

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 29th July 2003 at 1.00 p.m.

Present: Mr Paul Cressey (Chair), Mrs Metua Faasisila, Mr Alan Johnson (from 2.05pm) Mr Brent Morrissey, Ms Jenny Prince, Dr Charles Small, Mr Eru Thompson, Ms Airini Tukerangi, Mr Bob Wichman

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

Apologies: Mrs Miria Andrews, Mr Donald Barker, Dr Peter Didsbury, Mr Lindsay Smith

1. Welcome

Committee members and members of the public were welcomed to the meeting. Ms Bernadette Pone was welcomed to her first meeting as a member of CPHAC.

2. Apologies

Apologies were received from Mrs Miria Andrews, Mr Don Barker, Dr Peter Didsbury and Mr Lindsay Smith.

3. Presentation

Mental Health Development Update – Dr Sue Hallwright, Ms Denise Thompson



CPHAC Presentation
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Dr Hallwright and Ms Thomson provided an overview of the provision of mental health services in the Counties Manukau region by both the provider arm of CMDHB and non-government organisations. Copies of the presentation were circulated to members.

Acknowledgement was given to the unique nature of the relationship between the Counties Manukau M-HAN (Mental Health and Addiction Network) and the Board and CPHAC, noting that two members of the Board (Mr Paul Cressey and Ms Airini Tukerangi) were representatives on this group. There is also a regional M-HAC group and the local groups provide input to the regional group for the development of the regional mental health plan.

The workforce shortage for health professionals providing child and youth mental health services was considered. This is a national issue. In some cases children and young people are treated by the adult inpatient service, however, although there have been some improvements, children and young people are not able to access the required level of services in the Counties Manukau region.

Generally, the expectation is that 3% of the population should be able to access mental health services, although the Ministry of Health is not funding services to this level. Current data suggests around 0.5% of Counties Manukau people are able to access mental health services each month, however this figure does not include Counties Manukau resident use of regional services in Waitemata DHB and Auckland DHB and is therefore likely to increase when data capture is more comprehensive. Mental health services are funded on an input (FTE and available bed days) rather than outcome basis although the Ministry is working with DHBs toward developing outcome measures. The current level of funding addresses those patients with high needs while those with lesser needs are not accessing mental health services. In some cases, primary care providers provide the mental health services for those with less intensive needs.

Further information about the allocation of total mental health funding for 2002/2003 and 2003/2005 will be provided to the next CPHAC meeting.

The provider arm of CMDHB together with Manawhenua and MAPO is undertaking mental health development work in the area of mental health services for Maori. It was noted that the Maori mental health plan has still not been released for consultation by the NDSA.

The Chair applauded management's work in the area of investment in mental health services for the people of the Counties Manukau region, noting the regional approach but local focus.

Resolution

The Committee:

- Noted the increase in \$10m increase in mental health funding for Midland and Northern regions and the increase in Blue Print funding allocated to Counties Manukau, bring the region closer to equity.
- Noted the disparity between the current level of services provided and the target level of 3%.
- Noted the shortage in workforce for child and youth mental health services, strongly advocating for workforce development in this area.
- Noted concern about the delay in the development and consultation on the Maori Mental Health Plan.
- Requested a quarterly report on mental health services.
- Requested further information about the Methamphetamine ('P') use.

Moved Mr Paul Cressey; **Seconded**, Mrs Metua Faasisila, **Carried** Unanimously.

4. Minutes of the previous minutes (24th June 2003)

Resolution:

The minutes of the meeting of CPHAC held on Tuesday 24th June 2003, having been circulated were taken as read and confirmed.

Moved, Mrs Metua Faasisila **Seconded**, Mr Brent Morrissey, **Carried** Unanimously.

5. Procedural Issues

There were no procedural matters.

6. Matters arising not elsewhere on the agenda

The Chair noted concerns about the CPHAC workload and want to ensure that the focus of the Committees was on the identified priorities. This would be reflected in the setting of the agenda where emphasis would be given to understanding and advising on the development of services in priority areas. Other information such as updates and monthly reports would be taken as read or noted as being provided for information with scope for discussion if required.

Tomorrow's Manukau/Manukau City Council Health Plan

Management has met with Manukau City Council officials regarding the Council's Health Plan and will be working with the Council in the development of the Plan. The Board also agreed Management will provide background information regarding the linkages between CMDHB and different aspects of the Council in preparation for The Chair of the Board and members of the CPHAC committee, supported by CMDHB management to meet with the Council.

Counties Manukau Health Council Health Forum

The paper was noted. A summary of the outcomes including CMDHB responses will be provided at the next CHPAC meeting. Ms Jude Woolston's work with the Council was complimented. Planning is underway for the next set of forums.

7. Development priorities.

• *Community Radiology*

This has been recognised as a priority area by CPHAC.

Mr Brad Healey, acknowledging the work of Jenny Shepherd, provided an overview of the issues relating to the provision of Community Radiology services by the provider arm of CMDHB. Detail is provided in the paper.

The Committee Chair referred to the April 2003 Board meeting minutes:

Mr Healey advised that refurbishment of the radiology department will meet the hospital needs and improve access for community radiology, however, it is uncertain whether this will be sufficient until the community need has been ascertained. The sufficiency of the operational budget will need to be considered taking into account additional demand. This will be considered for the 2004/2005 budgeting process where it is likely that community radiology will be given higher priority.

The refurbishment is for the Middlemore Hospital site with some equipment at the Manukau SuperClinic site being upgraded. Any expansion of the use of the SuperClinic site will be part of the strategic development of CMDHB generally.

It was noted that in the evaluation of the POAC (Primary options to acute care) that access to radiology was the second most common use of funds after general practice related interventions and early access to radiology has shown significant savings.

Resolution

The Committee:

- Noted that CMDHB will need to decide on the future direction of funding for Radiology services to meet the demands of community, inpatient and outpatient to ensure equitable access.
- Noted that the cost allocation model needs to be revised with a view to transfer changes to services using radiology.
- Noted that a review of the referral guidelines for all patient areas will be undertaken to ensure equitable access.
- Noted that there is sufficient physical capacity in the radiology refurbishment plan however radiology will require additional operational resources to staff the department 7 days per week for extended hours.
- Noted that an emergency care work group chaired by Dr Tom Bracken is currently reviewing community demand and guidelines for referrals.
- Advises the Board of the importance of considering community radiology as part of the commitment to the capacity and funding resources for radiology refurbishment, as considered at the April 2003 Board meeting.

Moved, Mr Paul Cressey, **Seconded**, Mr Metua Faasisila, **Carried**, Unanimously.

9. Updates for information

- ***Chronic Care Management update (Dr John Wellingham, Mr Kim Arcus)***

A paper with background information was distributed to members.

The programme involves the identification of high-risk people and then setting up a process for recall and engagements. A negotiated care plan is developed between the service and the individual and his or her family and whanau. In some cases secondary care services are provided in the community and secondary care specialists are upskilling primary care providers.

Funding has come from Integration funding (see below). In the future, funding may be from the PHO Services to Improve Access funding (with DHB approval) or Care Plus.

8. Updates for understanding

- ***Tackling Health Inequalities***

This is a priority area.

This paper has also been provided to the Maori Health Advisory Committee and the Pacific Health Advisory Committee.

There will be a repeat of the Ministry of Health's workshop on reducing Inequalities in Health on 3 October 2003. CPHAC members are invited to attend this workshop and further detail will be provided to members. (Refer to www.moh.govt.nz for a copy of the Reducing Inequalities in health publication.)

It was noted that the action plan was constrained by the available funding. It is recognised that CMDHB is doing more in this area than most of the other DHBs. The report provides a snapshot of the initiatives currently underway, however there is no specific plan at this stage to manage inequalities. This is likely to develop over time as the Strategic Plan is reviewed.

Resolution

The Committee:

- Received the report
- Noted the recommendations of the paper:
 1. A population health approach should be used when planning all services and programmes so that the impact of the proposed intervention on the total population is considered. This should also include the impact of the programme on subsets of the population, in particular groups that are currently disadvantaged in health terms, with the aim of reducing the health disparity.
 2. All significant health and disability services projects should include addressing inequalities, and incorporate ways to monitor and assess their impact.
 3. Health needs should determine the service priorities. Conditions that have the greatest impact, where there is an opportunity for an effective intervention, should be prioritised.

4. Providers, and in particular PHOs, are supported to prioritise according to inequalities within their own enrolled population and allowed to fund flexible mixes of services and target according to inequalities that might persist in their own catchments.
 5. Health data should be collected and reported by ethnicity, gender and deprivation wherever possible, new data collection systems (e.g. PHOs) must take this into account in their design and implementation.
- Notes the proposed action plan based on the recommendations (Appendix 1 of the report).
 - Recommends attendance at the 3rd October workshop.
- Moved** Mr Paul Cressey, **Seconded** Mr Brent Morrissey, **Carried** Unanimously

- ***Youth Health Update***

The steering group proposed in recommendation one has already been established.

It was noted that the paper did not cover issues related to disabled youth.

The Committee was advised that there has been further analysis covering a different cohort of youth who are outside of mainstream education, ie different to the cohort included in Youth 2000 the report presented at the previous CPHAC meeting by Dr Peter Watson. Ms Jude Woolston will be invited to the next CPHAC meeting to present on this information.

Resolution

The Committee:

- Received the report
- Noted the recommendations.

Moved Mr Paul Cressey, **Seconded** Mr Brent Morrissey, **Carried** Unanimously

- ***Community Engagement update***

This is a priority area.

The distinction between media coverage and advertising was discussed. At the current time, the high costs of advertising were considered to be a barrier to this type of communication taking into account the need for repetition. Other forms of communication, such as radio, were also discussed. The GMs for Maori and Pacific Health were also reviewing their communication plans.

Resolution

The Committee:

- Received the report
- Noted the recommendations.

Moved Mr Paul Cressey, **Seconded** Mr Brent Morrissey, **Carried** Unanimously

9. Updates for information

- ***Asian Health Update***

It was noted that the Asian community was not well represented on the advisory committees. ADHB has recently appointed an Asian GP on to its CPHAC. It was suggested that the reports should be considered within the tackling inequalities framework (above).

Resolution

The Committee:

- Received the report.
- Acknowledges and supports the recommendations of the Asian Public Health Project Report (February 2003) wherever possible.
- Encourages the reading of the Asian Public Health Project Report by all service managers within CMDHB and primary care providers. The report is available from www.moh.govt.nz.

Moved Mr Paul Cressey, **Seconded** Mr Brent Morrissey, **Carried** Unanimously

- ***Quarter 4 Non-financial performance report***

The report was noted.

10. Additional Maori Health issue not already covered in the agenda

Further information was requested about the Maori Health Plan.

11. Monthly reporting

- ***Board update***

In the future a copy of the draft public minutes of the previous Board meeting will be provided for information.

Mr Stephen McKernan will be invited to the next CPHAC meeting to provide an overview of the key achievements in 2002/2003 and the plans for 2003/2004.

- ***Planning and Funding update***

The report was received.

The NDSA Board has agreed the methodology for unbundling agreements currently held by a lead DHB within the region. This includes the oral health agreement with Mighty Mouth, which will transfer from Waitemata DHB to CMDHB. Any changes will be backdated to 1 July 2003.

- ***Meningococcal update***

A key issue is the availability of the vaccine. Delays will have an impact on the time frames for implementation, but priority will be given to the highest priority population.

Resolution

The Committee:

- Noted the report.
- Expressed concern regarding the supply of the vaccine and the impact this may have on the campaign.
- Requested the terms of reference for the regional steering group and details of the roles of the Maori and Pacific health advisers.

Moved Mr Paul Cressey, **Seconded** Mrs Metua Faasisila, **Carried** Unanimously

- ***Integrated care update***

Dr Allan Moffit provided an update noting the budget for 2003/2004 as follows:

POAC	\$1,000,000
CCM	\$1,750,000
Wellchild	\$50,000
Winter demand	\$375,000
Healthy Housing	\$150,000
Overhead	\$175,000
Total	\$3,500,000

The achievement in reaching 95% coverage for the 6 week to 5-month well child checks for the new cohort was a highlight and indicative of the level of cooperation between providers combined with the use of technology.

Mr Eru Thompson left the meeting at 4.15pm

- ***Financial report***

The report was noted and in particular that the end result was better than the forecast.

- ***CPHAC Work programme update***

The update was noted.

Resolution

The Committee resolved that the public and the media be excluded from discussion on the primary health update and 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** Mr Brent Morrissey **Carried** Unanimously

The meeting was reopened to the public.

12. General Business

There was no general business. Members were reminded that the next CPHAC meeting would be at Weymouth.

The next meeting of CPHAC will be Tuesday 26 August 2003 at 1pm at Weymouth Community Hall, 11 Beihlers Road, Weymouth.

The meeting closed at 4.50 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 29th July 2003 are approved.

Recommendation (moved Bernadette Pone/seconded Ms Jenny Prince)