

# MidCentral District Health Board

## Community & Public Health Advisory Committee Meeting

Unconfirmed Minutes  
S.4

Minutes of meeting held on Tuesday 3 November 2009 in the Board Room of Board Office, Gate 2B Heretaunga Street, Palmerston North

The meeting commenced at 1.00pm

### PRESENT:

Diane Anderson (Chair)  
Graeme Campbell  
Barbara Robson  
Ann Chapman (ex officio)  
Linda Gray  
Charmaine Hamilton

### IN ATTENDANCE:

Mike Grant, General Manager, Funding  
Stuart Wilson, General Manager, Corporate Services  
Rebecca Bensemman, Committee Secretary  
Phil Sunderland (observer)

### OTHER:

Staff: (6)  
Public: (0)  
Media: (0)

### 1. APOLOGIES

Dennis Emery, Deputy Chair  
Murray Georgel, Chief Executive Officer  
Ian Wilson (ex officio), Committee Member

### 2. NOTIFICATION OF LATE ITEMS

There were none.

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

There were none.

#### 4. MINUTES

##### 4.1 MINUTES

An amendment to the minutes was requested. The following sentence is to be amended to read, "A member suggested adding awareness of screening for breast cancer symptoms and involvement of hospice to the clinical care guide list".

It was recommended:

*that the minutes of the previous meeting held on 6 October 2009 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 none.

The Committee congratulated Mike Grant, Rebecca Bensemman and Caroline Rowe on the recent Health Awards, held 30 October 2009. The Committee affirmed that the evening was a great success and commended Mike for his vision in establishing the awards ceremony in 2005. The Committee also thanked Rebecca and Caroline for organising the event and agreed that the evening provided an opportunity to celebrate the successes of various health providers in a positive atmosphere. It was requested that these comments be noted accordingly.

#### 5. OPERATIONAL REPORTS

##### 5.1 LOWER NORTH YOUTH JUSTIC FACILITY – HEALTH SERVICE

It was advised that this is a requirement from the Ministry as part of a national process. Management confirmed that additional funding is available and that this report seeks approval to sign under delegated authority.

It was recommended:

*that this report be received  
that delegated authority is granted for entering into contract with Manawatu PHO who have been selected as the preferred provider following an open tender process*

##### 5.2 PRICE AND VOLUME SCHEDULE 2010/11

Management reiterated that the Committee will need to identify what further information is required to assist this outcome. The Committee queried the timeframe regarding this and it was advised that the draft District Annual Plan and Price Volume Schedule will be developed within the next 3-4 months and that it is important the Committee receives all the relevant information necessary to assist this process.

Discussion ensued and the Committee agreed that the perspective needs to be DHB-wide, not specifically Funder focused. Leadership will need to be shown in determining which low-value services may not be purchased in the future.

A member asked for clarification in terms of devolution of funding from the Ministry for 2010/11 (under 65 DSS, Public Health Services, etc). Management responded that the ability for the Ministry to organise this is not possible before finalisation of the District Annual Plan.

The Committee also requested clarification as to the nature of information that will be made available. Management advised there are two areas which are significant pressure points in terms of fiscal risk and capacity. Firstly, opportunities to manage acute presentation of frail elderly and to provide different clinical pathway options. Secondly, best management practice of emergency presentations.

Management confirmed there is a range of high-level strategies available to change the overall fiscal impact on MidCentral Health and that it is expected that MidCentral Health will use this information to cost up services and plan volumes for next year under guidance of what the Funder is prepared to fund.

It was recommended:

*that this report be received and management be asked to review which low-value services may or may not contribute to break even*

### 5-3 CHRONIC DISEASE SERVICES

A member questioned which aspects of service delivery are not working effectively due to lack of awareness of ethnicities and cultural differences. Management advised that ACC have completed work around cultural competencies and a précis regarding this information will be provided at the December meeting.

It was acknowledged that the situation is similar for secondary services, with regard to the Maori population largely spending less time with clinicians, or vice versa. For example, for a respiratory condition the average bed days for a Maori person is 2.4 days, compared to 4.4 bed days for a European person. Consequently, more and more services are becoming responsive as to how improvements can be made.

It was recommended:

*that this report be received*

### 5-4 FUNDING DIVISION OPERATING REPORT – OCTOBER 2009

#### *Item 2.1.2 Ageing in MidCentral District Management Group (AIM DMG)*

A member sought clarification around how stakeholder meetings were publicised and who attended such meetings. Management advised that the stakeholder group mainly consists of the District Management Group, together with a few others including MidCentral Health representatives.

A member also queried the ten priority areas wherein the most benefits can be gained. It was advised that the group has not yet defined the key priority areas but an update will be provided to the Committee in due course. It was noted that with regard to the Health of Older Person Strategy such priority areas are likely to include workforce development, ongoing development of RNs, input from Allied Health, ongoing development work with GPs, development of community specialists, building capacity in home support, and InterRAI (improving the transfer of elderly people through levels of service).

A member commented anecdotally that there is a perception that InterRAI will be linked with service cuts. Management responded that this is unlikely, although home management may come under some pressure. InterRAI is intended to reduce hospital admissions and it is a tool designed for standardisation of assessment.

*Item 2.6.2 Whooping Cough Immunisation in preparation for overdue epidemic*  
A member questioned the likelihood of a pertussis outbreak. Management advised that an outbreak has been avoided to date but that a free pertussis vaccine will once again be offered to key hospital staff in order to minimise this eventuality.

*Item 2.7.1 HEHA*

Management advised that the Catering Accord is a consortia consisting of Sport Manawatu, PHO promotional people and MidCentral DHB Funding Division staff. The next step is to recruit caterers onto the Accord as well as to secure a database of agencies and organisations who will purchase from the Accord caterers.

It was recommended:

*that this report be received*

## **5.5 FINANCE REPORT – OCTOBER 2009**

It was advised that there has been a significant improvement in electives performance and that the financial situation remains unchanged from the previous month.

It was confirmed that the DHB is only \$31k behind the YTD budget when the latest EI delivery information is taken into account and that this figure is the most accurate in terms of the closest possible reporting in real time.

Management asked the Committee for approval to change the format of future finance reporting to exception reporting. It was agreed this would be more appropriate.

A member queried the mechanics of top-slicing and management clarified this accordingly.

It was recommended:

*that this report be received*

## **6. GOVERNANCE ISSUES**

### **6.1 CONTRACTS UPDATE**

Management advised there have been technical problems in connecting the current spreadsheet information into the new Contract Management System but that this information would be provided to the Committee in December.

It was recommended:

*that this report be received*

### **6.2 2009/10 WORK PROGRAMME**

There were no amendments to the 2009/10 Work Programme.

It was recommended:

*that this report be received*

## **7. LATE ITEMS**

There were none.

**8. DATE OF NEXT MEETING**

5-8

1 December 2009

**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 reasons stated:*

Item	Reason	Reference
"In Committee" Minutes of the Previous Meeting	For reasons stated in the previous agenda	
Funding Division Operating Report – October 2009 (2.9)	Subject to negotiation	9(2)(j)

Meeting closed at 1.53pm

Confirmed Tuesday 1 December 2009

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Chairperson