# MidCentral District Health Board

# Community & Public Health Advisory Committee Meeting

Minutes of meeting held on Tuesday, 29 April 2014 at 1pm at MidCentral District Health Board, Rooms A & B, Education Centre, Palmerston North

Unconfirmed Minutes

#### PRESENT:

Di Anderson (Chair)
Barbara Cameron (Deputy Chair)
Phil Sunderland (ex officio)
Andrew Ivory
Nadarajah Manoharan
Adrian Broad
Oriana Paewai

#### IN ATTENDANCE:

Mike Grant, General Manager, Planning & Support
Rebecca Bensemann, Committee Secretary
Chiquita Hansen, Clinical Executive Director (Central PHO)
Bruce Stewart, Chair (Central PHO)
Craig Johnston, Senior Portfolio Manager, Primary Health Care
Jo Smith, Senior Portfolio Manager, Health of Older Persons
Vivienne Ayres, Manager, DHB Planning & Accountability
Andrew Orange, Pharmacy Advisor
Doug Edwards, Maori Health Advisor
Brad Grimmer, Project Manager
Jordan Dempster, Communications Officer
Barbara Robson, Board Member

#### **OTHER:**

Public: (1) Media: (0)

### 1. APOLOGIES

An apology for absence was received from Ann Chapman and Murray Georgel.

### 2. NOTIFICATION OF LATE ITEMS

There were no late items.

## 3. CONFLICT AND/OR REGISTER OF INTERESTS UPDATE

## 3.1 Amendment to the Register of Interests

There were no amendments to the Register of Interests.

## 3.2 Declaration of Conflicts in Relation to Today's Business

Barbara Cameron declared an ongoing conflict in relation to any mention of the Feilding Integrated Family Health Centre (IFHC) and noted that she is a Councillor for Manawatu District Council.

Oriana Paewai declared a conflict in relation to Part 2 of the agenda in respect of Item 14.1 General Approach to Contract Review and Renewal for 2014/15, specifically pertaining to Rangitane o Tamaki nui a Rua and Te Runanga o Raukawa. The Chair noted this and advised that Ms Paewai could remain in the meeting and participate in any discussion around this item due to the generality of information contained therein.

## 4. MINUTES

## 4.1 Minutes

It was recommended:

that the minutes of the previous meeting held on 18 March 2014 be confirmed as a true and correct record.

## 4.2 Recommendations to the Board

It was noted that all recommendations contained in the minutes were approved by the Board.

### 4.3 Matters Arising from the Minutes

There were no matters arising from the minutes.

## 5. GOVERNANCE

### **5.1 2013/14** Work Programme

The Committee noted progress made against the 2013/14 work programme and confirmed that the current style, content and timing of reports presented is appropriate and sufficient.

Management advised that two workshops are scheduled for August 2014, relating to the Master Health Service Plan initiative as well as development of a health strategy/health charter, and that Board and Committee members are invited to attend both sessions.

Mr Adrian Broad queried the timing of the Whanau Tri 2014 report. Management confirmed that full and final information would be received from Sport Manawatu at a period some 12-16 weeks at the conclusion of the event and that it was likely this would be reported back to the Committee at its meeting in July.

It was recommended:

that the updated work programme for 2013/14 be noted.

# 6. STRATEGIC/SPECIAL ISSUES



#### 6.0 Annual Presentation from the Central PHO

Ms Chiquita Hansen (Clinical Executive Director, Central PHO) and Dr Bruce Stewart (Chair, Central PHO) provided a comprehensive overview on current Central PHO activities and developments. A copy of the PowerPoint presentation slides is available to be forwarded to Committee members on request.

The Chair thanked Ms Hansen and Dr Stewart for providing a full update and commented that the Committee looks forward to future developments on the work programme over the next year.

### 6.1 Health Charter

As part of the development of a Master Health Services Plan there is a need to develop a district-wide Health Charter which essentially will be a unifying founding document that provides the stewardship for understanding what we wish our sector to look like over time.

To achieve this, the process of engagement with the sector is important. It is proposed that four workshops will be held involving key stakeholders, clinicians and managers. A further workshop will be held in August for Board and Committee members.

Mr Adrian Broad queried whether it would be possible to obtain details of the invitees for the first two stakeholder workshops to be held in May. The General Manager, Planning & Support, explained that the correct process to release this information would be through the formal Committee process, with the information to be reported and presented appropriately.

Mr Broad noted this and amended his request. It was agreed that a list of Steering Group members would be circulated to the Committee as part of the next update.

It was recommended:

that this report be received.

## 6.2 Primary Maternity Unit Feasibility Update

This report seeks to explore the feasibility of establishing a Primary Birthing Unit in Palmerston North.

Mr Nadarajah Manoharan queried the level of involvement of independent midwives in this project. It was clarified that, at this stage, an Oversight Group has been formed to provide advice about the project approach and provide feedback on key areas, however it is expected there will be significant discussions with midwives in future. It is essential there is strong secondary involvement and contribution throughout this process.

Ms Oriana Paewai noted the identification of a stakeholder role within primary and community as being Iwi and she asked that this area be expanded to include Whanau Ora Collectives. This was noted and agreed accordingly.

Management confirmed that regular updates will be provided to the Committee at future meetings.

It was recommended:

that this report be received.

6-15

### 7. OPERATIONAL REPORTS

# 7.1 Update on Partnering with General Practice for Improved Health Outcomes

This framework is designed to encourage larger general practice teams to take responsibility for improving the health of their enrolled population and to undertake transformational change in order to achieve those improved outcomes. This innovative programme is currently undergoing 'proof of concept' testing with Tararua Health Group.

Mr Adrian Broad queried why this particular provider was selected to help develop the Practice Development Plan (PDP). It was advised that Tararua Health Group was chosen because it has the right size population base (about 15,000 enrolled population), good infrastructure and resources, and good clinical leadership.

Further, the Central PHO has been asked to provide resource to help Tararua Health Group redevelop the PDP to a greater level of detail and it is anticipated that the revised plan will be presented to the Committee in June.

It was recommended:

that this report be received.

## 7.2 Funding Division Operating Report - February & March 2014

Item 2.1.1 Home Based Support Services (HBSS)

The Chair sought clarification around the process for making a complaint in this instance. The Senior Portfolio Manager, Health of Older Persons advised that the process is to first approach the HBSS agencies, or contact the Needs Assessment & Service Coordination (NASC) service. MidCentral DHB is comfortable with the process around how these complaints are managed.

Item 2.1.2 Aged Residential Care Sector

All Aged Residential Care (ARC) facilities are to become smoke free as part of the general move towards a smoke free New Zealand.

Item 2.3.2 Social Housing Reforms

Ms Barbara Cameron queried the role of MidCentral DHB in determining how social housing reforms will impact upon the needs of mental health clients. The characteristics that distinguish the provision of social housing from the provision of residential care need to be examined further. Management will provide an update to the Committee at its next meeting.

Item 2.6.1 Community Pharmacy Services Agreement - Stage 4

This is another step towards population-focused medicine management which helps to uncover specific populations that community pharmacies are servicing (and any consequent gaps).

It was recommended:

that this report be received.

## 7.3 Finance Report – April 2014

Positive financial performance and forecast continue.

It was recommended:

that the report be received.

## 8. LATE ITEMS

There were no late items for this section of the meeting.

## 9. DATE OF NEXT MEETING

Tuesday, 10 June 2014

## 10. EXCLUSION OF PUBLIC

It was recommended:

that the public be excluded from Part 2 of this meeting in accordance with the Official Information Act 1992, section 9 for the following items for the reason stated:

Item Reason		Reference	
"In Committee" Minutes of the Previous Meeting	For reasons stated in the previous agenda		
2014/15 Annual Planning	Under negotiation	9(2)(j)	
General Approach to Contract Review and Renewal for 2014/15	Negotiating strategy	9(2)(j)	
Planning & Support Operating Report – Feilding IFHC	Subject to negotiation	9(2)(j)	

Chairperson

Confirmed this 10th day of June 2014