Notes of the 66th meeting of the Health Quality & Safety Commission Board held on 3 May 2018 in Wellington

Members: Prof Alan Merry (Chair), Dr Dale Bramley (items 1-12), Shelley Frost, Bob Henderson, Dr Gloria Johnson, Dr Bev O'Keefe, Dame Alison Paterson, Gwen Tepania-Palmer. Staff: Dr Janice Wilson, Karen Orsborn, Richard Hamblin, Kiri Rikihana, Chris Walsh, Gillian Bohm, Julene Hope (item 2), Shelley Hanifan (items 10-19), Carmela Petagna & Tania Simmons (items 8-9), Alice McCallum (item 11), Diane de Rochester (EA), Ethan Tucker (minutes). Guests: Anthony Hill (Health & Disability Commissioner, items 1-12), Prof Gregor Coster (bowel screening programme review panel chair, item 2), Dr Felicity Dumble (CYMRC Chair, via videoconference, item 6), Dr Neil Houston (items 8-9), Dr Sue Wells (via videoconference, items 8-9), Dr Anthony Williams (POMRC Chair, item 11), Dr Sue Belgrave (PMMRC Chair, item 12), Dr John Tait (item 12).

Key points and decisions are summarised below.

- The minutes of the previous meeting were **approved**.
- The actions of the previous meeting were updated and noted.
- The interests register and special register of interests were updated.
- Members Board related activities were **noted**
- The financial report and risk register **noted**
- The CE Report was noted
- A patient story was provided by way of a video

Key decisions – the Board:

- a. **agreed** to write to ACC Chief Executive Scott Pickering seeking a meeting to discuss ACC's funding for the Commission's surgical site infection programme, which ACC is considering ending
- b. **agreed** that funding additional primary care improvement work like Safety in Practice (SIP) is currently not possible but the Commission will investigate options for a national collaborative approach, and will work with Waitemata DHB to prepare a submission to the primary care review
- c. **noted** and provided comments on the draft 2018 Window report, which will be revised to reflect Board input
- d. **agreed** to a range of mortality review committee appointments, reappointments and terms of reference amendments.

Bowel screening programme review

Prof Gregor Coster and Julene Hope joined the meeting for this item

In response to public controversy regarding the bowel screening programme, the Minister of Health invited the Commission to provide secretariat support for a review into the

programme. A contract has been agreed with the Ministry of Health but we have yet to receive a signed copy. Prof Coster provided an update to the Board on progress to date on the review. He intends to report to the Minister of Health by 30 June. While the review has a short timeframe he is confident the reporting deadline will be met.

The Board:

- **noted** that at the invitation of the Minister of Health, the Commission is hosting the Independent Assurance Review for the National Bowel Screening Programme, which is being led by Prof Gregor Coster
- **noted** that Prof Coster intends to complete the final Review report by June 2018, and the Board will be invited to comment on the draft final report in June

CYMRC Data Report & Chief executive's report

Dr Felicity Dumble joined the meeting via videoconference for the CYMRC discussion

CYMRC Chair Dr Dumble joined the meeting to discuss the **CYMRC 13th Data Report**, which was issued on 26 April, in response to the Board's interest in the report. The report summarises data on mortality in New Zealand children and young people aged 28 days to 24 years, over the five-year period from 2012 to 2016. In 2016, 483 children and young people died. The leading cause of death for children and young people overall was medical conditions (38.8%), followed by unintentional injury (27.7%) and intentional injury (25.3%).

The Board:

• noted the publication of the CYMRC 13th Data Report on 26 April 2018

Safety in Practice programme

Dr Neil Houston & Dr Sue Wells (via videoconference) joined the meeting for the next two items; Carmela Petagna & Tania Simmons also joined the meeting to observe the discussion

Drs Houston and Wells joined the meeting to discuss the Safety in Practice (SIP) initiative, which has operated in Auckland DHBs since 2014, and which has been supported by the Commission since it began. They expanded on the issues raised in the Board paper prepared by Drs Bramley and Houston.

Based on an IHI model, SIP trains primary health care teams in a regional initiative to reduce preventable harm to patients from care received in the community. Recently the programme has added a pilot project in 20 community pharmacies in Auckland and Waitemata DHBs. Dr Houston highlighted the increasing evidence of the harm patients suffer from high-risk medicines and failing to detect patient deterioration. Auckland and Waitemata DHBs would like to spread the initiative more widely, and there is considerable clinical backing for this. Implementation in Scotland, where Dr Houston is from, generated valuable innovation in local implementation, and some of this has been seen in New Zealand adaptations to suit local circumstances. If a national organisation like the Commission led sharing and learning in this area, Drs Houston and Wells feel there would be considerable potential for improvement.

The Board:

- **noted** the Safety in Practice presentation from Dr Neil Houston, and the request for the Commission to consider how to build on the achievements of the SIP programme in Auckland to spread primary care improvement initiatives nationally
- **agreed** that the Commission funding any additional primary care improvement work like SIP is currently not possible, but the Commission will investigate options for a national collaborative approach in primary care as part of its ongoing work, and it will enlist sector views, including Waitemata, in this process
- **agreed** the Commission would work with Waitemata DHB to prepare a submission to the primary care review being led by the Ministry of Health

Primary care programme update

Karen Orsborn and Dr Wells provided an update on the current and next year's rounds of Whakakotahi primary care improvement programmes. Six Whakakotahi 2018 projects covering a range of topics and provider types are currently in the start-up phase. An expressions of interest process for the Whakakotahi 2019 cohort is planned for July 2018. Progress to date has been positive, and Synergia will soon evaluate the three-year programme. In response to feedback from Synergia and Te Roopū Māori, the programme team are implementing changes to Whakakotahi delivery to improve engagement with Māori health organisations and to facilitate their participation in the Whakakotahi process by addressing systemic barriers.

The Board:

• **noted** the update on the primary care work programme, and continuing discussions to improve the programme's ability to address Māori health inequity

Draft Window on the Quality of New Zealand's Health Care

Shelley Hanifan joined the meeting for the remainder of the agenda

Richard Hamblin presented the draft Window report prepared by his team, and explained some of its key findings. The report shows that deaths from conditions that can be improved by health care continue to reduce for all parts of the country, but there is a two-fold variation between the DHBs with the highest and lowest rates of these premature deaths. The report also shows that New Zealand has good high-level outcomes in line with international norms, despite lower expenditure on its health care system than most comparable countries.

The Board discussed the Window 2018 findings, and provided a range of detailed feedback to inform the report:

The Board

- noted and provided comments on the draft 2018 Window report, which will be revised to reflect Board input
- **agreed** that the revisions requested by the Board, along with the usual consultation and briefing requirements, may mean the Window 2018 report could miss its 30 May 2018 SPE deadline

• **noted** that the Minister's office will be briefed in advance, and the Commission will consult with the Ministry of Health and liaise with the Minister's communications team before the Window release

7th POMRC Annual Report

Dr Anthony Williams & Alice McCallum joined the meeting for this item

Kiri Rikihana and new POMRC Chair Dr Anthony Williams introduced the committee's 7th Annual Report, which is scheduled to be published on the Commission's website on 22 June 2018. Dr Williams took over as POMRC Chair from Dr Leona Wilson on 15 April. The report analyses perioperative mortality from 2011 to 2016 and includes a special topic feature on 30-day mortality following hip fracture repair. Updated draft recommendations were circulated to the Board.

The Board:

- agreed to publish the POMRC 7th Annual Report on the Commission's website on 22 June 2018
- **noted** that the Minister's office will be included in the communication plan and be briefed about the report before publication

12th PMMRC Annual Report & Maternal Morbidity Working Group 2nd Annual Report

Dr Sue Belgrave and Dr John Tait joined the meeting for this item

Kiri Rikihana and PMMRC Chair Dr Sue Belgrave discussed the contents of the PMMRC report, which is scheduled for publication on the Commission's website on 26 June 2018. The report investigates perinatal and maternal mortality over a range of years, and records a perinatal-related mortality rate of 10.1 per 1000 total births in 2016. There has been no statistically significant reduction in perinatal mortality since 2007. There has, however, been a significant reduction in the stillbirth rate, from 5.7 per 1000 births in 2007 to 5.1 per 1000 births in 2016. Dr Belgrave outlined the main report findings and the revised recommendations and additional consumer messages that have been included. The special topics on neonatal mortality and neonatal encephalopathy are important focuses of this year's report.

The Board:

- agreed to publish the PMMRC 12th Annual Report and the MMWG 2nd Annual Report on the Commission's website on 26 June 2018
- **noted** that the Minister's office will be included in the communication plan and be briefed about the reports before publication

MRC appointments

Kiri Rikihana described proposed appointment of seven members to four MRCs, the reappointment of one POMRC member, and proposals to recruit two new members: one each to FVDRC (a legal expert) and PMMRC (a midwife). The proposed appointments involve increasing the number of members on FVDRC and PMMRC above the maximum of

eight, with a ninth member to join each committee for two years (FVDRC) and three years (PMMRC), to provide extra expertise in key areas for each committee.

The Board:

- agreed to increase the maximum membership of FVDRC and PMMRC from eight to nine for two years to 3 May 2020 for FVDRC and three years to 3 May 2021 for PMMRC, to bring extra skills to the committee membership
- **agreed** to begin seeking a ninth FVDRC member with expertise in law and legal analysis, and a ninth PMMRC member with expertise in midwifery
- **agreed** to appoint and reappoint:
 - a) Current PMMRC member Dr John Tait as committee chair for a three-year term from 26 June 2018, to replace Dr Sue Belgrave
 - b) New members Donna Cormack, Louise Kuraia and Dr Sarah Tout to PMMRC for a three-year term from 26 June 2018 to 26 June 2021
 - c) New members Dr Alayne Hall and Dr Colette Muir to CYMRC for a three-year term from 1 July 2018 to 1 July 2021
 - d) New member Dr Kerry Gunn to POMRC for a three-year term from 1 May 2018 to 1 May 2021
 - e) New member Dr Michael Roguski to FVDRC for a three-year term from 1 May 2018 to 1 May 2021
 - f) Current POMRC member Rob Vigor-Brown to POMRC for a further three-year term to 1 March 2021
- noted the appointments of new CYMRC ex-officio members Lisa-Jane Rogers (Oranga Tamariki) and Emma Sutich (Ministry of Health)

POMRC & SuMRC terms of reference

Kiri Rikihana outlined amendments to the terms of reference for two mortality review committees. Both committees' terms of reference are to be amended to encourage greater information sharing between MRCs, and add knowledge of health inequities to the list of required expertise for committee members. POMRC's terms of reference are also to be amended to broaden the definition of perioperative mortality to 90 days, while SuMRC's terms of reference are to be expanded by adding the mandate for SuMRC to inquire into suicide. The Board noted the attached legal opinion and approved the proposals, suggesting additional contributions on expertise in addressing inequities could be added to proposed cover letter templates. FVDRC, CYMRC and PMMRC have yet to review their terms of reference, but this will be done shortly.

The Board:

- **agreed** to amend MRC terms of reference to:
 - a) allow POMRC and SuMRC to share information with other MRCs
 - b) add "*knowledge of health inequities*" to the areas of expertise required by POMRC and SuMRC members
 - c) extend the inclusion period in POMRC's terms of reference to 90 days
 - d) add a clause to the SuMRC terms of reference stating that, "The Committee will be required to consider suicide on an ongoing basis and consider other mortality and morbidity as directed by the Health Quality & Commission in writing, or as specified within the Committee's agreed work programme"