

**MINUTES OF THE
COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE MEETING OF THE
WAIRARAPA DISTRICT HEALTH BOARD,
HELD ON TUESDAY 14 JULY 2009 AT 9AM
IN THE BOARD ROOM, WAIRARAPA DISTRICT HEALTH BOARD,
BLAIR STREET, MASTERTON**

Present:

Bob Francis (Chair), Janine Vollebregt, Trish Taylor, Viv Napier, Fiona Samuel, Perry Cameron, Liz Mellish

In Attendance:

Tracey Adamson (Chief Executive), Joy Cooper (Deputy Chief Executive), Simon Everitt (Director Planning and Funding), Eric Sinclair (Chief Financial Officer), Stephanie Turner (Director Maori Health), and Jen Bergantino (minute taker)

1. Apologies

No apologies were received.

2. Conflicts of Interest

No conflicts of interest were recorded in relation to the agenda.

3. Confirmation of Minutes – Meeting of 16 June 2009

Resolved:

THAT THE MINUTES OF THE MEETING HELD ON 16 JUNE 2009 BE CONFIRMED AS A TRUE AND CORRECT RECORD WITH MINOR AMENDMENT.

4. Six Monthly Report to Regional Public Health

Tracey Adamson summarised this report and highlighted the following points:

- Under the Wairarapa District Health Board's (DHB) contract with Regional Public Health (RPH) the Wairarapa Public Health Unit is obliged to provide a six monthly report. This report is a snapshot of the last six months as reported to Regional Public Health.
- The Wairarapa Public Health Unit will be making a submission on the South Wairarapa Fluoridation Health Impact Assessment (HIA) as part of the Long Term Community Council Plan (LTCCP).
- Two Councils, South Wairarapa and Carterton, are considering adoption of Smokefree public places.
- The Committee sought clarification on the monitoring of dairies selling cigarettes.
- New Zealand now has the third highest obesity rates in the World. The Wairarapa DHB led the country with Healthy Eating Healthy Action (HEHA) initiatives and it has been disappointing to hear that the Government has recently changed food regulations in school canteens.
- RPH reported that there has been limited progress in supporting the Pacific community with HEHA initiatives. Even though they are a small population it is still important that they are given the support in ensuring a healthy lifestyle.
- The Committee is concerned that Colgate New Zealand will only provide oral hygiene products to Plunket and would like to see "other" services who provide Wellchild Services also being able to access oral hygiene products.
- Victoria Brown, HEHA Education Co-ordinator, is making good progress working with the Kura, Whaiora Whanui and Wairarapa Public Health Unit in developing a Memorandum of Understanding to allow a range of health services to access the Kura. Simon Everitt to follow-up and report back on progress.

- The issue of improving and maintaining the quality of drinking water supplied to rural communities is a very important issue though the cost related to maintaining quality drinking water is high.
- The Wairarapa DHB will continue to build its relationship with RPH. There are ongoing relationship meetings however these have recently not taken place due to the H1N1 out break.
- Bob Francis will follow up with Fran Wilde of Greater Wellington Regional Council (GWRC) on the Ruamahanga River submission and report back to the Committee.
- The Wairarapa Public Health Unit staff have attended a range of work force training opportunities in the past six months.
- Overall the Committee found this to be a good report and requested that future reports are broadened to cover information from relevant services to Regional Public Health and the DHB.

Resolved:

THAT THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE RECEIVE THE COPY OF THE SIX MONTHLY REPORT TO REGIONAL PUBLIC HEALTH FOR JANUARY - JUNE 2009 FROM THE PUBLIC HEALTH UNIT UNDER THE CONTRACT.

5. Six Monthly Report on progress against the Mental Health and Addiction section of the Wairarapa District Health Board District Annual Plan 2008/09

This is a regular six monthly report to the Board. Simon Everitt reported back and the following points were noted:

- The Wairarapa has a range of well established mental health services which are performing well.
- Te Whare Atawahi and King Street services provide day activity programmes which are very well attended and support a large number of mental health consumers in the community.
- There has been a drop in patients accessing acute services which may be related to the range of community support available to mental health consumers
- Child and Adolescent Mental Health Service (CAMHS) are doing good work with young people but there has been a drop off in access rates over the past two quarters.
- The recruitment of four Maori mental health positions which have been vacant for some time across mental health services are on hold.
- There has been a very consistent use of the Mental Health Line. The Committee would like to see this information broken down by ethnicity.
- Additional packages of care have been funded for the To Be Heard service in 2008/09 due to a greater number of people accessing this service.
- HEADSS assessment - The assessment programme is very good but the resources to deal with issues once high needs children have been identified is limited. Social work resource to address this will be further explored in 2009/10.
- The DHB still needs to work on drawing links between aged care and mental health services to better support patients with both mental health and age related conditions.
- Adult Mental Health services are now fully staffed.
- There has been an increase in the inpatient admission bed days out of the region however the number of patients has not increased indicating that there are a small number of patients being admitted out of the region with an increased length of stay / higher complexity.
- A six month trial to assess the needs of children with high and complex needs who are under the care of the Paediatric service is underway. CAMHS staff are involved in completing psychometric testing of these children.
- There has been increased engagement between Te Hauora, Adult Mental Health Services and CAMHS.

Resolved:

THAT THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE:

1. **NOTE THAT:**

- THERE HAS BEEN EXCELLENT PROGRESS IN ACHIEVING THE 2008/09 MENTAL HEALTH AND ADDICTIONS DISTRICT ANNUAL PLAN (DAP) OBJECTIVES
- ALL PROVIDERS ARE MEETING CONTRACTUAL REQUIREMENTS FOR SERVICE DELIVERY AND UTILISATION
- THERE HAS BEEN A DOWNWARD TREND IN ACCESS RATES TO ACUTE SERVICES OVER THE PAST TWO QUARTERS. THIS SITUATION IS BEING REGULARLY REVIEWED AND MONITORED TO IDENTIFY ANY POTENTIAL BARRIERS TO SERVICES THAT COULD BE LINKED TO THIS
- THERE ARE NO FINANCIAL OR SERVICE PROVISION RISKS WITHIN THE NGO SECTOR IN THIS PERIOD
- IN THIS PERIOD, THE DHB PROVIDER HAS STRUGGLED TO REMAIN WITHIN BUDGET DUE TO THE HIGH COSTS OF PSYCHIATRIC SERVICES. THE PROVIDER IS WORKING TO ADDRESS THIS THROUGH RECRUITMENT PROCESSES AND IS OPTIMISTIC THAT IT WILL BE ABLE TO REDUCE THESE COSTS BY THE SECOND QUARTER OF THE 2009/10 YEAR.

2. **APPROVE THE REPORT**

3. **NOTE THAT INFORMATION OF FUTURE FUNDING TRACK (FFT) FUNDING FOR MENTAL HEALTH PROVIDERS WILL COME BACK TO THE COMMITTEE FOR CONSIDERATION**

6. Planning and Funding Report – July 2009

Simon Everitt summarised this report and highlighted the following points:

- The DHB's Statement of Intent (SOI) was tabled at Parliament on 3 July 2009.
- The DAP is currently with the Minister's office and has yet to be signed.
- Pharmaceutical budget for end of year is \$239,000 or 2.3% adverse to budget but it continues to grow annually at over 9%.
- Inter District Flows (IDFs) are (\$1.3m) adverse to the end of April. As 66% of this activity is for elective work the DHB anticipated receiving additional funding from the Ministry of Health.
- Funder financial position –The Funder year end result has come in slightly favourable but final results are still to be finalised.
- The additional dementia level beds at Kahandar Court are reported nearly full. Management will be working with the provider over the next week seeking an update on occupancy.
- The DHB is in ongoing contact with Foot Mechanics, who provide the podiatry service in the Wairarapa, to monitor the ongoing high demand for Podiatry services.
- The Senior Leadership team recently approved the appointment of an additional nurse to support the Oncology Nursing Service. Management anticipate the position will be recruited to by September 2009.
- The Ministry of Health has approved the Wairarapa DHB's Primary Care After Hours Plan and management will be meeting with the PHO in the next week to look at how the plan can be implemented. This will result in lower weekend fees for a targeted group of patients.
- Committee members raised concern over the lack of after hours Pharmacy services in the South Wairarapa. Pharmacy Hours after hours will be reported back to the Committee.
- The Wairarapa DHB has succeeded in achieving the target for the B4 school checks for 2008/09. Wairarapa DHB was one of only four DHBs to meet or exceed its target. The Committee were

delighted with the result. Over 137 children have had onward referrals to other services such as oral health services or have been brought up to date with immunisations as a result of these checks.

- The Ministry of Health is looking at deferring the District Strategic Plan (DSP) to June next year. Tracey Adamson will be indicating this to other Central Region DHB CEOs to get agreement on this. The Board is very supportive of this approach.

Resolved:

THAT THE COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE RECEIVE THE PLANNING AND FUNDING REPORT FOR JULY 2009.

Move into Confidential Business

Resolved:

THAT THE PUBLIC BE EXCLUDED FROM CONFIDENTIAL BUSINESS ITEMS LISTED WITHIN THE COMMITTEE MEETING AGENDA PURSUANT TO THE FOLLOWING:

1. TO ENABLE THE COMMITTEE TO DELIBERATE IN PRIVATE ON ITS RECOMMENDATIONS.
2. WITHHOLDING OF INFORMATION IS NECESSARY TO MAINTAIN THE EFFECTIVE CONDUCT OF PUBLIC AFFAIRS THROUGH THE FREE AND FRANK EXPRESSION OF OPINIONS BY OR BETWEEN OR TO MEMBERS OR OFFICERS OR EMPLOYEES OF ANY LOCAL AUTHORITY.

The meeting concluded at 10.25am.

Signed: _____
Chairman

Date: _____