

MidCentral District Health Board

Community & Public Health Advisory Committee Meeting

Minutes of meeting held on Tuesday, 4 October 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
Barb Bradnock, Portfolio Manager, Child & Youth Health
Andrew Orange, Pharmacy Advisor
Joy Christison, Executive Project Manager
Tricia Keelan, Planning & Accountability Manager
Lyn Horgan, Operations Director, Hospital Services
Niki Michael, Communications Officer
Megan Doran, Support Coordinator

OTHER:

Public: (1)
Media: (0)

1. APOLOGIES

An apology was received from Oriana Paewai, Committee Member.

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

The agenda contained a report on the District-Wide Quit Smoking Service. This report was provided in two sections, being a public and a confidential section (agenda items 6.1 and 14.1).

The confidential section outlined the results of the RFP process undertaken in respect of the District-Wide Quit Smoking Service Contract. Rangitane o Tamaki nui a Rua and Te Runanga o Raukawa were participants in this process.

Accordingly the confidential section of the report was removed in full from Oriana Paewai's and Richard Orzecki's agenda. The associated recommendation was also removed from the order paper.

4. MINUTES

4.1 Minutes

It was recommended:

that the minutes of the previous meeting held on 6 September 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 Better Health and Disability Services for Older People

The General Manager, Planning and Support, provided background information around the purpose of this report and explained the Annual Plan initiatives for older people, being a review of Home Based Support Services, improvement of access for kaumātua and kuia, and implementation of the older person module of the *Better, Sooner, More Convenient* business case.

It was noted that interRAI assessment data has identified numerous clinical assessment protocols for individual clients which suggests there are previously unrecognised needs that must be taken into account in future support allocations. A member queried how this significant shift in future staff skill sets would be addressed. It was advised that workforce capability will be improved through higher levels of learning on the CareerForce national framework, as well as additional initiatives such as the establishment of a preceptorship programme for nurses entering into Aged Residential Care.

Separately, it was also advised that capacity for dementia residential care beds is adequate in

the short-term, however facilities will need to be reconfigured to meet future requirements and mitigate increased demand for dementia care in the longer term.

It was recommended:

that this report be received

5.2 Better Help for Smokers to Quit: Update 1

The Ministry of Health has introduced a tobacco related Health Target in recognition of the need to support smokers to quit. This framework was introduced by MidCentral DHB during 2009 and a significant improvement has been made from 53% in July 2010 to 90% for July 2011.

The Committee noted this progress and agreed it was important to keep momentum moving forward.

It was recommended:

that this report be received

5.3 Map of Medicine – Part One

Map of Medicine is a software tool that supports the development and ongoing use of care pathways to support quality health care delivery. The advantage of this product was noted in that, although the development of care pathways is based on clinical evidence, the pathways can also be tailored to the local environment.

The Committee agreed that Map of Medicine would be a valuable resource for MidCentral DHB and noted that there would be no national impact as HBL does not include clinical software applications at this stage.

It was recommended:

that this report be received

5.4 Regional Services Plan 11/12 Monthly Update

Local initiatives and health targets continue to be an important focus, however a significant and broad range of work is occurring regionally, some of which is becoming more comprehensive each month.

The Committee acknowledged the importance of receiving regular updates and noted a full regional report would be furnished at the November meeting. Management also advised that the forthcoming joint Board meeting with Whanganui DHB would provide an important forum in understanding all aspects and issues around regionalisation.

It was recommended:

that this report be received

5.5 Progress in Delivering the Shorter Stays in Emergency Department (SSIED) Health Target (for information only)

The Operations Director, Hospital Services advised the Health Target for Shorter Stays in Emergency Department (ED) is set at 95%. New and various initiatives are being implemented within MidCentral Health in order to achieve this target, including engaging clinician support and implementation of the Hospital at a Glance electronic tool to better manage hospital

capacity and patient flow.

A member noted there had been a slight decrease in this target in recent months. The Operations Director advised that resources were aligned accordingly and that processes were set in place to achieve the health target given the impact of seasonal variations.

Additionally, it was also confirmed that the “Never Say No” campaign was not mandatory but that this initiative is designed to focus on positive attitudes and actions to minimise length of stay in ED.

It was recommended:

that this report be received

6. OPERATIONAL REPORTS

6.1 District-Wide Quit Smoking Service – Part One

This paper proposes that district-wide smoking cessation services be coordinated through one agency; an approach which is supported by PublicHealth, MidCentral DHB and the Ministry of Health.

It was agreed that, firstly, performance payments which are not paid in a given quarter due to underperformance can be reinstated if performance is on target in subsequent quarters. Secondly, if the local prevalence estimate changes significantly when the number of people in the district with smoking status recorded increases, performance targets will be adjusted accordingly.

It was recommended:

that this report be received

6.2 Suicide Intervention Coordinator Project

The Committee received this report and noted that this project is a work in progress and that a further update would be required once an appointment was made to this position. Further information would include monitoring, evaluation and assessment of the project’s success or otherwise.

It was also noted that there is a disproportionate number of Maori male who commit suicide and accordingly this population is classed as the highest at-risk group in our community. The suicide intervention initiative will embrace all ethnicities across the spectrum, however the Maori male demographic is a particular target for this programme.

A member queried the timeframe for an appointment to this position. Management advised that an appointment was imminent and that a further update would be provided to the Committee in due course, via the Funding Division Operating Report.

It was recommended:

that this report be received

6.3 Funding Division Operating Report – September 2011

Item 2.1.2 Additional Funding for sustainability and growth of Dementia Services

A member queried the nature of the projected increase in demand for dementia care services. It was advised that the incidence is universally similar which makes for easier planning.

Item 2.6.1 Psychological Support for families with Autism Spectrum Disorder (ASD)

Over the last two years there has been a noticeable increase in the number of children presenting with Autism Spectrum Disorder (ASD). Previously there was no resource in place to assist families with coping strategies. This gap has since been identified and met which now enables families better access to support services earlier once a diagnosis has been made.

It was recommended:

that this report be received

6.4 Finance Report – September 2011

The favourable result for the second month of the financial year was noted and that positive financial performance and forecast continue.

It was recommended:

that this report be received

7. GOVERNANCE**7.1 Committee's Work Programme, 2011/12**

The Chief Executive Officer detailed those reports scheduled for consideration at the next meeting, and confirmed that a workshop on quality would also be held. This workshop is a result of a request made in late 2010 and will provide an overview around clinical governance.

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 1 November 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>Map of Medicine – Part Two</i>	<i>Subject to negotiation</i>	<i>9(2)(j)</i>
<i>District-Wide Quit Smoking Service – Part Two</i>	<i>Under negotiation</i>	<i>9(2)(j)</i>

6.12

Confirmed this 1st day of November 2011

.....
Chairperson