

Pacific Health Advisory Committee

Minutes

Of the meeting held on Wednesday, 20 August 2008, from 9am to 12pm in the Manukau Boardroom, CMDHB, 19 Lambie Drive, Manukau City

Attendees	Anae Arthur Anae (AA), Stephanie Erick-Peleti (SEP), Malia Hamani (MH), Sefita Hao'uli (SH), Philip Beilby (PB), Louisa Lavakula (LL), Lope Ginnen (LG), Ruth DeSouza (RDS), Roine Lealaialoto (RL)
CMDHB	Manu Sione (MS), Vicky Tafau
Apologies	Bernadette Pereira, Nuku Rapana, Leau Peter Skelton, Paul Cressey, Michael Chan, Dr Etuate Lui Saafi, Anne Candy

Actions from Previous Meeting	Action Items
Please find the percentage of nurses going into Primary Healthcare – over all and Pacific.	VT
MS and the Pacific Health Division to look at putting together some strategies to see how we can go about preventing Pacific Island people presenting at MMH with incorrect personal details.	MS
MS asked the committee members to comprehensively read the report and there will be a further discussion at the next meeting.	ALL
MS to meet with SH and PB to discuss reducing inequalities.	MS/SH/PB
PHAC would like to know what the scope and direction of future investments are that the MoH are looking at in terms of Carer Support. MH to report back to PHAC.	MH
08/09 DAP to be included in the next months meeting papers.	MS

Welcome	Meeting was opened at 9.15am with a prayer from Malia Hamani. Apologies were accepted.	
Minutes of the Previous Meeting	Amendments to previous minutes: Moved: Louisa Lavakula Seconded: Philip Beilby	
Topics	Discussion	Action Items
Matters Arising	Noted that D Makie contacted AA in regard of the incident in which a male Pacific Islander presented at MMH and identified himself with his cousin's particulars. This also happened with a pregnant Pacific Island woman. Have put alerts out in the media which have been well received. SH advised that this has also happened previously to a pregnant Tongan woman (4 to 5 years ago). Need to look at consent forms provided by MMH being available in a variety of languages, advising patients of the risk of falsely identifying themselves. AA mentioned a program he would like to see implemented whereby Pacific Islanders visiting NZ must pay a compulsory medical insurance if they wish to enter the country. MS and the Pacific Health Division to look at putting together some strategies to see how we can go about preventing this from happening. MS advised PHAC that WFD is top of his list of priorities for in regard to seeing	MS

	<p>how we can have more Pacific Islanders employed throughout the Health System.</p> <p>RL asked if we should be looking further than Risk Management, etc to what responsibility people should have to take for their own health. How much will we invest in community awareness?</p> <p>LG – would like to see PHAC become the link between DHB and Community to ensure the resources/information are reaching the right people/communities.</p> <p>SH – Need to look to Health Programs in collaboration with Pacific Island Health Agencies and Immigration.</p> <p>SH – Bariatric conversation continues from the last meeting. He is of the opinion that we do not promote Prevention enough to our Pacific Communities. Would like to see Ethics as part of our approach. Asked if it could be explained why it is unethical for us to pick non-diabetic people and study them too.</p> <p>SH would like to see further debate around the Prevention issue. Would like to see clinicians views around ethics challenged.</p> <p>PB/SH.MS to work together on a paper that can be presented to the next Board meeting.</p>	
<p>LBD Social Marketing Strategy Brief Christine McKay</p>	<p>Christine McKay introduced herself as the Social Marketing Manager for LBD and PHAC introduced themselves to her as this was their first occasion to meet. This is an insight driven Marketing Strategy and need to be driven.</p> <p>People know about Diabetes as a name of an illness but not necessarily all that it encompasses. It appears to be passed by and ignored.</p> <p>Christine would like to get into the Social Network and via these networks – name Diabetes, offer easy solutions and get the message out there and into the communities.</p> <p><i>PHAC endorsed this Marketing Strategy unanimously.</i></p>	
<p>Reducing Inequalities Siniva Sinclair</p>	<p>Improving Organisation Commitment to Reducing Inequalities in CMDHB. Full presentation attached to the minutes.</p> <p>RDS – attitudinal changes are required – there needs to be an institutional commitment.</p> <p>SH – courage needs to come with the knowledge of how to reduce inequalities for disparities.</p> <p>MS advised that he wanted this discussion brought to the table to see what actions we can put in place around reducing inequalities.</p> <p>MS asked the committee members to comprehensively read the report and there will be a further discussion at the next meeting.</p> <p>MS to meet with SH and PB to discuss reducing inequalities.</p> <p>MS noted that we need to prioritise the issues around clinical decisions.</p> <p>Kirk Mariner (Program Manager, Pacific Health) also noted that we need to reach an understanding about what addressing Health Disparities actually is and how we present that to our Non-Pacific colleagues.</p> <p>Siniva is to present on the upcoming HPV program at the next PHAC meeting in October.</p> <p style="text-align: right;">PB left the meeting at 11.15am.</p>	<p>All MS/SH/PB</p>
<p>GM Report</p>	<p>MS ran through the highlights and key issues outlined in his report.</p> <p>Pacific Return to Nursing Project – has secured permission from the NZ Nursing Council for students that fail one of the four strands of the IELTS exam are now only required to re-sit that one strand, not all four.</p> <p>RL – requested that the DHB work more closely with Pacific Providers in regard to who is attending the courses (although it was noted that this may be a possible breach of privacy). It was suggested that the DHB could suggest to</p>	

	<p>course attendees that they be transparent with their employers.</p> <p>Lotu Moui Games – 27 October. Bruce Pullman Park, Takanini. This will comprise of a series of activities leading up to a day of Games.</p> <p>Lotu Moui to present at the next PHAC meeting.</p> <p>07/08 DAP – 43 actions completed, 6 remain uncompleted.</p> <p>08/09 DAP to be included in the next months meeting papers.</p>	MS
General Business	<p>The Lui Ola Plan was discussed. MoH is asking DHB's and other agencies to each put in \$20K. MoH will support \$ for \$. MS recommended that this needs to continue for 3 years to a minimum of \$400K per year.</p> <p>MH concerned that nothing is happening with the MoH portfolio responsible for implementing this plan.</p> <p>A discussion evolved around the issues for Family Carers. Can this committee pick up the issues that MH is facing and bring her requests to the MoH. MH, as a PHAC committee member was urged to ask the questions of the MoH herself.</p> <p>PHAC would like to know what the scope and direction of future investments are that the MoH are looking at in terms of Carer Support. MH to report back to PHAC.</p> <p>The Pacific Research and Pacific Research Committee discussion was held over until the next meeting due to time constraints.</p> <p>Briefly touched on the development of Western Campus into a training/research/learning & development Centre for Health Innovation. Approximate cost of \$40M.</p> <p>LL would like to have a speaker on Prostate Cancer for Pacific Males. Further discussion to be held in regard to Men's Health at a future meeting.</p>	MH
Conclusion	<p>Meeting closed at 12.05pm.</p> <p>Closing prayer was given by Louisa Lavakula.</p> <p>The next meeting is on Wednesday, 17 September 2008 at CMDHB Offices, 19 Lambie Drive, Manukau City.</p>	

Signed as a true and correct record on **Wednesday, 17th of September 2008.**

Chair: Anae Arthur Anae

Resolution:

The minutes of the meeting of the Pacific Health Advisory Committee of Counties Manukau District Health Board of 20 August, 2008 were approved.

Moved: Malia Hamani

Seconded: Lope Ginnen

Carried: Unanimously