

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

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**HELD ON MONDAY 25 JUNE 2018  
IN THE WAIPOUA ROOM, TOHORĀ HOUSE, WHANGAREI HOSPITAL**

**COMMENCING AT 10.30AM**

**CPHAC/ DiSAC**

Libby Jones (Chair)  
Sue Brown  
Craig Brown  
Sharon Shea via VC

Jonny Wilkinson  
Sally Macauley  
Beryl Wilkinson

**IN ATTENDANCE**

Nick Chamberlain, Warren Moetara (part), John Wansbone, Kathryn Leydon, Dr Mike Roberts (part) and Paula Douglas (minutes)

**APOLOGIES**

Colin Kitchen  
Beth Cooper

**CONFLICTS OF INTEREST**

None noted

**COMMITTEE MINUTES**

**IT WAS RESOLVED** that the minutes of the CPHAC/DiSAC meeting held on 26 March 2018 be approved.

**MOVED: Sally Macaulay      SECONDED: Beryl Wilkinson  
CARRIED**

**2.1 Matters/Actions Arising**

Jonny Wilkinson was congratulated on behalf of the Committee for the MNZM he was awarded.

- *'Informal carers' to be added to NRHP as well as 'formal carers'.*
  - Actioned
  - Concern was expressed regarding the use of the word 'elderly' in reporting. The preference is the term 'older people', or 'older old' be used. Language does matter. It was agreed that while this should be considered in internal documents there can be no influence over external reporting.
  
- *Auckland University Neighbourhood Healthcare Homes Evaluation Report*
  - Agenda item, paper tabled.
  - Purpose of report was to support continuous improvement
  - Methodology was qualitative, interviews were undertaken
  - Practices are supportive and engaged
  - Feedback from practices suggests the initiative has transformed the way they operate
  - Enabled efficiency
  - No patient survey has been undertaken as yet

- *EY Outcomes Evaluation Report on Pinnacle Midlands HCH Model*
  - EY completed an evaluation of the Pinnacle Midlands HCH model.
  - Highlights reduced presentations at ED but it is noted that reporting has not compared like for like. An evaluation of EY's evaluation has also been commissioned.
  - Recognised that this is a journey and there is still a lot to do. Main driving focus is to not make things any worse for patients. The report has provided some useful feedback.
  - **List of general practices in the NHH programme to be reported to next meeting.**
  
- *Update on early draft of implementation framework for NZ Disability Strategy*
  - Point 2.2.2
  - Ministry of Health has provided feedback on implementation of the strategy but concern expressed on whether this is fit for purpose. A belief that a checklist is not going to change any organisational culture.
  - Suggested that NDHB take leadership regarding disability, appropriate customer service to disabled persons
  - NDHB will be asked to socialise the concept of having dedicated FTE to undertake the organisational disability awareness training, to be cost neutral in the short to medium term.
  - **A paper outlining concept to come to the next CPHAC/DiSAC meeting.**

### 3.0 CHAIR'S REPORT

- Offered 'The Good Doctor' by Dr Lance O'Sullivan to Committee members.
- The Committee acknowledge Dr O'Sullivan and his work and advocacy with iMOKO.

### 4.0 SYSTEM PERFORMANCE

#### 4.1 Northern Region Health Plan (NHSP) Update

- Report taken as read
- 7 out of 10 targets met or exceeded
- Point 6 on the progress on the top 10 commitments – Patients are transferred directly to Auckland – STEMI bypasses help patients significantly
- STEMI bypass is a new project, considered innovative
- The occurrence of unwanted teenage pregnancies have reduced.
- New Telestroke service being launched to enhance current access to specialist services for patients suspected of suffering acute stroke.
- Positive feedback has been received in relation to the NDHB stroke unit.

#### 4.2 Public and Population Health Services Update

- Report taken as read.
- A lot of input into national and regional policies, submissions and resource consents has been made.
- Significant work has been undertaken in Dargaville associated with proposed Tegal site - potential pollutions such as noise, odour and leeching of toxins into the water table. A hearing is due 8 August 2018.
- Health Promoting Schools – schools still have the right to operate a tuck shop that includes sugary drinks and unhealthy food items.
- NDHB has done a lot of work supporting the 'water only schools' initiative.
- The only way schools can enforce water-only is by way of government policy.
- **Discussion on whether NDHB can take a leadership role in promoting healthy lifestyles programmes. PHU to prepare paper for CE and report back to Committee on progress.**

- **Percentage uptake of HPV vaccination was queried. Requested for next meeting.**

## **5.0 INFORMATION UPDATES**

### *5.1 Spinal Cord Impairment Service: Presentation Dr Mike Roberts, Chief Medical Officer*

- Spinal cord impairment is 'acute spinal cord impairment' a process which suddenly results in the spinal cord not functioning, causing loss of total sensation or in certain parts of the body.
- Usually result of trauma or pathological disease which weakens the spinal column and causes collapse on the spinal cord.
- Prompt treatment can assist with recovery.
- Northland's resource has been sub-optimal prior to 2014.
- A number of reviews have taken place in the service to improve spinal care.
- NRA led a piece of work to bring together the Auckland and Counties Manukau DHB service to provide a '2 hour' service. Waikato service was also brought to this.
- Rehab service is also provided by Counties Manukau DHB
- There is a single regional unit based at CMDHB.
- There is referral and retrieval criteria established providing a reliable on call system.
- Regional Spinal Cord Impairment Centre – Middlemore Hospital
- Outcome is improved if care is given in an appropriate time frame. A favourable outcome may be time critical.
- Estimate and plan for future across a 5 year period.
- A rebuild of the Otara spinal unit is planned.
- Approx 5-10 Northlanders a year are using this service.
- The service is open to all ages however children still go to Starship Children's Hospital.

### *5.2 Primary Care Integration Initiatives*

- Taken as read
- Calderdale Framework is rolled out in pockets of NZ, NDHB is adopting this framework
- **Further paper on the Calderdale Framework to the next meeting.**

## **6.0 NEXT MEETING DETAILS**

The date of the next meeting is 24 September 2018 at 10.30am in the Waipoua Room, Tohora House, Whangarei Hospital.

There being no further business the meeting closed at: 11.54am

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**CPHAC/DiSAC CHAIR**

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**DATE**