

Minutes of the Board: Meeting No. 105

14 June 2024

Date	14 June 2024
Time	10.00am – 4.05pm
Venue	Te Tāhū Hauora, 650 Great South Road, Ellerslie, Auckland
Chair	Rae Lamb
Board members	Shenagh Gleisner, Tristram Ingham (zoom), David Lui, Ron Paterson, Tereki Stewart.
Te Tāhū Hauora staff	Peter Jansen, Bevan Sloan, Deon York (items 5 & 14), Holly Bodiam (item 9), Richard Hamblin (items 10-12), Carl Shuker (item 10), Martin Thomas, Nikki Grae and Caroline Tilah (item 13), Adrian Portis (minutes), Paula Farrand (EA to the Board).
Apologies	Andrew Connolly, Peter Crampton, Jenny Parr.
Guests	Ria Earp, Chair, Te Kāhui Piringa (zoom) Russ Aiton, Co-chair, Te Kāhui Mahi Ngātahi (zoom) Morag McDowell, Health and Disability Commissioner (zoom)

The hui began at 10.00 am with a karakia by the board chair.

1. Board only time

2. Board and Chief Executive time

3. Board, Chief Executive and Director of Finance and Digital - budget / finance discussion

The Chair welcomed the chair of Te Kāhui Piringa, and the co-chair of Te Kāhui Mahi Ngātahi to the meeting at 11.40am.

4. Standard business

4.1 Minutes of the meeting held 19 April 2024

Rae Lamb

No changes were made to the previous minutes, which were taken as read and approved.

4.2 Actions update from 19 April 2024 **Rae Lamb**

No updates were made to the actions.

Some actions are due for an update and were noted in the Chief Executive's report.

4.3 Interests register **Rae Lamb**

Updates to the Interests Register are to be provided to the board secretary.

4.4 Board activities **Rae Lamb**

Additional board activities are to be provided to the board secretary.

5. Patient story **Peter Jansen**

The Director of Consumer Engagement shared 'Safer use of anticoagulants' which can be accessed at: <https://www.hqsc.govt.nz/resources/resource-library/russ-story/>

Members queried how we quantify the impact of these sort of stories, noting that they seem valuable but that it is unclear what happens to them and what is the value of them outside of the organisation. The Director of Consumer Engagement noted that it would be useful to know from the Colleges and other entities how they incorporate these resources into their training. It was agreed that videos such as these are valuable resources and there is potentially more we could do with them.

Members spoke of their own positive experiences in this area, endorsed the usefulness of these resources and queried whether we have considered social media.

6. Health and Disability Commissioner report **Morag McDowell**

The Health and Disability Commissioner (HDC) joined the meeting virtually to present her report. The HDC expects to end the year with 3600 complaints, the highest ever received. This figure reflected a 50 percent increase over five years and a 10 percent increase from last year.

The HDC noted that they continue to work with providers on how they can address their own complaints and reduce escalation with early resolution the goal, noting that the support of the National Quality Forum will continue to be sought.

The HDC advised that a report on residential disability services is currently being worked on, noting that there were often barriers for those in home care, in particular a fear of retaliation, and that as part of the review of the HDC Act and Code, they are looking into the addition of a non-retaliatory clause at Right 10.

The HDC advised that they had written to Health New Zealand and the Ministry of Health (the Ministry) regarding a cohort of patients with hypermobile Ehlers-Danlos syndrome and the problems that this group is experiencing accessing appropriate care. Health New Zealand responded that they are leading a process to review the issue with a multi-disciplinary team at national level.

The HDC noted that the risk to patient safety is often hard to quantify but that it could be inferred from existing data that people on waiting lists for long periods are suffering a psychological decline and that the HDC's triage system is seeing escalating concerns about public safety more than ever.

The Board Chair queried how best to keep Te Tāhū Hauora connected when HDC are raising safety issues with the system with the HDC, noting that this is done but could be more

consistent. The Chief Executive noted that Te Tāhū Hauora is trying to bring other relevant agencies together, and it was broadly agreed that HDC, Accident Compensation Corporation (ACC) and Te Tāhū Hauora data should be connected around issues of safety and risk.

The HDC noted that complaint numbers from Northland were unexpectedly low and that it wasn't yet clear why this was the case.

A board member suggested there is a need to bring together some thought leaders to address the issues raised by HDC, in particular the increases in complaint numbers. The Board Chair, Chief Executive and the HDC endorsed such an approach.

7. Chief Executive report

Peter Jansen

The Chief Executive report was taken as read.

In general discussion, the Chief Executive highlighted that from a financial perspective he expects that leave liabilities will reduce with staff losses.

Regarding the approach of restorative practices, it was noted that a number of groups had approached the Ministry to adopt this practice however it needed to be recognised that it is resource intensive and not appropriate for everything. Te Tāhū Hauora is engaging with the Ministry to assist with the issue.

The Board noted that it would like more advance notice of Te Tāhū Hauora /sector events coming up in case members wish to attend, noting that with cost pressures it may not be possible to pay travel expenses for board members who attend such events.

The role of Te Tāhū Hauora in facilitating dialogue with Health New Zealand and consumer engagement was queried with regard to how best engagement for consumers across regional and national structures could be achieved.

8. Finance and risk report

Bevan Sloan

The finance report was taken as read.

The Director of Finance and Digital advised that the year-to-date surplus has continued ensuring we are set up well for the new financial year. It was noted that after the current change process has concluded, a number of policies and approaches may need to be revisited. Board members noted the importance of having a clear explanation for the end-of-year surplus, given concerns about reduction in overall staff numbers following the restructure.

The Director of Finance and Digital noted that we continue to meet our legislative requirements – no concerns of significance are being raised, and any incidents are followed up as appropriate.

The risk report was taken as read.

The Board noted that it would be useful to have an external facing risk register in addition to the internal focused risk register, to differentiate the two distinct types of risk.

The Co-chair, Te Kāhui Mahi Ngātahi queried whether there were opportunities for inclusion of consumer perspectives in the risk register.

The Director of Finance and Digital agreed to circulate a draft budget with assumptions by end of the month.

9. People, Cultural and Capability update and priorities planning

Holly Bodiam

The Director of People, Culture and Capability joined in person for this item.

There was general discussion regarding how the change process is progressing and any issues that had become apparent, with a particular focus on staff morale, ensuring issues regarding Māori are captured under the new structure and ensuring that any recruitment processes enable good representation. A board member suggested that Te Tāhū Hauora discuss approaches to recruitment with Whaikaha, following its establishment experiences.

10. Window 2024

Richard Hamblin & Carl Shuker

The Director of Health Quality Intelligence and the Scientific Publications Manager joined virtually and led this item, providing an update on the Window 2024 document and clarified next steps.

11. Te Whatu Ora performance framework

Richard Hamblin

The Director of Health Quality Intelligence noted the role of Te Tāhū Hauora in advising on approaches to monitoring the Government's health sector targets, including how to avoid gaming and unintended consequences and providing advice on construction of the performance framework.

The Board noted that a quarterly update to the Minister of Health could be helpful given our role to be a 'critical friend' of the Minister who should be aware of our position on the framework and any related reporting.

12. Using Qualitative Comparative Analysis to understand our impact over a decade

Richard Hamblin

The Director of Health Quality Intelligence spoke to his paper, addressing the benefits to the organisation of taking such an approach to measuring organisational impact.

The Board noted the potential and significant work that has gone into the paper and queried how it differentiated between individual and system level events/impacts. The Board requested that the paper be brought back to the Board with additional information around some of the assumptions contained in it.

13. Our work with other agencies

Martin Thomas/Caroline Tilah/Nikki Grae

The Medical Director and Executive Lead, the Senior Manager System Safety and Capability and the Senior Manager Quality System joined the meeting virtually. Their paper was taken as read.

The Senior Manager, System Safety & Capability discussed the range of avenues that this information contributes to, noting opportunities for triangulation of data across hospitals, ambulance providers and ACC.

The Board queried how this work aligned with the work being undertaken at item 12 on the agenda. The Medical Director & Executive Lead noted there was an opportunity to align these pieces of work.

The Board noted the importance of setting a manageable number of recommendations in reports such as these and ensuring that consumer voices were integral, adequately represented and heard, and that this needed to be an ongoing focus.

14. Te Kāhui Mahi Ngātahi environmental scan

Russ Aiton/Deon York

Te Kāhui Mahi Ngātahi co-chair provided board members with the regular environmental scan which was taken as read.

The co-chair thanked the board and Chief Executive for the inclusion of Te Kāhui Mahi Ngātahi in the recent change process.

The co-chair noted concerns with the Health New Zealand regionalisation of consumer councils within a relatively short timeframe and the potential for dilution of information that consumers can provide as a result of this process.

The Board noted the value of the ongoing contribution to meetings from Te Kāhui Mahi Ngātahi and proposed to move consumer items up the agenda for future meetings, noting that if there are things Te Kāhui Mahi Ngātahi specifically wished the Board to consider, it would be helpful to identify these early so the Board knows what further action is sought.

15. Noting papers

All noting papers were taken as read.

Agenda items for 9 August meeting

The following items will be included in the agenda for the 9 August board meeting:

- Draft annual report 2023/24
- Primary care – what the plan is, who we've seen
- How the restructuring has landed, and the wider impact of changes across the sector such as the loss of Te Aka Whai Ora and the Ministry of Health restructure.

The Chair, Te Kāhui Piringa closed the meeting at 3.50pm with a karakia.