

# Community & Public Health Advisory Committee

## Minutes

of the meeting held on 25<sup>th</sup> September 2007, from 1.00 to 4.00pm, at the Manukau Boardroom, 19 Lambie Drive

Present:	Mr Paul Cressey (Chair), Ms Yvonne Waterreus, Ms Airini Tukerangi, Ms Winnie Potter, Ms Miria Andrews, Ms Elizabeth Farrell, Mr Anae Arthur Anae (until 2.50pm), Mr Sefita Haouli, Mrs Donna Richards (from 2pm), Jillian Dooley (from 2.25pm), Mr Don Barker  In attendance: Mr Chris Mules, Dr Allan Moffitt, Mrs Alice Ropata (minute-taker)
Apologies:	Dr Peter Didsbury, Whaea Nganeko Minhinnick, Dr Lynne Lane, Ms Jillian Dooley (for lateness)
1) Welcome	Mr Paul Cressey welcomed the Committee.  Ms Yvonne Waterreus advised that her term as representative for the Mental Health and Addictions Network (MHAN) has come to an end and that this would be her last attendance at CPHAC. Mr Cressey thanked Ms Waterreus for her contribution and asked that a vote of appreciation be recorded.
2) Minutes of Previous Meeting & Matters Arising	<p><b>Resolution:</b> Noted that the minutes of the meeting of CPHAC held on Tuesday 28th August 2007, were taken as read and confirmed.</p> <p><b>Moved:</b> Ms Airini Tukerangi <b>Seconded:</b> Ms Winnie Potter <b>Carried:</b> Unanimous</p> <p><b>Matters Arising:</b></p> <ul style="list-style-type: none"> <li>- NIR letter to Ministry of Health. CMDHB is awaiting a response.</li> </ul>
3) Procedural Matters	<p><b>3.1 Interests Register</b></p> <ul style="list-style-type: none"> <li>- Mr Cressey updated that he is no longer Chairman of Life Education Trust.</li> <li>- Mr Anae advised that he is a member of the Board of Counties Manukau Sport.</li> </ul> <p><b>3.2 Guidelines for Declaring Interests</b></p> <ul style="list-style-type: none"> <li>- The guidelines will be included in each agenda pack as a reference.</li> </ul>
4) Chief Planning & Funding Officer's Report	<p><b>4.1 Chief Planning &amp; Funding Officer's Report (Chris Mules)</b></p> <p><b>Oral Health</b></p> <ul style="list-style-type: none"> <li>- The Ministers of Health and Finance have approved the funding of the Buckland Road community oral health clinic to the amount of \$1.53m. A paper is being prepared for the</li> </ul>

metro-Auckland CFOs on options for the ownership and management of the new facilities.

#### **Let's Beat Diabetes**

- Evaluation of the first phase of the Social Marketing campaign will commence at the end of September. This work will be undertaken by School of Population Health.
- CMDHB has resubmitted its CM Active proposal to SPARC. The changes to the proposal focus on increasing the funding provided by the CM Active partners, and more explicitly links the initiative to sports and recreation. A decision is expected by the end of September.

#### **Mental Health**

- CMDHB was awarded the Gold Award for NGO-provided services at the Australian and New Zealand Mental Health Awards held in Melbourne. The award celebrated the success of the Community Living Services innovative model to enable mental health consumers to move and live independently in society.
- Community based acute service. The recently contracted provider is seeking an appropriate community facility for the service. Work is continuing to align CMDHB provider arm with the new service to ensure a seamless client pathway into the service.
- Peer support training has been successfully completed to develop our local Peer Support Specialist workforce. Of the original 40 participants, 10 have been employed. There will be a further 20 FTE positions filled for over the next year.
- Mellow Parenting training has been scheduled for the first week in October. The programme originates in the US and is based on the social/emotional development of children from 0 to 3 years. CMDHB is looking at adopting these principles and tailoring to the needs of our population. The pilot will determine whether the programme is a good fit.

#### **Primary Health Care**

- Agreement on the strategic intent of the PHC Plan was obtained from PHOs at the August GPHO meeting. The Plan will go to the Board for final sign off in October.
- A stakeholder workshop was held on 29 August facility by Judith Smith, Victoria & Birmingham Universities. The workshop was attended by 90 participants from community, Manawhenua, providers, PHOs, NGOs and inter-sector agencies (Housing, Justice, Education, Work & Income, ACC and Manukau City Council). A small representative group will consider how the project moves forward and will develop a planning framework and terms of reference which will be presented to the Mangere Community Board, Manawhenua and the DHB for sign off.

#### **Pharmacy**

- The regional contract variation has been offered to pharmacists. CMDHB is confident of 100% acceptance of the regional variation and base national contract. A regional group of pharmacists and DHB reps is working through implementation issues.

#### **Low Paid Workers**

- A judicial review is underway regarding the low paid workers and collective agreement clauses in the 2007/08 ARC contract. The DHBs and residential care providers

	<p>have agreed not to proceed with the enforcement of these clauses until the outcome of the judicial review is known and agreed.</p> <p><b>Resolution</b></p> <ul style="list-style-type: none"> <li>- CPHAC received the report from Mr Mules.</li> </ul> <p><b>Moved:</b> Ms Yvonne Waterreus  <b>Seconded:</b> Ms Winnie Potter  <b>Carried:</b> Unanimously</p>	
<p>5) CPHAC Priorities</p>	<p><b>5.1 Mental Health and Addictions 3 Year Financial Plan</b></p> <ul style="list-style-type: none"> <li>- Dr Sue Hallwright and Mr Phil Grady attended CPHAC to speak to the paper.</li> <li>- In July 2006 the CMDHB Board signed off the Mental Health and Addictions Action Plan 2006-2010. The 3 year financial plan outlines the new services and projects that CMDHB will need to develop through to 2009/2010 in order to implement that Action Plan and to move from 74% of the national benchmarked services levels to 80% of those levels.</li> <li>- Dr Hallwright reminded CPHAC that funding is ringfenced, therefore no internal prioritisation is required.</li> <li>- CPHAC asked about services for Maaori and Pacific consumers. Dr Hallwright explained that it has been difficult recruiting specialists who are Maaori or Pacific. This is a workforce issue, not a funding issue.</li> <li>- CADS will continue to operate in Counties Manukau. CMDHB management are working with Waitemata DHB to develop a more appropriate service model for our population. CMDHB is also growing some local service providers however the major focus will be to improve the existing service.</li> <li>- Mental Health Development is continuing to work with Primary Care to develop services for the CCM depression programme.</li> </ul> <p><b>Resolution</b>  CPHAC:</p> <ul style="list-style-type: none"> <li>- <b>Endorsed</b> the Mental Health and Addictions 3 Year Financial Plan which outlines the expenditure required to implement the Board approved Mental Health and Addictions Action Plan through to 2009/2010; and</li> <li>- <b>Approved</b> the submission of the Plan to the Board for approval.</li> </ul> <p><b>Moved:</b> Mr Paul Cressey  <b>Seconded:</b> Ms Yvonne Waterreus  <b>Carried:</b> Unanimously</p> <p><b>5.2 Mental Health Expenditure 2006/07</b></p> <ul style="list-style-type: none"> <li>- Received for information only.</li> </ul> <p><b>5.3 Achievements of the CMDHB Renal Project</b></p> <ul style="list-style-type: none"> <li>- Ms Justine Patterson, Medicine/Clinical Support Project Manager, presented to CPHAC.</li> <li>- CMDHB dialyses 25% of all patients receiving kidney dialysis in New Zealand, although we have only 10% of the New Zealand population. There has also been high growth in Maaori and Pacific patients accessing dialysis.</li> <li>- The CMDHB Renal Project which ran from April 2006 to</li> </ul>	<p><b>Resolution</b></p>

June 2007 was developed out of the Auckland Regional Renal Project to implement CMDHB specific recommendations. These recommendations included:

- Increasing home dialysis ratio;
- Increasing awareness in the community of kidney donation and transplantation;
- Improving the quality and safety of patient care; and
- Promoting education and awareness within primary care.
- In 2005 dialysis growth in CMDHB was 6.7%. In 2006 growth was 4.8%.
- In July 2007, the mix of home versus hospital treatment is 41% to 59%. This modality mix is very good against international figures and is an improvement for CMDHB from 34% to 66% respectively.
- Organ donations have decreased within the Auckland region and the Ministry of Health are looking at a social marketing campaign to stimulate interest. CPHAC members asked that any campaign is tailored to respect the cultures and beliefs of the Counties Manukau population.
- The work introduced by the project will be continued by operational staff. The next phase of the Regional Renal Project looks at home therapies, transplantation, capacity planning and the interface with primary care.

#### **5.4 Child and Adolescent Oral Health Services Business Case**

- Ms Sue Dashfield, Ms Kar Po Chong and Ms Ingrid Minett attended CPHAC to discuss the business case.
- Mr Cressey congratulated the Oral Health project team on the business case. It is easy to read and to understand.
- Ms Dashfield advised that the MoH will allocate \$100m nationally to develop oral health services. CMDHB wishes to forward its business case to MoH as soon as possible, prior to undertaking community engagement to ascertain whether or not the MoH will fund the proposal.
- The business case gives the community ideas around oral health services configuration and indicative arrangements.
- CPHAC raised the issue that because the document is so comprehensive, it would appear that community consultation would provide little input. Ms Dashfield explained that the proposed models, while comprehensive, are certainly not final and will be led by community feedback and input.
- CPHAC discussed the need to ensure that the model targets families and that children are not treated in isolation from their parents. Models of care for Maaori and Pacific children must be appropriate to their needs. Ms Dashfield explained that any models of care will be tailored to each community and have direct input from the community. ARPHS will develop an education programme focused on Maaori and Pacific families.
- In terms of prevention, the proposed model of care will see WellChild engaging with parents and children earlier. A new training role within ARDS will support NGOs/WellChild to perform basic 'lift the lip' assessments in the home.
- CPHAC queried the proposed decrease in dental chairs in each community. Ms Dashfield explained that although there will be a decrease in chairs (capital), the opening hours in each community will be increased, providing better access. Most schools will have some form of oral health services whether it is a fixed or mobile clinic.

	<ul style="list-style-type: none"> <li>- CPHAC members encouraged management to learn from the mistakes of other services where DNA rates are high. It was suggested that mobile units could be stationed at community gatherings such as markets.</li> <li>- Mr Don Barker asked that Franklin be moved up the consultation timetable. WDHB has recently announced the closure of one of the school clinics in Franklin causing some concern within the community. Management will assess the proposed timetable and feedback to Mr Barker.</li> <li>- Mr Paul Cressey cautioned management on the use of the terms 'hub' and 'spoke' as they have centralist connotations which may cause concern to the community. He also suggested that the local plans not focus on facility development, but instead on service development.</li> </ul> <p><b>Resolution</b> CPHAC</p> <ul style="list-style-type: none"> <li>- <b>Endorsed</b> the child and youth oral health master business case to be submitted to the Ministry of Health at the end of September;</li> <li>- <b>Noted</b> that the community consultation feedback document will remain in draft format until it is piloted in the community; and</li> <li>- <b>Noted</b> that six subsequent detailed local plans will be presented over the coming year that will provide precise community plans for service development following development and consultation with local communities.</li> </ul> <p><b>Moved:</b> Mr Paul Cressey <b>Seconded:</b> Ms Elizabeth Farrell <b>Carried:</b> Unanimously</p>	<p><b>Action:</b> C Mules</p>
6)	<p><b>6.1 Maori Health Update</b></p> <ul style="list-style-type: none"> <li>- Received</li> </ul> <p><b>6.2 Pacific Health Update</b></p> <ul style="list-style-type: none"> <li>- Received.</li> </ul> <p><b>6.3 Breast Screening Update</b></p> <ul style="list-style-type: none"> <li>- Received</li> </ul>	
7)	<p><b>7.1 Updates from Board and Advisory Committees</b></p> <p><b>HAC</b></p> <ul style="list-style-type: none"> <li>- There continues to be a shortage of anaesthetic technicians and midwives. Strategies have been put in place to attract and recruit in these areas.</li> <li>- The new maternity unit will be opened on 8 October.</li> </ul> <p><b>PHAC</b></p> <ul style="list-style-type: none"> <li>- The LBD Operational Plan has not yet been endorsed by PHAC. CMDHB management are working through issues raised by PHAC.</li> </ul> <p><b>POU</b></p> <ul style="list-style-type: none"> <li>- Endorsed the Mental Health &amp; Addictions 3 year financial plan.</li> <li>- Discussed the Fit for Purpose project and which Maaori providers are engaging in the project.</li> </ul> <p><b>Resolution</b></p> <p>The Committee resolved that the public and media be</p>	

	<p>excluded from discussions on the risk register, (OIA s 9(2)(i), Standing orders Schedule 2 cl 2(g)) to enable the carrying out of commercial activities.</p> <p><b>Moved:</b> Ms Miria Andrews  <b>Seconded:</b> Ms Winnie Potter  <b>Carried:</b> Unanimous</p> <p>The meeting was reopened to the public at 4.30pm</p>	
8)	<p><b>General Business</b></p> <p><b>Franklin Positive Ageing Expo</b></p> <ul style="list-style-type: none"> <li>- Ms Winnie Potter reminded CPHAC that the Expo is taking place in October.</li> </ul> <p>The meeting closed at 4.11pm.</p>	

**Next meeting** will be held Tues 23<sup>rd</sup> October 2007 at the CMDHB Boardroom, 19 Lambie Drive, Manukau City.

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Signed as a true and correct record on the 23<sup>rd</sup> October 2007

Chair: Mr Paul Cressey

**Resolution**

The minutes of the meeting of the Community and Public Health Advisory Committee of Counties Manukau District Health Board of 25<sup>th</sup> September are approved.

Moved: Airini Tokerangi  
Seconded: Winnie Potter  
Carried: Unanimous