



Auckland District Health Board Hospital Advisory Committee Minutes

MEETING DETAILS													
Date and Time	Wednesday 1 April 2009, 10:45 am												
Venue	A+ Trust Room, Clinical Education Centre, Level 5, Auckland City Hospital, Grafton												
1.	ATTENDANCE AND APOLOGIES												
	<p>Committee Members</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Dr Chris Chambers (Chair)</td> <td style="width: 50%;">Jo Agnew</td> </tr> <tr> <td>Susan Buckland</td> <td>Harry Burkhardt</td> </tr> <tr> <td>Dr Brian Fergus</td> <td>Dr Ian Scott</td> </tr> <tr> <td>Pat Snedden</td> <td>Rt Hon Bob Tizard</td> </tr> <tr> <td>Seiuli Dr Juliet Walker</td> <td>Ian Ward</td> </tr> <tr> <td>Lynda Williams</td> <td></td> </tr> </table>	Dr Chris Chambers (Chair)	Jo Agnew	Susan Buckland	Harry Burkhardt	Dr Brian Fergus	Dr Ian Scott	Pat Snedden	Rt Hon Bob Tizard	Seiuli Dr Juliet Walker	Ian Ward	Lynda Williams	
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	<p>Management in Attendance</p> <p>Garry Smith – Chief Executive Dr Denis Jury – Chief Planning & Funding Officer Dr David Sage – Chief Medical Officer Greg Balla – Director Performance & Provider Development Ngaire Buchanan – GM Operations Taima Campbell – Executive Director Nursing Margaret Dotchin – Nurse Director Fionnagh Dougan – GM Mental Health, Ambulatory, Cancer Blood Services Kay Hyman – GM Woman’s and Children’s Services Chris Morgan, Manager Materials Management Janice Mueller – Director Allied Health Vivienne Rawlings – GM Human Resources Operations Dr Margaret Wilsher – Medical Director Adult Services Ian Bell – Board Administrator</p>												
	<p>Apologies</p> <p>The Chair declared the meeting open at 10:55 am.</p> <p>Apologies had been received from Rob Cooper, Professor Iain Martin and Associate Professor Anne Kolbe.</p>												
2.	CONFLICTS OF INTEREST												
	There were no declarations of interest for any items on the agenda.												
3.	CONFIRMATION OF MINUTES 4 MARCH 2009												

	<p><u>Moved Pat Snedden; seconded Seiuli Dr Juliet Walker</u></p> <p><i>That the minutes of the Hospital Advisory Committee meeting held on 4 March 2009 be confirmed as a true and correct record.</i></p> <p><u>Carried</u></p>
4.	<p>ACTION POINTS 4 MARCH 2009</p>
	<p>Elective Surgery</p> <p>Ngaire Buchanan tabled a summary explaining the funding and number of electives that provided access to the Ministry of Health's additional elective funding. This was very sensitive to production rates and for ADHB's population were 800 less and for the electives 300 less. The MoH net additional funding would be \$12.8m for the 3,200 WIES which, with other Ministry revenue of \$8m, provided a total of \$21.8m. The Funder and Provider were monitoring production and managing the resources to get to year end. There was outsourcing being undertaken. The additional electives for ADHB's population were to move the intervention rates to the national average and the Committee requested comparison with the rates the previous year and the national intervention rates. For the next financial year outsourcing would be commenced earlier with an access agreement having been negotiated. The proposed new Elective Centre at Greenlane was to give access to the population on the margin which presently had an unmet need.</p> <p>Devolution to Primary Care</p> <p>Diagnostics and minor surgery were being considered for devolution to primary care however the amount of minor surgery presently undertaken in primary care was unknown and there may be an issue of co-payments as a stipulation of the devolution is that there will be no co-payment whereas the existing work will have had a co-payment component. This would be a funding exposure.</p> <p>Treatment Costs</p> <p>The changes year on year of direct treatment costs between 2007/2008 and 2008/2009 were outlined. These included \$2.4m in cancer drugs and \$2.6 hemophilia blood products both of which were covered by additional funding. It also included \$3.6 surgical contracts costs.</p> <p>Occupancy</p> <p>The Committee asked for a report on occupancy of the hospital for the next meeting. The building of two wards had been approved with one expected to open in October/November and the second in 2010. Presently increased demand was being handled in temporary areas. The increase in acute admissions was explainable by population growth.</p>
5.	<p>OPERATIONAL PERFORMANCE</p>
5.1	<p>Operational Summary Report</p> <p>In-patient volumes were 101.2% of contract of which elective was 93.6% of contract which included IDFs which was a risk. ESPI were still compliant however there was discussion with the MoH on ESPI 8. The drop in Acute WIES Volumes - IDFs was noted. The graph on Acute WIES Volumes Auckland population was showing a trend upwards and the range may need to reflect this.</p>
6.	<p>IMPROVEMENT ACTIVITIES</p>
6.1	<p>DAP Projects Report</p> <p>97% of projects had commenced. Included in the ones in an orange state was the surgical project however this was proceeding better. Starship Theatres were in a red state with the need to move the Child, Youth & Family unit before it could commence. The Committee asked that the</p>

	DAP reporting graphs be checked to see that they are meaningful and understandable.
7.	HAC FINANCIAL REPORT
	<p>The result for the month was \$0.4m unfavorable and year to date \$5m unfavorable and in comparison with the previous year were not doing as well. The Committee asked in the financial report to include comparison with the last year, year to date.</p> <p>While WIES production for the 8 months was 3% down the discharge numbers were up. This information was important at service level and indicated a higher number of discharges at lower WIES. It was thought that this was a return to "normal" compared with unexplained increases in the previous 2 years. The Committee asked that the data for cancer and blood services be reviewed as they did not appear to be correct.</p>
8.	PAPERS
8.1	<p>Regional Mental Health – Mental Health Service Volumes – February 2009</p> <p>This data would be incorporated into the KPI reporting and while it gives volume data it does not measure quality of service.</p>
8.2	<p>Development of an Implementation Plan of the Northern Region Eating Disorders Plan 2008 - 2013</p> <p>It would be the end of April before a decision on anymore funding, which would be required, was available for a inpatient service. In the meantime under 15s would be accommodated within Starship. The Minister had made an undertaking that the beds would be delivered and with a better critical mass there would be a better ability to attract staff to the service.</p>
10.	<p>GENERAL BUSINESS</p> <p>Elective Centres</p> <p>A regional meeting would be held the next day on the Elective Centre's proposal with the three DHBs to define what had to be done and what services would be delivered for the region as well as establishing principles on how these would operate including access criteria.</p> <p>High Occupancy</p> <p>The high occupancy was having an affect on staff moral however the organization did have an inherent resilience. However, recognizing that we are coming into winter, there was a need to relieve pressure particularly through to October when bed and Theatre capacity would increase.</p> <p>Staffing</p> <p>Mental Health and nurse recruitment was improving and with the economic downturn more were seeking work. There had been no affect on SMO recruitment, with still many vacancies in Australia.</p> <p>Indicators</p> <p>Cancer waiting lists would be part of the monthly indicators.</p> <p>The Board Chair noted that clinical management/quality was a Board responsibility and should be discussed at the next month's meeting.</p>

	NEXT MEETING
	<p>The meeting closed at 12:15 pm.</p> <p>The next meeting is scheduled for 10:45 am, Wednesday, 6 May 2009 A+ Trust Room, Clinical Education Centre Level 5 Auckland City Hospital Grafton</p>
	CONFIRMED CHAIR: DATE: