



Minutes

Public session

Meeting of the Community and Public Health/ Disability Support Advisory Committee

held in the Board Room, Fourth Floor, Ward/Administration Building
Whanganui Hospital, 100 Heads Road, Whanganui
on Friday 2 December 2016, commencing at 9.30am

Present

Ms Kate Joblin, Committee Chair
Mr Frank Bristol
Ms Jenny Duncan
Mr Stuart Hylton
Mrs Judith MacDonald
Mr Matt Rayner
Ms Dot McKinnon (ex-officio, board chair)

In attendance

Mr Jon Buchan, Child and Maternity Health Portfolio Manager
Mr Matthew Power, Funding Manager Service and Business Planning
Mrs Andrea Bunn, Senior Portfolio Manager, Mental Health and Health of Older People
Mr Matthew Power, Funding and Contracts Manager
Mrs Julie Patterson, Chief Executive Officer
Mrs Eileen O'Leary, Project Manager
Mrs Jevada Haitana, Associate Director of Nursing
Mr Frank Rawlinson, Chief Medical Officer
Mrs Jennie Fowler, Associate Director Allied Health (part of the meeting)
Mrs Rowena Kui, Director Maori Health
Ms Sue Campion, Communications Manager
Mr Raju Gulab, Finance Manager (part of the meeting)
Mr Mike Bothma, Management Accountant (part of the meeting)
Ms Kim Fry, Director Allied health (part of the meeting)
Ms Shonelle Fergusson, EA to General Manager, Service and Business Planning (*minutes*)

Media

No media representative attended the meeting.

Public

There were two members of the public in attendance.

In attendance

Mr Graham Adams.

Karakia/reflection

Mr Matt Rayner provided a Karakia.

1 Apologies

Apologies were received and accepted from Ms Harete Hipango and Ms Grace Taiaroa.

2 Conflict and register of interests update

2.1 Amendments to the register of interests

Nil

2.2 Declaration of conflicts in relation to business at this meeting

No conflicts were declared.

3 Late items

No late items were advised.

4 Minutes of the previous meeting

It was resolved that:

The minutes of the public session of the meeting of the Community and Public Health/Disability Support Advisory Committee held on 16 September 2016 are approved as a true and correct record with the following amendment:

- That Ms Dot McKinnon was in attendance at the 12 September 2016 meeting.

5 Matters arising

There were no matters arising from the last meeting.

6 Committee Chair's report

There was no chairs report given.

7 Presentation

There was no presentation for this part of the meeting.

8 General Manager Service and Business Planning's report

8.1 Whanganui DHB – Annual Planning for 2016/17

A national planning workshop was held on the 25th November at the Ministry of Health and the following points resulted from the workshop:

- There will be a more streamlined approach to the planning documents
- A shorter document focused on the key priorities
- Integrate current Annual Plan and Maori health plan
- Integrated focus on health equity and deliverables.

The general manager, service and business planning and the director Maori health gave the committee confidence that the integration of both the annual plan and Maori health plans would be a positive for Whanganui, however noting and acknowledging that Hauora a Iwi had expressed a contrary view formally.

A board planning workshop will be held in February 2017, with participation of our PHOs and Iwi governance partner, Hauora a Iwi.

8.1.1 System Level Measures (SLM)

The SLM plan has been approved by the Ministry of Health. The plan is an outcomes based approach to performance measurement that will guide the delivery of constantly improving health services.

The measures themselves are not new and are already included into the Whanganui District Health Board Annual Plan.

High focus on the following measures:

- Ambulatory Sensitive Hospitalisation (ASH) rates per 100,000 for 0-4 year olds
- Acute hospital bed days per capita
- Patient experience of care
- Amenable mortality rates under 75 years.

The SLM plan was discussed and was well received at the last board to board meeting with Hauora a Iwi.

8.2 centralAlliance Strategic Plan and sub-regional initiatives

The General Manager Service and Business Planning's report was included under Section 9.1 - combined items for discussion.

8.3 Health Targets and indicators of DHB performance

8.3.1 Health Target Two – Elective Services

Taken as read.

8.3.2 Health Target Four - Immunisation

Taken as read.

8.3.3 Health Target Five - Better help for smokers to quit

Taken as read.

8.3.4 Health Target Seven - Raising Healthy Kids

This target shows that we have completed the process and completed referrals, including the following:

- Referred and acknowledged
- Under care at the time of the B4SC (so already referred)
- Declined (referral offered but parent/caregiver declines the referral)

The Whanganui District Health Board has the opportunity to ensure all children and their families are supported. It was noted that this was only part of the wider work happening in our region to address childhood obesity and the target should not be looked at in isolation.

8.4 Whanganui Rising to the Challenge

The Health Quality and Safety Commission is progressing the development of a programme that includes improvement approaches in clinical practice and operational systems. The Ministry of Health is also undertaking the 'Fit for the Future' co-development process to explore future models of care of AOD.

The DHB is also working with Platform Trust to test an evaluation framework that is focused on system level change supported by Whanganui Rising to the Challenge. The framework will assesses the current position and can be used to help monitor progress over time.

A committee member noted the children's team philosophy and the mental health manager, quality improvement clinical lead advised that similar work is being done in the youth sector and particularly for the over 65s by applying the principles framed by 'Whanganui Rising to the Challenge'.

A discussion was held and the following was noted:

- Supporting early intervention and prevention
- Strategies in place to support vulnerable children
- Support when and where it is needed
- Providing care to adults to be in a better position to care for their children
- That peer support is a key component of service delivery, noting Whanganui District Health Board has embraced this concept
- Navigating people to healthier lifestyles.

A committee member advised the chair that a scoping paper has been developed to help clarify advocacy, defining the peer support and the principals of peers support and how we can support this regionally. The chair suggested that the committee member provide the paper to be an agenda item for the next regional governance group meeting to be held on 13 February 2017.

8.5 Oral Health Project - update

The general manager, service and business planning advised that the 'Did not Attend' (DNA) project next step is to focus on the DNAs for the child oral health service.

Committee members expressed to the director of Allied Health that the fluoride varnish application in general practice is followed up as soon as possible as part of the improvement project. Following departure of the project lead to another role, a new project lead needs to be identified to progress this work.

8.6 Raising the profile of health promotion across the Whanganui health district

8.6.1 Health in all policies

The general manager, service and business planning advised that this was recently discussed at the board to board meeting held on the 29th November, feedback was well received and a refreshed vision will be developed. This will be an agenda item at the annual planning workshop to be held on 17 February 2017.

8.6.2 Fluoridation – new responsibilities for DHBs

Taken as read.

8.7 Child Health landscape

Taken as read.

Support the child health governance group to keep the momentum continuing.

A committee member advised her role within the children's team governance group and the following comments were noted:

- Membership on this team is at the highest level
- The role of this DHB is to make sure connecting and accessing health services is the very best it can be
- That the child and youth governance group should be connecting the whole health system together, and getting visibility of 'blocks' to a smooth patient journey
- Investment is required in a connected IT system and integrated records
- Child health governance group should look at measures and waiting times.

The chief medical officer advised the committee about 'HealthOne' (a shared care record view) which is a secure record that stores health information, including GP records, prescribed medications and test results. HealthOne came about as a matter of urgency following the Christchurch earthquake. HealthOne is maintained and operated by Canterbury DHB. Whanganui District Health Board has requested a presentation on HealthOne to see if this is suitable for the Whanganui health region.

The committee asked that discussions are also held with Hauroa a Iwi about the strategic direction for child and youth health.

8.8 Financial report

Taken as read.

Combined committee interest commenced at 11.07am.

9 Items of mutual interest to CPHAC and HAC

This section of the meeting commenced at 11.07am

Attending CPHAC and HAC members:

Mr Darren Hull
Ms Dot McKinnon
Mr Frank Bristol
Ms Jenny Duncan
Mrs Judith MacDonald
Mrs Kate Joblin
Mr Matt Rayner
Mr Allan Anderson
Mr Stuart Hylton
Ms Susan Osborne
Ms Julie Nitschke

Whanganui District Health Board staff:

Mrs Eileen O'Leary, Project Manager Planning and Funding
Mr Jeff Hammond, Associate Director of Nursing Mental Health
Mrs Jevada Haitana, Associate Director of Nursing General
Mr Jon Buchan, Portfolio Manager Planning and Funding
Mrs Julie Patterson, Chief Executive
Mrs Rowena Kui, Director Māori Health
Mrs Sandy Blake, Director of Nursing, Patient Safety and Quality
Ms Sue Champion, Communications Manager
Ms Tracey Schiebli, General Manager, Planning and Funding
Ms Andrea Dempsey-Thornton, Cancer Nurse Coordinator
Ms Marama Cameron, Acting Allied Health Manager
Mr Peter Wood-Bodley, Business Manager Surgical Services and Mental Health

General Manager, Service and Business Planning's report

9.1. centralAlliance Strategic Plan and sub-regional initiatives

Renal Services

The general manager, service and business planning gave the committee the background to the renal services development that has been undertaken by Whanganui DHB.

The new renal nurse practitioner role has been well received, and feedback suggests the role has contributed to a number of people being able to remain in our community for treatment.

Progress against the work programme has been good, with many small improvements implemented, to the satisfaction of the consumer advisory group.

In Whanganui, a project manager is assigned to renal services and has been working on the companion piece to MidCentral's review. A steering group meeting is planned for 16 December to discuss next steps.

The general manager, service and business planning advised the committee that support for dialysis in the local community would be explored however some people would always need to travel to Palmerston North for dialysis due to the availability of Nephrologist support. This is not a cost issue,

rather a workforce issue. The option of having a chair in hospital to avoid admitted patients having to travel to Palmerston North will be considered. It is important that this does not create an expectation that all dialysis could be done here, as this would only be suitable for certain patients of low acuity.

Urology

Taken as read.

Laboratory Services

Taken as read.

Women's Health

Taken as read.

9.2 Health of Older People – Update including managing home based support service (HBSS)

Significant changes are underway with the home and community support sector and the following points noted:

- Regularisation of the home and community support workers
- Future sustainable home and community support models
- Implications of pay equity settlement
- 'Scene setting' that will come out of the healthy aging strategy.
- Short term restorative approach.

Advance care planning:

- Advanced care plan discussions need to be articulated well
- The nature of the conversation is important
- Aim to have completed ACP before cognitive impairment sets in.

It was noted that the Whanganui District Health Board has a well driven advanced care planning champion network and this has been one of the keys to success.

9.3 Health Target Three - Faster Cancer Treatment (FCT)

The report was taken as ready and the cancer nurse coordinator gave a quick background of the information that is reported and presented to the Ministry of Health.

Urology:

It was noted that the urology service has improved significantly since having the cancer coordinator role in place which is advocating for the clients and referrals. The committee acknowledged the great work the coordinator is undertaking.

9.3.1 Administration of cytotoxic medication at Whanganui Hospital

MidCentral and Whanganui DHBs are to formalise an agreement that non-complex chemotherapy will be delivered at Whanganui Hospital. It is envisaged that if approval is given this year, the service would be functional in June 2017.

Director Māori Health's report

9.4 Hapai te Hoe Programme

Hapai te Hoe commenced in March 2015 with new staff as part of orientation. In September 2015 the programme was extended to include all existing staff.

The programme is delivered three times a month (including orientation) and will move to four times per month in 2017.

The programme is being rolled out to all the staff with the Whanganui District Health Board. Whanganui UCOL nursing tutors and students have been attending the programme. Board members have the opportunity to go through the programme in January 2017.

The director of Māori health advised that this programme has been very successful and the programme is leading the way to changing the culture of the Whanganui District Health Board to embrace *whānau ora*, to place *whānau/families* at the centre of all that we do and to have our services delivered by staff who are confident working with Māori *whānau* and who understand and acknowledge Māori values and beliefs.

Director of Nursing Report

9.1 Mental health and addictions services

Taken as read.

9.1.1 Infant, Child and Adolescent Mental Health and Addictions Service (ICAMHAS)/SUPP

Taken as read.

9.1.2 Stanford House

The associate director of nursing (mental health/DAMHS) advised that Stanford House continues to have good outcomes. A service user has completed the transition to the community and discharged.

9.1.3 Methamphetamine

Taken as read.

9.1.4 New training directions

The associate director of nursing (mental health/DAMHS) advised that Whanganui District Health Board staff are completing de-escalation training. A new course on physical 'break aways' is being rolled out next month which MidCentral are currently doing, which provides both DHBs with the same training.

Suicide prevention training:

International expert Professor Annette Beautrais will be presenting advanced suicide prevention training to clinicians throughout Whanganui in early December in addition to running a youth suicide workshop for agency staff who work with youth. Annette has also presented advanced training for our clinicians this month.

A committee member asked for ethnicity data to be presented in mental health and addiction service volumes for inpatient units and community mental health services.

Communications report

9.6 November update

The communications manager advised the committee that the Health Quality and Safety Commission has requested to publish four of Whanganui District Health Board's stories in their reports and the Mental Health Foundation have requested permission to publish two of our consumer stories.

This part of the meeting closed at 12.09pm.

10 Information papers

Taken as read.

11. Date of next meeting

The next combined committee meeting is scheduled for 17 February 2017 for the Annual Planning 2016/17 workshop with the Board, WRHN, NHC, HAI and Committees.

12. Whanganui District Health Board – Board minutes of the meeting held on 30 September *(for information only)*

Taken as read.

13. Glossary and Terms of References *(for information only)*

Taken as read.

14. Exclusion of public

It was unanimously resolved that:

The public be excluded from the remainder of this meeting under clause 32, Schedule 3 of the New Zealand Public Health and Disability Act 2000 on the grounds that the conduct of the following agenda items in public would be likely to result in the disclosure of information for which good reason for withholding exists under sections 6, 7 or 9 (except section 9(2) (g) (i)) of the Official Information Act 1982.

Agenda item	Reason	OIA reference
Community and Public Health/Disability Support Advisory Committee minutes of meeting held on 16 September 2016 (public-excluded session)	For the reasons set out in the committee's agenda of 16 September 2016	As per the committee's agenda of 16 September 2016

Agenda item	Reason	OIA reference
Service and Business Planning risk register	To protect the privacy of natural persons, including that of deceased natural persons To protect information where the making available of the information would be likely unreasonably to prejudice the commercial position of the person who supplied or who is the subject of the information To enable the district health board to carry out, without prejudice or disadvantage, commercial activities or negotiations (including commercial and industrial negotiations)	Section 9(2)(a) Section 9(2)(b)(ii) Section 9(2)(i) and 9(2)(j)

Persons permitted to remain during the public excluded session

The following person(s) may be permitted to remain after the public has been excluded because the board considers that they have knowledge that will help it. The knowledge possessed by the following persons and relevance of that knowledge to the matters to be discussed follows.

Person(s)	Knowledge possessed	Relevance to discussion
Chief executive and senior managers and clinicians present	Management and operational information about Whanganui District Health Board	Management and operational reporting and advice to the board
Committee secretary	Minute taking	Recording minutes of committee meeting