

	 <p>Capital & Coast District Health Board ŪPOKO KI TE URU HAUORA</p>	<p>MINUTES Held on Wednesday 6 October 2021 Location: Zoom Zoom: 876 5068 1844 Time: 9:00am</p>
2DHB CONCURRENT BOARD MEETING		PUBLIC

Due to Covid 19 alert level (level 2) only the Chair and limited staff attended in person (in person marked with * and all others on zoom).

PRESENT

*David Smol	Chair, Hutt Valley and Capital & Coast DHBs		
Dr Kathryn Adams	Board Member		Board Member
Dr Tristram Ingham	Board Member	Ria Earp	Board Member
Brendan Boyle	Board Member	Ken Laban	Board Member
Sue Kedgley	Board Member	Yvette Grace	Board Member
Roger Blakeley	Board Member	Prue Lamason	Board Member
Dr Chris Kalderimis	Board Member	Naomi Shaw	Board Member
Vanessa Simpson	Board Member	Dr Richard Stein	Board Member
Stacey Shortall	Deputy Chair	John Ryall	Board Member
		Josh Briggs	Board Member
		Wayne Guppy	Deputy Chair

APOLOGIES

'Ana Coffey
Hamiora Bowkett (for lateness – attended at 1.45pm)
Keri Brown
Roger Blakely (left at 1.30pm)
Vanessa Simpson (left at 2pm)

IN ATTENDANCE

Hutt Valley and Capital & Coast DHB

*Fionnagh Dougan	Chief Executive
Rosalie Percival	Chief Financial Officer
Karla Bergquist	Executive Director Mental Health, Addictions and Intellectual Disability Service
Paul Oxnam	Executive Clinical Director Mental Health, Addictions and Intellectual Disability Services
Rachel Haggerty	Director Strategy, Planning and Performance
Sarah Jackson	Director of Clinical Excellence
Joy Farley	Director Provider Services
Rachel Gully	Director People and Culture
Sue Gordon	Director Transformation
Helen Mexted	Director of Communication and Engagement
*Sally Dossor	Director Office of the Chief Executive and Board Secretary
*Meila Wilkins	Board Liaison Officer

1 PROCEDURAL BUSINESS

1.1 KARAKIA

The Board opened the meeting with a karakia.

1.2 APOLOGIES

As noted above.

1.3 PUBLIC PARTICIPATION

The Boards noted the attendance by the following:

- Bill Day, Chair Wellington Hospitals Foundation (WHF)
- Simon Williams, District Governor, Lions International, District 202m
- Rex Bullard, Past District Governor, Lions International, District 202m

Notes

- Bill Day introduced the representatives of Lions International which has made a donation of \$500K to the Wellington Children’s Hospital.
- The Children’s Hospital covers three districts of Lions – and this was key to the Clubs’ across the region embracing the project and undertaking significant fundraising in the last 12-14 months.
- Simon Williams noted the partnership with the WHF and working with Mark Dunajtschik.
- Lions have seen the project as a win-win and are pleased to be part of the legacy.
- Rex Bullard noted the Lions’ involvement in fundraising for Ronald McDonald House and the natural continuity to become involved in the Children’s Hospital project.
- The partnership with the WHF was acknowledged and the Clubs have enjoyed the opportunity to be involved
- The Chair thanked the WHF for its work and partnership with the Lions, and thanked the Lions for the phenomenal contribution, especially in the circumstances of Covid-19 presenting challenges for fundraising.

Acknowledgement

- The Chair and the Boards acknowledged the recent passing of Grant Corleison –and his contribution to the Children’s Hospital project. Grant’s contribution was also acknowledged by Bill Day on behalf of the WHF

1.4 INTEREST REGISTER

1.4.1 COMBINED BOARD INTEREST REGISTER

The Boards **noted** that any further changes were to be sent to the Board Liaison Officer via email.

1.4.2 COMBINED EXECUTIVE LEADERSHIP TEAM INTEREST REGISTER

It was **noted** as current and the Chief Executive will ensure the ELT will update as needed.

1.5 MINUTES OF PREVIOUS CONCURRENT MEETING

The Boards **approved** the minutes of the concurrent Board Meeting held on 1 September 2021 (public).

	Moved	Seconded	
HVDHB	Ria Earp	John Ryall	CARRIED
CCDHB	Roger Blakeley	Chris Kalderimis	CARRIED

1.6 MATTERS ARISING FROM PREVIOUS CONCURRENT MEETINGS

There were no updates or comments.

1.7 CHAIR'S REPORT AND CORRESPONDENCE

The Board thanked the Chief Executive and team for the progress on the vaccination programme and the work preparing for Covid in the community.

Noted the milestone of Board appointments to Health New Zealand and Māori Health Authority.

1.8 CHIEF EXECUTIVE'S REPORT

The paper was taken as read and the Chief Executive answered questions.

Notes:

- The Chief Executive reflected on the value of Board members connecting with their communities and assistance with our vaccination programme.
- The data in the report was updated and the progress made since the Board reports were published was noted (1st dose Maori 64% to 66%, Pacific 70% to 72%)
- Trusted faces and trusted places is working well as a programme.
- Prime Minister visit noted and the positive outcomes of the visit
- It is about supporting individuals to come forward and working with community leaders, and interagency groups

1.9 BOARD WORK PLAN 2021/2022

The Board **noted** the work plan for 2021/2022.

2 DHB PERFORMANCE AND ACCOUNTABILITY

2.1 HVDHB JULY 2021 FINANCIAL AND OPERATIONAL PERFORMANCE REPORTS

Paper was taken as read and the Chief Financial Officer answered questions.

The HVDHB Board noted:

- the DHB had a (\$3.3m) deficit for the month of July 2021, being (\$0.5m) unfavourable to budget;
- the DHB year to date deficit excluding \$0.1m net COVID-19 costs was (\$3.2m);
- the Funder result for July was (\$1.7m) unfavourable, Governance \$0.1m favourable and Provider \$1.1m favourable to budget;
- total Case Weighted Discharge (CWD) Activity was 12% ahead of plan.

	Moved	Seconded	
HVDHB	Wayne Guppy	Ken Laban	CARRIED

2.2 CCDHB JULY 2021 FINANCIAL AND OPERATIONAL PERFORMANCE REPORTS

Paper was taken as *read* and the Chief Financial Officer answered questions.

The CCDHB Board notes:

- (a) The DHB had a (\$2.6m) deficit for the month of July 2021, being breakeven to budget before excluding COVID-19;
- (b) In the one month we have incurred \$441k additional net expenditure for COVID-19;
- (c) The DHB has an overall YTD deficit of (\$2.2m) from normal operations (excluding COVID-19) being \$400k favourable to the underlying budget.

	Moved	Seconded	
CCDHB	Brendan Boyle	Sue Kedgley	CARRIED

3 UPDATES

3.1 HSC UPDATE FROM MEETING DATED 29/09/21

The Chair of HSC spoke to the paper.

The Boards noted:

- (a) **The papers are in the Diligent Board book for the HSC meeting dated 29 September 2021.**
- (b) **HSC received reports and noting recommendations on the following:**

Item 2.1: Planned Care Performance and Impact of COVID-19 Lockdown in 2021

- (a) the increasing service delivery and financial risks within Planned Care services at both Capital & Coast and Hutt Valley DHBs

Item 3.1: Ministry of Health Non-Financial Performance Report – 2020/21 Quarter 4

- (a) that this report provides a summary from two key reports:
 - i. CCDHB and HVDHB's Ministry of Health (MoH) Non-Financial Quarterly Monitoring Report for Q4 2020/21 (April to June 2021).
 - ii. CCDHB and HVDHB's Q4 2020/21 Health System Plan and Vision for Change dashboard.
- (b) that for the 56 indicators rated by MoH this quarter, CCDHB received 1 'Outstanding' rating, 30 'Achieved' ratings, 18 'Partially Achieved' ratings and 7 'Not Achieved' ratings. This is an improvement on CCDHB's Q3 result.
- (c) that for the 56 indicators rated by MoH this quarter, HVDHB received 1 'Outstanding' rating, 28 'Achieved' ratings, 19 'Partially Achieved' ratings and 8 'Not Achieved' ratings. This is similar to HVDHB's Q3 result.
- (d) that specific action plans are in place to improve performance against the 'Not Achieved' performance measures, including strategies to improve our immunisation and smoking cessation advice results.
- (e) that the recommissioning of immunisation services is now being considered, alongside quality improvement initiatives.

- (f) overall results for CCDHB and HVDHB demonstrate:
 - i. performance deterioration in immunisation targets reflecting the impact of a timing change in the age for MMR immunisations and a greater number of declines to vaccination offerings;
 - ii. a community health system delivering well for the majority of indicators with a persistent pressure points posing challenges; and,
 - iii. a hospital system working hard under the pressures of increased seasonal acute demand and bed pressures.
- (g) that both CCDHB and HVDHB received ‘Outstanding’ ratings for the ‘Engagement and obligations as a Treaty partner’ indicator, which is recognition of our efforts in this area.
- (h) that both CCDHB and HVDHB improved their performance rating for the ‘Shorter Stays in Emergency Departments’ indicator, which moved from a ‘Not Achieved’ rating in Q3 to a ‘Partially Achieved’ rating in Q4.
- (i) that the recent Alert Level 3 and 4 lockdown period is likely to impact performance in the Q1 2021/22 results, as some activities cannot be performed during lockdown and resources have also been temporarily diverted into swabbing and vaccination efforts.

Item 4.2: Central Region Eating Disorder Service

- (a) the contents of this report

Item 4.3: Homelessness, health and COVID-19

- (a) This update on homelessness and how the 2DHBs contribute to addressing this important issue.
- (b) Homelessness is part of a wider issue in a housing continuum that faces significant challenges. Working towards a solution requires coordinated cross agency collaboration.
- (c) A strategic priority project around emergency housing is a priority this year. Emergency housing is considered a subset of homelessness.



Impact of primary care on acute demaprogramme - 29 Sep



2DHB Covid

Notes:

- The Chair summarised the reports considered by the Committee.
- The Chair noted ICU capacity and discussed staffing challenges and the impact of Covid on other hospital operations.
- Noted the contribution of our public health staff to contact tracing in Auckland.

	Moved	Seconded	
HVDHB	Josh Briggs	Wayne Guppy	CARRIED
CCDHB	Sue Kedgley	Kathryn Adams	CARRIED

3.2 DSAC UPDATE FROM MEETING DATED 29/09/21

Board member (and DSAC member) Yvette Grace spoke to the paper.

The Boards noted:

- (a) The papers are in the Diligent Board book for the HSC meeting dated 29 September 2021.
- (b) DSAC received reports and noting recommendations on the following:

Item 2.1 Locality Community Mental Health Development (Strategic Priority: Community Mental Health Networks)

- (a) the purpose of the Community Mental Health and Addiction (MHA) Change Programme (the Programme) is to design, and implement integrated, place-based, MHA services for the Hutt Valley, Wellington, Kāpiti and Porirua that are operational by 30 June 2022.
- (b) the Programme is part-funded by Ministry of Health investment and is one of three MHA strategic priorities for delivery in the 2021/2022 financial year, as our DHBs transition to a new health and disability system.
- (c) the first stage of the Programme is the MHAIDs-led 3-month Te Haika/Crisis Response project to address immediate pressures in our 24 hour call centre and intake/triage services and will consider our community mental health teams' structure.
- (d) Te Rangapū Ahikaaroa, our memorandum of understanding with Ngāti Toa Rangatira and Te Āti Awa ki te Upoko o te Ika a Māui , is our platform for partnering to design and develop community MHA services for Māori, noting that staff are to ensure the same connections are made with other iwi in the sub region
- (e) the Mental Health and Addiction Commissioning Forum will provide Programme governance and the design process will implement the Pro-Equity, People-based Commissioning Policy to understand and address inequities for our priority populations.

the enablers for the Programme design and implementation – our evolving partner, provider and stakeholder MHA networks, including the Lived Experience Advisory Group.

Item 3.1 - MHAIDS Service Performance Update

- (a) the attached report from MHAIDS.

Item 3.2 – 3DHB Sub Regional Disability Strategy 2017 – 2022 Update

- (a) This report provides DSAC with an update on the implementation of the Sub Regional Disability Strategy 2017 – 2022.



2DHB Covid programme DSAC Networks



Community MHA



WrDHB Covid Programme.pptx

Notes:

- Yvette Grace noted the DSAC papers and outlined the matters at the meeting
- On behalf of the committee, Yvette requested that item 2.1 (d) is amended from what was passed at the Committee – to include the additional wording in the resolution (shown in underlined text) to make it clear that the consultation will be with all iwi groups in the sub-region (and is not only the 2 groups in the MOU referred to). This addition to (d) was accepted by the leave of the meeting- and the motion accepted by the Boards (refer below)
- It was noted that the MHAIDS service report shows a system under distress, in particular the increase in demand for youth and staffing vacancies. Some are national and not just local. Noted there would be a report which includes mitigation measures at the DSAC meeting on 24 November 2021.

	Moved	Seconded	
HVDHB	Yvette Grace	John Ryall	CARRIED
CCDHB	Kathryn Adams	Sue Kedgley	CARRIED

4 OTHER

4.1 GENERAL BUSINESS

Nil.

4.2 RESOLUTION TO EXCLUDE THE PUBLIC

	Moved	Seconded	
HVDHB	Yvette Grace	Ria Earp	CARRIED
CCDHB	Brendan Boyle	Roger Blakeley	CARRIED

5 NEXT MEETING

Date: 3 November 2021, **Location:** Auditorium, Level 1 Clock Tower Building, Hutt Hospital
Time: 9.30am

The public meeting concluded at 10.05am

CONFIRMED that these minutes constitute a true and correct record of the proceedings of the meeting.

DATED this 3rd day of November 2021



David Smol
BOARD CHAIR