



## AUCKLAND DISTRICT HEALTH BOARD

### COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE

**Minutes of the Community and Public Health Advisory Committee  
meeting held on Wednesday 3 September 2008 in the  
Marion Davis Library, Building 43, Auckland City Hospital, Grafton  
commencing at 9:00 am**

#### 1. KARAKIA, ATTENDANCE AND APOLOGIES, CONFLICTS OF INTEREST

##### **Committee Members**

Rob Cooper (Chair)	Susan Buckland
Harry Burkhardt	Dr Chris Chambers
Dr Brian Fergus	Dr Ian Scott
Pat Snedden	Rt Hon Bob Tizard
Seiuli Dr Juliet Walker	Ian Ward
Rev Alfred Ngaro	Lynda Williams

##### **In Attendance**

David Hunter, Chair ProCare Network Auckland  
Jude Keys, CEO ProCare Network Auckland

##### **Management in Attendance**

Garry Smith – Chief Executive  
Dr Denis Jury – Chief Planning and Funding Officer  
Frank Booth – Manager Auckland Regional Public Health Service  
Sarah Marshall – Planning and Funding Manager  
Taima Campbell – Executive Director Nursing  
Naida Glavish – Chief Advisor Tikanga, GM Maori Health  
Kerry Hiini – Planning & Funding Manager  
Deirdre Maxwell – Planning and Funding Manager  
Janice Mueller – Director Allied Health  
Dr Celia Palmer – Clinical Director Planning and Funding  
Ian Bell - Board Administrator

##### **Karakia, Apologies**

The Chair declared the meeting open at 9.12 am.  
Naida Glavish commenced the meeting with the karakia.  
Apologies had been received from Jo Agnew, David Sage and Aseta Redican.  
There were no notifications of conflicts of interest for any item on the agenda.

The Chair acknowledged the loss within Gary Smith's family.

## **2. CONFIRMATION OF MINUTES 6 AUGUST 2008**

Moved Brian Fergus, seconded Susan Buckland

*That the minutes of the Community and Public Health Advisory Committee meeting held on 6 August 2008 be confirmed as a true and correct record.*

Carried

## **3. ACTION TABLE 6 AUGUST 2008**

### **Maternity**

The paper on maternity would be provided to the October meeting.

## **4. PRO-CARE NETWORK AUCKLAND PHO PRESENTATION**

David Hunter, Chair ProCare Network Auckland and Jude Keys, CEO ProCare Network Auckland presented to the Committee.

ProCare Network Auckland Ltd was a “not for profit” PHO with a Board of Directors nominated by advisory groups including GPs, nurses, Pacific and Maori. The infrastructure was 82 practices with 251 GPs and 180 practice nurses. The only employee was the Chief Executive Officer with ProCare Health Ltd providing management services under contract. The enrolled patient population was 307,300 which was 72% of the ADHB’s enrolled population with 20% of those being in Maori, Pacific and quintile 5. The Indian, South East Asian and Chinese population was approximately 18%. Funding for the high needs population in 2007/2008 was \$1.96m and in 2008/2009 planned of \$2.56m. Additional funding from the MoH in 2007/2008 was \$3.29m and projected in 2008/2009 \$3.85m.

Service to Improve Access (SIA) expenditure was on the key projects of mental health, sexual health and CVD. New projects for 2008/2009 were child oral health, end of life care, 50% funding for an additional HVAZ nurse and 50% funding for a Maori/Community Nurse and some discretionary healthcare expenditure.

Alfred Ngaro joined the meeting at 9.26am.

The PHO’s performance was comparable with the national performance and exceeded that performance in childhood immunisation and child immunisation for high needs. Laboratory expenditure was above the national average.

Community projects included HVAZ, health promotion activities with the objectives of reducing obesity and improving nutrition, health promotion through activity groups and diabetes support groups with a number of individual projects including gardening, cooking lessons and physical activities.

Taima Campbell joined the meeting at 9.45am.

The PHO’s supported the ADHB Primary Healthcare Plan endorsing the community concept, devolving District nurses into Neighbourhood/Community nurses and participating in health promotion through green prescriptions, Muslim women’s swimming,

Pacific lifestyles and Lifestyle Co-ordinators. Within the plan there was a need for a funding policy change, a universal after hours policy and further workforce development for primary care nurse training and development. More Lifestyle Co-ordinators were required to keep the projects going and sustainable.

The Chair thanked the presenters.

## **5. ADHB INTERPRETER SERVICES**

Sarah Marshall, Planning and Funding Manager presented to the Committee. The service was established following the 1988 Cartwright Report with a pilot interpreting service developed at Middlemore Hospital in 1991. The A+ Interpreter Service commenced in 1998 provided by the Auckland Regional Public Health Service and in 2006 changed to an in-house service located and reporting to the Greenlane Clinical Centre Manager. The need for an interpreter is protected by the 1996 Health and Disability Commissioner Regulations. ADHB has an intranet site displaying the languages available where services can make bookings. The utilisation of this service was in 2006/2007 26,960 jobs at a cost of \$1.82m and in 2007/2008 30,500 jobs at a cost of \$2.44m. The top ten languages requested included Mandarin and Cantonese with these principally being requested by the Eye Clinic but also being provided to almost all services.

A primary healthcare interpreting pilot was being established as part of the Auckland Regional Settlement Strategy, Migrant and Refugee Health Action Plan with a long term goal of having interpreting services available to all primary health providers. Many of the interpreters work on a part time basis.

## **6. REGIONAL AND LONG TERM SERVICE AND CAPACITY PLANNING**

Sarah Prentice, Acting General Manager NDSA was in attendance. Counties Manukau, Waitemata and Northland had presented major capital plans to the Regional Planning Committee and the northern region's response was required to the National Capital Committee (NCC) by 15 September 2008. The NCC had approved the strategies in principle and was now seeking the business cases and the regional perspective. The strong regional collaboration was based on principles including achieving the greatest possible health gain for the population of the region and providing equitable and appropriate access to DHB provided and funded health services. The key outcomes of the regional process were to have an agreed picture of current and future inpatient bed requirements, current bed and theatre capacity, population forecasts and a commitment by the northern region's DHBs to the 2008 business cases. Underpinning the service planning framework was clinical and workforce sustainability to provide services that are financially sustainable with equitable access. The approach is to address these planning for 1.5m people not the individual DHB's populations.

With the bed modelling across the region there is currently a shortage of approximately 60 beds in the main acute facilities. There would be a steady growth in demand for beds, particularly with an ageing population who tended to have longer lengths of stay. Between 60 and 70 new beds would be required per annum. The business cases only addressed the immediate demand over the next 5 years. The process was to get approval by the Regional Governance Forum and then to have the individual Boards' endorsement.

Moved Ian Scott, seconded Sue Buckland

*That the Community and Public Health Advisory Committee:*

- 1. Notes the paper and presentation describing the ADHB component of the Long Term Regional Service and Capacity Plan and*
- 2. Resolves to advise the Board to delegate the Chairman and Chief Executive to approve the final regional plan for submission to the Ministry of Health.*

Carried

## **7. PLANNING AND FUNDING MONTHLY REPORT**

Regarding Maori Health the DNA report was being completed and the implementation was work in progress. Work was being undertaken following the launch of the HPV vaccine. Tereki Stewart of Tamaki PHO would be presenting to the MHAC on gains and gaps in Maori Health and Neil Woodhams would be presenting on a programme to recruit Maori nurses. Ngati Whatua was progressing on their review of Tihi Ora Mapo. Following the Board meeting on 5 November 2008 there would be a powhiri at Orakei Marae followed by a dinner.

Issues addressed by the Pacific Health Advisory Committee were the HPV vaccine with a regional approach being taken following expressions of concern over timing and engagement with the community. With HVAZ there were concerns at the risk to sustainability and the capacity of the Pacific Team to maintain the momentum of the project. The Pacific Health Team did work in Adult Services and were trying to expand this into Paediatrics. The funding of out of hours primary care services was included in capitation, with a variety of approaches taken around the country. ADHB did fund White Cross to cover some of their additional costs and to avoid high co-payments with the latter being a matter of discussion between ADHB and White Cross. The MoH had signalled that there would be funding for after hours services of which ADHB's share would be approximately \$900k. A survey had been undertaken to determine what people wanted in an after hours service to assist in the design of that service. There was a strong response against telephone consultations.

It was noted with the HPV vaccine informed consent was required and that there was a target set of 95%. There was some debate concerning the giving of advice on shaken baby syndrome as to when and how and the Committee asked for a paper on present practices to give women and family informed choices at the time of birth including length of stay and professional input to advice. There was a need for good access to advice and support.

Denis Jury advised the appointment of Frank Booth as Manager, Auckland Regional Public Health Services and Deirdre Maxwell as Planning and Funding Manager Mental Health.

## **8. GENERAL BUSINESS**

There were no items general business.



**9. NEXT MEETING**

The meeting closed at 11:02am

The next meeting is scheduled for  
9:00am, Wednesday 1 October 2008  
Marion Davis Library  
Building 43  
Auckland City Hospital  
Grafton

**CONFIRMED**

**CHAIR:** ..... **DATE:** .....