

Community & Public Health Advisory Committee

Minutes

of the meeting held on 24th January 2006, from 1.00 to 4.00pm, at the Boardroom, 19 Lambie Drive

1) Present:	<p>Mr Paul Cressey (Chair), Ms Donna Richards, Mrs Nganeko Minhinnick, Dr Lynne Lane, Mr Bill Mudgway, Mr David Collings, Mrs Eileen Fox, Mr Sefita Hauoli, Ms Malia Hamani, Ms Miria Andrews, Ms Jenny Prince. Mrs Jillian Dooley arrived at 2.30pm.</p> <p>Noted that Ms Donna Richards left the meeting at 3.00pm and Dr Lynne Lane left at 3.30pm</p> <p>In attendance: Dr Allan Moffitt, Mr Chris Mules, Ms Janine Pratt and Ms Subha Srinivasan (secretary)</p>	
Apologies:	Mr Arthur Anae, Ms Yvonne Waterreus, Dr Peter Didsbury, Mr Pat Snedden and Mrs Jillian Dooley for lateness	
	Action	
2) Minutes of Previous Meeting:	<p>Noted some corrections to previous minutes as follows:</p> <ul style="list-style-type: none"> - Apologies should include Mr Chris Mules, and Mr Mules should be removed from the 'In attendance' list. - Page 2, item 6.1, 4th bullet point on McDonalds/Coca-Cola initiative to be re-worded as "Based on the response to the pilot programme, sugar free drinks will be the default option in Counties Manukau and probably New Zealand". - Page 3 – Health of Older People Action Plan, under queries/concerns, the note on "Reliance on the not for profit organisations and religious sectors – might not be the right basis for future planning of HOP services" – to be clarified with Jenni Coles. - Page 4 – financial update, slight amendment to bullet point 3 to read as follows "It was clarified that with the advent of PHOs, co-payments have reduced, and more scripts written increasing overall costs." <p>Resolution: Noted that minutes of the meeting of CPHAC held on Tuesday 22nd November 2005, having been circulated, were taken as read and confirmed and ratified with the proposed changes described above.</p> <p>Moved: Mrs Eileen Fox Seconded: Ms Donna Richards Carried: Unanimous</p>	None
3) Presentation	<p>Naming process for Pou – Mrs Nganeko Minhinnick</p> <ul style="list-style-type: none"> - Noted that in trying to choose a suitable name for the committee, it was important to link it to positive outcomes - Dr de Bono's coinage "po" meaning provocative operation to generate new ideas, concepts and increase value was the starting point to choosing the word "Pou" to represent the DHB's commitment to positive health outcomes for Maori. 	

	<ul style="list-style-type: none"> - The new committee is committed to exploring better ways of doing things for and with Maori. - Also noted the significance and importance of the members in adding value to effective functioning of this group 	
4) Procedural Matters	<ul style="list-style-type: none"> - Noted that the interests register continues to be updated – all updates to be forwarded to Subha for inclusion in the register. - Noted that schedule for 2006 meeting dates was circulated. - Noted CPHAC members' profile – continues to be updated. 	
5) Matters Arising:	<p>Changes to Citizenship rules</p> <ul style="list-style-type: none"> - Further to a note in the Personal Health Update in November, noted that as a result of feedback from CMDHB, the Minister has decided to defer implementation of this policy for the first quarter of 2006 while more work is done to address the issues raised. 	
6) CPHAC Priorities	<p>6.1 Auckland Renal Project Update Presentation by Pauline Hanna – Programme Manager, Hospital and Specialist Services</p> <ul style="list-style-type: none"> - The Renal Project is a multi-disciplinary group from the metro-Auckland DHBs convened as a result of growth in numbers of patients accessing dialysis, in order to understand the issues and to adopt a common, planned approach to developing the renal services. - Noted that chronic kidney disease has no cure, but optimizing treatment can delay the development of the disease. - Noted an increasing number of 60+ year old patients accessing the dialysis services and also a high growth in numbers of Maori and Pacific people. - Those at high risk of developing this are those with diabetes, hypertension and cardiovascular disease. - Noted that CMDHB contributes a third of the total dialysis patients NZ wide - Noted that in terms of costings per patient the treatment costs are as follows: <ul style="list-style-type: none"> - In-centre - \$64K per annum - Satellite - \$48K per annum - Home HD - \$34K per annum - Peritoneal dialysis - \$37K per annum - Transplant - \$27K (one-off) - Noted that diabetes is the main reason for up to 60-70% of these patients developing the disease. - The primary aim of the project is to implement the optimum mix of treatment modalities. - The project has identified the prevention/screening component and to link with the existing CCM structure to pilot a renal prevention programme. - A Project Manager appointment will be confirmed by the end of February – this role will work with the steering group towards establishing processes, structures, resources etc. <p>Recommendation The Chairman thanked Pauline on behalf of the Committee for the comprehensive and informative presentation and moved that the Update be received</p> <p>Moved: Mr Paul Cressey Seconded: Dr Lynne Lane Carried: Unanimous</p>	

6.3 Health Indicators – Elective Surgery

Presentation by Dr Gary Jackson – Manager, Clinical Planning.

- Noted that access by the CMDHB population to publicly funded elective surgery has improved over recent years, and is better than the for the other DHBs in the metro-Auckland region. Overall surgical intervention rates for CMDHB are also higher as CMDHB spends more on acute care.
- For procedures like angiography and angioplasty the rates for the Counties Manukau population have increased over the last few years in comparison to NZ average.
- Also noted improved access for cataract surgery in comparison to NZ average.
- Noted the rates for hip replacement and knee replacement surgery is higher than the NZ average.
- Noted that while less private surgery is provided to Counties Manukau residents on average compared to other DHBs, there is no information to identify whether the surgery was funded by ACC, private insurance, or the patient.
- Noted that the next Census is in March. There was a query on how this would affect the funding formula for CMDHB, and discussion of the importance of all people being counted and ethnicity being recorded accurately. The final results from the next Census will be available mid-2007 and will be applied to the 2008/2009 funding.

Recommendation

Noted the need to have an update on the effect of recording of ethnicity in the Census as this is important for funding. Also noted that Maori/Pacific teams need to think strategically to increase awareness among the community on the importance of participating in the census.

Moved: Mr Bill Mudgway

Seconded: Mr Sefita Hauoli

Carried: Unanimous

6.4 2006/07 District Annual Plan update

Presentation by Janine Pratt – Planning & Accountability Manager:

- The framework informing the DHB DAP process was explained.
- The planning package was received by the DHB in December.
- The DHB is currently working through the budgeting process.
- The draft version of the DAP will be reviewed by EMT in February, Board in March, and a draft delivered to the Ministry of Health on 10 March, with final sign-off by Board in May.

6.5 Tupu Ola Moui – CMDHB Pacific Health and Disability Action Plan

Presentation by Margie Fepulea'i, GM, Pacific Health

- This plan outlines how the DHB will implement the DSP for Pacific populations and reflect priorities for reducing health inequalities for Pacific people.
- In considering/designing the plan, it is important to note that Pacific communities are accessible to the DHB as is evidenced in CCM enrolments and MeNZB update rates. There is a considerable body of research/evidence

	<p>available on Pacific people and their health issues. This is an opportunity to influence the community to believe the health system can benefit them.</p> <ul style="list-style-type: none"> - A modelling exercise was undertaken to identify and plan the priorities – obesity has been identified as a key priority. - Outcome 1 proposes a community based approach to improving the health environment – information, education etc - Outcome 2 aims to improve the Pacific child and youth health – focus on link to Well Child programmes, obesity management, support to mothers and caregivers - Outcome 3 - focuses on those with chronic disease - a structured care approach seems to work well with Pacific people - Outcome 4 – to reduce inequalities through prioritisation processes - Outcome 5 – improvement in access to services for the Pacific population - Outcome 6 – growing and developing the Pacific workforce and providers. Noted that the DHB has got commitment from the MoH to continue with PPD funding. - Noted this is a very positive plan with a positive approach. It's important to fit the outcome measures/budget alongside implementing and evaluating the outcomes. <p>Resolution:</p> <ol style="list-style-type: none"> 1. endorse the draft Tupu Ola Moui CMDHB Pacific Health & Disability Action Plan for progress to Board in February 2006; 2. note that PHAC has approved the Plan for Board consideration; and 3. note the timeframes for finalising the Plan to be tabled to the Board by February 2006. <p>Moved: Mr Sefita Hauoli Seconded: Ms Donna Richards Carried: Unanimous</p>	
7) CPHAC Priorities update	<p>7.1 Personal Health Care Update</p> <ul style="list-style-type: none"> - Noted the PHO Performance Management Programme is underway and 3 PHOs have joined from 1st January. The aim of this programme is to measure and lift the PHOs' performance. This is a continuous improvement approach, with a modest financial incentive/reward is built into the programme. At this stage, this incentive is funded out of additional Primary Health Care Strategy funding, but from 07/08 will probably be included in the Population Based Funding. - Noted the discussions at GPHO re barriers to CCM implementation and the PHOs' role in resolution of these barriers. - Noted that an "Interim Evaluation Report" on CCM was published in April 2005 and is available for the members. - Noted the Child Health Plan is in draft form and will be tabled at a future meeting for feedback, discussion and ratification. - Update on Intensive Home Visiting: this has been a service contracted directly by the MoH with two providers in Mangere area. The DHB facilitated meetings between the MoH and the providers due to MoH decision to end the contracts on 31/12/05. After meetings and discussions, the end date for the contract has been deferred to 30/06/06, and MoH are working with MSD to roll out the Family Start 	

	<p>programme which will replace the Intensive Home Visiting programme and lessen the impact of the Ministry decision on staff and families.</p> <ul style="list-style-type: none"> - Copies of the Sexual Health Guideline for Primary Care will be made available at next meeting - Noted a workshop has been undertaken involving stakeholders to discuss the options to share the Buckland Road Oral Health Community Clinic reconfigured facility. <p>Action:</p> <ul style="list-style-type: none"> - A detailed presentation on the PHO – Performance Management programme at a future meeting. - To send a copy of the Interim CCM Evaluation Report to Ms Donna Richards - An Oral Health update to be provided at a future meeting - Sexual Health Guidelines to be made available at meeting on 28th February. <p>Resolution That the Personal Health Care Update report be received</p> <p>Moved: Mr David Collings Seconded: Mr Bill Mudgway Carried: Unanimous</p> <p>7.2 Health of Older People Update</p> <ul style="list-style-type: none"> - Noted that work on the Health of Older People action plan continues. - Additional funding has been received to support the development of fair travel policy and compensation for service workers. - Noted that 4% increase for ARC service providers backdated from 1 July 2005 will be paid on 25 January 2006. <p>Resolution That the Health of Older People Update report be received</p> <p>Moved: Seconded: Carried: Unanimous</p> <p>7.3 Mental Health Update</p> <p>Resolution That the Mental Health Update report be received</p> <p>Moved: Mr David Collings Seconded: Mrs Jillian Dooley Carried: Unanimous</p>	
8) For Information	<p>8.1 Maori Health Update</p> <p>Resolution That the Maori Health Update report be received.</p> <p>Moved: Ms Miria Andrews Seconded: Mr Bill Mudgway Carried: Unanimous</p> <p>8.2 Pacific Health Update</p>	Oct 05

	<p>Resolution That the Pacific Health Update report be received.</p> <p>Moved: Ms Malia Hamani Seconded: Mrs Jillian Dooley Carried: Unanimous</p> <p>8.3 CM Breast Screen Update</p> <ul style="list-style-type: none"> - Noted response to query from previous meeting re improving DNA rates. - Noted a concern around the process for scheduling the appointments which could be a reason for the DNA rates. <p>Resolution That the Breast Screening Update report be received with a note requesting a follow up for DNA and the process for scheduling appointments.</p> <p>Moved: Mr Sefita Hauoli Seconded: Mrs Jillian Dooley Carried: Unanimous</p> <p>8.4 Flu Vaccines Update</p> <p>Resolution That CPHAC receive the Flu Vaccines Update report and encourage management to work with the organisation to increase the uptake of influenza vaccine.</p> <p>Moved: Mrs Eileen Fox Seconded: Mr Sefita Hauoli Carried: Unanimous</p>	
9)	<p>Additional Maori Health Issues not already covered in the agenda</p> <p>Nil</p>	
10)	<p>Additional Pacific Health Issues not already covered in the agenda</p> <p>Nil</p>	
11) Monthly Reporting	<p>11.1 Board update</p> <ul style="list-style-type: none"> - Round 3 Priority Initiatives were approved by the Board in December - Discussions around elective services <p>11.2 CPHAC report to Board</p> <p>Noted that Chairperson's report to the Board included in the agenda document.</p> <p>11.3 Updates from Board Advisory Committees</p> <p>Hospital Advisory Committee (HAC)</p> <ul style="list-style-type: none"> - See under General Business <p>Disability Support Advisory Committee (DiSAC)</p> <ul style="list-style-type: none"> - NZDS Action Plan was ratified for Board approval - Discussion around Disability Advisor role similar to the one piloted at Waitemata DHB. - Presentation from FMP outlining their commitment to ensuring all facilities/health services will be accessible to the disabled community. 	

	<p>Pacific Health Advisory Committee</p> <ul style="list-style-type: none"> - Update on the Pacific Service Plan - Update on LBD - Presentation on Health of Older People Plan <p>11.4 Financial Report</p> <ul style="list-style-type: none"> - Noted the pharmaceutical costs have levelled out. Forecast underspend on Health of Older People 	
12) General Business:	<ul style="list-style-type: none"> - Request for the full report on the Auckland Regional Renal Services project to be made available at next meeting - Noted a request from HAC meeting re availability of information on GP fees for under 6s. This is seen as very useful for the community. Update to be provided at next CPHAC - Noted query from HAC re need to update the CMDHB website <p>Resolution CPHAC encourages management to improve the general website for CMDHB</p> <p>Moved: Mr Paul Cressey Seconded: Mr Bill Mudgway Carried: Unanimous</p> <ul style="list-style-type: none"> - Noted that the Board Planning is scheduled for 26th January and that CPHAC planning and prioritising will be closely aligned to the Board priorities – decision at next meeting on the process. - Noted that the level of presentations at the meeting was excellent. 	
13) Adjournment	The meeting adjourned at 4.20pm	
14) Next Meeting:	Tuesday 28 th February 2006, 1.00-4.00pm, Boardroom – 19, Lambie Drive	
<p>Signed as a true and correct record on the 28th February 2006</p> <p>Chair: Mr Paul Cressey</p> <p>Resolution The minutes of the meeting of the Community and public Health Advisory Committee of Counties Manukau District Health Board of 24th January 2006 are approved.</p> <p>Moved: Ms Miria Andrews Seconded: Ms Donna Richards Carried: Unanimous</p>		