

Minutes of the Meeting of the Members of the
Disability Support Advisory Committee of the Counties Manukau District Health Board
Held in the Board Room, 19 Lambie Drive, Manukau
Tuesday 6th May 2003 at 1.00 p.m.

Present: Mr Brent Morrissey (Chair), Mr Paul Cressey, Ms Heather Grace, Mr Lindsay Smith, Ms Chris Ellis, Ms Nganeko Minhinnick, Professor Sir John Scott, Mr Bruce Ellery, Mr Tu'uta Pome'e, Ms Karyn Russell, Ms Airini Tokerangi

In attendance: Ms Jenni Coles, Ms Carol Delaney, Mr Chris Mules, Ms Elisabeth Harding, (Board Secretary)

Apologies: Mr Donald Barker, Ms Donna Hemi, Ms Donna Rauwhero

1. Welcome

The Chair welcomed members of the Committee and members of the public.

2. Apologies

Apologies were received from Mr Donald Barker, Ms Donna Hemi and Ms Donna Rauwhero.

3. Ratification of previous minutes (1st April 2003)

Resolution:

The minutes of the meeting of DiSAC held on Tuesday 1st May 2003, having been circulated were taken as read and confirmed.

Moved: Professor Sir John Scott, **Seconded** Mr Bruce Ellery, **Carried** Unanimously.

Procedural issues

Resolution

The Committee recommends that the Board reappoint the following members whose term expires on 15 May 2003:

- Ms Karyn Russell
- Ms Heather Grace
- Ms Chris Ellis
- Mr Bruce Ellery
- Professor Sir John Scott

Moved: Mr Lindsay Smith, **Seconded** Ms Airini Tokerangi **Carried** Unanimously

4. Integration Project based in Pukekohe: presentation by Ms Anthea Penny

Ms Penny provided an update on the progress of the project. Copies of the presentation were made available to Committee members.

The review of the current services and the Focal Person Survey have been completed with the next steps being the development of a model for integrated care for older people's health and a gap analysis of current services against the model. Although the model is being developed in the Franklin region it is envisaged that the model would also be applicable in similar population profile areas such as Kaitaia and Dargaville. With regards to whether the model could be applied in an area such as Manukau, further work would need to be undertaken because of a different stakeholder groups.

One of the main issues identified relates to transportation and in particular the infrequency of public transport, leading to isolation. Although there are volunteer groups who provide some transport services, the aging of the volunteer workforce does not always make this a viable alternative. Other concerns include the lack of specialist services (for example, respite care and dementia care) and the availability of home based services. It was noted that there was fragmentation of some services with linkages though information rather than formal networks. In some cases resources had been made available but patients and their families were not clear about how to utilise the resources.

The projected population growth for elderly was discussed and in particular the expected increase in the number of people over the age of 85 by 2021.

Maori expectations were considered and the importance of matching need with service provision. The provision of mobile services was discussed as a way of ensuring the provision of rural services.

Ms Penny was thanked for her update and invited to remain for the rest of the meeting.

5. Information project for DSS in the Northern Region

The report has been circulated to members for information. It was suggested that members should focus on the executive summary, the feedback from the focus groups and the recommendations.

Initially it had been envisaged that the project would include a needs analysis to identify gaps in services. However, the only data available from the Ministry is on utilisation. This is due to information historically being obtained for payment purposes rather than planning purposes. There is no available information on waiting lists. Most of the information available is about the provision of residential services with little about home care utilisation or part funded services in the voluntary sector. Therefore the information from the focus groups provided more useful information about the service gaps. It was noted that the feedback from the participants (approximately 70 people) was consistent.

With regard to the provision of services for younger people there are indications in the report of a high level of dissatisfaction with the range and quality of services and in particular the attitudes of staff at all levels, with the report recommending a review of younger people's services. Both groups had concerns about the provision of home care services and about making complaints.

The next steps will be to get the base information collected for this report and analyse specifically for the CMDHB region to help identify how services and what services should be provided to people in the CMDHB region. In preparation for devolution of services for people over 65 years the next step will be to analyse current contracts in the CMDHB region, with further work following devolution.

Other issues which will need to be considered include the changing demands for services for example where historically Pacific people have been looked after by their families while now there is pressure on those families to work, placing additional demands on public health services and access to services.

The report will be provided to the Ministry of Health for it to provide a response on the recommendations regarding younger people. CMDHB management will focus on a response to the recommendations regarding older people.

6. Maori Issues

The issue of access to services for Maori people was considered and in particular when and how Maori access services. In the current context Ms Nganeko Minhinnick noted that the definition of services for older people starting at 65 years was not appropriate for Maori, raising concerns about who defines an older person as someone over 65 years. At present only 1% of the population over 65 years is Maori. Ms Minhinnick also advised members that the Manawhenua networks could assist and support Elders to access services. Ms Minhinnick will discuss this further with Ms Jenni Coles

There was further discussion about defining services specifically for people over 65 years that access should be triggered by need rather than age, ensuring equity of service provision. There is flexibility regarding access by those less than 65 years to some services defined as being for people over 65 years.

Further analysis is needed on needs assessment to ensure it matches with service provision with the objective of keeping Maori Elders well. Current services are based on provider services to people who are unwell. It was considered that a better model would be to focus on a keeping people well to improve the quality of life.

Consultation on the provision of services should include Kuia and Kaumatua and not just service providers.

With regard to devolution, this raises an issue about a hidden demand for services for people over 65 years who are not currently accessing services.

Devolution will be the starting point for beginning the changes needed to the provision of services for older people, with the Health of Older People Strategy forming the framework to start addressing the changes. However, changing the systems of service delivery will take time.

Resolutions

The Committee recommended:

- Management write to the Ministry of Health seeing further information about the work it is undertaking with MAPO in identifying the needs of Maori Elders;

Moved Ms Airini Tukerangi, **Seconded**, Mr Tu'uta Pome'e, **Carried** Unanimously

- Understanding of how Maori and Pacific people access existing services is a priority issue.

Moved Mr Paul Cressey, **Seconded**, Mr Tu'uta Pome'e, **Carried** Unanimously

7. DSS Utilisation and Services Issues

Ms Jenni Coles provided an update on utilisation of secondary disability support services. Background information will be circulated to members.



Briefing Information

DiSAC 5.5...

In particular Ms Coles highlighted the increase in the number of referrals to home health care. This is possibly being driven by the earlier discharge of people from secondary care, and as such is a desirable growth. There has also been an increase in the number of needs assessments and service coordination (NASC) services being provided with referral to other services as appropriate. Consideration was being given to extending the NASC model to mental health and personal health services.

Recently, arrangements have been made to fund respite beds for night care services to provide a break for caregivers. To date caregivers have not fully utilised this service. One explanation is caregivers' reluctance to give responsibility for the care of their family member to others for overnight care. Potential providers of day stay respite services are currently being identified.

8. DSS devolution – draft establishment plan: plan for Older People's Services in Greater Auckland

Ms Janine Pratt provided an update on the draft plan, which needs to be provided to the Ministry by 9th May 2003. It was noted that information about the existing contracts currently management by the Ministry remain unknown, but is expected to be available by the end of May.

The issue of regional versus local management of services was discussed. It is anticipated that the processing and administrative components associated with the devolution of services would be dealt with on a regional basis, with the development and implementation of strategic and policy initiatives being on a local basis.

The initial focus is on what services the funding is currently being spent, who is providing the services and whether the provision of these services is being monitored.

The establishment plan is linked with the national health strategies and in particular the Health of Older Persons Strategy.

Once the Ministry has reviewed the draft plan it will provide formal feedback to CMDHB. There will be a report going to Cabinet on 30 June 2003 with a decision expected from Cabinet on the proposed devolution of services on 1 October 2003. An update will be provided at the next DiSAC meeting.

9. General business

There was a general discussion about whether the nature of DiSAC will change following devolution of services. Once devolution occurs it is expected that there will be a need to focus on financial and performance reporting as well as the Committee providing advice on how the funding should be allocated. Following devolution it is expected that there will be greater focus on services for people over 65 years. The role of DiSAC will be discussed in more detail at the next Committee meeting.

The next meeting of DiSAC will at Lambie Drive on Tuesday 1st July 2003. There will be a regional DiSAC meeting on 18 June 2003 from 1 to 4pm.

The meeting closed at 3.25 pm

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

Chair:
Mr Brent Morrissey

The minutes of the meeting of the Disability Support Advisory Committee of Counties Manukau District Health Board of 6th May 2003 are approved.

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