

Minutes of the Meeting of the Members of the
Community and Public Health Advisory Committee of the Counties Manukau District Health Board
Held in the Board Room, 19 Lambie Drive, Manukau
Tuesday 27th May 2003 at 1.00 p.m.

Present: Mr Paul Cressey (Chair), Mrs Miria Andrews, Mr Donald Barker, Dr Peter Didsbury (until 4pm), Mr Alan Johnson Mr Brent Morrissey, Ms Jenny Prince, Dr Charles Small, Mr Eru Thompson (until 4.05 pm), Ms Airini Tugerangi, Mr Bob Wichman (until 4:30pm)

In attendance: Mr Chris Mules, Ms Janine Pratt, Ms Elisabeth Harding (Board Secretary)

Apologies: Mrs Metua Faasisila, Dr Allan Moffitt, Mr Lindsay Smith

1. Welcome

Committee members and members of the public were welcomed to the meeting. Ms Jenny Prince was welcomed to her first CPHAC meeting.

2. Apologies

Apologies were received from Mrs Metua Faasisila, Dr Allan Moffitt and Mr Lindsay Smith.

3. Deputations

Auckland Regional Public Health Unit

Representatives from the Auckland Regional Public Health Unit provided background information on the provision of the regional public health service. This is the largest public health unit in Australasia with the focus being on both health promotion and protection. Although the service is provided by ADHB it is a regional service for the Auckland region, with each of the DHBs being involved in the strategic planning process. It was noted that Dr Gary Jackson is on the Public Health Steering group.

A copy of the presentation was provided to members and members of the public, setting out details of the services provided with particular focus on nutrition and physical activity (\$700k funding for the region). Presentations were given by Ms Monica Briggs (Regional Manager), Mr Bob Mack, (Programme Manager, Nutrition and Physical activity), Ms Christine Cook (Dietician), Ms Kate Sladden (Dietician) Rangimarie Bassett (Maori team) and Ms Ta'i Matenga-Smith (Pacific team).

Emphasis was given to the opportunity for CMDHB to contribute to the planning of services. Further information was requested by members about the allocation of public health funding in the CMDHB region. Committee members also sought further information about how the public health team could work to make a difference to the people of the CMDHB region. It was noted that the limited funding meant the need for the public health team to work in conjunction with other programmes and the PHOs as they develop.

With regard to the provision of services to Maori and Pacific people, there were concerns about how information was disseminated to these groups. Mr Eru Thompson extended an invitation to the public health team to present to the Manawhenua Board. Ms Airini Tugerangi referred to the need to follow the framework of the Maori Health Strategy and take a collaborative approach working with existing providers.

The public health team were thanked for their presentation.

Discussion continued on the prevention work relating to Type 2 diabetes and that CMDHB had supported an application to the Health Research Council for a pilot prevention programme.

Further information on the integrated diabetes strategy and work plan will be available for the next CPHAC meeting.

The work of the Diabetes Advisory Group was discussed, noting that members represented primary and secondary care and Maori and Pacific people. The importance of taking an evidence-based approach was considered taking into account the importance of taking a pragmatic approach and using existing information. A member of the public present at the meeting, Ms Kathy Maxwell, is also a member of this group and she advised that comments and issues could be directed to this group.

Resolution

The Committee:

- Acknowledges the work of the Auckland Regional Public Health team in the area of nutrition and physical activity, within the budget of \$700k;

- Recommends that the Board works with Auckland Regional Public Health Team and any other group and campaigns to address the increasing incidence of diabetes in this area;
- Expresses its concern regarding the overall planning and funding of public health in the region and how funding is allocated.

Moved Mr Paul Cressey; **Seconded**, Mr Eru Thompson, **Carried** Unanimously.

4. Minutes of the previous minutes (29th April 2003)

Resolution:

The minutes of the meeting of CPHAC held on Tuesday 29th April 2003, having been circulated were taken as read and confirmed.

Moved, Mr Bob Wichman **Seconded**, Dr Charles Small, **Carried** Unanimously.

5. Procedural Issues

• **Membership**

Ms Prince was welcomed to the meeting.

The Pacific Health Advisory Committee and M-HAN have still to nominate a further member for this Committee

• **Conflicts of interest**

There were no further conflicts of interest recorded.

6. Matters arising not elsewhere on the agenda

Oral health update: work is being done on developing the oral health strategy and this will be presented to a future CPHAC meeting.

Ms Sue Zimmerman from Manukau City Council has written to CMDHB seeking the involvement of the CPHAC sub committee.

7. Board Update

The Chair updated members about the Board meeting with particular reference to community engagement, noting that the Board was not prepared to commit significant resource but had allocated \$100k on related activities. Management is working with the Pacific and Maori units on this matter and options will be provided at a future CPHAC meeting. The Board's concerns with regards to the provision of pharmacy services relate to access and safety issues.

10. Monthly reporting

• **Financial report**

Management has met with the Ministry account manager regarding the shortfall of funding for the First Health agreements. A further report will be provided to the next CPHAC meeting. This matter has arisen as CMDHB is the lead provider for First Health services and funding was based on 2001/2002 levels, not taking into account the growth of the service throughout the region during the 2002/2003 period.

Options for revised reporting formats will be presented to the next CPHAC with feedback sought from members as to the preferred format and level of financial reporting.

Management is meeting with the Ministry on 4th June to finalise funding. One suggestion has been to combine the GMS/PHO funds.

Resolution

The Committee received the report

Moved, Mr Paul Cressey **Seconded**, Mr Don Barker, **Carried** Unanimously.

8. Integrated Care Report

It had been intended for Dr Allan Moffit to talk to this report. The following comments were made:

- There has been a good uptake of the flu vaccination
- Chronic care management pilot has been evaluated. The issue now is to find sustainable funding for this programme and FAMA. One mechanism may be through the Care Plus programme announced in the budget. To date the limiting factors in extending the programme has been the need for sustainable funding to enable patient numbers to be increased and the need for GP practices to have the IT infrastructure. There has been increased interest from other DHBs and Treasury with regard to these projects, with a presentation to Treasury next week.

There will be internal workshop next week with an update on the chronic care management programme at the July CPHAC meeting.

The Committee received the report.

10. Monthly reporting

• Meningococcal and NIR update

Ms Nettie Knetsch provided an update (presentation to be distributed to members). Main discussion points were:

- Clinical trials need to be completed for January 2004 roll out. The roll out will be built on the learnings from the clinical trials.
- The service was working with schools and primary care.
- Adverse monitoring: all children that enter hospital following immunisation will be monitored over a six month period to identify any increased in trends such as headaches, falls etc which are not obviously the side effects of the vaccine. Diary cards will be issued covering a 7-day period post immunisation for the first 1500 children immunised. It is expected that in December 2003 all information regarding the clinical trial will be provided to Medsafe to enable a provisional licence to be granted. At this stage it is expected that the provisional licence will cover over 5-year olds although it is hoped that it will include over 6 month old children as this is where the main prevalence of the disease is seen.
- There will be a staggered rollout. The pilot will be in the CMDHB and Eastern Corridor (Otahuhu, Panmure, Glen Innes and Mt Wellington) with a national rollout following, based on prevalence patterns of the disease.
- Negotiations with the Ministry continue on the planning and preparation for the region with CMDHB as the lead DHB. There will be separate agreements for the implementation phase covering school based children, under 5 year olds and a 'hard to reach' campaign.
- Vaccine supply remains an issue.
- Communication strategy: the Ministry will be developing the forms and information. CMDHB management has not yet reviewed this information. Any concerns regarding this information will be referred to CPHAC.
- NIRS: Members were invited to view a demonstration of the system.

• Mental Health Update

Mr Frank Tracey provided members with an update. Background information will be made available to members. Further information will be available for the July meeting of CPHAC on the outcomes to date and the CMDHB status including a comparative analysis within the northern region. An update on the resolution from the March meeting of CPHAC was also requested for the July meeting.

The plan is being developed with input from Maori, Pacific, clinicians, management, unions and the NGO sector. The focus remains on local decisions regarding the allocation of resources in line with priorities set in the regional plan. It was noted that consultation with Maori on the Maori mental health plan was ongoing and the plan still in its formative stage as CMDHB had not been involved to date.

A high-level draft plan will be provided to the Ministry but nothing in the plan will be finalised without the agreement of the DHBs. The underlying planning principles are:

- Equity to the blue print
- Local and regional priorities based on need

The strong links in the CMDHB region with NGO providers was noted.

Dr Peter Didsbury left the meeting at 4pm.

Regional priorities include:

- Consumer networks
- Eating disorders services
- Maternal mental health services
- Services for older people
- Child and Youth services. There are on-going challenges in getting expertise for child and youth mental health services.

Mr Eru Thompson emphasised that Manawhenua wants involvement at all levels in the development of the mental health plan.

Mr Eru Thompson left the meeting at 4.05pm.

Other priorities include:

- Acute services
- Services for people with high and complex needs.
- Alcohol and other drugs services.

Overall there were general concerns that there had not been local consultation on the development of the plan and in particular on the Maori mental health plan. The Committee suggested that Mr Bernard Te Paa, GM Maori Health should be involved.

Resolution:

The Committee:

- Noted the priorities set out in the draft plan
- Expressed concern about the apparent lack of consultation regarding the development of the Maori Mental Health Plan.

Moved: Mr Paul Cressey, **Seconded,** Mr Bob Wichman, **Carried** Unanimously

- **Elective services report**

The report was received. Further explanatory information was requested for the June meeting.

- **Primary care update**

Specific comments included:

- Two remaining groups are expected to become PHOs by October 2003. (East Health in two stages, July and October, and Franklin in October.
- Enrolment and Registration: The Ministry is funding a project manager to work with a joint taskforce (Ministry, CMDHB, local PHOs) to review and develop solutions with regard to capitation based funding.
- Primary care agency/PHO Council: An update will be provided at the next CPHAC meeting. Concerns were expressed about the role of such a Council and whether this would create conflicts and not reflect consumer interests. The intended purposes of the Council are to be a forum for PHOs to work collaboratively and for CMDHB to work through in consultation with primary care. It was suggested that this matter should be brought to the Board for final approval.

Resolution

The Committee requested that more information about the role and expectations of the Council be provided.

Moved: Mr Alan Johnson, **Seconded** Mr Paul Cressey, **Carried** Unanimously

Resolution

The Committee received the Primary Health Care Update report

Moved: Mr Paul Cressey, **Seconded** Dr Charles Small, **Carried** Unanimously

Mr Bob Wichman left the meeting at 4.30pm.

9. Additional Maori Health Issues

No issues were raised.

12. General Business

There was no general business.

Resolution

The Committee resolved that the public and the media be excluded from discussion on the Risk register, (OIA s 9(2)(i), Standing orders Schedule 2 cl 2(g)) to enable the carrying out of commercial activities.

Moved Mr Paul Cressey, **Seconded** Ms Airini Tukurangi **Carried** Unanimously

The meeting was reopened to the public.

The next meeting of CPHAC will be Tuesday 24 June 2003 at 1pm at the Nga Tapuwae Community Hall, 253 Buckland Road, Mangere.

The meeting closed at 4.45 pm

Signed as a true and correct record on the day of 2003

Chair:

Mr Paul Cressey

The minutes of the meeting of the Community and Public Health Advisory Committee of Counties Manukau District Health Board of 27th May 2003 are approved.

Recommendation (moved...../seconded.....)