Distribution:

Board Members:

P Lockett

N Volzke

A Brown

R Bruce

H Duynhoven

B Gibson - Deputy Chair

R Handlev

T A Hohaia - Chair

D Lean

K Nielsen

A Tamati

P Bodger

Management:

Chief Executive

General Manager Finance / Commercial General Manager Planning, Funding &

Population Health

Chief Operating Officer

Chief Advisor Maori Health

Chief Medical Advisor

Quality Risk Manager

Director of Nursing

PA to Board

Internal Auditor

Advisors:

C Gates-Thompson, Media Advisor

P Franklin, Legal Advisor

P Mayes, Relationship Manager, MoH

TARANAKI DISTRICT HEALTH BOARD

AGENDA

COMMUNITY & PUBLIC HEALTH ADVISORY COMMITTEE/DISABILITY SUPPORT ADVISORY COMMITTEE

ORDINARY MEETING

Wednesday 30 May 2018 1.00pm

Council Chambers
Stratford District Council
61 – 63 Miranda Street
STRATFORD

Agenda available on Taranaki DHB website (www.tdhb.org.nz)



COMMUNITY PUBLIC HEALTH ADVISORY COMMITTEE and DISABILITY SUPPORT ADVISORY COMMITTEE

Wednesday 30 May 2018 1.00pm

Council Chambers, Stratford District Council 61 – 63 Miranda Street STRATFORD

| | | Action |
|---|---|--|
| 1 | Meeting Opening – Karakia | |
| | Kia Uruuru Mai | |
| | Kia uru-uru mai a hau-ora, a hau-kaha, a hau-māia ki runga, ki raro, ki roto, ki waho rire-rire hau, pai marire | |
| 2 | Apologies Resolution That the Community Public Health Advisory Committee and Disability Support Advisory Committee receive and note the apology from Aroaro Tamati and Harry Duynhoven (Committee Members) | |
| 3 | Public Comment | Verbal |
| 4 | Interest Register Members to verbally advise all changes to the interest register, and amend the register circulated; and Members to verbally advise the Chair of any conflict with any matter that is part of the agenda papers. | Verbally advise Chair Verbally advise Chair |
| 5 | Chairman's Report | Verbal |
| 6 | Attendance Schedule | Noting |
| 7 | Presentation - Health in All Policies Presenter: Bevan Clayton-Smith | Noting |
| 9 | Minutes – CPHAC and DSAC Meeting 9.1. Minutes of Meeting held on 28 March 2018. | Resolution |

May 2018 - CPHAC DSAC Agenda

| | Resolution That the Minutes of the Community Public Health Advisory Committee and Disability Support Advisory Committee meeting held on 28 March 2018 be received as a true and accurate record. 9.2 Matters Arising | |
|----|---|--------|
| 10 | General Business | |
| 11 | Date of Next Meeting | |
| | Next meeting 25 July 2018 (Venue TBC) | Noting |
| | Karakia | |
| | Kia Uruuru Mai | |
| | Kia uru-uru mai | |
| | a hau-ora, a hau-kaha, a hau-māia | |
| | ki runga, ki raro, ki roto, ki waho | |
| | rire-rire hau, pai marire | |

Attendance Records 2017 - 2018 TDHB Community Public Health Advisory Committee Meetings

| Date | 2619 | 712017 | 29/2017 | 1/2017 | 33/2018 | 5512018 C |
|-------------------------|------|--------|---------|--------|---------|-----------|
| СРНАС | | | | | | |
| Pauline Lockett | ✓ | ✓ | ✓ | ✓ | | |
| Alison Brown | ✓ | ✓ | ✓ | ✓ | | |
| Rose Bruce | ✓ | Α | ✓ | ✓ | | |
| Harry Duynhoven | ✓ | Α | ✓ | ✓ | | |
| Bev Gibson | ✓ | ✓ | ✓ | ✓ | | |
| Richard Handley | ✓ | ✓ | ✓ | ✓ | | |
| Te Aroha Hohaia - Chair | ✓ | ✓ | ✓ | ✓ | | |
| David Lean | ✓ | ✓ | ✓ | Α | | |
| Kevin Nielsen | ✓ | ✓ | ✓ | ✓ | | |
| Aroaro Tamati | ✓ | ✓ | Α | Α | | |
| Neil Volzke | ✓ | ✓ | ✓ | ✓ | | |
| Co-Opted | | | | | | |
| Pat Bodger -TWPK | | | ✓ | ✓ | | |

| KEY | |
|-----|----------|
| ✓ | Attended |
| А | Apology |
| LOA | Leave of |
| LOA | Absence |
| AB | Absent |



COMMUNITY & PUBLIC HEALTH / DISABILITY SUPPORT ADVISORY COMMITTEES

MINUTES - PUBLIC (Unconfirmed)

Wednesday 28 March 2018 1.00pm Owae Marae 16 North Street WAITARA

Present

Te Aroha Hohaia (Chair), Alison Brown, Rose Bruce, Harry Duynhoven, Bev Gibson, Richard Handley, Pauline Lockett, Kevin Nielsen, Neil Volzke.

In Attendance

Rosemary Clements (Chief Executive), Becky Jenkins (General Manager Planning, Funding & Population Health), Ngawai Henare (Chief Advisor Māori Health), Cressida Gates-Thompson (Communications Manager), Patsy Bodger (TWPK representative), Rawinia Leatherby (TWPK representative), Tammy Taylor (Minute Taker).

Invited Attendees:

Rawiri Doorbar, Graeme Eager-Savage and Barb Purdie (Pinnacle Midlands Health Network), Vicky Dombroski (Waitara Alive), Bob Mahy (North Taranaki Healthcare Trust), Jez Morris (Waitara Health Centre), Margaret Helms (Waitara Pharmacy)

998.0 Welcome

The meeting was opened by Rawiri Doorbar.

Ms Hohaia welcomed Committee Members and guests and explained the format for the meeting.

999.0 Apologies

The apologies from David Lean, Aroaro Tamati (Committee Members), Te Pahunga Davis, Greg White and Ngapari Nui (Te Whare Punanga Korero) be received and noted.

Gibson/Duynhoven Carried

1000.0 Public Comment

Nil

 $2018\text{-}03\text{-}28_\text{CPHAC}\,/\,\text{DSAC}\,\,\text{Minutes}$

1001.0 Interest Register and Conflicts of Interest Register

Members were asked to verbally advise all changes to the Interest Register and amend the register circulated; and members to advise the Chair of any conflict with any matter that is part of the agenda papers.

Changes to the register were noted as below:

- Kevin Nielsen (add) President, New Plymouth Riding for the Disabled
- Rose Bruce (add) Supervisor for Students, Auckland University
- Pauline Lockett (add) Trustee. Ngati Te Whiti Whenua Topu Trust
- Patsy Bodger (add) Hospice Board

1002.0 Chair's Report

Nil

1003.0 Attendance Schedule

The attendance schedule was noted and updated as required.

1004.0 Presentations/Talks

Focus on the Waitara Community

a) Ms Ngawai Henare, Chief Advisor Māori Health

Ms Henare began the session with a presentation giving a high level overview of the Waitara Township. A copy of the presentation is included at the end of these Minutes.

As part of Ms Henare's talk, Rawiri Doorbar was invited to provide the group with some context on leasehold land and its impact on the Waitara community.

b) Ms Vicky Dombroski – Waitara Alive

Ms Dombroski gave an overview of *Waitara Alive*, a community development organisation. A copy of the presentation is included at the end of these Minutes.

General Discussion as part of the presentation:

- High speed broadband is not yet available in Waitara due to a lack of infrastructure. This makes it very difficult when organisations such as WINZ are requesting people contact them via the internet.
- Mr Nielsen asked about the Regional Investment Fund administered by the new Government and whether funding could be obtained for local initiatives.
 Ms Dombroski responded that they were waiting on the Tapuae Roa Plan to come out to see where such funding and projects might fit.
- Waitara Alive focuses on what is strong in Waitara and involves the local community in the journey. Ms Dombroski has spent several years building relationships and works closely with whanau, hapu and iwi on all consultations.

Mr Duynhoven and Mr Handley left the meeting at 2pm.

c) <u>Bob Mahy – North Taranaki Healthcare Trust Chair</u> Mr Mahy provided an overview of the Trust:

- Trust has been operating for approximately 12-13 years.
- The Trust was developed to ensure ongoing medical services in Waitara.
- Obtained a \$1.5M loan from the bank over a 25 year term to a purchase building only \$400,00 to pay off the loan so are six years ahead of schedule
- Has been many challenges with Doctors moving away.
- Model chosen was that the Trust would provide facilities and be the landlord and the doctors would pay rent.
- The Trust stays out of the operational issues of the Medical Centre.
- Building is also tenanted by a Pharmacy.
- Consultations cost \$18.50 at the Waitara practice a lot cheaper than elsewhere as it is a 'Very Low Cost Access' practice.

d) <u>Jez Morris – Business Manager/Director, Waitara Health Centre</u> Mr Morris added to comments made by Mr Mahy:

- There is a risk in the sustainability of health services that the Centre has historically provided.
- 10% of the population does not have access to vehicles, therefore getting to hospital appointments can be impossible.
- Within the Medical Centre they are providing a Dental Unit which is being leased (trying to recruit to this position after their dentist left).
- Looking at starting up a pre-orthopaedic clinic within the centre.
- They have two new doctors and a Nurse Practitioner.
- Very advanced with the systems in place in terms of diagnostic testing.
- Challenges are around costs \$18.50 is low cost healthcare which brings other issues such as pressures on existing doctors. As a result looking at utilising Managing My Health, but there is also the issue around a large number of the population not having access to computers and no reliable fast broadband access.
- The costs of providing the services are constantly increasing.

General Discussion:

- Mr Nielsen asked if the Health Centre was happy with the GP to patient ratio. Mr Morris responded that current ratio was 1670 patients per GP which has come down.
- The way the Health Centre works fits very well with the Health Care Home concept.
 - Mr Graeme Eager-Savage, from Pinnacle Midlands Health Network advised that discussions were to happen between the PHO and the Medical Centre. Looking at immunisations rates with the DHB and Waitara would be a good place to focus on.
 - Mr Eager-Savage explained the PHO focus has been on South Taranaki due to the GP shortage but will now be turning focus to Waitara.
 - The PHO has better reporting available now to better understand the needs of Waitara and in particular how quickly children are getting engaged with General Practice

- Mr Nielsen urged people not to become complacent simply because there are currently enough doctors in the community of Waitara.
- e) <u>Margaret Helms Waitara Pharmacy</u>
 Mrs Helms gave an overview of the Waitara Pharmacy:
- Has owned the pharmacy since 2010 and employs 16 staff.
- Is the second largest pharmacy in Taranaki.
- Has invested heavily in robotics and have robotic dispensing machines.
- Feels there is a misconception that pharmacies make their money from selling things out of the shop when in fact 75% of Waitara Pharmacy's turnover is from the dispensary.
- Some of the issues the pharmacy has include people not being able to pay for their prescriptions and they support people to deposit small amounts each week into an account so that they have money to cover prescriptions when needed.
- There are a lot of uncollected prescriptions. The pharmacy buys in the medications at a cost; staff sorts it and label it. It can be frustrating when people do not collect their prescriptions as the pharmacy does not receive funding until the prescription is collected.
- The pharmacy provides (and pays for) a text service to remind people about prescriptions and funds a free delivery service.
- Mrs Helms stated that Taranaki does not have as many regional services funded by the DHB as other areas. (Free Emergency Contraceptive Pill, Mental Health Long Term Service and Smoking Cessation are provided in other areas.)
- There is a pilot smoking cessation programme about to start which Waitara Pharmacy will be taking part in.
- Mrs Helms took the opportunity to provide comment on a proposal currently being consulted on in terms of a national pharmacy contract and encouraged members to look at the proposal and make feedback. Mrs Jenkins re-iterated that this was a national process and the consultation is open until 10 April. One of the opportunities that the DHB sees in this process is being able to respond to local need.

General Discussion:

- Mrs Clements mentioned that the Board had previously been interested in medicines wastage and asked if Mrs Helms would like to add anything further on this
 - The pharmacy does accept medicines being returned
 - o If the medicine is uncollected it is not a waste to the DHB or community but is a waste to the pharmacy
- Mrs Gibson wondered if data was being kept on those customers not picking up their prescriptions
 - No data is kept
 - A lot of the items not collected are for smoking cessation, iron supplements, preventive inhalers
- No technological way of tracking prescriptions from the time they leave the GP clinic to the time they leave the pharmacy.
- Ms Lockett thought that some prescriptions may not be collected because of the costs involved

- Ms Helms agreed this would be the case in some instances, but some prescriptions are for children and there is no cost for these
- Mr Volzke felt that although there was a cost to the pharmacy for those medications not collected there was a greater loss to the patient.

Graeme Eager-Savage and Barb Purdie left the meeting at 2.15pm.

- Ms Lockett suggested that Waitara Pharmacy and Waitara Alive look at a joint project around medications not being collected and try and find a community based solution.
- It was felt there was a lack of knowledge with patients in terms of what they are entitled to in terms of disability and Ministry of Social Development funding.
- Local social workers and multi-disciplinary teams are being looked at by the DHB currently under the integration programme (Project Connect).
- f) <u>Bev Gibson Mahia Mai a Whai Tara</u> Ms Gibson explained the services provided by Mahia Mai a Whai Tara.
- Mahia Mai is about helping the elderly and kaumatua stay connected and stay well in their community.
- A lot of elderly feel isolated and Mahia Mai makes them feel valued and worthy.
- Mahia Mai is a place for people to socialise, a safe place for nurturing the past and looking at the future.
- Mahia Mai is open two days a week they are independent and do not receive any funding. They receive koha and rent out an office and the rent goes towards providing programmes.
- There are many different programmes including:
 - Mai Friends sharing stories, or recipes, just to enjoy company
 - o Mai Day Day trips out to museums, the coast etc
 - Mai Advocacy assisting kaumatua with WINZ forms, using computers, getting insurance quotes, dealing with internet providers, discussing Wills and Age Care Plans
 - o Mai Net getting the elderly more skilled at using computers
 - Mai Fit exercise programmes
- Looking at establishing a community garden in Waitara.

Ms Hohaia asked for general comments from Committee Members as a result of listening to the various speakers and discussion followed.

Ms Hohaia thanked the various speakers and invited them to stay for the formal part of the meeting.

1005.0 Minutes of Previous Meeting

Resolution

That the Community and Public Health Advisory Committee and the Disability Support Advisory Committee resolve to accept the Minutes of the meeting held on 29 November 2017 as a true and accurate record.

Gibson/Nielsen Carried

 $2018\text{-}03\text{-}28_\text{CPHAC}\,/\,\text{DSAC}\,\,\text{Minutes}$

The Task List was updated accordingly.

1005.0 General Business

Nil

1006.0 Next Meeting

The date of the next meeting is Wednesday 30 May 2018. The venue will be confirmed at a later date.

1007.0 Waitara Community Presentations

As referred to in item 1004.0, presentations follow from Ngawai Henare and Vicky Dombroski.

TDHB Community & Public Health Advisory / Disability Support Advisory Committee Task List

| Action No | Date Raised | Action Description | Status | Assigned | Due Date | Updates |
|---------------|-----------------------|---|--------|----------|---------------|--|
| 82 | 29/11/2017 | Write to Marcia Paurini at Taranaki Rural Support and congratulate her on her National Lifekeepers Recognition Award for outstanding contribution to suicide prevention in the community. | NEW | GMPF&PH | | Letter sent |
| 79 | 27/09/2017 | Management My Health Fees Check PHO contract with DHB re additional fees being allowable | NEW | GMPF&PH | March meeting | In progress. PMHN are doing a stocktake of those practices charging. Update in the New Year. |
| 76 | 26/07/2017 | HEAT TOOL – Immunisations Circulate report once completed | NEW | GMPF&PH | | Report to be put onto Board Books end March. Recommendations currently under consideration. |
| 69 | 24/05/2017 | Follow up with Pinnacle Midlands Health Network concerning extending an invitation to MAiHEALTH to come to Taranaki. | NEW | CAMH | | Invited to November CPHAC but no response received. Ngati Ruanui to be approached. |