

Notes of the 69th meeting of the Health Quality & Safety Commission Board held on 29-30 November 2018 in Wellington

Members:	Professor Alan Merry (Chair), Dr Dale Bramley, Dr Gloria Johnson, Dr Bev O'Keefe, Dame Alison Paterson, Gwen Tepania-Palmer.
Staff:	<i>In attendance:</i> Dr Janice Wilson, Richard Hamblin, Dr Chris Walsh, Gillian Bohm, Lizzie Price, Dr Iwona Stolarek, Shelley Hanifan (minutes), Diane de Rochester (EA), Carmela Petagna, Ying Li.
Invited advisor	Ria Earp - Chair, Te Rōpū Māori; Rowena Lewis - Consumer Advisory Group.
Apologies:	Bob Henderson, Mr Andrew Connolly, Anthony Hill (Health & Disability Commissioner), Karen Orsborn (a.m.)
Guests:	Te Rōpū Māori, Dr Michal Boyd.

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 were **noted**.
- The CE Report was **noted**.
- A **patient story** was provided by way of a video.

Key decisions – the Board:

- a. **agreed** to appoint Dr Hinemoa Elder and Dr Matthew Reid as members of CYMRC, each for a term from 29 November 2018 to 29 November 2021
- b. **agreed** to reappoint consumer representative Andrew (Fale) Lesa as a member of CYMRC for a second and final three-year term from 1 March 2019 to 1 March 2022
- c. **agreed** to reappoint Prof Jane Koziol-McLain as FVDRC Chair for a further one year to 31 March 2020, by which time the intention is to have identified the next potential FVDRC Chair, and for the number of FVDRC members to return to eight
- d. **noted** that in an out-of-session paper they recently appointed Otago midwife Heather LaDell to PMMRC for a three-year term.
- e. **agreed**, for the aged residential care (ARC) programme, a focus on emerging priority topics of medicines management; resident deterioration; learning from adverse events and encouraged exploration of a broader framework that includes resident wellbeing
- f. **agreed** to the next steps outlined and to the approach being taken for the design, delivery and measurement of the ARC programme
- g. **approved** Dr Karen Poutasi and Darrin Sykes as the external reviewers to undertake the Commissions Performance Improvement Framework (PIF) review.
- h. **requested** that the PIF Review terms of reference should use improvement language and framing and include a focus on performance development.
- i. **agreed** to support the refresh of the Commission brand

- j. **agreed** to accept 'Te Tāhū Oranga' as the Māori name for the Commission, for stakeholder testing
- k. **agreed** to proceed to testing with the 'HQSC' acronym, 'Health Quality and Safety Commission' and 'Health Quality Commission' as the English names for the Commission
- l. **recommended** equal weighting of Māori and English in branding, with Māori on top
- m. **recommended** that the Commission decline the Ministry of Health's offer of accommodation at this time.

MRC appointments and reappointments

The Board requested that candidates' interest information be provided when they are put forward to the Board for appointment. They noted that this information is important for both Board and secretariat to understand. The Board asked if Dr Hinemoa Elder was replacing Dr Paula King and this was confirmed.

Te Rōpū Māori joint session

Te Rōpū Chair Ria Earp expressed appreciation of the opportunity for Te Rōpū Māori to meet with the Board. She expressed the need for equity to focus on Māori, and for Te Tiriti o Waitangi to be core. She asked for Board views.

The Board expressed recognition of the impact of colonisation, and recognised the need for a strong focus on Te Tiriti o Waitangi. The Board expressed that they see equity issues specific to Māori and want to find solutions. The Board value the advice of Te Rōpū Māori. It was recognised by the Board that the Commission's equity focus, in some key documents, does seem to confuse the needs of other groups, alongside those of Māori.

The 'Open Forum for Equity' was briefly discussed. Te Rōpū Māori reflected on how best to work with the Board to support the Commission's work. They would like to develop relationships and advise. They would like to focus on priority areas. They suggested work in three or four key areas, which may include strengthening in-house ability; assisting the Commission to highlight best practice initiatives in improving Māori health, and mental health and addiction work.

In terms of the Open for Equity Forum, they'd suggest a different name and a focus on improving Māori health. A Māori health lens is different from an equity lens. It was reiterated that partnerships should come first. The Commission should not lose sight of its equity goal – but Māori health need must come first.

Aged residential care QI Programme

Carmela Petagna and Dr Michel Boyd joined the meeting.

Dr Boyd thanked the Board for the opportunity to talk to them about improving aged residential care, which she has a passion for. She talked about the change that the Commission has already brought to the sector, in providing a national view, through the Quality Leads Group.

Dr Boyd talked about focusing quality improvement strategy at three levels; registered nurse level, prescriber level and caregiver level. She talked about basing work on the Triple Aim, and work planned with consumers, collecting information and stories about 'what matters to me?' This work will help to inform strategy.

The Board:

- **agreed** a focus on emerging priority topics of medicines management; resident deterioration; and learning from adverse events and encouraged exploration of a broader framework that includes resident wellbeing
- **agreed** to the next steps outlined and the approach being taken for the design, delivery and measurement of the ARC programme.

Performance Improvement Framework (PIF) Report

The Chair invited Dr Janice Wilson to talk to the PIF Review item.

Dr Wilson explained that the paper provided updates the Board on progress in this area. She reminded the Board that they had requested that one PIF Reviewer from the last PIF Review Panel be invited to participate on the current PIF Review. Dr Karen Poutasi was approached and has agreed to participate.

The Board has also requested careful selection of other panel members. Darrin Sykes curriculum vitae was provided to the Board for their information. In particular, Darrin Sykes brings a thorough understanding of the role of Crown Entities, which will strengthen the panel.

The final panel member has not yet been secured. The Commission is looking for a panel member with specific Māori health focus and expertise.

The Board

- **approved** Dr Karen Poutasi and Darrin Sykes as the external reviewers to undertake the Commissions Performance Improvement Framework (PIF) review
- **requested** that the terms of reference should ensure improvement language and framing, which includes a focus on performance development.

Dashboard Equity Presentation

Ying Li joined the Board meeting for this item. Richard Hamblin was invited to introduce and provide context.

He pointed out that the goal of the session is to seek feedback on different options for displaying the information on equity, for the dashboard series. The dashboard is not the most appropriate way to display equity data and the team is working on finding an appropriate alternative.

Public facing name for the Commission

Lizzie Price highlighted that the Health Quality and safety Commission is a name that people struggle with. It is important that people know who we are and what our name is. We also want to have clear te reo Māori branding.

However, a full name change is not necessary. The Commission can retain our current name for legal purposes and select an easy to remember English and Māori name for the purposes of brand recognition.

'Te Tāhū Oranga' was the preferred Māori name, and it was formally accepted by the Board subject to testing. In terms of the English name, the Board suggested that 'HQSC, 'Health Quality and Safety Commission' and 'Health Quality Commission' should be tested. They

noted that Māori and English should be given equal weighting in the logos developed for testing, and that Māori should be on top.

The Board agreed to:

- **support** the refresh of the Commission brand
- **accept** 'Te Tāhū Oranga' as the Māori name for the Commission, for stakeholder testing
- **proceed** to testing with the 'HQSC' acronym, 'Health Quality and Safety Commission' and 'Health Quality Commission' as the English names for the Commission
- **recommended** equal weighting of Māori and English in branding, with Māori on top.

MOH accommodation plan

Bevan Sloan joined the meeting for this item, by zoom.

Dr Wilson introduced the discussion with an overview of the paper. The Ministry of Health has offered the Commission floor space at their Molesworth St premises. For some time, there has been discussion about setting up a 'health hub' of organisations like the Commission and the Health Promotion Agency (HPA). Currently there is not room for the health hub idea, but there is room for one additional agency. The floor space is not as big as the Commission currently has and there are no costs savings offered to the Commission, in terms of lease.

In terms of strategy, the Commission's separation from regulation and monitoring is important. The Board questioned how being positioned in the Ministry would affect our ability to perform our functions or impact the relationships of trust we have within the sector.

After consideration of cost and space, recognising that the current space works well and that there is no pressure to relocate at the current time, the Board noted that they are happy for the Commission to stay where it is.

The Board:

- **recommended** that the Commission decline the Ministry of Health's offer of accommodation at this time.

Audit management report

The Board asked about the Audit Report and, the final meeting with Audit NZ.

The Commission has aimed to improve all audit ratings from 'good' to 'very good'. A face to face meeting with Audit NZ is required, so that we can understand specifically how this can be done. The Board Chair and dame Alison Patterson would like to be present for the meeting.

The good work of the staff working in this area was commended by the Board.

The Board

- **noted** the audit report.