



Minutes of Meeting Northland District Health Board Equity in Hospitals Committee Meeting

9.35am, Monday 19 April 2021
Te Waka Hauora, Kaitiāia Hospital

Present

Mataroria Lyndon (Chair)	John Bain	Sally Macauley
Carol Peters	Vince Cocurullo	
Debbie Evans (Via Zoom)	Libby Jones	
Harry Burkhardt	Ngaire Rae	

In Attendance

Nick Chamberlain, Jeanette Wedding, Mark McGinley, Tracey Schiebli, Maree Sheard, Ian McKenzie, Michael Kelly, Mike Roberts, Marty Rogers, John Wansbone, Neta Smith, Sarah Clarke, Kathryn Leydon, Paula Douglas (minutes)

Apologies

Kyle Eggleton

Register of Interests

The interests register was updated.
Ngaire Rae confirmed that she is no longer an employee of Mahitahi Hauora.

The Chair opened the meeting with a karakia.

1. COMMITTEE MINUTES

1.1 Confirmation of Minutes 08 March 2021

IT WAS MOVED THAT the minutes of the meeting held on 08 March 2021 be accepted.

*Libby Jones / Carol Peters
Carried*

1.2 Matters / Actions Arising

Colonoscopy service rates

- Paper was taken as read.
- A tour was given on the endoscopy suite at Whangarei Hospital last year.
- This report includes ethnicity data that has previously been requested by the Committee.
- Mitigation strategies have been put in place – up until May 2021 we are confident that we are moving in the right direction there is however concern around throughput for May-July 2021.
- Growth in the numbers of referrals for this type of procedure is far greater than any of the other cancer services.
- Some of the reasons for the current performance has been workforce gaps across all the endoscopy services; this has resulted in non-delivery in some parts.
- Modelling suggests 14 clinical sessions per day should be enough but we are still currently trying to catch up after COVID-19 2020.
- Recruitment is ongoing on a permanent basis.
- There have been positive discussions with a surgeon from the UK who is interested in the role – it will take approx 6 months for this person to arrive in NZ.
- To be kept as a standing item for upcoming meetings – updated report to next meeting with a breakdown of access for rural v urban patients.

Faster Cancer Treatment Waiting Times

- Paper was taken as read
- A number of initiatives have been highlighted.
- It is puzzling as to why we have had a doubling of our numbers.
- Ethnicity data – raw numbers were not included, Pacifica, Asian and Other were low totals.
- Interesting results around Māori and European – relatively equal results in regard to waiting time totals
- Remains a work in progress and things are starting to turn around.
- Has good support in key clinician groups.
- In terms of the delivery pipeline, this is open as far as it can be.
- This is about resources needed in relation to facilities and staffing.
- It is critical to be able to prioritise the high need patients.
- First specialist appointments for patients are conducted in Whangarei – for most patients everything beyond that takes place in Auckland.
- Progress is being made with discussion with the Ministry re linear accelerators (Linac).
- COVID-19 has impacted significantly on waiting times in the last 12 months.
- No issues experienced with patients reluctant to come in for treatments.

Helicopter Flight Figures

- Not discussed

2. CHAIR'S REPORT

The Chair:

- Michael Kelly was welcomed to the committee by the Chair including all the new staff members who have joined this month.
- Acknowledge GM Medical & Elder Services for the work she has done on the agenda and the work done in putting together the reports.

3. Role of Rural Hospitals in Healthcare

- Presentation Dr Sarah Clarke, Clinical Director, Rural Hospitals
- There has been substantial growth in the rural regions of Northland.
- More than 20% of Northlanders are living in quintile 5
- Previously rurality has been measured on units with Kaitaia considered an urban area.
- Oncology service is getting busier, progressing toward offering support for bowel screening.
- Proposed an overnight bed be set up at Kaitaia Hospital for mental health patients to avoid overnight transfers to Whangarei hospital.
- Data on all patients who are diagnosed with cancer is not currently being captured. The data is being captured from the time that treatment starts.
- Asked that we start capturing further information on cancer patients.
- Data was given on the numbers of patients that require CT scans at Whangarei Hospital. Request for information on what would be required to set up CT imaging at Kaitaia Hospital
- Rural Māori may be particularly vulnerable to the effects of having to travel for treatments.
- Believe that the Calderdale Framework is a good solution for inter-professional education for staff.
- Trialling the Rongoa Māori programme at Kaitaia Hospital.
- Telehealth is also providing an opportunity for growth – provision has dropped right off since the downturn with COVID-19.
- Telehealth provision needs to be included in employment contracts going forward for all medical staff.
- Suggested that services be mobilised to enable patients who are in the outer regions access to services therefore removing barriers for those unable to travel.

3. SYSTEM PERFORMANCE

3.1 Operational Report

- Report was taken as read.

4. NEXT MEETING DETAILS

The next meeting will be 9.00am on Monday 31 May 2021 at Dargaville Hospital.

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

CHAIR _____ DATE _____

The meeting closed at 10.45am