

**MINUTES OF THE MEETING OF THE
NORTHLAND DISTRICT HEALTH BOARD
COMMUNITY & PUBLIC HEALTH AND DISABILITY
SUPPORT ADVISORY COMMITTEE**

**HELD ON MONDAY 27 MARCH 2017
IN THE WAIPOUA ROOM, TOHORĀ HOUSE, WHANGAREI HOSPITAL**

COMMENCING AT 10.45AM

CPHAC/DiSAC

Libby Jones (Chair)
Sue Brown
Beth Cooper
Colin Kitchen

Sally Macauley
Sharon Shea (via teleconference)
Beryl Wilkinson
Jonny Wilkinson

IN ATTENDANCE

Nick Chamberlain, Kathryn Leydon, Sam Bartrum, Marion Bartrum, Stephen Jackson, Sarah Hunt (minutes)

APOLOGIES Craig Brown

MOVED Colin Kitchen : SECONDED Sally Macauley

CARRIED

CONFLICTS OF INTEREST – The Chair reminded Committee members that in keeping with agreed protocol, conflicts of interest should be declared on a meeting-by-meeting basis as issues arise.

1. COMMITTEE MINUTES

1.1 That the minutes of the CPHAC/DiSAC meeting held on 19 September 2016 be approved.

MOVED Colin Kitchen: SECONDED Beryl Wilkinson

CARRIED

1.2 Matters/Actions Arising

MSD social report

- No further action has occurred. Expecting the regional work will be done in 2017.
- Report back to this committee at a later date.

Homelessness in Northland

- Paper taken as read.
- Ambulatory Sensitive Hospitalisation (ASH) admissions – working with paediatrics on childhood ASH rates. ASH rates often associated with inadequate housing, overcrowding rather than homelessness.
- Noted increasing numbers of young people being homeless.
- Northland Intersectoral Forum (NIF) has a report on housing, challenge is number of different agencies involved. Still working through the new process.
- Shortage of accessible housing. Whangarei Accessible Housing Trust provides some housing stock, however they don't have data on what the need or overall level of stock is.
- Data is old.
- Commend Public Health unit for their response to emergency housing.
- **Committee to write to NIF and request an update on its plan regarding housing, including homelessness, accessible housing and housing for older people, throughout Northland.**

Contracting local suppliers for food sourcing within the DHB

- Requested all suppliers articulate strategies for local food sourcing for contracts.
- Encouraged local food suppliers to apply.
- Will still be requirement around local sourcing of food.

2. CHAIR'S REPORT

- Referenced the Terms of Reference for the Committee. Chair encouraged all to review and look at function and responsibilities of the Committee.
- Confirmed that this is a Committee that advises the Board in relation to a broad range of issues.
- Previously has been focused on presentations, understanding current issues and then making recommendations to the Board.
- There is a Health Services Plan and previously agreed that would be the focus. Currently in the process of closure of that (ends 2017) with evaluation at the end of the year. New health services plan to be developed and the Committee will be very involved in that.
- Need to have a strategic approach, but at the same time will be areas members are particularly interested in.
- Consumer Council and their role discussed. The Council consider operational aspects.
- Over the next few years will build new Whangarei Hospital, will need Committees' input for that.
- Northland Health Services Plan is available on the website (click [here](#)).

IT WAS MOVED that the report be received.

MOVED Sally Macauley: SECONDED Beryl Wilkinson

CARRIED

3. SYSTEM PERFORMANCE

3.1 Northland Health Services Plan Update

- Changes made to 5 major projects
- Management of Patient and Whanau Centred Care has transitioned to Patient Safety and Quality Improvement Directorate. Governance is now Clinical Governance Board.
- The two sub projects of the Integrated Urgent Care project have transitioned to the Neighbourhood Healthcare Homes (NHH) and Whangarei Hospital Urgent Care programmes of work.
- NHH project is closed as a project and transitioned to implementation programme.
- Two new projects have commenced - the NHH Integration/Care Coordination project and the Digital Technologies project. Integration project change facilitator and project manager for that project started last Monday.
- Change facilitation for NHH has completed work with The Doctors Kerikeri. Change plan approved.
- Will provide evaluation throughout the project, together with benefits realisation. Rural SLAT and Auckland University will do evaluation.
- Expression of Interests for next tranche of NHH practices will be run in May and June, with a selection process following.
- **A copy of the original NHH Business Case to be sent to committee members.**
- Bush Road Medical Centre, The Doctors Kamo (formerly Widdowson Sprague Medical), West End Medical Centre, Te Hiku Hauora, The Doctors Kerikeri (formerly Kerikeri Medical Centre) and The Doctors Tikipunga (formerly Paramount Medical) are in the first tranche of 6 practices.
- Discussion regarding house bound people and those unable to attend their GP. Would like to see viability of an early response team investigated for house bound people. Must be a balance as much more expensive to provide care at home.
- Model of care of NHH is about redesigning how to provide services to ensure they are closer to home, and can be provided by one person, rather than a multitude of people.
- Whanau Tahi (shared care plans) and uploading the details from all practices will support this. Will be able to identify the most at risk population (5-6%) and they will have shared care plans. Query raised on how this fit with Manage My Health and referrals. IFHC in Dargaville consider Manage My Health to be a success. Everyone involved with a patient has access to a shared care record.
- There is a Patient Portal associated with Whanau Tahi so patients can see their plan. Very patient focussed and the patient has to be involved with the development of that plan.
- Large number of NGOs involved with CareSelect, GPs can refer directly via secure messaging.

- Many abbreviations in the report that don't correspond with the abbreviation list. This will be rectified in future reporting.
- Programme reports very helpful and informative. Respiratory ASH readmissions – good to see the readmissions reported over time and to be able to see how the project is going with reducing admissions. **Would like more data in future reports.**
- Noted a number of items are under active management – queried whether the steps outlined in the report will bring them back on track. Discussed. GM Planning, Outcomes, Integrated Care & District Hospitals will provide reports at appropriate times to show progress.
- Would like to see expected completion dates for the other projects detailed, particularly the dental project to do with fluoride varnish. A draft final report of the project will be reported at a future meeting.
- Child health integrated platform is queued for implementation. Northland is working as part of the Northern region for this project. There is a regional cost involved but this project essential for integration of various providers.
- Would like to receive an evaluation report and next steps planned for the pregnancy hapu wananga project.

3.2 Northern Region Health Plan Update

- The Ministry of Health requires DHBs to report on a number of targets each quarter.
- NRA prepares part of that report, based on detail the Ministry issues each quarter
- That report is distinct from the reporting NDHB provides.
- NRA report is very focussed on Auckland metro DHBs with not much mention of Northland, the balance is not correct. This is a consistent theme. **Letter to be sent to NRA regarding this.**
- **The Committee requested a brief summary of Northland data from the report** for future- detailing relevance to Northland, successes and issues.
- Report to the Board are the minutes from this meeting which the CPHAC/ DiSAC Chair will talk to.

4. INFORMATION PAPERS

4.1 Public and Population Health Services Update

- Taken as read
- Environmental health officers contracts discussed.
- Far North District Council and Kaipara District Council had previously contracted Northland DHB to provide those services. Part of TLA approach. Both Councils have now taken those functions back in house. Services continue.
- **Committee to write a letter to Dr Clair Mills to thank her for the advice, guidance and presentations over the years.**
- Reduction in rates of rheumatic fever a great success for Northland. Strep throat testing still occurring. Understand the rate of strep throat has stayed the same. Significant decline in rheumatic fever. Has gone from 17 cases per year to zero.

4.2 Disability Support Services Newsletter November 2016

- Taken as read

4.3 Disability Support Services Newsletter December 2016

- Taken as read

4.4 Disability Support Services Newsletter February 2017

- Taken as read
- Would like to see more discussion in this Committee around general services NDHB delivers and the appropriateness towards disabled people.
- Current reporting feels like a tokenistic gesture towards DiSAC committee.
- New Health Plan will contain some deliverables for disability accessibility. Will be making general services more acceptable to disabled people in two areas: non disabling built environment which would come under the Site Master Plan, and non disabling culture within the organisation. Would like to see this in the reporting.
- Requested that Jonny provide advice and a framework on what to report to this committee to make it

meaningful. GM Planning, Outcomes, Integrated Care & District Hospitals to confirm portfolio responsible for reporting.

- Recognise that NDHB has a bit to learn.
- Committee agreed to leave the newsletters out moving forward.
- DiSAC focus is on general services that DHB provides being acceptable to disabled people access.
- Look at current disability trajectory and work with Jonny on providing a report.
- Link in and find out what is happening at Far North District Council and Whangarei District Council, however note that we're focussing on health services. Suggested that Kaipara District Council be included in this as well.
- Following investigation with Councils, look at services we fund.
- Consider older people too as part of this.

5. GENERAL BUSINESS

5.1 Whangarei Hospital Site Master Plan – Consumer Engagement and Disability Advice

- Consumer Council don't currently have disability representation. Check with Committee regarding conflict of interest as operationalizing.
- Consumer Council will provide consumer and disability advice. This committee to then monitor that.

5.2 Work Plan

- Draft a work plan for the Committee.

- Older people who live alone don't get subsidised services.
- Have set up a volunteer system but hasn't had a huge uptake. Committee would like to reflect next time on how to use that more and get progress.
- Innovative website and system has been set up to encourage volunteering – Hands up – linked in with Volunteering Northland.
- **Report to be prepared for the next meeting with presentation.**

6. NEXT MEETING DETAILS

The date of the next meeting is: Monday 26 June 2017 10.45am, Waipoua Room, Tohorā House, Whangarei Hospital.

There being no further business the meeting closed at 12.32pm

Confirmed that these minutes constitute a true and correct record of the proceedings of the meeting

CHAIR

DATE