

# Minutes of Pacific Health Advisory Committee

Of the meeting held on Wednesday 20<sup>th</sup> September 2006 – 9.00 to 12.00 @ Lambie Drive

1. Present:	<p>Mr Anae Arthur Anae, Mr Michael Chan, Mrs Bernadette Pone, Mrs Jillian Dooley, Mr Nuku Rapana, , Mr Sefita Haouli</p> <p>In attendance: Mrs Elizabeth Powell standing for Fepulea'i Margie Apa, Ms Subha Srinivasan (Secretary)</p>	
Apologies:	Mrs Roine Lealaiauloto, Ms Stephanie Erik-Peleti, Mr Paul Cressey, Fepulea'i Margie Apa and Mr Sefita Hauoli for lateness Ms Malia Hamani	
	<p>Welcome and apologies noted</p> <p>Welcome to Mr Phil Beilby – GM PIASS Trust, new member with PHAC.</p>	<b>Action</b>
2. Minutes of Previous Meeting:	<p><b>Resolution</b> The minutes of PHAC held on Wednesday 16<sup>th</sup> August 2006 were confirmed and approved with no further amendments.</p> <p><b>Moved:</b> Mr Nuku Rapana <b>Seconded:</b> Mr Athur Anae <b>Carried:</b> All</p>	
3. Matters Arising:	<ul style="list-style-type: none"> <li>- Noted that presentation of Palliative Care Strategy will be scheduled for a future Committee meeting.</li> <li>- A consolidated presentation for 05/06 on the PATHS programme is being finalised</li> <li>- Noted that reports requested at previous meetings is being finalised. <ul style="list-style-type: none"> <li>Ø Pacific patients admission to the hospital</li> <li>Ø Brief on PPD</li> <li>Ø Feedback on Traditional Healing</li> </ul> </li> <li>- Noted that the Memorandum of Understanding with Cook Islands is currently being written by Jane Lattimer and will be completed by the end of September.</li> <li>- Report on proposed DHB actions on PPDF under-spend catch-ups to be tabled at next meeting.</li> <li>- Mr Michael Chan queried the DHB stance on the utilisation of the PPDF funds for overseas conference as there is considerable benefits and value in sending staff to participate and present at international conference.</li> <li>- It was clarified that MoH is non-committal about spending PPD funds on overseas travel.</li> </ul>	
4. Procedural Matters	<p><b>Membership Update</b></p> <ul style="list-style-type: none"> <li>- Noted that nominations from Otara and Mangere Community Board has been received for PHAC</li> <li>- Noted that Mr Phil Beilby will join DiSAC representing PHAC</li> <li>- Mr Anae queried a nomination received from Dr Juliet Walker for someone with clinical expertise.</li> </ul> <p><b>Resolution</b></p>	

**That PHAC**

1. **endorse** the nomination of Louisa Lavakula on behalf of the Otara Community Board to the Board at its October 06 meeting;
2. **endorse** the nomination of Peter Skelton on behalf of the Mangere Community Board to the Board at its October 06 meeting; and
3. **endorse** the nomination of Dr Etuate Saafi on behalf of the PIAC to the Board at its October 06 meeting.

**Moved:** Mr Nuku Rapana

**Seconded:** Mr Sefita Hauoli

**Carried:** All

**Resolution**

1. **Approve** Mr Philip Beilby's nomination to DiSAC; and request the Board to ratify the nomination.

**Moved:** Mr Nuku Rapana

**Seconded:** Mr Sefita Hauoli

**Carried:** All

**Disclosure of interest**

Disclosure of interest (this list is part of all PHAC minutes)

- Mr Sefita Hauoli
  - Ø Contracted to the Social Marketing Strategy formation work stream of the Let's Beat Diabetes initiative
  - Ø Contracted to 531PI, a broadcasting service that has a health promotion contract with CMDHB;
- Mr Nuku Rapana
  - Ø Board member of TaPasefika
- Mr Michael Chan
  - Ø CEO - Southseas Health Care – CM Pacific Provider
  - Ø Member of PHWAG, Oral Health group and Pacific Provider Management group.
- Ms Malia Hamani
  - Ø Manager, Toa Pacific – CM Pacific provider and involved in the Let's Beat Diabetes initiative
- Mr Anae Arthur Anae
  - Ø Board member of Phobic Trust
  - Ø Counties Manukau Sports – Board member
- Ms Bernadette Pereira
  - Ø Member of the Breast Screening Advisory Group
- Mrs Roine Lealaiauloto
  - Ø Manager – Penina Health Trust – CM Pacific Provider
- Ms Stephanie Erick-Peleti
  - Ø AUT Researcher.
  - Ø Treasurer: Pacifica Womens Inc. Auckland Central Branch
  - Ø Treasurer: Pacific Health & Welfare Inc Society
  - Ø National Pacific Diabetes Initiative – Subcontractor
  - Ø Nancy Sheehan & Associates (Contracted provider for CMDHB) – (Writer) subcontractor
- Ms Bernadette Pone
  - MIT Board of Council - Member
  - Contracted Provider - Work and Income NZ and Housing NZ
  - St Josephs School, Onehunga - Board of Trustee
  - Careerworks Pasifika Ltd - Managing Director
- Mr Pat Snedden
  - Ø Business Advisor, Healthcare Aotearoa Inc
  - Ø Chairman Housing NZ

	<ul style="list-style-type: none"> <li>Ø Treaty negotiator, Ngati Whatua Orakei Maori Trust Board</li> <li>Ø Deputy Chair ASB Trusts</li> <li>Ø Director Watercare Services Ltd</li> <li>Ø Director Mai 86.6 FM</li> <li>- Mr Paul Cressey</li> <li>Ø Chairman Life Education Trust</li> <li>Ø Trustee South East Auckland Life Education Trust</li> <li>Ø Chairman Health Information Strategy Action Ministerial Committee</li> <li>Ø Chairman Injury Surveillance Ministry Advisory Panel (ISMAP)</li> <li>- Mrs Jillian Dooley</li> <li>Ø Currently employed by CMDHB as an Appointment Coordinator (0.5FTE)</li> </ul>	
5. Committee Updates		
6. Presentation	<p><b>Primary &amp; Community Health Centres and Integrated Models of Care.</b></p> <p>Dr Alan Greenslade presented on this project.</p> <ul style="list-style-type: none"> <li>- The project focuses on the development of Primary and Community Health Centres as part of an integrated delivery system, to meet the needs of the population in 2026 and aligned to the goals of the Primary Health Care Strategy.</li> <li>- It is anticipated that preferred localities for service delivery will be identified, a service model developed, determine governance and management structure and develop a business case for Board approval.</li> <li>- The DHB is getting involved in configuring future primary health care service for the following reasons <ul style="list-style-type: none"> <li>Ø Anticipated population growth and aging over the next 20 years – 50% population increase and 172% increase in 65+ age group.</li> <li>Ø Current delivery model is not sustainable</li> <li>Ø Need to consider a “whole system” approach to planning new models of care</li> </ul> </li> <li>- Some of the challenges faced by Primary Care as follows: <ul style="list-style-type: none"> <li>Ø General Practice isn’t attracting medical graduates</li> <li>Ø Nursing workforce development is slow and difficult to support in current model</li> <li>Ø Practices too small to facilitate teamwork, collocation, host visiting service</li> <li>Ø Practice enrolled population too small to support integration and sub-specialisation of GPs and nurses.</li> </ul> </li> <li>- There is a GP workforce crisis pending as the workforce is aging, as the model is not sustainable new graduates aren’t looking to buy into a GP business, workforce being supplemented by overseas graduates, considerable compliance costs in running business and more emphasis on non-monetary component.</li> <li>- Noted that Manukau has the second lowest number of GPs per capita.</li> <li>- It has been found that young GPs prefer to work in a supportive team, access to ongoing clinical education, want to take holidays, train in a speciality area, work/life balance, prefer a salary to running business.</li> <li>- In terms of targeting a high-needs area for the service, it’s been Mangere has been identified as the preferred locality for the following reasons</li> </ul>	

	<ul style="list-style-type: none"> <li>Ø Larger locality population</li> <li>Ø Large high-need population – 84%</li> <li>Ø Defined and compact community</li> <li>Ø Strong community infrastructure</li> <li>Ø High use of MMH emergency and acute services</li> <li>- There are some challenges in developing integrated services in Mangere</li> <li>Ø Developing a shared vision across 6 PHOs and 15 practices.</li> <li>Ø Developing PHC nursing when it is fragmented across 6 PHOs, 15 practices, 1 DHB and multiple NGOs.</li> <li>- PHOs and GPs will be invited for initial discussion and exploring approach most appropriate for this area.</li> <li>- A consultation document outlining ideas on what services will look like in 2026 is being scoped. Providers and PHOs will be invited to provide feedback and stimulate participation.</li> <li>- In terms of progressing this further, noted that the steering group will sign off the consultation document, consultation and feedback from providers and community. This will be followed by a joint planning exercise by the DHB, providers and community.</li> <li>- It was noted this could be an opportunity to introduce messages on prevention to complement existing services.</li> </ul> <p><b>Procure Pacific Health Plan</b></p> <p>Presentation by Mac Leauanae Other members from Procure who joined this meeting were PNM Executive Officer Shirley Wilson, PNM Chair Dr Harley Aish, PNM &amp; ProPa member Dr Sam Fuimaono</p> <p>The presentation focussed on the review of the Pacific Health Business Plan, review of enrolled population, key objectives for 06/07, current programmes and challenges for Pacific</p> <ul style="list-style-type: none"> <li>- The Pacific Health Plan for Procure was approved by the board in August 2006 and is currently with CMDHB for approval.</li> <li>- The Plan has factored in the national statistics for Pacific Health and also includes CMDHB Pacific statistics.</li> <li>- As at July 2006 quarters, the Pacific population enrolled with Procure network Manakua is 43,493.</li> <li>- Out of the enrolled population, over 60% are quintile 5.</li> <li>- The PHO has 5 key objectives which are closely aligned to the DHB's DSP outcomes framework. These are as follows <ul style="list-style-type: none"> <li>Ø Reduce health inequalities for Pacific</li> <li>Ø Improve the management of priority conditions for Pacific populations</li> <li>Ø Improve capacity to deliver quality services</li> <li>Ø Improve Pacific community health and well being</li> <li>Ø Improve Pacific Child, Youth &amp; Women Health</li> </ul> </li> <li>- The PHO has a range of programmes for the enrolled population – this includes mental health, psychological services, community health services, smoking cessation, diabetes and CCM.</li> <li>- Noted that Procure Network Manukau has the largest enrolled Pacific population and is committed to delivering quality services. Acknowledging there are areas for improvement, the PHO seeks support/advice from PHAC to achieve this.</li> </ul> <p>Queries from Committee/responses noted below</p>	
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	<ul style="list-style-type: none"> <li>- Re services for men, it was clarified that the next priority for the PHO is Cardio Vascular screening and it is hoped this will capture the men.</li> <li>- Re introducing a prevention aspect, it was clarified that the PHO has a wholistic population approach which is managed by the Health Promotion Plan.</li> <li>- The PHO is investing in “self-management” to target specific communities and plans to build upon it. It is hoped that it might be easier to profile those accessing health care and use the stats for targeting those in need.</li> <li>- Noted that Procure also assists in 2 Lotu Moui churches and provides proactive support to the project via sponsorship.</li> <li>- Noted that enrolment in programmes and outputs for Pacific people are being measured and reporting is available for quiet a few programmes.</li> <li>- Currently looking at utilisation rates for enrolled Pacific populations – this information is available with Danny Wu who’s the programme manager.</li> </ul> <p><b>BreastScreen Counties Manukau</b></p> <p>Presentation did not proceed and will be scheduled for future meeting as appropriate.</p>	
7. Information papers	<p><b>Pacific GM update</b></p> <ul style="list-style-type: none"> <li>- Noted the Lotu Moui symposium is scheduled for 22/23 November.</li> <li>- The sponsorship package and the draft programme for the Pacific Workforce conference was circulated.</li> <li>- The conference is a 1-day programme and will provide tools for people to strategise around recruitment, retention and mentoring of Pacific people.</li> <li>- It has been proposed that a full business case be developed to manage the relationships with Pacific in providing health services.</li> <li>- The sustainability conference on 7/8 September was quite successful</li> <li>- PMA conference – 1 good speaker from Toronto University. An opportunity to showcase the excellent work/success stories missed out.</li> </ul> <p><b>Breast Screen Service Implementation Project Update</b></p> <ul style="list-style-type: none"> <li>- Noted report tabled.</li> </ul>	
8. General Business:	<ul style="list-style-type: none"> <li>- Mr Anae noted that it will be most useful for the Committee to time for brainstorming/think-tank session <ul style="list-style-type: none"> <li>Ø To identify issues outside the norm to inform discussions with MoH</li> <li>Ø Members input on the issues they want to discuss, evaluate the last 18 months progress and plan for the next 15 months</li> <li>Ø Feedback from providers to determine their support needs, the challenges/problems encountered and the actions required – use of PPDF and SIA.</li> </ul> </li> <li>- Mr Arthur Anae stressed the importance meeting with providers for discussions and agreement on measurable/tangible outcomes for services provided across all PHOs delivering services to Pacific populations.</li> <li>- Noted that the PHO Performance Management Programme has clear set of indicators with national targets.</li> </ul>	

9. Adjournment:	The meeting adjourned at 12.00noon
10. Next Meeting:	Wednesday 18 <sup>th</sup> October 2006, 9.00 to 12.00, Boardroom – Lambie Drive.
Signed as a true and correct record on the <b>18<sup>th</sup> October 2006</b>	
Chair: <b>Mr Arthur Anae</b>	
<b>Resolution</b>	
The minutes of the meeting of the Pacific Health Advisory Committee of Counties Manukau District Health Board of 20 <sup>th</sup> September 2006 are approved.	
Moved: Mrs Jillian Dooley	
Seconded: Mr Phil Beilby	
Carried: Unanimous	