

MidCentral District Health Board

Board Minutes

Meeting held on 29 March 2022 from 9.00am Via Zoom (due to COVID-19 restrictions)

PART ONE

Members

Brendan Duffy (Board Chair), Heather Browning, Vaughan Dennison, Lew Findlay, Norman Gray, Muriel Hancock, Materoa Mar, Karen Naylor, Oriana Paewai, John Waldon, Jenny Warren.

Apologies

Materoa Mar for lateness

In attendance

Kathryn Cook, Chief Executive; Shivarn Stewart, Communications Team Leader; Margaret Bell, Board Secretary.

Note: Due to workload pressures related to the COVID-19 response, the Chief Executive would present papers on behalf of some of the executive team; other members of the executive team would only join the meeting to present their paper.

In attendance (part meeting)

Celina Eves, Executive Director, Nursing and Midwifery; Sarah Fenwick, Operations Executive, Te Uru Pā Harakeke; Darryl Ratana, Deputy Chief Financial Officer; Gabrielle Scott, Executive Director, Allied Health (and Interim General Manager, Quality and Innovation); Neil Wanden, General Manager, Finance and Corporate Services.

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1. KARAKIA

The meeting opened with the organisational karakia.

2. ADMINISTRATIVE MATTERS

2.1. Apologies

An apology was accepted from Materoa Mar for lateness.

2.2. Late items

No items

2.3. Register of Interests Update

Heather Browning

- Role with the Ministry of Health as Project Manager for Mana Whaikaha ended late 2021.
- Resumed role as Director of Mana Whaikaha in August 2021 (temporary role).

In relation to agenda items for this meeting

• Item 6.2 – Materoa Mar had previously declared her interest as Upoko Whakarae Te Tihi O Ruahine Whānau Ora Alliance

2.4. Minutes of the Board meeting held on 15 February 2022, Part One

It was resolved that:

the Part One minutes of the 15 February 2022 Board meeting be approved as a true and correct record. (Moved John Waldon; seconded Vaughan Dennison)

2.5. Matters arising from previous minutes

No discussion.

2.6. Verbal report from the Board Chair

The Board Chair acknowledged the pressure the organisation was under in providing services during the COVID-19 pandemic. He had been embarrassed to observe some members of the public abusing staff who were monitoring people entering the front door. Their role was to ensure contact tracing and social distancing measures were observed in order to keep patients and staff safe.

He noted there were only two more Board meetings scheduled before the transition to Health New Zealand on 1 July 2022.

In response to a question, the Chief Executive advised that management followed guidance from the Ministry of Health regarding staff members who either had COVID-19 or were household contacts being at work. This included some circumstances where a person who had tested positive for COVID-19 could still work, but no MidCentral District Health Board (MDHB) staff were in that category.

2.7. Minutes of the Health and Disability Advisory Committee meeting held on 1 March 2022, Part One

It was resolved that the Board:

note the unconfirmed Part One minutes of the Health and Disability Advisory Committee meeting held on 1 March 2022. (Moved Muriel Hancock; seconded Heather Browning)

2.8. Minutes of the Finance, Risk and Audit Committee meeting held on 15 March 2022, Part One

It was resolved that the Board:

note the unconfirmed Part One minutes of the Finance, Risk and Audit Committee meeting held on 15 March 2022. (Moved Oriana Paewai; seconded Vaughan Dennison)

2.9. Manawhenua Hauora Chair's Report

Oriana Paewai, Manawhenua Hauora Chair provided a verbal update on the Manawhenua Hauora hui held on 21 March 2022, which was focused on the transition to Health New Zealand and the Māori Health Authority. Members of the Iwi Māori Partnership Board (IMPB) were being appointed. The IMPB would replace Manawhenua Hauora and include iwi from outside the MDHB rohe, so a new name would be used.

The final hui of Manawhenua Hauora would be held on 16 May 2022, followed by a Board to Board hui that afternoon.

It was resolved to:

note the Manawhenua Hauora Chair's report. (Moved Oriana Paewai; seconded Brendan Duffy)

3. STRATEGIC FOCUS

No items.

4. PERFORMANCE REPORTING

4.1. Chief Executive's Report

The Chief Executive presented this report, which was taken as read. She noted that the number of COVID-19 deaths reported was increasing. The change in reporting method meant that many of these people died with COVID-19, rather than from COVID-19. A significant number of staff were absent either because they had tested positive for COVID-19 or were a household contact. Business continuity plans had been enacted to support safe patient care and safe staffing. It was not clear whether MDHB had reached the peak number of cases yet and it was possible the peak would be in a few weeks' time.

In response to a question, the Chief Executive noted that governance of the Health New Zealand and Māori Health Authority would be at a national level. Community engagement and advocacy was likely to be through localities.

It was resolved that the Board:

note the update of key local, regional and national matters. (Moved Vaughan Dennison; seconded Lew Findlay)

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer joined the meeting.

4.2. Financial Update – February 2022

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer presented a verbal report, which had also been presented to the Finance, Risk and Audit Committee meeting held on 15 March 2022.

The February result was \$2.341 million favourable to budget, mostly due to additional ACC revenue following a price review of Non-Acute Rehabilitation (NAR) contracts. The new prices were effective from December 2020 and resulted in \$1.7 million of revenue that had not been included in the budget.

Year-to-date revenue was ahead of budget, with overall expenditure close to budget.

In response to a question, the General Manager, Finance and Corporate Services advised that any delays to building projects would not have an impact in the current financial year.

It was resolved that the Board:

note the verbal update provided on the February 2022 financial result. (Moved Oriana Paewai; seconded John Waldon)

4.3. Finance Report – January 2022

The General Manager, Finance and Corporate Services and the Deputy Chief Financial Officer presented this report, which was taken as read.

It was resolved that the Board:

note that at its March meeting, the Finance, Risk and Audit Committee endorsed this report for the Board's consideration note that the month operating result for January 2022 is a surplus before one-off items of \$1.359m, which is \$1.162m favourable to budget

note that the year to date result for January 2022 is a deficit before one-off items of \$3.319m, which is \$0.284m adverse to budget

note that year to date for January 2022 COVID-19 related contribution of \$0.146m and Holidays Act costs of \$3.194m have been incurred. Including these results in a year to date deficit after exceptional items of \$6.367m, which is \$0.751m favourable to budget

note that the total available cash and equivalents of \$31.558m as of 31 January 2022 is sufficient to support liquidity requirements

approve the January 2022 financial report.

(Moved Oriana Paewai; seconded John Waldon)

The General Manager, Finance and Corporate Services left the meeting.

Board member, Materoa Mar, joined the meeting.

4.4. Health System Indicators Dashboard - Quarter One 2021/22

The Chief Executive presented this report, which was taken as read. In response to a question, she advised that the childhood immunisation team was working with the primary health organisation and iwi providers to look at opportunities to offer vaccinations in different ways. This included using the non-regulated vaccinator workforce, pharmacies and linking the regular vaccination schedule with COVID-19 vaccinations for tamariki and whānau.

A Board member noted that the MDHB website didn't reflect the longer waiting times – and still showed incorrect wait times. The Chief Executive undertook to ensure the website was updated and that letters to the public explained the likely delay in wait times.

The Chief Executive advised that details of unmet need and declined referrals for ESPI 2 and ESPI 5 would be included in the Te Uru Arotau, Acute and Elective Specialist Services report to the next Health and Disability Advisory Committee meeting.

In response to a question about funding of water and power services in kohanga reo to support connections to mobile dental units, the Chief Executive explained that MDHB was not permitted to spend its capital on external providers. However mobile units were being upgraded so they could be self-contained. She suggested that the broader issue be raised through the Regional Interagency Network (RIN).

A Board member noted that cellulitis is on the pathway for Primary Options for Acute Care (POAC) and asked that further discussion be held with THINK Hauora around privileging for Māori and POAC.

It was resolved that the Board:

note the performance for the first quarter of 2021/22 of the Health System Indicators (HSI) as highlighted in the HSI dashboard.

(Moved Heather Browning; seconded Lew Findlay)

4.5. Non-Financial Performance Measures – Quarter Two 2021/22

The Chief Executive presented this report, which was taken as read. She noted that details of the length of stay in the Emergency Department were included in reports to the Health and Disability Advisory Committee. The length of stay was affected by lack of hospital beds, which would be improved through the building programme. The additional all-day theatre lists on Saturdays and the Ministry of Health's pilot discharge programme had also helped to improve patient flow.

A Board member spoke of recent personal experience of a family member being diagnosed with cancer. Despite pressures on the hospital due to COVID-19, the response, treatment and support to the patient and whānau from the haematology and oncology teams was amazing.

It was resolved that the Board:

note the progress and performance for the second quarter of 2021/22 against its commitments and accountabilities to Government as identified in the 2021/22 Annual Plan and the Non-Financial Monitoring Framework and Performance Measures for DHBs

note the Ministry of Health's summary report for Quarter Two 2021/22 is available on the Stellar platform endorse the mitigation activities in place for those performance measures or deliverables that were not meeting expectations for Quarter Two 2021/22.

(Moved John Waldon; seconded Vaughan Dennison)

The Interim General Manager, Quality and Innovation joined the meeting.

4.6. Sustainability Plan Report

The Interim General Manager, Quality and Innovation and the Deputy Chief Financial Officer presented this report, which was taken as read.

It was resolved that the Board:

note that at its March meeting, the Finance, Risk and Audit Committee endorsed this report for the Board's consideration note the progress in the implementation of the Sustainability Plan note the Sustainability Plan benefits monitoring dashboard and trend analysis note the January 2022 report indicates savings of \$323,961 year to date approve the 2022 Sustainability Plan report.

(Moved Muriel Hancock; seconded Heather Browning)

The Interim General Manager, Quality and Innovation and the Deputy Chief Financial Officer left the meeting.

5. DISCUSSION/DECISION PAPERS

5.1. Combined Medical Staff Association and Executive Action Plan

The Chief Executive presented this report, which was taken as read. She noted that the March Medical Reference Group meeting did not take place as attendance was affected by the response to COVID-19 and there were no significant items for discussion.

It was resolved that the Board:

note the Combined Medical Staff Association (CMS) and Executive Action Plan. (Moved John Waldon; seconded Lew Findlay)

The Executive Director, Nursing and Midwifery joined the meeting.

5.2. Nursing Workforce Update

The Executive Director, Nursing and Midwifery presented this report, which was taken as read. She outlined the staff wellbeing programme in place to support staff who are responding to COVID-19 pressures, particularly nurses. The Chief Executive explained that a wellbeing programme for all staff was in place, including leadership support, psychosocial support and access to counselling. Other initiatives were being rolled out, including access to refreshments once per shift (staff would be provided with a voucher). Food was already being provided to staff working on COVID-19 wards. A targeted payment was in place for hard-to-fill shifts.

It was resolved that the Board:

note the Nursing Workforce Report. (Moved Oriana Paewai; seconded John Waldon)

The meeting agreed to reorder some agenda items. The original agenda item numbers are used in these minutes.

6. INFORMATION PAPERS

6.2 COVID-19 Vaccinator Working Under Supervision

The Executive Director Nursing and Midwifery presented this report, which was taken as read. It was noted that costs for staff welcoming visitors and screening at the hospital's front entrance were included on the COVID-19 expenditure tracker which was reported to the Ministry each month.

It was resolved that the Board:

note the briefing.

(Moved Brendan Duffy; seconded Heather Browning)

5. DISCUSSION/DECISION PAPERS (continued)

The Operations Executive, Te Uru Pā Harakeke, Healthy Women, Children and Youth joined the meeting.

5.3 Midwifery Workforce Update

The Operations Executive, Te Uru Pā Harakeke presented this report, which was taken as read. She noted that the Te Papaoiea Birthing Centre was expected to reopen during May, Monday to Friday for 24 hours a day.

It was resolved that the Board:

note the current midwifery workforce position note the key updates to the Midwifery Action Plan. (Moved Jenny Warren; seconded Muriel Hancock)

The Operations Executive, Te Uru Pā Harakeke and the Executive Director, Nursing and Midwifery left the meeting.

6. INFORMATION PAPERS (continued)

6.1. NZ Health Partnerships – Quarterly Update

The Chief Executive presented this report, which was taken as read.

It was resolved that the Board:

note the update on the activities of New Zealand Health Partnerships Limited. (Moved Materoa Mar; seconded Lew Findlay)

6.3 Use of the Official Information Act 1982 to exclude the public from meetings

The Chief Executive presented this report, which was taken as read.

It was resolved that the Board:

note the report on the use of the Official Information Act 1982 to exclude the public from meetings. (Moved Jenny Warren; seconded John Waldon)

6.4 **Board's Work Programme**

The report was taken as read. It was noted that the Psychosocial Wellbeing Plan had been presented to Manawhenua Hauora.

Several Board members expressed concern that representatives from professional work groups would not have the opportunity to meet with the Board before the end of its term.

It was resolved that the Board:

note the Board's annual work programme.

(Moved Vaughan Dennison; seconded Norman Gray. Karen Naylor voted against this resolution)

7. GLOSSARY OF TERMS

8. LATE ITEMS

No discussion.

9. DATE OF NEXT MEETING

Tuesday, 10 May 2022 – Board Room, MidCentral District Health Board, Gate 2 Heretaunga Street, Palmerston North (subject to any COVID-19 restrictions).

10. EXCLUSION OF PUBLIC

It was resolved:

that the public be excluded from this meeting in accordance with the Official Information Act 1982, section 9 for the following items for the reasons stated:

| Item | Reason | Ref |
|---|--|-------------|
| 'In Committee' minutes of the previous Board meeting | For reasons set out in the agenda of 15 February 2022 | |
| Electrical Substation Replacement | To carry out without prejudice or disadvantage, negotiations (including commercial and industrial negotiations) | 9(2)(j) |
| Generator Replacement | To carry out without prejudice or disadvantage, negotiations (including commercial and industrial negotiations) | 9(2)(j) |
| Replacement of CT Scanner and Building Works | To carry out without prejudice or disadvantage, negotiations (including commercial and industrial negotiations) | 9(2)(j) |
| Post-Acute Community Rehabilitation Business Case | To carry out without prejudice or disadvantage, negotiations (including commercial and industrial negotiations) | 9(2)(j) |
| Transfer to Enable New Zealand Limited – progress report | To protect information which is subject to an obligation of confidence | 9(2)(ba) |
| Te Awa – Clinical Digital and Technology Modernisation Programmes | To maintain the constitutional conventions for the time being which protect the confidentiality of advice tendered by Ministers of the Crown and officials | 9(2)(f)(iv) |
| Health Sector Reforms – Transition Plan for MDHB | To maintain the constitutional conventions for the time being which protect the confidentiality of advice tendered by Ministers of the Crown and officials | 9(2)(f)(iv) |
| Board only time | No decision sought | |
| 'In Committee' minutes of the previous Health and Disability Advisory Committee meeting | For reasons set out in the agenda of the 1 March 2022 meeting held with the public present | |
| Serious Adverse Events (SAC 1) Report | To protect patient privacy | 9(2)(a) |

| 'In Committee' minutes of the previous Finance, Risk and Audit Committee meeting | For reasons set out in the agenda of the meeting held on 15 March 2022 | |
|--|---|---------|
| Workshop | | |
| Acute Mental Health Unit – progress report | To carry out without prejudice or disadvantage, negotiations (including commercial and industrial negotiations) | 9(2)(j) |

(Moved Vaughan Dennison; seconded John Waldon)

| Part One of the meeting closed at 10.55am |
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| Confirmed this 10th day of May 2022 |
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| Board Chair |