

**WAIKATO DISTRICT HEALTH BOARD**  
**Minutes of the Health Waikato Advisory Committee Meeting**  
**held on Wednesday 22 July 2009**  
**commencing at 9.30 am**

**Present:** Ms S Christie (Chair)  
Mr G Milne  
Mr H Mikaere  
Ms R Klos  
Ms R Dean  
Ms A Isbister  
Dr J Havill  
Dr S Vatsyayann

**In Attendance:** Mrs J Adams (Chief Operating Officer)  
Mr C Climo (Chief Executive Officer)  
Ms M Chrystall (Acting Chief Financial Officer)  
Mrs M A Gill (Director of Media & Communications)  
Mrs S Hayward (Director of Nursing & Midwifery)  
Dr G Howard (Acting Group Manager Waikato Hospital)  
Ms B Garbutt (Group Manager Population Health Services and  
Group Manager Older Persons and Rehabilitation Service)  
Mr M Webb (for Group Manager Clinical & Support Services)  
Ms S Brodnax (Minutes Secretary)

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**IN THE ABSENCE OF DELEGATED AUTHORITY ALL ITEMS  
WERE FOR RECOMMENDATION TO THE BOARD**

**ITEM 1: APOLOGIES**

Apologies were received from Mr T Maipi and Mrs P Mahood.

**ITEM 2: LATE ITEMS**

There were no late items.

**ITEM 3: MINUTES OF PREVIOUS MEETING: 22 JUNE 2009**

**Resolved  
THAT**

The minutes of a meeting of the Health Waikato Advisory Committee held on 22 June 2009 be confirmed as a true and correct record.

## **ITEM 4: MATTERS ARISING FROM PREVIOUS MINUTES AND ACTION LIST**

There were no matters arising.

## **ITEM 5: INTERESTS**

### **5.1 Changes to Register**

No changes to the register were noted.

### **5.2 Conflicts Related to Any Item on the Agenda**

No conflicts of interest relating to items on the agenda were foreshadowed.

## **ITEM 6: CHIEF OPERATING OFFICER'S REPORT**

### **6.1 June Activity**

The main factor in the unfavourable result is staffing costs. An internal audit has shown deficiencies in the budget construct last year and in management practice. More controls have now been put in place with regard to staff replacement. Surgical throughput is favourable, and it is anticipated this turnaround will be sustainable.

### **6.2 Influenza**

The Emergency Management Team continues to manage the H1N1 influenza. The hospital is seeing cases of normal seasonal influenza, but is not overwhelmed at this stage.

### **6.3 Taumarunui GPs**

Following the Taumarunui GPs' withdrawal from after hours service, a three month trial has commenced. This will see after hours patients presenting to the Taumarunui Hospital Emergency Department in evenings and during the weekend. The Waikato DHB Board is reviewing contractual arrangements of GPs, but acknowledges that there are many factors affecting them such as workforce issues.

### **6.4 Receipt of Report Resolved THAT**

The Chief Operating Officer's Report to the Health Waikato Advisory Committee for June 2009 be received.

## **ITEM 7: FINANCE REPORT JUNE 2009**

### **7.1 Financial Summary**

The provider arm has reported at \$25.4m deficit for the financial year, of which \$15m are one-offs and predominantly do not impact on cash.

**7.2 Receipt of Report  
Resolved  
THAT**

The Finance Report for June 2009 be received.

**ITEM 8: ELECTIVE SERVICES PROVISION**

Health Waikato is maintaining overall compliance at a DHB level. Outsourcing will continue until the new build is complete, however the intention is to decrease the proportion of outsourced surgery over time it as we become more operationally efficient.

In future, elective service performance will be reported in the Chief Operating Officer's report with any issues or concerns raised by exception to the Committee.

**Resolved  
THAT**

The report be received.

**ITEM 9: HEALTH BENCHMARK INDICATORS**

We are now one year into the three year plan to move into the top third for patient outcome and efficiency categories of measures.

Triage 2 & 3 categories improved for the quarter as a result of projects underway in the emergency department. The various factors affecting Length of Stay (LOS) were discussed. Waikato Hospital is aiming to have 80% of acute patients receive surgery within the first 24 hours, which should help to reduce LOS and provide better outcomes for our patients.

With regard to the hospital acquired blood stream infections, it was noted that there is a particular group of patients (renal and central line) for whom this is an issue. In general, it is not an issue for most patients.

**Resolved  
THAT**

The report be received.

**ITEM 10: SURGICAL THROUGHPUT AT WAIKATO HOSPITAL**

The increase in performance was acknowledged.

**Resolved  
THAT**

The report be received.

**ITEM 11: SMOKEFREE POLICY COMPLIANCE**

Waikato DHB currently offers 49.6% of inpatients advice and help to quit. This is the highest performance across DHBs nationally. Once a patient who has signed up for smoking cessation leaves hospital their details are passed to an NGO for follow up. We also offer free nicotine replacement to staff members.

**Resolved  
THAT**

The report be received.

**ITEM 12: MENTAL HEALTH & ADDICTIONS SERVICE STRATEGIC PLAN IMPLEMENTATION**

The implementation plan was noted. More information on the use (or reduction) of restraint was requested.

**Resolved  
THAT**

The presentation be received.

**ITEM 13: WORK PLAN**

**Resolved  
THAT**

The Health Waikato Advisory Committee work plan be received.

**ITEM 14: DATE OF NEXT MEETING**

Wednesday, 26 August 2009.

**ITEM 15: MINUTES OF 24 JUNE 2009 – PUBLIC EXCLUDED**

**Resolved  
THAT**

The minutes be noted.

Chairperson: \_\_\_\_\_

Date: \_\_\_\_\_

Meeting Closed: 10:25 am

## **ACTION LIST FROM HEALTH WAIKATO ADVISORY COMMITTEE MEETING OF 22 JULY 2009**

*(Relates to items to be reported to the Committee and not implementation of substantive decisions)*

	<b>ACTION</b>	<b>WHEN</b>
1.		

### **LONG TERM ACTION LIST**

	<b>ACTION</b>	<b>WHEN</b>