



# Minutes

## Public session

### Meeting of the Whanganui District Health Board

held in the Board Room, Fourth Floor, Ward/Administration Building  
Whanganui Hospital, 100 Heads Road, Whanganui  
on Friday 21 September 2018, commencing at 10.00am

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#### Present

Mr Graham Adams  
Mr Charlie Anderson (QSM)  
Mrs Philippa Baker-Hogan (MBE)  
Ms Maraea Bellamy  
Ms Jenny Duncan  
Mr Darren Hull  
Mr Stuart Hylton  
Mrs Judith MacDonald  
Ms Annette Main (ONZM)  
Dame Tariana Turia (DNZM)

#### In attendance

Mr Russell Simpson, Chief Executive  
Mrs Sandy Blake, Director of Nursing, Patient Safety and Quality  
Mrs Sue Champion, Communications Manager  
Mr Hentie Cilliers, General Manager Human Resources and Organisational Development  
Mrs Kim Fry, Director Allied Health  
Mrs Rowena Kui, Director Māori Health  
Mr Paul Malan, General Manager Service and Business Planning  
Mr Brian Walden, General Manager Corporate  
Mr Peter Brown, Board Secretary  
Mr Declan Rogers, Nurse Manager Surgical Services

#### Public

Members of the press, public and staff

#### Karakia/reflection

Philippa Baker-Hogan opened the meeting with a karakia/reflection.

## **1 Apologies**

*It was resolved that:*

The apology from Board Chair, Dot McKinnon, be accepted and sustained.

## **2 Conflict and register of interests update**

- 2.1 Amendments to the register of interests  
Judith MacDonald declared her interest as a director of Ruapehu Health Ltd
- 2.2 Declaration of conflicts in relation to business at this meeting  
Nil.

## **3 Late items**

Nil.

## **4 Delegations**

Nil.

## **5 Presentation**

Emma Hall, clinical nurse specialist in wound care, provided board members with a presentation on her personal journey and the role of specialist wound care nurses in improving patient outcomes in community care.

In their role as clinical nurse specialists they accept referrals from all services.

55,000 people in healthcare facilities sustain pressure injuries annually at a cost of \$694 million per annum. In the last six months, Whanganui had 80 reported pressure injuries including 35 stage 1 injuries and 30 stage 2 injuries.

She outlined the factors causing pressure injuries and presented board members with a case study.

In her role as a nurse specialist she is involved in research, providing education for hospital staff, regional health network staff, Iwi and other providers, facilitating study and providing information to all aged healthcare facilities.

## **6 Minutes of board meetings**

### **6.1 Whanganui District Health Board meeting held on 10 August 2018**

Taken as read.

*It was resolved that:*

The minutes of the public session of the meeting of the Whanganui District Health Board held on 10 August 2018 be approved as a true and correct record.

## **Matters arising**

Nil.

## **7 Minutes of committee meetings**

### **7.1 Combined Statutory Advisory Committee meeting**

*It was resolved that:*

The minutes of the public session of the Combined Statutory Advisory Committee meeting held on 7 September 2018 be received.

## **8 Board and Committee Chairs' reports**

*Verbal reports may be given at the meeting*

### **8.1 Board**

The deputy chair noted the celebration of 125 years of women's suffrage in New Zealand.

He welcomed Paul Malan to the meeting, as the newly appointed general manager, service and business planning.

### **8.2 Combined Statutory Advisory Committee**

Nil.

### **8.3 Risk and Audit Committee**

Nil.

## **9 Chief Executive's report**

### **9.1 Māori Health**

The pro-equity check survey/audit over the period August to November 2018 will go to Dr Bryn Jones and will be available to the WDHB Risk and Audit meeting 14 November 2018.

### **9.2 centralAlliance**

The nurse manager, surgical services, provided the board with an update regarding the provision of urology. Points made included:

- The rollout of the roadmap for the services (approved in July) continues.
- An audiovisual aid for patients and family to better understand cancer and treatment options is being progressed.
- At the moment, with the two boards being at different phases in terms of the implementation of Webpas, there are IT issues with the services being on different systems.
- The care logistics patient scheduling approved by MidCentral District Health Board (and which WDHB will also be part of) is being rolled out in November and may overcome a lot of the issues.

- With regard to the resourcing of the service, at the July meeting it was advised that a fifth urologist was expected in August, but that has not happened due to personal reasons. There are currently four neurologists employed in the service and two of them have been coming to Whanganui to do outpatient services. Since August the head of the service and a registrar have also been coming to Whanganui to provide clinics, which has been a great support.
- There are weekly phone calls between Whanganui and Palmerston North to discuss scheduling, timeframes, patient care, rosters and the availability of clinicians.
- Currently shortest waiting time for Whanganui patients waiting for a FSA is 32 days and the longest waiting time on the Whanganui list is 115 days, which is within the target waiting time. For Whanganui patients waiting for surgery, the shortest waiting time is 36 days and the longest waiting time is 90 days, again within the 120 day target timeframe.
- There is regular reporting and there are meetings each week, involving both sites, monitoring the new patients going onto the waiting lists.
- With regard to equity and access to services, there appears to be equity for both Wanganui and Manawatu patients.

### 9.3 Summary financial results for July 2018

The general manager corporate provided the board with an update on the August results.

The financial trend will be clearer by the end of September. August IDFs are running at about budget. Aged care is favourable to budget. Acute flows into the Medical Ward and Emergency Department continue to be high, driving increased nursing costs. The year to date result is \$55,000 favourable to budget.

At this stage the budget is still not yet approved by the Ministry of Health.

\$160,000 additional wash up from elective services in the 2017/18 financial year will come to WDHB in the 2018/19 financial year.

### 9.4 Compliance with statutory requirements

Taken as read.

## 10 Decision items

### 10.1 Board and committee meeting dates for 2019

Taken as read.

*It was resolved that the Whanganui District Health Board*

1. **Receives** the paper entitled 'Board and committee meeting dates for 2019'.
2. **Approves** the meeting schedule for 2019.
3. **Notes** that the Remuneration and Executive Appointment Committee will be convened as and when necessary.
4. **Notes** that further dates will be provided for meetings with Hauora A Iwi and MidCentral District Health Board once agreed.

## 10.2 Risk and Audit Committee chair and deputy chair

Taken as read.

*It was resolved that the Whanganui District Health Board*

1. **Receives** the paper entitled 'Risk and Audit Committee chair and deputy chair'.
2. **Approves** the appointment of Darren Hull as chair and Jenny Duncan as deputy chair of the Risk and Audit Committee.

## 11 Discussion/noting items

### 11.1 Health and safety report

The report was taken as read and points noted included:

- They questioned the engagement in health and safety in rural services. A Waimarino health and safety representative was recently appointed, but couldn't attend the last training session.
- Community and public health nurses are included in the health and safety training.
- With regard to the management of aggression in Te Awhina, there are risks but there are extensive strategies in place to manage those risks.

*It was resolved that the Whanganui District Health Board*

1. **Receives** the paper entitled 'Health and safety report'.

## 12 Information papers

Taken as read.

## 13 Date of next meeting

Friday 2 November 2018 from 10:00am in the Board Room, Whanganui District Health Board, 100 Heads Road, Whanganui.

## 14 Exclusion of public

*It was resolved that:*

The public be excluded from the remainder of this meeting under clause 32, Schedule 3 of the New Zealand Public Health and Disability Act 2000 on the grounds that the conduct of the following agenda items in public would be likely to result in the disclosure of information for which good reason for withholding exists under sections 6, 7 or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982.

Agenda item	Reason	OIA reference
Whanganui District Health Board minutes of meeting held on 10 August 2018 (public-excluded session)	For the reasons set out in the board's agenda of 10 August 2018	As per the board's agenda of 10 August 2018

<b>Agenda item</b>	<b>Reason</b>	<b>OIA reference</b>
Combined Statutory Advisory Committee minutes of meeting held on 7 September 2018	For the reasons set out in the Combined Statutory Advisory Committee agenda of 7 September 2018.	As per the committee agenda of 7 September 2018
Risk and Audit Committee minutes of meeting held on 8 August 2018	For the reasons set out in the Risk and Audit agenda of 8 August 2018	As per the committee agenda of 8 August 2018
Regional Governance Group minutes of meeting held on 5 June 2018	For the reasons set out in the Regional Governance Group agenda of 3 April 2018	As per the group agenda of 5 June 2018
Chief Executive's report	To enable the district health board to carry out, without prejudice or disadvantage, commercial activities or negotiations (including commercial and industrial negotiations)	Section 9(2)(i) and 9(2)(j)
Multi-employer collective agreement or negotiations	To enable the district health board to carry out, without prejudice or disadvantage, commercial activities or negotiations (including commercial and industrial negotiations)	Section 9(2)(i) and 9(2)(j)
Staff matters	To protect the privacy of natural persons, including that of deceased natural persons  To avoid prejudice to measures protecting the health or safety of members of the public  To protect information which is subject to an obligation of confidence or which any person has been or could be compelled to provide under the authority of any enactment, where the making available of the information would be likely to prejudice the supply of similar information, or information from the same source, and it is in the public interest that such information should continue to be supplied; or would be likely otherwise to damage the public interest	Section 9(2)(a)  Section 9(2)(c)  Section 9(2)(ba)

### **Persons permitted to remain during the public excluded session**

The following person(s) may be permitted to remain after the public has been excluded because the board considers that they have knowledge that will help it. The knowledge possessed by the following persons and relevance of that knowledge to the matters to be discussed follows.

<b>Person(s)</b>	<b>Knowledge possessed</b>	<b>Relevance to discussion</b>
Chief executive and senior managers and clinicians present	Management and operational information about Whanganui District Health Board	Management and operational reporting and advice to the board
Board secretary	Minute taking, procedural and legal advice and information	Recording minutes of board meetings, advice and information as requested by the board

The public session of the meeting ended at 11.10am.