

Minutes of Pacific Health Advisory Committee

Of the meeting held on Wednesday 21st June 2006 – 9.00 to 12.30 @ Lambie Drive

1. Present:	<p>Mr Anae Arthur Anae, Mrs Jillian Dooley, Mr Sefita Haouli, Seiuli Dr Juliet Walker, Ms Bernedette Pereira, Mrs Bernadette Pone, Mr Nuku Rapana, Mrs Roine Lealaialoto, Mr Michael Chan</p> <p>Mr Paul Cressey arrived at 9.30am</p>	
Apologies:	Ms Malia Hamani, Mr Michael Chan for late arrival	
	<p>The meeting opened with a formal acknowledgement of Fepulea'i Margie Apa's matai title. The Committee members expressed their appreciation of Fepulea'i's significant role and contribution to Pacific Health in the area and acknowledged her family's recognition of this through the bestowment of a matai title.</p>	Action
2. Minutes of Previous Meeting:	<p>Resolution The minutes of PHAC held on Wednesday 17th May 2006 were confirmed and approved with no further amendments.</p> <p>Moved: Mr Sefita Haouli Seconded: Mrs Jillian Dooley Carried: All</p>	
3. Matters Arising:	<p>Noted that presentation of Palliative Care Strategy is scheduled for the meeting in July or soon after it is signed off by EMT for Advisory Committee presentation.</p> <p>To invite Stephen McKernan to the next PHAC to farewell him – a joint invitation to all past members will be made.</p>	Subha
4. Procedural Matters	<p>Membership</p> <ul style="list-style-type: none"> - Noted that Seiuli Dr Juliet Walker has resigned due to changes in her work programme. Mr Anae Arthur Anae thanked Seiuli for her contribution to CMDHB not only as a current member of PHAC but also for her work as previous Director of the Board and Chair of PHAC; - Noted that Ms Sosefina Fuimaono has resigned from the Committee due to work commitments - Noted that 2 PHAC representatives for DiSAC needs to be confirmed - Discussions around the criteria to be used to replace the 3 vacancies comprised a balance of ethnic representation, medical /clinical expertise given Seiuli's resignation and youth perspectives and additional disability/mental health expertise; - Mr Anae requested the Committee to forward their suggestions for committee membership to Fepulea'i for processing – a paper with nominations will be presented at the July meeting; - Suggestions for memberships include – <ul style="list-style-type: none"> Ø Mr Philip Beilby, GM, PIASS Trust, previous manager at Pathways with significant experience in mental health, currently managing Pacific disability 	

	<p>and advocacy services;</p> <ul style="list-style-type: none"> Ø Mac Leauanae - Pacific Manager for Procure has a background in Pacific Island business Trust and will be a link with a mainstream organization and he's also involved in youth activities. Ø Heidi Muller – GP at Southseas who works with youth and young people <p>Resolution</p> <ul style="list-style-type: none"> - That the Board approve Ms Malia Hamani's representation on CPHAC. - That the Board approve Mr Nuku Rapana's representation on HAC. <p>Moved: Mr Arthur Anae Seconded: Mr Sefita Hauoli Carried: Unanimous</p> <p>Disclosure of interest</p> <p><u>Disclosure of interest (this list is part of all PHAC minutes)</u></p> <ul style="list-style-type: none"> - Seiuli Dr Juliet Walker <ul style="list-style-type: none"> Ø Director – Southseas Healthcare - CM Pacific Provider, Ø Member of the CMDHB Breast Screening Steering Group, ESSAG & CAG - Mr Sefita Hauoli <ul style="list-style-type: none"> Ø Contracted to the Social Marketing Strategy formation workstream 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 <ul style="list-style-type: none"> Ø Board member of TaPasefika - Mr Michael Chan <ul style="list-style-type: none"> Ø CEO - Southseas Health Care – CM Pacific Provider - Ms Malia Hamani <ul style="list-style-type: none"> Ø Manager, Toa Pacific – CM Pacific provider and involved in the Let's Beat Diabetes initiative - Mr Anae Arthur Anae <ul style="list-style-type: none"> Ø Board member of Phobic Trust - Ms Bernadette Pereira <ul style="list-style-type: none"> Ø Member of the Breast Screening Advisory Group - Mrs Roine Lealaialoto <ul style="list-style-type: none"> Ø Manager – Penina Health Trust – CM Pacific Provider - Ms Stephanie Erick-Peleti <ul style="list-style-type: none"> 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 <ul style="list-style-type: none"> • Member, Council for Manukau Institute of Technology - Mr Pat Snedden <ul style="list-style-type: none"> Ø Business Advisor, Healthcare Aotearoa Inc Ø Chairman Housing NZ Ø Treaty negotiator, Ngati Whatua Orakei Maori Trust Board Ø Deputy Chair ASB Trusts Ø Director Watercare Services Ltd Ø Director Mai 86.6 FM - Mr Paul Cressey <ul style="list-style-type: none"> Ø Chairman Life Education Trust 	
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	<ul style="list-style-type: none"> Ø Trustee South East Auckland Life Education Trust Ø Chairman Health Information Strategy Action Ministerial Committee Ø Chairman Injury Surveillance Ministry Advisory Panel (ISMAP) - Mrs Jillian Dooley Ø Currently employed by CMDHB as an Appointment Coordinator (0.5FTE) 	
5. Committee Updates	- Noted as read and no further questions raised.	
6. Presentation	<p>Update on Regional Health</p> <p>Fepulea'i Margie Apa provided an updated on progress in this area. It was noted that:</p> <ul style="list-style-type: none"> - As per the Board resolutions at the May 2005 meeting, supporting activities in the Pacific region in a planned manner, noted that this has been progressing with Niue, Cook Islands, Tonga and to be established in Samoa. - Tonga <ul style="list-style-type: none"> Ø Scoping visit – September 05 and May 06 Ø Agreement being drafted Ø Focus on capacity building to support the new developments in Tonga. Ø Draft contract awaited from NZ Aid - Samoa <ul style="list-style-type: none"> Ø Expecting to make a visit in August, the DHB's focus will be on capacity building rather than providing medical treatment visits - Cook Islands <ul style="list-style-type: none"> Ø MoU expires end of June. The DHB has experienced some difficulties progressing an evaluation of the MoU to inform its rollover; Ø Information on Cook Island referrals suggests a highly complex and resource intensive but appropriate level of referrals Ø Noted that while those from Cook Islands are eligible for health services, they aren't counted in the PBFF formula and this affects the IDF where high and complex need patients are referred to ADHB for tertiary services; Ø Noted that planned specialist visits will be suspended till the MoU is evaluated; Ø Funding issues for non-resident but eligible patients are to be raised with the Ministry of Health - Niue <ul style="list-style-type: none"> Ø MoU signed on November 2005 Ø Implementation progressing well, provided all services undertaken Ø The work programme for next year is being confirmed. - The Chairman noted that the DHB has commenced a good working relationship with countries in the Pacific and this should be maintained - Noted that it is important to work with the MoH to ensure services are available for those that are eligible to get services here - Noted the DHB is encouraging these countries to focus on population health perspectives and needs analysis to prioritise health resource, starting at policy levels and working with WHO, AusAid and NZ Aid. - Noted that the concept of developing regional specialist 	

	<p>services within Pacific countries is being discussed at the moment</p> <ul style="list-style-type: none"> - At present the cost of treatment at MMH is being absorbed by the DHB - Noted that patients from Cook Islands, Tokelau and Tuvalu have direct access to the health system and they aren't being counted on census night. <p>Pacific Service Plan Update by Fepulea'i Margie Apa</p> <ul style="list-style-type: none"> - The Tupuola Moui Plan has been signed off the board in February - The Board priorities have been captured by the 06/07 DAP which is set out in a 3-year work programme and outlines the services and will also be used for funding allocation - The work programme will be used to determine the agenda for PHAC for 06/07 with regular and scheduled presentations on key milestones of the plan during implementation - Also this will be used to invite comments and feedback from PHAC on anything of importance to the community. - Noted that it is important to communicate this to the community. - Also important to add the community linkage to ensure the information is disseminated <p><i>Noted that the following reporting structure is recommended for PHAC:</i></p> <ul style="list-style-type: none"> - Monthly report against activities and milestones listed above; and - Presentations at key milestones and/or decision points for implementation of plans listed under Outcome 3 including: <ul style="list-style-type: none"> Ø Primary Care Work Programme Ø Let's Beat Diabetes and its work stream Ø Cancer Control Ø Pacific Regional Mental Health & Addictions Plan Ø Oral Health Ø Child and Youth Health Ø Workforce Development - Further progress reports on issues that have historically been of important interest to PHAC: <ul style="list-style-type: none"> Ø Organ donation and renal dialysis project <p>Resolution That PHAC approve the resolution subject to addition of anything else that needs to be included deemed necessary</p> <ol style="list-style-type: none"> 1. agree the reporting process for the 06/07 work programme discussed above. 2. note the attached work programme for 06/07. <p>Moved: Mr Arthur Anae Seconded: Mr Sefita Hauoli Carried: Unanimous</p>	
7. Progress report	<p>LBD – Operational Plan - Presentation by Adrian Field and Amanda Dunlop seeking endorsement for the operational plan.</p> <ul style="list-style-type: none"> - It was noted that some key achievements for 2006/06 as follows: <ul style="list-style-type: none"> Ø Developing programme infrastructure, programme team and external relationships Ø Social marketing strategy and baseline data collection Ø Initiatives such as development of Kai Lelei nutrition 	

	<p>resources, community nutrition education programmes delivered to over 250 Pacific people, community action fund accessing previous unfunded groups, Sprite Zero initiatives in Mc Donalds and the Healthy Tuckshop model</p> <ul style="list-style-type: none"> - The focus of activities for 2006/-07 is implementation – <ul style="list-style-type: none"> Ø Shifting to implementation Ø Building on current achievements, Ø Build leadership in Pacific communities Ø Implementing the social marketing programme Ø Raising the profile of LBD within the CM communities. Ø In response to a concern that this programme might be seen as a DHB driven initiative, membership of PSG to be clarified and included in the plan Ø Noted that SPARC funding will be used to develop physical activity programmes. - In terms of continuing to support Community Leadership and action, the Community fund will be continued, nutrition training in Pacific churches will continue aiming for a further 250 people, develop a physical activity toolkit and extend Heartbeat Challenge workplace health promotion to food industry in CM area. - The social marketing campaign will be rolled out from the Pacific base targeting parents and family members who influence household meals and activities and those who influence the environment in which people live, work and play. - A total number of 300 people from different Pacific groups will be surveyed. - Progressing schools accord – pacific language nests to further implement Kai lelei resource, develop physical activity module for children 5 years and under, extending “Nutrition, Exercise and Weight” programmes to Decile 1 and 2 secondary schools covering 85% of Pacific students. - Involvement of Primary care setting for health promotion activities and as first point of contact, introduce post diagnosis self management education, develop innovative ways of involving Pacific families in primary care and enhancing family support. - Work progressing in other action areas. Activity park, food industry partnership, health promotion workforce, physical activity workforce etc. <p>Resolution That PHAC endorse the Let’s Beat Diabetes Operational Plan 2006/2007</p> <p>Moved: Mr Arthur Anae Seconded: Mr Sefita Hauoli Carried: Unanimous</p> <p>Lotu Moui Operational Plan Presentation by Rachel Enosa-Saseve seeking endorsement for the Operational Plan.</p> <ul style="list-style-type: none"> - The plan will focus on coordinating activities across the programme, - This plan is informed through an extensive consultation and feedback process with Church Ministers, Lotu Moui health Committees, PHAC, Pacific Providers and Funding forum. - The plan outlines six key outcomes for the Pacific Lotu 	
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	<p>Moui community</p> <ul style="list-style-type: none"> Ø Improve nutrition practices Ø Increase physical activity levels Ø Promote healthy weight Ø Reduce smoking prevalence Ø Improve engagement with health systems Ø Implement community education modules <ul style="list-style-type: none"> - Community nutrition education module – focus has been on improving nutrition practices, 7 interactive workshops were held to educate the community on nutritional content of food, food groups, portions, serving sizes etc. 324 people completed this training overall from different ethnic groups. - Noted that a second Lotu Moui symposium is planned for 22nd and 23rd November 2005. The theme for the symposium is “as a Lotu Moui Community where do we want to be 20 years from now”. - A second round of church funding will also be launched and is available to any church in this area. - There will be a strong focus on youth at this symposium with a dedicated youth stream to run parallel to the main symposium workshops. - Youthline is being involved to facilitate the engagement with the younger group. The rationale to involve Youthline is that they’ve worked in this area, have a strong infrastructure, good research information, links with the community and help reach out to the communities. - Also linking with youth streams through MSD to ensure as wide a coverage as possible. - Ms Bernadette Pereira noted that in working with groups like Youthline, it’s important for the DHB to provide opportunities to locally established groups. - Noted that guidelines around contracting/tendering is adhered to strictly. <p>Resolution That PHAC</p> <ul style="list-style-type: none"> - Note that the LotuMoui Operations Plan has been developed collaboratively with Church Ministers, LotuMoui health committees, PHAC, Pacific Providers, Funding Forum and is aligned to CMDHB strategic priorities; - Ratify the content of the LotuMoui Operations Plan; and - Note Wednesday 22nd and Thursday 23rd November 2006 as the dates of the LotuMoui Symposium 2006 <p>Moved: Mr Arthur Anae Seconded: Mr Sefita Hauoli Carried: Unanimous</p>	
8. Information papers	<p>Pacific GM update</p> <ul style="list-style-type: none"> - Circulated and noted as read. <p>Breast Screen Service Implementation Project Update</p> <ul style="list-style-type: none"> - Noted report tabled. - Noted that more detailed statistic is needed for population monitoring. 	
9. General Business:	<p>Mr Arthur Anae has requested the following feedback/update:</p> <ul style="list-style-type: none"> - Report on Pacific patients in the hospitals – numbers and what they’re there for. - Report from providers on what they’re doing to close the 	

	<p>links and ensure Pacific people have access to services.</p> <ul style="list-style-type: none"> - A calendar of different meetings and activities through till December. - A brief paper on PPD funding - Feedback/update on traditional healing - Sustainability conference is scheduled for 7/8 September, currently pulling the key themes, speakers etc. Draft programme will be ready in July - National DHB Pacific Workforce Conference is scheduled for 21st November. Keynote speaker Dr Joan Reed from Harvard Medical School has researched and implemented community based programmes with positive outcomes. She's a renown writer and has linked Workforce Development and reducing inequalities for positive outcomes. - RMO strike – noted that this was dealt well, no pressure for beds, decisions were made promptly. - Noted that its important to link Consumer panel with PHAC to get consumer feedback. 	
10. Adjournment :	The meeting adjourned at 11.55am	
11. Next Meeting:	Wednesday 19 th July 2006, 9.00 to 12.00, Boardroom – Lambie Drive.	
<p>Signed as a true and correct record on the 19th July 2006</p> <p>Chair: Mr Arthur Anae</p> <p>Resolution</p> <p>The minutes of the meeting of the Pacific Health Advisory Committee of Counties Manukau District Health Board of 21st June 2006 are approved.</p> <p>Moved: Mr Arthur Anae Seconded: Ms Jillian Dooley Carried: Unanimous</p>		