

MidCentral District Health Board

Community & Public Health Advisory Committee Meeting

Minutes of meeting held on Tuesday, 2 August 2011 at 1pm at MidCentral District Health Board Offices, Board Room, Gate 2, Heretaunga Street, Palmerston North

PRESENT:

Diane Anderson (Chair)
Ann Chapman (Deputy Chair)
Pat Kelly
Karen Naylor
Phil Sunderland (ex officio)
Andrew Ivory
Neil Perry

Unconfirmed Minutes

IN ATTENDANCE:

Murray Georgel, Chief Executive Officer
Mike Grant, General Manager, Planning & Support
Rebecca Bensemman, Committee Secretary
Craig Johnston, Senior Portfolio Manager, Primary Health Care
Brad Grimmer, Senior Portfolio Manager, Health of Older People
Claudine Nepia-Tule, Portfolio Manager, Mental Health & Addictions
Barb Bradnock, Portfolio Manager, Child & Youth Health
Andrew Orange, Pharmacy Advisor
Jo Smith, Project Manager, InterRAI
Tricia Keelan, Planning & Accountability Manager
Niki Michael, Communications Officer

OTHER:

Public: (1)
Media: (2)

1. APOLOGIES

An apology was received from Oriana Paewai, Committee Member. Mavis Mullins, Board Member was absent.

2. NOTIFICATION OF LATE ITEMS

There were no late items, however Pat Kelly tabled an item to be placed on the agenda for the Committee to review at its next meeting. This paper will be placed on the Work Programme accordingly.

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

Ann Chapman declared her conflict regarding agenda item, 13.1 Contracts Quarterly Report in respect of her membership of the Otaki Community Health Trust.

Ms Chapman remained at the meeting but did not participate in discussion relating to this item.

4. MINUTES

4.1 Minutes

It was recommended:

that the minutes of the previous meeting held on 5 July 2011 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. STRATEGIC REPORTS / SPECIAL ISSUES

5.1 Annual Prioritisation Framework Update

The General Manager, Planning & Support, advised that the prioritisation framework is a set of criteria used by the Funding Division to evaluate all new service initiatives and for renewing existing contracts and services. Any potential funding changes can be signalled through this framework.

A Member queried whether the scope of the prioritisation framework included potential impact from a financial or a national perspective. It was advised that the financial impact is considered within this process, in terms of the effect on other services as well as possible opportunity costs.

The General Manager, Planning & Support, provided a general overview in that prior to 1 July 2011, the Funding & Planning division within the MidCentral District Health Board (DHB) structure was accountable for the allocation of revenue across services. It was noted that from 1 July 2011 Corporate Services had merged with Funding & Planning to create a combined Planning & Support division.

Total spend across total continuum of care is largely the responsibility of Portfolio Managers, who also initiate or recommend any service changes. Additionally, the Annual Plan and Health Needs Assessment aid in the prioritisation of service delivery.

It was recommended:

that this report be received and the Community and Public Health Advisory Committee makes any comments and suggestions

that the prioritisation framework be confirmed for use in the 2011/12 financial year or until reviewed as part of the centralAlliance Road Map outcomes

5.2 The Impact of Pharmac

The General Manager, Planning & Support, advised that a copy of this paper had been forwarded to PHARMAC for their reference. It was also reiterated that representatives of PHARMAC would attend a future workshop to be held for all Board and Committee members.

Members thanked management for a comprehensive and informative paper, however it was requested that a colour copy of Figure 1: Impact of PHARMAC on Medicines Expenditure Over Time be electronically sent to all Committee members.

It was also queried whether figures were available to substantiate the cost-effectiveness of All-at-Once dispensing. Management advised that the projected reduction in DHB spending on dispensing fees of \$132m was a net estimate as it was difficult to measure or quantify waste.

An update was provided to the Committee in that an amendment to the Medicines Regulations 1984 came into effect on 1 August 2011. This amendment being that generic substitution on prescriptions is to be the default position unless the prescriber specifically states that the medicine prescribed is not to be substituted for another brand.

It was recommended:

that this report be received

5.3 Regional Services Plan

The Chief Executive Officer iterated that the Regional Services Plan focuses on areas which require immediacy of action at a regional level. A general overview of such work streams was provided in this paper.

A Member sought further feedback around the Central Regions Information System Plan (CRISP) initiative. It was advised that CRISP is the development of a suite of key clinical systems focusing on providing standardised availability of user information and entitlements to six DHBs in the lower North Island. This initiative is not fundamentally related to a national strategy, however the I.T Board (part of the National Health Board) has endorsed this regional focus on clinical systems. National cohesion may or may not be a future initiative at this stage.

It was recommended:

that this report be received

6. OPERATIONAL REPORTS

6.1 Funding Division Operating Report – July 2011

Item 3.1 Health of Older Person, Audit Framework – Integrated Audits

Management advised that the Funder had previously been carrying partial liability but that the move to an integrated audit framework in October 2010 ensures a partnering approach to liability risk is undertaken together with the sector.

Item 3.1 Health of Older Person, Premium-only Facilities

The Committee was assured that the ability to grow premium bed numbers will not compromise the current situation for years to come.

Item 3.2.1 He Korowai Oranga update

A Member noted that Whanau Ora was of particular importance and requested that the Committee be made aware of any potential implications or relevant information pertaining to this.

Item 3.1 Health of Older Person, InterRAI for Aged Residential Care

An overview was provided to the Committee in that interRAI is intended to standardise assessments throughout New Zealand by the removal of locality variations. In effect, this generates the collection of standardised data which will contribute to more informed and robust decision-making.

Item 3.4.1 PHO Performance Programme

With regard to Table 1: PHO Performance Programme Summary of Performance to December 31st 2010, it was noted that Central PHO has achieved a large number of local targets, which were not recorded on this table, and that updated data will be presented to the Committee at its next meeting.

Item 3.4.4 National Pharmacy Services Agreement

Management advised that DHBs are facing unstainable financial risk from the 'Close Control' provisions of the current National Pharmacy Services Agreement and that the existing agreement will rollover to 30 April 2012 in order to garner greater support for the change in process.

It was recommended:

that this report be received

6.2 Finance Report

The General Manager, Planning & Support, advised that the interim financial result to mid August 2011 was positive variance to budget which was mainly caused by a \$3.8m "one-off" component. This robust financial position also enabled a number of balance sheet adjustments to be made in the Provider Arm, most notably the lifting in threshold defining an asset.

It was recommended:

that this report be received

7. GOVERNANCE

7.1 Committee's Work Programme, 2011/12

The Chief Executive Officer reiterated that representatives from PHARMAC had been invited to attend a future workshop which would be held for all Board and Committee Members. It was noted that the last presentation by PHARMAC was approximately two years ago.

The Chief Executive Officer also advised that the Annual Plan had been approved and that a copy would soon be distributed to each Committee Member. It was noted that any final changes to the Annual Plan would be minor with one exception, being that from 30 June 2012 patients were to wait no longer than six months for a specialist appointment or for elective surgery (once approved).

It was recommended:

that the updated work programme for 2011/12 be noted

8. LATE ITEMS

There were no late items.

9. DATE OF NEXT MEETING

Tuesday, 6 September 2011

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:

<i>Item</i>	<i>Reason</i>	<i>Reference</i>
<i>"In Committee" Minutes of the Previous Meeting</i>	<i>For reasons stated in the previous agenda</i>	
<i>Quarterly Report – Contracts</i>	<i>Subject to negotiation</i>	<i>9(2)(j)</i>

Confirmed this 6th day of September 2011

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Chairperson