



# Minutes Meeting of the Board

**Minutes of the Auckland District Health Board meeting held on Wednesday, 18 September 2013 in the Marion Davis Library, Building 43, Auckland City Hospital, Grafton commencing at 2:00pm**

ADHB Board Members Present	ADHB Management Present
Dr Lester Levy (Chair)	Ailsa Claire – Chief Executive
Jo Agnew	Greg Balla – Director Provider Business Management
Peter Aitken	Simon Bowen – Director of Health Outcomes – Waitemata and Auckland
Judith Bassett	Fionnagh Dougan – Director Provider Services
Susan Buckland	Margaret Dotchin – Chief Nursing Officer
Dr Chris Chambers	Mark Fenwick – Communications Manager
Robyn Northey	Debbie Holdsworth, Chief Planning and Funding Officer
Gwen Tepania-Palmer	Bruce Levi – Acting Pacific General Manager for Hospital Services – Waitemata and Auckland
Ian Ward	Auxilia Nyangoni – Deputy Chief Financial Officer
	Andrew Old – Interim Chief Strategy, Participation and Innovation Officer
	Rosalie Percival – Chief Financial Officer
	Vivienne Rawlings – Chief Human Resources Officer
	Marlene Skelton – Corporate Business Manager
	Susan Waters – Chief Health Professions Officer
	Margaret Wilsher – Chief Medical Officer

## 2 Apologies

Dr Lee Mathias (Deputy Chair) and Rob Cooper  
Also Naida Glavish and Linda Wakeling

## 3 Conflicts of Interest

The Board Chair advised of a conflict of interest in relation to item C11.10 as he is Deputy Chair of HBL and Board Member Susan Buckland advised of a potential conflict of interest in relation to item C11.12 as she is a member of the Northern Region Ethics Committee (A).

There were no declarations of conflicts of interest for any other items on the agenda.

## 4 Confirmation of Minutes 7 August 2013

Moved Robyn Northey/Seconded Gwen Tepania-Palmer

**That the minutes of the Auckland District Health Board meeting held on 7 August 2013 be confirmed as a true and correct record.**

Carried

## 5 Action Points 7 August 2013

There was no comment with regard to action points from the meeting of 7 August 2013.

## 6 Chairman's Report

The Board Chair noted as follows:

- That the Local Body Elections, which include elections for the District Health Boards, are

almost upon us. He wished current members and all other candidates well. By the time the next Board meeting comes around the election would be complete and results public.

## 7 Chief Executive's Report

The CEO asked that her report be taken as read. She highlighted and/or updated aspects of her report which included:

- Drawing Board Members' attention to the published success Auckland District Health Board had had with the 6 National Health Targets
- The successful management of the coronial tissue sample issue, thanking the Chief Medical Officer, Margaret Wilsher Sue waters Fionnagh Dougan Matt Rogers and all those involved for the sensitive and effective way it had been handled
- Noting 35 people were nominated as Local Heroes during July and August and that there were a diverse range of people achieving in their fields
- Noting the 10 year anniversary of the Blue Coats and applauding their commitment. Commenting that it was perhaps time too, to see a new generation of volunteers come on board and that the role that they performed could be reviewed and expanded
- Noting that the target performance summary was showing that "elective surgery" had slipped from green 100%, to yellow 99%.

Senior Managers reported on scorecard aspects on behalf of the Chief Executive:

### Patient Safety

- Margaret Wilsher – Chief Medical Officer reporting that a good start to the year could be reported but that there was always further work to do.

### Better Quality Care

- Susan Waters – Chief Health Professions Officer reporting that work was on-going around DNAs in order to improve the situation.

### Clinical Governance

- Margaret Dotchin – Chief Nursing Officer advised that to increase the visibility of hand hygiene and compliance, a further step was being taken with the formation of an ADHB hand hygiene steering group with Health Service Group attendance. There is the intention of training one Gold auditor in every ward/unit. This should ensure that the current high level was maintained.
- Nurses working in expanded practice roles.
- Auckland District Health Board is establishing a Nursing Scope of Practice Committee (NSOPC). The NSOPC will be chaired by Auckland DHB's Chief Nursing Officer. NSOPC has developed a process to consider proposals for expanding registered nurse practice using the NCNZ Guideline.
- It provides advice, approves changes and credentials individual registered nurses to perform specified expanded nursing practice activities within Auckland District Health Board. Approval for expanded registered nurse practice may be limited to a specific clinical setting or approved across the DHB. Expanded registered nurse practice that overlaps the activities of other health professionals must also be endorsed by those disciplines.
- Bohmer clinical leadership sessions
- Twenty-six Auckland DHB clinical leaders and senior managers attended a two-day workshop on strategy and clinical leadership conducted by Professor Richard Bohmer, MPH. Prof Bohmer is a NZ medical graduate who teaches at the Harvard Business School, although he is currently on sabbatical working with the Kings Fund in London, UK.
- The aim of the training, which is conducted jointly with WDHB, is for staff to apply the skills acquired to joint problem-solving as part of the District Health Boards collaboration efforts.

- Immunisation
- The Integrated Auckland and Waitemata DHB National Immunisation Register and Outreach Immunisation Service launched on 1 July 2013. The transition has progressed smoothly and a positive impact on the Auckland DHB immunisation rates is being seen.

Board members had the following questions and/or comments to make:

- Chris Chambers asked, what specific outcomes management hoped to achieve from the Bohmer leadership training? The Chief executive advised that it essentially challenged the way a person thought about problems and taught individuals to work in a team environment and focus on value added activity.
- The Board Chair commented that it was not pure leadership development (which still is a concerning void within this organisation), although it is helpful in developing acumen and changing mind-sets.
- Susan Buckland commented that the rheumatic fever campaign was being well liked by Facebook followers

**That the report of the Chief Executive dated 18 September 2013 be received.**

## **8 Lift the Health of People in Auckland City**

### **8.1 CPHAC Recommendations**

There were no recommendations this month.

### **8.2 ADHB Family Violence Self Audit for the Violence Intervention Programme (Vip) Results 2013**

Susan Waters – Chief Health Professions Officer asked that her report be taken as read advising that :

- Restructuring and the amalgamation of WDHB and ADHB in certain services has meant that Whanau Ora initiatives have been delayed and that urgent work is required on the criteria to meet our cultural responsiveness targets.
- Re-establishment of the Family Violence Kaitiaki Group as advocated along with the establishment of other customer service and research initiatives.

Board Members had the following questions and/or comments to make:

- The Board Chair asked that it was made very clear to all parties what business as usual incorporated.

Moved Gwen Tepania-Palmer/Seconded Robyn Northey

**1. That the report of Susan Waters, Chief Professions Officer dated 18 September 2013 be received.**

**2. That the Board endorses the areas for development identified within the report**

**Carried**

### **8.3 ADHB Stroke Review Summary – September 2013**

Susan Waters – Chief Health Professions Officer asked that her report be taken as read advising that she was seeking Board acceptance of the results of assessment and the formation of a working party.

Board Members had the following questions and/or comments to make:

- Chris Chambers asked for clarification of who was involved in the working party and was advised that all relevant clinicians would be.
- The Board Chair noted that he had assumed that the Auckland District Health Board had a proper service in place and asked that timeframes be made clear for each of the key areas requiring development listed on page 68 of the agenda.

Moved Robyn Northey/Seconded Jo Agnew

1. **That the report of Susan Waters, Chief Professions Officer dated 18 September be received.**
2. **That the Board required a comprehensive, co-related all age stroke service which was evidence based and requests an action plan in February on how to achieve this.**

**Carried**

[Secretarial Note: the Board Chair requested Susan Waters – Chief Health Professions Officer to have a conversation with Debbie Eastwood of Waitemata District Health Board in regard to having a similar audit take place within Waitemata District Health Board.]

**8.4 Health and Healthcare Where It Matters – A Locality Approach for Auckland and Waitemata District Health Boards**

Andrew Old – Interim Chief Strategy, Participation and Innovation Officer asked that his report be taken as read advising that it had been endorsed by the Locality and Governance Groups.

Board Members had the following questions and/or comments to make:

- Board Member Chambers noted that on page 86 some attention was required to address points that were mutually exclusive. It was agreed that this page would be revised before the final version of the report was released.

Moved Robyn Northey/Seconded Susan Buckland

1. **That the report of Andrew Old, Interim Chief Strategy, Participation and Innovation Officer dated September 2013 be received**
2. **That the Board endorses the next steps identified within the report**

**Carried**

**9 Live with our Means**

**9.1 Audit and Finance Committee Recommendations**

There were none

**9.2 Finance Report**

The Chief Financial Officer asked that the results for July be taken as read and tabled the financial results for August 2013. She highlighted aspects within the August report including:

- The month of August recorded a budget deficit of (\$1.0M) compared to the budgeted deficit of (\$1.1M)
- The Funder arm favourable variance has offset the unfavourable variance in the Provider arm.
- The result for the month is driven by higher revenue and higher operational costs.

Board Members had the following questions and/or comments to make:

- An explanation of the nursing cost was requested. It was explained that a \$1.3M favourable variance existed for registered nurses as opposed to an unfavourable variance of \$1.9M for Bureau nurses
- The Board Chair noted that it took longer for Auckland District Health Board to recruit than within other DHBs. This was due to the regional and national services offered and the specialist experience that was required within roles
- The Chief Executive advised that every vacancy was reviewed to determine the skill mix requirement and this adds time to the recruitment process.

**That the reports of the Chief Financial Officer dated July and August 2013 be received.**

### **9.3 2012/2013 Financial Statements – 2013 Annual Report**

The Corporate Business Manager put forward the request of the Audit and Finance Committee for signatories to be appointed to sign the representation letter to the Auditors and the annual accounts to June 2013, along with the requirement for a special Board meeting to approve those accounts.

Board Members had the following questions and/or comments to make:

- It was advised that it was possible that all District Health Boards would have their accounts “qualified” by NZ Audit as there was no acceptable way of validating data received from PHOs.
- The Board Chair also pointed out that the Audit and Finance Committee Chair, Ian Ward, had cautioned that he believed that any form of qualification may trigger the negative pledge bonds. Staff were investigating this circumstance.

Moved Gwen Tepania-Palmer/Seconded Robyn Northey

1. The Board Chair, Lester Levy and the Chair of the Audit and Finance Committee, Ian Ward be authorised to sign the representation letter to Auditors on behalf of the Board.
2. The Board Chair, Lester Levy and the Chair of the Audit and Finance Committee, Ian Ward be approved to sign the annual accounts for the period ending 30th June 2013 on behalf of the Board.
3. That in order to gain approval and sign off the final accounts in the required timeframe a special meeting of the Board be held immediately after the Audit and Finance meeting on 9 October 2013 at 11.30am

**Carried**

### **10 General Business**

#### **10.1 End of Year Report for the 2012-2013 Northern Region Health Plan**

The Board Chair invited Margaret Wilsher – Chief Medical Officer as lead CMO Regional Planning to highlight key points.

- Margaret advised that there had been many success stories throughout the year not least the “Advance Care Planning” training which has expanded throughout the region enabling more healthcare staff to be trained. This was due in no small part to the personal efforts of Lee Manson and her work through the National Cooperative.

Board Members had the following questions and/or comments to make:

- Board Members thought it was an extremely coherent and eminently readable document and an excellent example of regionalisation.

Moved Susan Buckland/Seconded Judith Bassett

1. **That the end of year report for the 2012-2013 Northern Regional Health Plan be received**
2. **That an invitation be extended to Lee Manson to address the Board on Advance Care Planning**

**Carried**

## **10.2 Waiting Lists**

Anecdotal comment was relayed by Robyn Northey that GPs had advised that some patients may not be getting to first appointment stage.

Robyn Northey was advised that waiting lists were triaged and that the pathway of care would govern a referral. If an appointment was not forthcoming then the GP would be advised. If the patient met the criteria the wait is five months, if they did not then they are referred back to their GP. An anomaly could occur too, when GPs did not provide all the details required to determine a pathway of care.

## **11 Public Exclusion**

Moved Jo Agnew/Seconded Robyn Northey

That in accordance with the provisions of Clauses 32 and 33, Schedule 3, of the New Zealand Public Health and Disability Act 2000 (“Act”), the Auckland District Health Board resolve that the public now be excluded from the meeting for consideration of the following items, for the reasons and grounds set out below:

<b>General subject of each item to be considered:</b>	<b>Reasons for passing this resolution in relation to each item:</b>	<b>Ground(s) under Clause 32 for the passing of this resolution</b>
11.01 Confirmation of Public Excluded Auckland District Health Board Minutes Meeting 7 August 2013	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.02 Circulated Resolution – Proposed Transition State for healthAlliance	To enable the Board to carry on without prejudice or disadvantage commercial activities and	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good

	negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	reason for withholding would exist under s 9 of the Official Information Act 1982.
11.03 Auckland Metro Primary Options for Acute Care Contract	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.04 Approval of Contract Changes for Richmond NZ Trust, Affinity Services & Odyssey House Trust	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.05 Orthotics NZ DSS Contract	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.06 CIU Room II Replacement	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.07 Business Case for Theatre Capacity	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.08 Bank Signatories	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.09 Request for variation to the HBL Agreement for the supply of hip and knee implants and instrumentation.	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.10 National Finance, Procurement and Supply Chain Policies and Procedures, HBL	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.
11.11 Human Resources Report	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist

	Information Act 1982 s.9(2)(i) and s.9(2)(j)	under s 9 of the Official Information Act 1982.
11.12 Serious process error by NZ Health and Disability Ethics Committees (HDECs).	To enable the Board to carry on without prejudice or disadvantage commercial activities and negotiations: Official Information Act 1982 s.9(2)(i) and s.9(2)(j)	That the public conduct of the relevant part of the meeting would be likely to result in the disclosure of information for which good reason for withholding would exist under s 9 of the Official Information Act 1982.

**Carried**

<b>NEXT MEETINGS</b>	
	<p><b>A special meeting is scheduled for:</b>  <b>11.30am, Wednesday, 9 October 2013</b>  <b>Sir Douglas Robb Boardroom, Level 7, Building 14, Greenlane Clinical Centre</b></p> <p><b>The next ordinary scheduled meeting will be held:</b>  <b>2:00pm, Wednesday, 30 October 2013</b>  <b>Marion Davis Library, Building 43,Auckland City Hospital, Grafton</b></p>

The meeting closed at 4.05pm

Signed as a true and correct record of the Auckland District Health Board meeting held on Wednesday, 18 September 2013.

\_\_\_\_\_  
Chair \_\_\_\_\_ Date \_\_\_\_\_