

MidCentral District Health Board

S-12

Community & Public Health Advisory Committee Meeting

Minutes of meeting held on Tuesday, 4 February 2014 at 1pm at
MidCentral District Health Board, Rooms A & B, Education Centre, Palmerston North

PRESENT:

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

Unconfirmed Minutes

IN ATTENDANCE:

Murray Georgel, Chief Executive Officer
Helene Carbonatto, Acting General Manager, Planning & Support
Rebecca Bensemman, Committee Secretary
Chris Channing, Financial Services Manager
Craig Johnston, Senior Portfolio Manager, Primary Health Care
Claudine Nepia-Tule, Mental Health & Addictions Portfolio Manager
Vivienne Ayres, Manager, DHB Planning & Accountability
Andrew Orange, Pharmacy Advisor
Doug Edwards, Maori Health Advisor
Jason Keall, Communications Officer
Jordan Dempster, Communications Officer

OTHER:

Public: (1)
Media: (0)

1. APOLOGIES

There were no apologies.

2. NOTIFICATION OF LATE ITEMS

There were no late items.

The Chair welcomed Helene Carbonatto, Acting General Manager, Planning & Support to the meeting and noted the absence of Mike Grant on leave at this time.

The Chair also welcomed new Committee Members, being Adrian Broad and Nadarajah Manoharan. The Chair thanked Ann Chapman for her contribution as Deputy Chair over a number of years and then welcomed Barbara Cameron as Deputy Chair for this new governance term.

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

Oriana Paewai declared a conflict in relation to Item 6.1 Planning & Support Operating Report, in respect of her participation in Masterclass 2014 as an Iwi provider representative.

The Chair noted this and advised that she saw no implications as a result of Oriana Paewai being present during consideration of her declared conflict and was comfortable for her to remain in the meeting at that point.

4. MINUTES

4.1 Minutes

It was recommended:

that the minutes of the previous meeting held on 26 November 2013 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

The Chair sought an update with regard to Item 6.1 Update: Regional Services Plan Implementation - Quarter 1, 2013/14, particularly in respect of delivery of the Central Region Information Systems Plan (CRISP).

The Chief Executive Officer verified that the six District Health Boards (DHBs) involved in CRISP have met and attained a high-level agreement around timing and product implementation. It is likely that MidCentral DHB, Hawkes Bay DHB and Whanganui DHB will implement the regional portal and then the remaining three DHBs (Capital & Coast DHB, Hutt Valley DHB and Wairarapa DHB) will access shared information in the meantime and come across at a later date. This is to be a staggered approach although the end goal remains unchanged and there are no likely penalties for MidCentral. The Chief Executive Officer explained to the Committee that here has been a resolution of the Midcentral DHB funding of the clinical portal early adoption under CRISP.

5. GOVERNANCE

5.1 2013/14 Work Programme

The Committee noted progress made against the 2013/14 work programme.

The Chief Executive Officer verified that the 2014/15 Planning Workshop would be held on 25 February 2014 and that Committee Members were also invited to attend this.

The Committee noted that there was a significant agenda scheduled for the next meeting with the inclusion of the Draft Annual Plan, the Draft Maori Health Plan and the Draft Regional Services Plan. Mr Sunderland requested that these be made available to the Committee for reading as and when the draft plans were ready to be released.

Mr Ivory queried whether a full update around Partnering with General Practice would be provided at a future meeting. The Senior Portfolio Manager, Primary Health Care explained that brief updates would continue to be provided within the Planning & Support Operating Report until such time as the full paper was ready to be tabled for discussion.

It was recommended:

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

6. OPERATIONAL REPORTS

6.1 Planning & Support Operating Report

Item 1.1.1 Additional Funding for Home Based Support Services

MidCentral DHB is now positioned just below the National Average for rates for Home Based Support Services, following the application of new funding being passed through in entirety to all six providers. Historically, DHBs have funded these services differently therefore it remains difficult to compare the different rates for home help and personal care nationally.

With the changing focus to keeping people cared for in their home it is important to consider the vulnerable workforce responsible for provision of this care. As this workforce is not directly employed by MidCentral DHB it is difficult to maintain oversight, however this may be controlled somewhat through the contract process and by supporting current providers to undertake significant training with their carers. A different approach to funding HBSS providers in the future may help to ensure that this workforce is trained accordingly to be seen as part of the wider primary health care team.

Item 1.2.2 Sport Manawatu – Whanau Tri

Mr Adrian Broad noted total funding of \$120,000 for the Whanau Triathlon and queried whether this amount is adjusted to reflect the number of actual participants in the event. It was advised that a one year contract has been awarded and the cost remains the same regardless of the number of entrants, however it is expected that up to 1000 people will register for the event to be held in April this year.

Mr Broad noted this and sought clarification around how the success of this particular event is monitored and evaluated. Ms Oriana Paewai responded that significant input into the triathlon and training programmes occurs up to 10 weeks prior to the event. The concept behind Whanau Tri is fundamentally about developing healthy habits and behaviours on a sustained basis. Positively changing lifestyle habits such as diet and exercise can lead to wide-ranging results and provide huge benefits to iwi/whanau.

Item 1.2.3 Workforce Development

The Kaimahi Ora framework aims to improve the capacity and capability of the current and future Maori health workforce by fostering and promoting the health care sector as a possible career pathway. Results will be reported back to the Committee through future Health Workforce papers.

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Item 1.3.2 Mental Health Phone Line

The current contract with Medibank Health Solutions is to provide an after-hours mental health line phone service at a call volume cap of 565 calls per month (6,780 calls per annum). Volumes tend to fluctuate and even out over a period of time and a rebate clause within the contract takes care of any unders/overs around funding.

MidCentral DHB is currently considering the future funding of this service and an update will be provided to the Committee at its next meeting.

Item 1.4.1 Horowhenua After Hours

Central PHO advises that the new after hours service is functioning very well. The service is being well supported by the community with an appropriate level of attendances per week. The GPs have been supporting the roster. There have been a few teething problems which are being worked through but no major issues. It has become clear that as long as the nurse and the receptionist are familiar with the clinic, there are no issues with the GP coming from a different practice. The current after hours fees are \$60 for a GP consult and \$40 for a nurse consult.

Item 1.4.2 Urgent Community Care Service, Horowhenua

Late in 2013 the Ministry confirmed ongoing funding for the Urgent Care in the Community service in Levin. This corresponds to a new service model developed by St Johns and key clinical leaders from Central PHO. The new model was scheduled to begin implementation on 1 February. The Ministry has delayed this until 1 March to allow more time for transition planning. St Johns, the Ministry and the DHB are currently working on the communications plan. The new service model features a 12 hour a day service (8am to 8pm) which will be progressively integrated with other primary health care services. There will be patient charges which will be in line with other fees currently charged (e.g. GP consult fees and ambulance transport charges). In due course the service will be relocated to the Horowhenua Health Centre where it will also provide walk in services. It will also be progressively integrated with other services in terms of aspects such as patient records and electronic communications. The new service model addresses deficiencies highlighted in the formal evaluation of the service – specifically that while the service had provided good clinical care and was valued by its users, it was unaffordable and was not well integrated with other local primary health care services.

Item 1.4.4 Feilding IFHC

Discussion over final details of the Clevely Centre site lease and sale agreement continues.

Item 1.4.5 Partnering with General Practice for Improved Health Outcomes

Tararua Health Group presented the DHB with a draft Practice Development Plan just before Christmas. This is now being considered. The intention is to obtain the input from MidCentral Health and Central PHO clinical leaders. Any issues will be worked through before it comes back to CPHAC for formal approval. Meanwhile, there have been discussions with other general practice teams about the Programme, most recently with the Vivien Street, Amesbury Street and Albert Street group of practices.

Item 1.4.6 PHO Performance Targets for 2014

Management explained that DHB is now doing very well on the key PHO Performance Targets as a result of a huge amount of effort on the part of the PHO and general practice teams. When setting targets for the 2014 year, the PHO has taken the bold step of setting all targets at the Programme Target or better – and that this involves a step up in some areas. That the PHO has done this is an indication of an enhanced commitment to quality and greater confidence in its ability to work with general practice teams.

The Committee requested that a formal acknowledgement be recorded to note the success of the PHO in running this very positive campaign in engaging general practices to improve their performance against the CVD, Immunisation and Smoking Cessation targets.

Item 1.5.1 Newborn Enrolment Programme

The Committee would like to formally note the success of this programme in supporting enrolment of newborn infants with General Practice teams by two weeks of age.

Item 4. Masterclass 2014

This initiative is sponsored via MidCentral DHB and Central PHO to develop leadership skills across participants and support thinking on different models of care (with a focus on child health and older health). The Masterclass will run over March/April and a report detailing learnings and benefits gained will be furnished to the Committee on completion of the tour.

It was recommended:

that this report be received.

6.2 Finance Report – January 2014

The Financial Services Manager provided an overview of this report and noted that positive financial performance and forecast continue.

With regard to Maori Health Expenditure, underspend of \$334,000 is mainly due to delay of NGO projects and it is expected that the allocated amount will be spent prior to end of the financial year.

It was recommended:

that the report be received.

7. LATE ITEMS

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

8. DATE OF NEXT MEETING

Tuesday, 18 March 2014

9. 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>Development of the 2014/15 Regional Services Plan</i>	<i>Subject to negotiation</i>	<i>9(2)(j)</i>
<i>Quarterly Report 3 - Contracts</i>	<i>Subject to negotiation</i>	<i>9(2)(j)</i>

Confirmed this 18th day of March 2014

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Chairperson