacancy has occurred in 0.5 FTE of the DLC role funded by the Ministry.

Southern DHB:* Capacity issues continue.
* With the redevelopment of the ICU/HDU at Dunedin Hospital, there is an opportunity to use some unallocated space for a separate acute dialysis unit with the current unit becoming a training suite. A business case is being developed.
* There have been some changes in staff roles, but not in staff numbers.
 | **Ian Dittmer****Chris Hood / Catherine Tracy****Max Reid** **Rachel Walker****Murray Leikis****Kimberley Reimers** **John Schollum** |
|  New Business  |
| 4 | Review of Deceased Organ Donation & Transplant | Oliver Poppelwell of the Ministry’s Strategy & Policy Business Unit joined the meeting to discuss the status of the Review of Deceased Organ Donation and Transplantation and NRAB’s submission on the Consultation Document “Increasing Rates of Deceased Organ Donation”.* The consultation period for public submissions has now closed and the submissions are being analysed by the Ministry. EY will report to the Ministry soon on the capacity of the sector to manage increased deceased donation and transplant volumes.
* A Sector Working Group will meet on 30 August 2016 to consider the outcome of the above work and provide expert advice to inform the Ministry’s recommendations to the Minister of Health by late October 2016 on options to increase organ donation & transplant rates.
* There has been widespread support in the public submissions, including from NRAB, for the development of a national strategy for organ donation and transplant, and the establishment of a new national coordinating body, with appropriate governance and accountability arrangements, to oversee live and deceased organ donation and transplant in New Zealand.
* NRAB’s recommendation is that the effective operation of the national coordinating body will require strong clinical input, such as through an expert Clinical Advisory Group.
* The pros and cons of a fixed target for organ donation were discussed. NRAB’s recommendation is for a long term goal (10 years) for transplant (rather than organ donation) to attain a combined live and deceased donor transplantation rate within the top 20% of countries (a more flexible approach than a specific volume target). The need for review milestones during the term of the target was noted.
* NRAB members support more transparent reporting of the Death Audit to support DHBs sharing good practices and processes.
* The Ministry is engaging with NZTA on possible options in the short and long term for information from Driver Licences to be used to identify potential deceased organ donors.
* NRAB members agreed the need for hospital based organ donation specialists in ICUs/EDs, with support for dedicated roles for medical staff. Oliver noted that nursing staff have been effective in Link roles in some DHBs.
* Education for ICU & ED staff is supported. Mentoring of clinical staff not previously involved.in organ donation would be needed also.
* There was support for a new national coordinating body to engage experts to run public awareness campaigns on organ donation.
 | **Oliver Poppelwell, Ministry of Health (invited guest)** |
| 5. | National Viral Screening and Protection in Haemodialysis  | No work to report **Action carried forward**: Murray to begin scoping work with Frederic. | **Murray Leikis** |
| 6. | ANZDATA |  At the recent Executive meeting of the ANDATA Registry it was agreed that:* a separate NZ Working Group would be established
* New Zealand will have a separate chapter in the ANZDATA Annual Report
* New Zealand will have separate standards and audit regime, including New Zealand relevant consent forms.

The ANZDATA contract will expire on 30 June 2017. Any new contracting arrangements will be informed by clinical input from NRAB and NRTS and the contracting arrangements in place between ANZDATA and the Australian Federal Government.  | **Tonya Kara****Annette Pack** |
| 7. | 2014 New Zealand Nephrology Activity Report | Murray presented the 2014 New Zealand Nephrology Activity Report (previously Audit & Standards).* Tonya Kara and Suetonia Palmer have worked with ANZDATA to revise the format of the reports, making them more accessible to a wider audience, through the use of clear language and graphics. There are now separate summary reports for transplant and dialysis and a powerpoint version of the Activity Report:2014: Care Processes and Treatment Targets.
* The Activity Report contains a description of supportive care for people who choose not have dialysis.
* Points relating to Dialysis Care:
* there is a significant variation in the need to start dialysis based on a person’s ethnicity
* there is an increasing proportion of older people (65 years and over) who are starting dialysis
* in-centre haemodialysis is increasing
* peritoneal dialysis continues to decrease
* The reports will be presented at the ANZSN’s conference in October, where feedback will be sought on what should be included or removed in the 2015 report. Anyone not attending the conference should send ideas to Tonya or Suetonia.
* New Zealand data for the 2015 year is due by the end of March 2017.
 | **Murray Leikis & Tonya Kara** |
| 8. | Australasian Health Facility Guidelines  | The Australasian Health Facility Alliance published a document in May 2016 describing the operational, functional and design requirements of in-centre and satellite haemodialysis and training facilities. The document has been approved by the Ministry of Health. Kay has been unable to find out from the Ministry what the status of the document is and the expectations for DHBs in meeting the requirements of the document.**Action**: Find out what the status of the health facility guideline for Renal Dialysis Unit, published by the Australasian Health Facility Alliance and advise Kay (Annette).  | **Kay Mclaughlin** |
| 9. | Dialysis Standards  | The views of the group were sought on each dialysis standard and whether targets included in them are still relevant or need to be changed.**Action**: Revise dialysis standards based on the discussion and include revised version in the agenda for the November meeting (Frederic). | **Frederic Dross** |
| General |
| 10 | NZ Chapter of the ANZSN  | * The annual meeting will be held in Whangarei on 13-14 October 2016.
* Aviva Rosenfeld, Executive Officer of ANZSN for many years has passed away
* There is a DNT conference next year. Possible agenda items from New Zealand are kidney exchange, increasing live donor transplant and donation promoting strategies.
 | **Murray Leikis** |
| 11 | Nephrology Advanced Training | The group’s views were requested on a proposal that several suppliers of dialysis equipment set up an educational fund for Nephrology Advanced Training.The group was supportive provided the fund is able to be applied to an independently developed and managed curricular.  | **Chris Hood** |
| 12 | Tier 2 document update | No work to report.**Action** carried forward: Update draft (Ian/Tonya). | **Ian Dittmer/Tonya Kara/All** |
| 13 | RRT access in NZ | Changes from the previous meeting have been included in a revised draft of “Access to Renal Replacement Programmes in New Zealand”, including a section on transplantation (Action 11 from previous meeting closed). The revised document was tabled and discussed.Further wording changes were agreed.**Action**: Update draft and circulate to members (Murray).  | **Murray Leikis** |
| 14 | PTAC Nephrology subcommitteeAnd Medicines | No work to report.  | **Tonya Kara** |
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| 15 | CKD National Strategy | The programme has been rolled out in the Wellington Region. Some software glitches have been resolved. | **Murray Leikis** |
| Dialysis |
| 16 | KHNZ - Holiday Dialysis | GMs Planning & Funding have agreed to work with KHNZ on a stocktake of holiday dialysis equipment in New Zealand and identify gaps.The Chair has written to DHB Chairs advising them of legal advice that KHNZ received from the Ministry of Health that holiday dialysis for Australian citizens is covered by the reciprocal health agreement between New Zealand and Australia and should be provided at no cost by DHBs. However, provision of the service is conditional on a DHB having capacity to provide the service and the visitor having made adequate arrangement in advance of their visit.The Ministry is investigating ways to include the above advice in DHB accountability documents and website (action 12 from previous meeting carried forward/Annette).KHNZ has written to the Minister of Health with concerns that renal disease is no longer part of the work programme in the Long Term Conditions team of the Ministry. The Chair asked NRAB members to consider how NRAB could promote a greater focus on renal disease.**Action**: Discuss at next meeting how NRAB can promote a greater focus on renal disease (Murray).  | **Max Reid/ALL** |
| 17 | PD Registry Update / PDOPPS update | The minutes of the NZ PD Governance Group July meeting were tabled and contents noted. | **Ian Dittmer** |
| 18 | Disaster Planning, patient and service preparedness | A Renal page has been added to healthEMIS, CCDHB is investigating adding its disaster plan. | **Kay McLaughlin** |
| 19 | Health Alliance Contracts | Each dialysis centre has developed its own procurement weightings, reflecting clinical and price factors. The healthAlliance procurement process for PD equipment is progressing and a RFP is to be issued to suppliers in September 2016. | **Murray Leikis** |
| Transplant |
| 20 | National Tx activity  | * A new patient resource on allocation of deceased donor kidneys has been developed and will be posted on the NRTS webpage.
* The NRTS’s 2015 Activity Report has been published. There was a record number of kidney transplants in 2015, due to an increase in deceased donor transplants. There has been a total increase of 16 live donor transplants since 2013 or 8 year-on-year, which is slightly less than the NRTS’s target of 10 live donor transplants year-on-year.
* The NRTS and the Ministry have jointly developed expectations on the number of live donor transplants by Renal Transplant Centre in 2016/17 and the next two years to assist transplanting DHBs with their resource planning.
* A National Live Donor Assessment Tests schedule is being developed.
* Pilot sites of Counties Manukau and MidCentral are supporting the NRTS with the implementation of Quality Improvement metrics 3,4,5 relating to consideration of people with ESKD for assessment for live donor transplant and work up times of recipients and live donors.
 | **Nick Cross** |
| 21 | Kidney Exchange  | * The NZ Kidney Exchange Report to June 2016 was tabled.
* There are currently 29 pairs enrolled in the programme.
* Work on trans Tasman collaboration is progressing.
 | **Ian Dittmer** |
| Standard Report Updates |
| 22 | Report on Kidney Health New Zealand | Refer item 16 above. | **Max Reid** |
| 23 | **Subcommittee reports**1. Standards & Audits2. RSA / Nursing Advisory Group3. NZ Board of DialysisPractice | Action: Discussed under item 7 above.Not discussed. * The structure of the NZBDP is examining joint membership options with Australia.
* There is an intake of 10 students at MIT.
* A symposium is being held 28-29 October 2016.
 | **Frederic Dross** |
| Other Business |
| Next Meeting |
| **Date:** Friday 18 November 2016 | **Time**: 9.30am | **Venue:** TBC |