



HOSPITAL ADVISORY COMMITTEE

MINUTES – PUBLIC - unconfirmed

Tuesday 28 September 2010

10.00am

Corporate Meeting Room 1

Base Hospital

David Street

New Plymouth

Present:

Peter Catt (Deputy Chairman), Kura Denness, Jenny Nager, Mary Bourke (Board Members), Brian Jeffares, Jan Dunlop, Nic Boheimer (co-opted members)

In Attendance:

Tony Foulkes (Chief Executive), Joy Farley (General Manager Hospital and Specialist Services), George Thomas General Manager Finance and Corporate Services, Dr Samir Heble (Clinical Director Mental Health), Sue Carrington (Media Advisor), Matua Ramon Tito (Kaumatua) Jenny McLennan (PA to Board)

593.0 Declaration to Open Meeting

The meeting was opened with a karakia by Ramon Tito at 10am.

594.0 Acknowledgement – Mr John Young – Chairman

Dr Catt acknowledged that this was the first committee meeting since John Young, Chairman has passed away. Dr Catt called for a moment of silent reflection.

595.0 Apologies

Resolution

That the apologies from Mrs Karen Eagles be received and noted.

*Carried
Denness/Nager*

596.0 Conflicts of Interest

The Register was circularised for updating by members, with no new interests being declared.

597.0 Minutes of Previous Meeting

Resolution

That the Hospital Advisory Committee resolve to accept the minutes of the meeting held on 31 August 2010 as a true and correct record subject to including Mary Bourke in the apology.

*Dunlop/Nager
Carried*

598.0 Matters Arising

598.1 Rheumatic Fever

Ms Denness noted that the incidence of rheumatic fever was not just related to poverty. Ms Farley advised that information from the Medical Officer of Health regarding the incidence of rheumatic fever had been forwarded to Mrs Eagles. Dr Catt indicated that there were guidelines in place for practitioners regarding swabbing of suspected cases.

598.2 Rangiatea Oral Health Opening

Dr Catt commented on the opening of the Rangiatea Dental Facilities and how the inclusion of children in the ceremony served to remind members the importance of their roles. Dr Catt thanked Mr Peter Moeahu for his efforts as the Master of Ceremony at the opening.

Ms Denness endorsed Dr Catt comments adding that Mr Moeahu deserved a special acknowledgement and thank you for his efforts behind the scene in the coordination and liaising with different groups throughout the establishment of the facilities.

599.0 Management Reports

599.1 General Manager Hospital Services Report

The General Manager Hospital Services took the report and attachments as read and highlighted the following issues which were discussed:

- Winter rush materialised with overall bed occupancy for August higher across the hospital than for any month in the preceding year.
- Bed occupancy over 90% recorded in some wards.
- Financial position slightly better than budget but noted that the result remains an operating deficit of \$1M.
- Recent visits from Mental Health Directorate and National Smokefree coach who had indicated a willingness to assist in development of smokefree strategies.
- Ambulance RFP process in place with site visits from interested parties currently underway.
- Year to date results indicate ahead in delivery of acute service but behind in electives, due largely to personnel taking annual leave within the ENT services.
- Although occupancy has been high specialising low which demonstrates that specialising reflects the type of patients rather than volumes of patients.

- Piloting video conferencing facilities within Mental Health Service, South Taranaki clients for follow-up appointments. Outcome of pilot will assist in determining if opportunities exist for utilising facilities in other services.
- Ms Farley advised that funding for a Smoking Cessation role within the provider arm and would be advertised shortly. The position would involve providing district wide support to other providers as well as within the hospital.

Discussion

- In response to a question from Miss Bourke Mr Foulkes confirmed the smokefree position within the Board advising that while the spirit of the Smokefree policy was supported in every way the application of the policy needed to be honest. The practicalities of applying the policy were more complex and there was a need to ensure that complaints about smoking outside the main entrances were not simply moved to complaints about smokers at the local bus shelter or elsewhere.
- Mr Moeahu was pleased that implementation of the policy continued but was disappointed that a firmer leadership role did not seem apparent. Mr Moeahu felt that clearer signage at entrance would assist in conveying the smokefree message and support the professionals views from within the hospital.

Miss Bourke was clear that a leadership role was in place for implementing the policy with no areas of neglect apparent.

Dr Boheimer supported a smokefree entrance and suggested that the policy could be directed to include that the smokers areas be furnished with useful, supportive information including numbers to access for help.

Ms Farley suggested that it may be an opportune time to review the smokefree policy to reflect the views of committee members.

Ms Farley clarified that the 'Better help for smokers to quit' health target' had progress with strategies in place to ensure the accurate recording of assistance provided to patients within the hospital. Recent Health Target results had reflected a positive improvement.

Mr Foulkes reassured the committee of the seriousness with which smoking was taken, referring to the DHBs role in health promotion and supporting many other efforts in the hospital and community. The DHB's role was far broader and more serious than simply the hospital entrance.

- Mr Moeahu requested clarity regarding the financial results against budget.

Mr Thomas advised that while the result was favourable against budget the hospital service continued to operate with a YTD \$1m deficit result. It was noted that the second quarter of the financial year would provide a more indicative result as wash-up costs impact on the first quarter results. However as the budget was phased it was often the second half of the financial year that negative results cause significant impact on the financial results.

Ms Denness noted that while there were various reviews and projects underway to address the financial situation results had not been reflected in the reduction of a the deficit.

Mr Thomas advised that the initial impact financially of the reviews should be reflected as an arrest of cost growth and that following this strategies to

ensure that services live within their budgets was a phased and continuum issue.

Mr Foulkes acknowledged the trend of the results adding that if results in nine months were at or better than budget, while still in deficit this would reflect a significant improvement in the financial situation. Mr Foulkes advised that plans and projections were built into the budget and included out years 2 and 3.

It was noted that the graph included in the financial report be printed in colour for future agendas.

- It was noted that the IT projects underway included Safe Medication and Contract Management and that these had been capitalised.
- FTE associated with Project Maunga had also been capitalised.
- Outsourced Clinical Services for ACC work relates to clinical staff.
- It was noted that while not all KPI Performance Indicator target had not been met the margin between the target and the results was minimal.
- Two part-time (1 FTE) Renal Physicians were to commence early December with Counties Manukau and Waikato continuing to provide support until then.
- It was noted that while the public open day for the Project Maunga mock room was not well supported by the public those who did attend provided supportive comments. The feedback however had been universally positive. Ms Farley added that various groups within the disability sector had visited the mock up previously which may have impacted on the low general public numbers.

Dr Catt welcomed Dr Samir Heble – Clinical Director Mental Health to the meeting and invited him to comment on his report. Dr Samir thanked the Chairman for the invitation and highlighted the following matters of interest from his report:-

- The inpatient unit redesign was expected to be completed by the end of the month which will provide flexi/dedicated areas for children/adolescent and for older adults.
- New funding received for Eating Disorder nurse which will complement the 2 part time Eating disorder Psychologists.
- Appointment process for Consumer Advisor underway.
- Better, Sooner, More Convenient initiative proceeding – GPs within Taranaki will be able to consult with Psychiatrists over the telephone with effect from 1 October 10. In response to comments by Dr Boheimer Ms Farley advised that this service should also be available for clinicians within the hospital.
- Alignment of Mental Health Services for the Elderly and Older Peoples Rehabilitation services to ensure common work groupings are working closely together. Dr Samir added that this initiative would add value to the BSMC initiatives and Project Splice.
- Ms Farley reported that Geriatricians were to extend their work profile into the community by looking at what value can be added to services through visiting rest homes and working with patients GPs. eg review patients medication when large amounts of medications are required.

- Development of ethnicity audit within mental health service to ensure compliance to recording ethnicity date and asking questions at the point of contact. Ms Farley advised that current processes were under review.

Committee members thanked Dr Heble for attending the meeting and for the positive impact he was having on the service.

Resolution

That the Hospital Advisory Committee note and receive the report of the General Manager Hospital and Specialist Services and attachments.

Dunlop/Denness

600.0 Next Meeting

The next meeting was scheduled to be held on Tuesday 26 October 2010 in New Plymouth.

601.0 Other Business

601.1 Mr John Young – Chairman

Mr Moeahu reflected on the acknowledgment of John Young by Matua Ramon Tito in his opening karakia. Mr Moeahu proposed that the Board consider recognising the legacy of the former Chairman within Project Maunga. This would demonstrate the integrity, friendship and warmth that John brought to the Board.

601.0 Exclusion of Public

Resolution

That the Hospital Advisory Committee resolve to exclude the public from the remainder of the meeting on the basis of the following matters:

1. *To present Hospital Advisory Committee Minutes pursuant to an earlier resolution publicly excluding the item*

*Nager/Bourke
Carried*

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Chairman

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Date