

MIDCENTRAL DISTRICT HEALTH BOARD

Minutes of the Disability Support Advisory Committee held on Tuesday, 17 July 2012 at 3.30pm in the Board Room, Board Office, Gate 2, Heretaunga Street, Palmerston North.

PRESENT

Lindsay Burnell (Chair)
Ann Chapman (Deputy Chair)
Jonathan Godfrey
Tawhiti Kunaiti
Kevin Miles
Phil Sunderland (ex officio)

Unconfirmed Minutes

IN ATTENDANCE

Murray Georgel, Chief Executive Officer
Heather Browning, General Manager, Enable New Zealand
Mike Grant, General Manager, Planning and Support
Susan Murphy, Acting Director, Patient Safety and Clinical Effectiveness
Jill Matthews, Principal Administration Officer
Anne Amooore, Manager, Human Resources
Sharon Tribe, Committee Secretary

Public: 1

1. APOLOGIES

Pat Kelly, Committee Member

2. LATE ITEMS

There were no late items identified.

3. CONFLICTS OF INTEREST/REGISTER OF INTEREST UPDATE**3.1 Amendments to the Register of Interest**

There were no amendments to the Register of Interest.

3.2 Declaration of Conflicts in Relation to Today's Business

There were no declarations of conflicts.

4. MINUTES**4.1 Minutes**

that the minutes of the previous meeting held on 13 March 2012 be confirmed as a true and correct record.

6.18

4.2 Recommendations to the Board

The Committee noted that all recommendations contained in the minutes had been approved by the Board.

4.3 Matters Arising

There were no matters arising from the minutes.

5. STRATEGIC ISSUES

5.1 Disability Stocktake – Proposed Approach and Timeline

The General Manager, Enable New Zealand summarised the report. Since the last meeting various District Health Boards have been canvassed to identify what they are using to evaluate accessibility of their services, however there is very little available that could be easily transferrable. A recent meeting with Minnie Baragwanath, Chief Executive of Be.Accessible it was identified that they have a framework and tools in place that could be utilised alongside what is currently in place at MidCentral District Health Board to form a framework.

The General Manager, Enable New Zealand noted that a lot of the initial work identified in Be.Accessible's proposal had already been completed as a result of the work carried out by Diversityworks in 2006 so this would not need to be carried out. It was envisaged that MidCentral District Health Board would work in partnership with Be.Accessible in developing the self audit tool.

Concerns were expressed by the Committee regarding Be.Accessible, in particular their reputation within some quarters of the disability sector. It was queried whether due diligence had been carried out to ensure that Be.Accessible was the most appropriate entity to enter a partnership with, the General Manager, Enable New Zealand advised that due diligence had not been carried out and undertook to do so. The General Manager, Enable New Zealand advised that Be.Accessible had a number of frameworks and tools that have been tested and was confident that could deliver.

The Committee requested a detailed proposal including deliverables, more detailed quote, evidence of track record, details of input from communities of interest and IP ownership be brought to the next meeting.

It was recommended:

that a detailed proposal including deliverables, evidence of track record and input from communities of interest be brought to the next meeting.

5.2 Portfolio Updates 2011/12 - Communications

The report was taken as read.

Jonathan Godfrey noted that it was pleasing to see that his comments over the last three years had been taken on board and passed on his thanks to staff for this.

It was recommended:

that the report be received.

5.3 Portfolio Updates 2011/12 – Facilities

The report was taken as read.

The Principal Administration Officer noted that the report was only one aspect of the last stocktake and was an update against facilities only.

The Chief Executive Officer advised that some of the work would be completed during the Palmerston North Hospital redevelopment. It was noted that during the planning and building of the Linac and Clinical Records Buildings access and egress had been taken into account.

It was queried whether there was a checklist in place to ensure the District Health Board adheres to Standard NZS4121 which while not in the current legislation is referred to. The Chief Executive Office advised that he would query this with the Group Manager, Commercial Support Services and report back to the Committee.

It was recommended:

that the report be received.

5.4 Portfolio Updates 2011/12 – HR

The report was taken as read.

It was recommended:

that the report be received.

5.5 Portfolio Updates 2011/12 – Contracts for Health Services

The General Manager, Planning and Support advised that the report was a standard update informing the Committee of audit and assessment processes against sector standards.

It was queried whether the audit and assessment covered all providers such as Primary Health Organisations and General Practitioners. The General Manager, Planning and Support advised that this was the case.

It was recommended:

that the report be received.

5.6 Disability Consumer Feedback January – June 2012

The Acting Director, Patient Safety and Clinical Effectiveness advised that there was a lower rate of consumer satisfaction compared to the last report however noted that there appeared to be no particular reason for this and comments were consistent with previous feedback received.

It was queried whether there was a link between the nature of a patient's disability and the service received; it was advised that this information is not currently captured. It was suggested that the Patient Management System could include a field to alert staff if a patient had a permanent disability, this would facilitate a better relationship with the patient particularly in regard to communication. The Group Manager, Planning and Support advised that it would be possible to implement this within the next 6-12 months.

6-20

It was suggested that the Director, Patient Safety and Clinical Effectiveness contact Jonathan Godfrey regarding ideas for the future.

It was recommended:

that the report be received.

6. GOVERNANCE ISSUES

6.1 2012/13 Reporting Framework

The Chief Executive Officer summarised the report.

It was recommended:

that the Committee's 2012/13 work programme be noted.

7. INFORMATION ONLY REPORTS

7.1 Outcome of Paid Family Caregivers Litigation Appeal

The General Manager, Enable New Zealand summarised the report and noted that there may be implications for the older person's sector however no discussions had taken place in regard to this to date. It was further noted that the District Health Board should keep a watching brief.

It was recommended:

that the report be received.

7.2 Health and Disability Commission Health Passport

The report was taken as read.

It was recommended:

that the report be received, and no further reports be provided.

8. LATE ITEMS

There were no late items.

9. DATE OF NEXT MEETING

Tuesday, 9 October 2012 at 3.30pm, MidCentral DHB Offices, Board Room, Gate 2, Heretaunga Street, Palmerston North.

10. EXCLUSION OF PUBLIC

It was recommended:

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

Item	Reason	Ref
"In Committee" minutes of the Previous Meeting	For reasons stated in the previous agenda	
Disability Stocktake – Proposed Approach and Timeline	Financial details – contains competitive pricing information	9(2)(j)

Confirmed this 9th day of October 2012.

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Chairperson