

**MINUTES OF THE
COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE MEETING OF THE
WAIRARAPA DISTRICT HEALTH BOARD,
HELD ON TUESDAY 17TH JUNE 2008 AT 9AM
IN THE DHB BOARD ROOM, WAIRARAPA DISTRICT HEALTH BOARD,
BLAIR STREET, MASTERTON**

Present:

Ms Janine Vollebregt (chaired meeting), Mr Perry Cameron, Ms Viv Napier, Ms Liz Mellish and Ms Fiona Samuel

In Attendance:

Ms Joy Cooper (Director Planning and Funding), Mr David Meates (Chief Executive), Mr Eric Sinclair (Chief Financial Officer) Gillian Malton (minute taker)

1. Apologies

Ms Stephanie Turner, Mr Bob Francis, Ms Trish Taylor

2. Conflicts of Interest

Nil

3. Confirmation of Minutes – Meeting of 20th May 2008

Resolved:

THAT THE MINUTES OF THE MEETING HELD ON 20TH MAY 2008 BE CONFIRMED AS A TRUE AND CORRECT RECORD

4. PHO Long Term Conditions Project

Joy Cooper, Director of Funding and Planning, summarised this report and highlighted the following points:

- The PHO have given a revised Long Term Conditions Project Management Plan with timelines for deliverables having been revised.
- Management are to provide feedback to the PHO and request some further detail be included in descriptions of deliverables. The PHO will also be asked to provide information on Maori input into the project.
- Practices continue to make good progress with populating the CDevolution database although some Practices are struggling more than others. Members suggested that a South Wairarapa Practice be invited to give an update at the next meeting.

Resolved:

THAT THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE:

- 4.1 NOTE** THAT THE PHO HAS PROVIDED AN UPDATED VERSION OF THE LONG TERM CONDITIONS PROJECT PLAN, WITH REVISED TIMELINES
- 4.2 REQUEST** THE PHO TO SUBMIT A MORE FULLY UPDATED PLAN THAT DEMONSTRATES MAORI INVOLVEMENT, AND CLEAR LINKAGES BETWEEN PROJECT OBJECTIVES AND DELIVERABLES
- 4.3 NOTE** THAT THE PHO IS EXPECTED TO REPORT PROGRESS AGAINST THE PLAN QUARTERLY
- 4.4 NOTE** THAT THE PROJECT IS CURRENTLY ABOUT A YEAR BEHIND SCHEDULE ACCORDING TO THE ORIGINAL TIMELINES, AND THAT 4 MONTHS OF THIS SLIPPAGE WAS DUE TO THE ESTABLISHMENT PHASE TAKING FOUR MONTHS LONGER THAN EXPECTED, WITH THE OTHER 8 MONTHS SLIPPAGE DUE TO VARIOUS PROBLEMS THAT HAVE ARISEN SINCE CONTRACT COMMENCEMENT.
- 4.5 NOTE** THE PHO NOW INTENDS TO RECOVER THE 8 MONTHS SLIPPAGE SINCE CONTRACT COMMENCEMENT BY COMPLETING PHASE 2 WITHIN 2 MONTHS RATHER THAN THE 6 MONTHS PROPOSED IN THE ORIGINAL TIMELINE, AND THEN COMPLETING PHASE 3 WITHIN 7 MONTHS RATHER THAN 12 MONTHS. THE REVISED PLAN SHOWS THE WHOLE PROJECT WILL NOW WRAP UP IN FEBRUARY 2010 RATHER THAN OCTOBER 2009.
- 4.6 AGREE** THE REVISED PROJECT TIMELINES

5. PHO Performance Data

Joy Cooper summarised this report and highlighted the following:

- This report shows the WCPHO performance against the indicators in the National PHO Performance programme.
- The data available to date shows that WCPHO has generally performed well.
- While the Breast and Cervical Cancer Screening didn't quite meet the target, they are still in line with National averages. There are still some issues around these targets and work is being done to get these into alignment.

Resolved:

THAT THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE:

5.1 RECEIVE THIS REPORT.

5.2 NOTE THAT THE WCPHO HAS GENERALLY PERFORMED WELL IN THE PHO PERFORMANCE PROGRAMME AGAINST NATIONAL BENCHMARKS.

5.3 NOTE CHANGES TO THE PROGRAMME THAT CAME INTO EFFECT FROM THIS PERFORMANCE PERIOD.

5.4 NOTE THAT PLANNING AND FUNDING WILL REPORT ON PHO PERFORMANCE TO CPHAC AFTER THE NEXT SIX MONTH PERFORMANCE PERIOD.

6. Planning and Funding Report

Joy Cooper spoke to this report and highlighted the following:

- The SOI and DAP are now ready for final sign off. A shorter version of the DAP will also be pulled together.
- A HPV Vaccine Clinical Coordinator has been appointed by Public Health to begin the planning for this new programme.
- Information about the implementation of the B4 School Checks is still being released by the Ministry. Planning and Funding are reluctant to rush into the delivery of the checks until the options are fully examined.
- The Ministry of Social Development are looking to fund health checks for children in CYF care. WDHB are interested in being a pilot site for this in conjunction with MidCentral.
- Pharmaceutical Expenditure is running under budget although we are expecting a further update to the PHARMAC rebate forecast prior to the end of the financial year and this will directly impact the year end position on the net pharmaceutical spend.
- According to the official stats, IDFs are favourable. However the real position is unlikely to be favourable because Capital and Coast have not got their cases loaded. Last year Capital and Coast did not get their final cases loaded until after the cut off date for the year end wash-up. T
- The AOD project is nearing the end of its development phase and it is expected that an implementation plan will come to the Committee next month.
- Adult Mental Health services have undertaken a review of their service structure. The new structure will be implemented from 1 July 2008 and it is expected that it will allow workload to be spread more evenly across services. The biggest change being the responsibility for crisis response being shared (on a roster) across the whole of the mental health team.

Resolved:

THAT THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE:

6.1 RECEIVE THE PLANNING AND FUNDING REPORT

7. Report Back from Public Excluded Meeting

The following resolutions were taken in the public excluded section of the meeting:

Resolved:

THAT THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE:

NOTE THAT SOME WAIRARAPA PHARMACIES ARE CONTINUING TO LEVY A \$1 CHARGE PER ITEM IN ADDITION TO THE CHARGES PERMITTED BY GOVERNMENT

NOTE THAT ALL WAIRARAPA PHARMACIES HAVE BEEN ADVISED THAT THE DHB CONSIDERS SUCH CHARGES ARE IN BREACH OF CONTRACT

NOTE THAT ALL PHARMACIES WILL BE ADVISED IN WRITING THAT CHARGES MUST CEASE WITHIN ONE WEEK OR THE DHB WILL INVOKE DISPUTE RESOLUTION PROCESS.

NOTE THAT THERE ARE CURRENTLY 408 AGED RESIDENTIAL CARE BEDS IN WAIRARAPA (252 REST HOME BEDS, 130 CONTINUING HOSPITAL CARE BEDS AND 26 DEMENTIA BEDS).

NOTE THAT OCCUPANCY OF BEDS, ESPECIALLY CONTINUING CARE BEDS, IS HIGH WITH FEW VACANCIES.

NOTE THAT AVAILABILITY OF SHORT TERM BEDS IN AGED RESIDENTIAL CARE IS ESSENTIAL TO SUPPORTING PEOPLE TO LIVE AT HOME

NOTE THAT PROJECTIONS FOR FUTURE NEEDS FOR AGED RESIDENTIAL CARE BEDS EXCEED CURRENT PROVISION.

RECEIVE THE NATIONAL CONTRACT MATTERS REPORT

NOTE THAT THE TERMS AND CONDITIONS UNDER WHICH THE TE OMANGA SPECIALIST MEDICAL TEAM WILL PROVIDE SPECIALIST MEDICAL INPUT TO THE NEW SERVICE FROM 1 SEPTEMBER 2008, HAVE BEEN AGREED, AND THAT THE SPECIALIST MEDICAL INPUT HAS TWO COMPONENTS:

- A WEEKLY CLINIC IN MASTERTON TO REVIEW PATIENTS, AND PARTICIPATION IN THE WEEKLY MULTI DISCIPLINARY PALLIATIVE CARE SPECIALIST STAFF MEETING; AND
- BEING AVAILABLE FOR TELEPHONE ADVICE 24/7 (DOCTOR TO DOCTOR)

NOTE THAT TE OMANGA AND WAIRARAPA PHO HAVE BOTH AGREED TO PARTICIPATE IN THE PALLIATIVE CARE STEERING GROUP THAT WILL BE ESTABLISHED TO PROVIDE CLINICAL OVERSIGHT, AND MONITORING OF THE NEW PALLIATIVE CARE SERVICE

NOTE A TRANSITION PLAN HAS BEEN AGREED AND IS NOW IN ACTION FOR THE CHANGES IN NURSING SERVICE RESPONSIBILITIES BETWEEN TE OMANGA AND DHB NURSES. THIS ENABLES SMOOTH TRANSFER GRADUALLY OVER THE NEXT THREE MONTHS.

AGREE THAT THE DHB REIMBURSE TE OMANGA FOR ACTUAL AND REASONABLE COSTS INCURRED IN EXIT OF THE NURSING SERVICE AND ASSISTING WITH SERVICE PLANNING AND TRANSITIONS, UP TO THE SUM SPECIFIED BY THE COMMITTEE.

RECOMMEND TO THE BOARD THAT IT:

APPROVE THAT, SHOULD THE ADDITIONAL \$1 CHARGES BEING LEVIED BY SOME PHARMACIES NOT CEASE, THE DISPUTE RESOLUTION PROCESS DESCRIBED IN THE PHARMACY SERVICES AGREEMENT BE INVOKED.

The meeting concluded at 11.55pm

Signed: _____
Chairman

Date: _____