Notes of the 64th meeting of the Health Quality & Safety Commission Board held on 30 November and 1 December 2017 in Wellington

Members:	Prof Alan Merry (Chair), Dr Dale Bramley (items 13-19 below), Shelley Frost, Bob Henderson (items 1-19), Dr Bev O'Keefe, Dame Alison Paterson (items 1-19)
Staff:	Dr Janice Wilson (all items except 11-12), Karen Orsborn, Bevan Sloan [*] , Richard Hamblin, Liz Price, Kiri Rikihana (items 5-8 & 13-20), Chris Walsh, Iwona Stolarek, Gillian Bohm, Carmela Petagna (item 14), Maria Poynter (item 7), Tania Simmons ^{**} (item 17), Roz Sorensen (item 10), Deon York (item 20), Diane de Rochester (EA), Ethan Tucker (minutes) (* via videoconference for items 15-16) (** via teleconference for item 17)
Guests:	Te Roopū Māori (item 7), Dr Clive Bensemann (item 10), Dr Michal Boyd (item 14), Consumer Advisory Group (item 20)
Apologies:	Dr Dale Bramley (30 November only), Dr Gloria Johnson, Gwen Tepania- Palmer

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 a range of appointments and reappointments to the Suicide Mortality Review Committee and the Family Violence Death Review Committee
- **b. endorsed** in principle a proposed aged residential care quality improvement approach, subject to further details being provided in 2018 meetings
- **c.** agreed in principle to:
 - i. the Commission progressing option C (a planned approach to increasing our internal delivery of education and training) for the next three years from 2018/19, which will require in-house adult education expertise to strengthen our Commission-wide capability building work
 - ii. consider option D (moving to an in-house delivery model) in the longer term, which will involve considering a fully costed business case and advice at a future Board meeting

Te Roopū Māori chair reappointment

Tuwhakairiora (Tu) Williams has chaired the Commission's Te Roopū Māori advisory group since October 2011. The paper proposed to reappoint Mr Williams as chair for one final year to 1 September 2018, to allow time to select his successor as chair. However, Mr Williams advised that on or around 30 November he had been appointed as a senior advisor in Hon Willie Jackson's office, commencing on 4 December. Therefore, he tended his resignation as Roopū chair. The Commission will consider next steps and a potential replacement.

The Board:

- noted that Te Roopū Māori chair Tu Williams, who was to be considered for reappointment at this meeting, just advised he has been appointed to an advisory role in the office of Hon Willie Jackson
- **noted** Mr Williams' resignation as Roopū chair, and that the Commission will consider a potential replacement Roopū chair in light of the potential perceived conflict of interest

Contributing to the new Government's priorities

Dr Wilson introduced a paper discussing the particular contribution the Commission can make to implementing the new Government's priorities. The Board considered how our existing and planned work contributes to the new Government's agenda and how the Commission can remain flexible, adapting to new policy directions as they emerge.

The Board:

• **noted** and discussed the summary of how the Commission supports the new Government's priorities

Te Roopū Māori meeting with the Board

The Board discussed Te Roopū's recent progress with the group. Highlights of work advancing Te Whai Oranga work programmes were detailed, and work to support the successful Commission visit to Tapū te Ranga Marae in Island Bay in June 2017. There has been progress under each of Te Roopū's four themes: mahi ngātahi (partnership), matauranga (knowledge), rangatiratanga (leadership), whai hua (strategic priorities).

Issues discussed included:

- Te Roopū's perspective on the broader health quality and safety system, sharing personal experiences of Te Roopū members and case studies of Māori interaction with the system. They identified a strong need for a more inclusive, Māori-centred system that rejects a monocultural interpretations of clinical service delivery and patient/whānau interaction.
- Mental health treatment experiences for Māori also differ widely from other consumers, with disproportionately poor outcomes in areas such as seclusion.
- Perceptions of acceptable health outcomes are affected by ethnicity and deprivation, with clinicians and systems unconsciously setting lower standards for Māori.
- The inverse care law in which those who need the best care receive the worst, is seen as a major challenge, but also presents many opportunities for reform in a system that

needs to change to serve Māori effectively and equitably. More work to measure cultural competence would be welcome.

- Te Roopū's support for 'setting a date for equity' so there is a firm objective for the system to respond to, and to drive both sector motivation and funding prioritisation.
- Can the system support a Māori-centred approach? The Wai262 Waitangi Tribunal report setting out a Māori worldview may provide a roadmap to copy.

The Board:

- **noted** the contents of the Te Roopū Māori update and congratulated the group on its progress in 2017
- **noted** Mr Williams' advice that he will commence working as a Senior Ministerial Advisor for Hon Willie Jackson on 4 December, and that accordingly he will step down from his role as Te Roopū chair

MRC appointments

Kiri Rikihana introduced two mortality review committee appointment papers, addressing appointments to the Suicide Mortality Review Committee (SuMRC) and the Family Violence Death Review Committee (FVDRC).

The Board:

- **agreed** to appoint to the Suicide Mortality Review Committee, subject to the usual background checks:
 - **a.** Tania Papali'l and David Cairns for an initial two-year term from 18 December 2017 to 18 December 2019
 - **b.** Taimi Allan for an initial two and a half-year term from 18 December 2017 to 18 June 2020
 - **c.** Maria Baker and Denise Kingi-'Ulu'ave for an initial three-year term from 18 December 2017 to 18 December 2020
- **noted** three SuMRC member terms currently concluding on 31 March 2018 (Chair Prof Rob Kydd, Deputy Chair Dr Sarah Fortune, and Prof Robert Mulder) will be addressed in an appointment paper at the February 2018 Board meeting
- **agreed** to make appointments and reappointments to the Family Violence Death Review Committee, subject to the usual background checks for new appointees:
 - **a.** Reappoint Prof Jane Koziol-McLain as a member to 31 March 2019 and appoint her as Chair from 1 January 2018 to 31 March 2019 to replace Dr Jackie Short
 - **b.**Reappoint Dr Jackie Short as a FVDRC member for three years to 1 January 2021, noting that her term as FVDRC Chair concludes on 31 December 2017
 - **c.** Appoint new members Mark Heneghan and Shayne Walker for an initial three-year term from 18 December 2017 to 18 December 2020
 - d.Appoint new member Nicola Atwool for an initial one-year term from 18 December 2017 to 18 December 2018

Kiri Rikihana departed 3.00pm

Contributing to the new Government's priorities (continued)

The Board continued its discussion on how best to address Government priorities. In particular, there is a strong need for improvements in oral health. The impact of poor dental health can be seen in the growing prevalence of child tooth extractions carried out by DHBs. The recent shift of responsibility for water fluoridation to DHBs presents an opportunity to address socio-economic disparities in health outcomes, because areas without fluoridation tend to be over-represented in negative statistics for oral health.

In summary, the Commission is establishing the contribution it can make to the Minister's agenda, and it may be that issues such as oral health and workforce capacity will arise in discussions. Our intelligence work including the Window report and the Atlas of Healthcare Variation present the opportunity to 'shine a light' on issues like this. In terms of improvement programmes, which require substantial investment, we must be guided by the Minister's signals.

Mental health & addiction improvement programme update

Dr Clive Bensemann and Roz Sorensen joined the meeting for this item

Dr Sorensen and Dr Bensemann summarised recent progress in the new mental health and addiction (MHA) national improvement programme, including how this will be affected by the new Government's official inquiry into these services. The discussion was informed by the MHA programme leadership group meeting on 29 November. Dr Bensemann discussed the sector's readiness for the improvement programme work and how the sector is faring in a time of organisational fatigue. Dr Sorensen also outlined the scope, intent and recent progress of the programme. Quality improvement facilitator courses have targeted 24 DHB staff around the country to build expertise, and the programme's five priority areas are being implemented:

- Minimising restrictive care
- Service transitions
- Maximising physical health
- Learning from adverse events and consumer experience
- Improving medication management.

Health & safety update

The health and safety update was noted and discussed briefly. The Board requested that the update should specify the total number of incidents recorded and the sites at which they occurred. Karen Orsborn cited the example of recent work to educate staff in how to deal with difficult external visitors, and the busy work schedule of the Health & Wellness Committee.

The meeting adjourned for the day at 4.30pm, and resumed at 9.00am on Friday 1 December with Dr Bramley now attending

Developing the Improvement Hub

Karen Orsborn described recent developments and current plans for developing the Commission's Improvement Hub, which will collect existing improvement programmes and capability building to improve the safety and quality of health services. Sector feedback has been incorporated to guide prioritisation, and advice on what we might do less of. A greater focus on consumer engagement, equity and cultural competence will be central themes of upcoming work.

The Board:

- **noted** and provided comments on the proposed direction for the Improvement Hub
- **noted** that further Improvement Hub details will be provided in the 2018/19 Statement of Performance Expectations in 2017/18 Q4

Proposed aged residential care quality improvement programme

Dr Michal Boyd and Carmela Petagna joined the meeting for this item

Dr Boyd and Ms Petagna discussed proposals to establish a new aged residential care (ARC) quality improvement programme, which have been informed by a scoping exercise to determine priorities for improvement. The scoping suggests a bottom-up approach to allow the sector to determine its own priorities for improvement. We will help to promote the Commission's preferred consumer-led co-design model, and the main focus of the programme will be on three to five areas of significant harm or variation. We will support the sector to reduce variation in quality improvement and quality of life indicators in these areas. The early stages of the programme will involve building a quality improvement platform from January to June 2018 and moving to build knowledge and capability in 2018/19, with a focus on specific local quality improvement projects. Specific topics will feature in the work as outlined in the paper, and will be clarified based on InterRAI data and discussions with the sector.

The Board:

- noted that in November 2016 the Board agreed that the Commission should engage with the aged residential care sector and scope quality improvement work for 2017/18 onwards
- **endorsed in principle** the proposed ARC quality improvement approach, subject to further details being provided in 2018 meetings
- **noted** that the Board will receive a progress report on the programme implementation in September 2018

Audit NZ report to the Board on the annual audit

Bevan Sloan and Dame Alison Paterson discussed the contents of the Audit NZ management report for 2016/17.

The Board:

• **noted** the Audit NZ report on the annual audit for the year ending 30 June 2017, and its recommendations for improvements

The Commission's future role in capability building

Tania Simmons joined the meeting via teleconference for this item

Karen Orsborn introduced a paper providing a stocktake and future direction for the Commission's leadership and capability building work. The work results from plans signalled in the 2017-21 Statement of Intent to investigate whether training and competencies for quality improvement can be delivered more effectively, and from developments in the past year at training provider Ko Awatea. The new location of the leadership and capability team within the Improvement Hub also presents an opportunity to consider how that team's work will integrate with and potentially benefit from working within the hub.

The paper's four options for delivering education and training were discussed:

- a. Full third-party delivery
- b. The current mixed delivery approach
- c. Amended current approach with more Commission delivery
- d. Full Commission delivery

The Board:

- **noted** the Commission's current approach to capability building and options for future training and education delivery
- **agreed** in principle to:
 - a. the Commission progressing option C (a planned approach to increasing our internal delivery of education and training) for the next three years from 2018/19, which will require in-house adult education expertise to strengthen our Commission-wide capability building work
 - b.consider option D (moving to an in-house delivery model) in the longer term, which will involve considering a fully costed business case and advice at a future Board meeting

Consumer Advisory Group meeting with the Board

The Board welcome the Group to the meeting, and discussed the Group's early planning since its members were appointed in August 2017, expectations for the coming months and how the relationship between the Board and the Group will develop. The Group will help us break down barriers in our own work and in the sector, and the Board welcome the suggestions for improvement that the Group has already made. Prof Merry introduced the range of backgrounds and interests of Board members, which have become more diverse with time, and described their personal experience of the health system.

The Board:

• **noted** the early work of the recently established Consumer Advisory Group and the resignation of group member Lisa Paraku, who will be replaced in due course.