

**MINUTES OF THE MATAMATA/PIAKO COMMUNITY HEALTH FORUM
MEETING HELD ON WEDNESDAY 3 SEPTEMBER 2008,
DAYCARE CENTRE, TE AROHA HOSPITAL**

PRESENT:	<i>Carole Greenville (Chairperson), Russell Morgan, Bruce Purchase, Wayne Aberhart, Ruth Baltus, Shirley Gillard, Flo Mace, Ann Inglis, Margaret Troughton, Leanne Smith, Endine Dixon-Harris and Anton Turner.</i>
IN ATTENDANCE:	<i>Grant O'Brien - Waikato DHB Representative Amy Thomsen – Waikato DHB Communications Consultant Jerry Rickman – Chair of Waikato DHB Gordon Chesterman – Waikato DHB Board Elected Member</i>
APOLOGY:	<i>No apologies</i>
ITEM 1	<i>Chairperson welcomed everyone to the meeting and extended a special greeting to Gordon Chesterman, Waikato Board Member and Jerry Rickman, Chair of Waikato DHB.</i>
ITEM 2	<p>MINUTES OF LAST MEETING: <i>These were taken as read</i></p> <p>MATTERS ARISING: <i>There were no matters arising</i></p>
ITEM 3	<p>WAIKATO DISTRICT HEALTH BOARD UPDATE <i>Grant O'Brien attended for this item and provided a power point presentation covering a number of DHB and Health sector developments. Key items included:</i></p> <ul style="list-style-type: none"> <i>• Continuing workforce challenges and the need to support local initiatives and do more to ensure health services remained available to rural communities. Health Waikato (the DHB's Provider Arm) routinely advertised locally, nationally and internationally for staff and on average carried 80 – 100 vacancies across all workforce groups. A new website had been developed with a focus on contribution to the attraction of people wanting to come and work in the Waikato region.</i> <i>• The new car park and Transit Lounge at Waikato Hospital was officially opened in July by the Prime Minister and King Tuheitia. An impressive crowd of Members of Parliament, Ministry Officials and Tainui supporters were on hand to witness the occasion where the new building was blessed in memory of Te Ariki Dame Te Atairangikaahu.</i> <i>• Transport issues are the focus of a new project designed to develop a tool to better identify inequalities across the region. There is a willingness within the DHB to be innovative in finding new solutions to these lingering problems. Members were invited to feed local suggestions into the planning process for consideration. Feedback and consultation on the outcomes of this project is likely to occur at the next forum meetings.</i> <i>• The DHB had commenced work into finding new ways to sustain rural health services. The concept of clustering services into a 'health village' around an existing rural hospital is being considered as one way of improving access and delivery of these vital local services. Taumarunui has been identified as the pilot site. Extensive consultation and community engagement has commenced to achieve a bottom up approach to this project outcome.</i>

	<ul style="list-style-type: none"> • <i>Workforce challenges were highlighted in a presentation showing demand for health care set to outstrip supply in a very short time-frame. While this is worrying, it does create opportunities to be innovative around new approaches to these issues. The DHB has commenced some work looking at establishing new community nursing services and further project work and consultation will occur further down the track.</i> • <i>Health Waikato (the DHB's Provider of health Services) had recorded a record year with 10.3 million procedures. This includes over 600,000 patient meals, over 20,000 surgical procedures, over 154 outpatient attendances and greater than 7million blood tests. Health Waikato is also undertaking significant redevelopment projects including campus upgrade, IT and system improvements.</i> • <i>Mental Health services across the region are set to be improved with the allocation of new funding for Primary Mental Health Services. The DHB reported that between 20 – 28% of people in NZ has a diagnosable mental illness at any one time. Until 1 July this year DHB's only received funding for 3% of this population. This meant that a number of people fail to have their needs met adequately. This new primary funding will be a welcome addition to health resources locally. PHO's will have the responsibility of working with their communities to develop and implement these new services.</i>
<p>ITEM 4</p>	<p>LOCAL ISSUES</p> <p>Services and no transport – what a waste! <i>Transport issues were again the subject of debate and concern. Members expressed their concerns that poor access to suitable and affordable transport was a leading cause for people unable to attend health appointments in Hamilton and services locally. The issue was getting serious with an increasing number of frail elderly dependent on this level of support.</i></p> <p><i>Grant O'Brien Waikato DHB Change Manager outlined the current work that the DHB was undertaking to try and resolve these long standing issues. "There is little point in having services available if people can't get to them", said Mr O'Brien. The DHB Project team plan to attend all Community Health Forums in November/December to discuss their plans and ideas with forums. This will be an opportunity to focus on local need and local solutions.</i></p> <p>New funding to address gaps in mental health services <i>The DHB update touched on new funding to DHBs to develop much needed primary mental health services for their regions. This new funding would be allocated to Primary health organisations (PHOs) in October 2008. PHO's would then work with their networks and enrolled populations to put in place the services to meet their needs. Mental health issues are increasing and providing new resources for these services through PHO's was a big step forward in overcoming some of these gaps in communities, says Mr O'Brien.</i></p> <p>Local interest in prioritisation funding for new additions services <i>Waikato DHBs prioritisation round provides opportunities for the purchase of additional or new services in some areas. After much discussion the meeting resolved to propose the development of a Youth focussed Mental Health and Addictions Outreach Service for the Piako area.</i></p> <p><i>A proposal would be submitted outlining the needs of this community and</i></p>

	<p><i>the development of this service to provide better access to this much needed youth service. Ruth Baltus and new comer Wayne Aberheart would be the lead on this proposal supported by the DHB Team.</i></p> <p>Local data collection to profile community needs <i>Access to good data is key to arguing for additional resources. So much information is collected yet so little is available to local communities to support them to become self-helpers. A local project is about to commence that will collect a range of data from community organisations, public organisations including local government in order to develop a profile of the population and its needs. This data would then be used to argue for more or better services. Grant commented that Local Government/District Councils were required to have community development plans and DHBs to undertake health needs analysis of their populations. While this data is often complex, it should be made available to the local community in such a way that it is meaningful and useful to them.</i></p> <p>Forum membership need to be representative of the community it serves <i>More people are needed to assist in identifying needs of the Matamata and Piako Community. The Community Health Forums is a good vehicle to discuss these needs and have a stronger voice with the DHB around service delivery. Members were encouraged to think about what groups of the community were not represented and who might be a suitable person to ask to join the Forum.</i></p>
<p>ITEM 5</p>	<p>GENERAL BUSINESS</p> <p><i>Waikato DHD Chair Jerry Rickman briefly spoke on the predicted DHB surplus. He encouraged members to consider this in the perspective of the DHB needing to run a surplus in order to be able to pay for the future costs of the new developments and Waikato and Thames Campuses. Surplus funding was being made available in this current and next financial year in order to offer the chance for new innovative services to be proposed. Prioritisation funding rounds may not always be offered in this way says Mr Rickman.</i></p> <p><i>Gordon Chesterman, Waikato DHB Board Member told the meeting that the role of the Board was to employ and support the Chief Executive Officer. "Often the needs of the community were not always known to Board members and attendance at meetings like this was useful" says Mr Chesterman.</i></p> <p><i>The workforce challenges are not particular to New Zealand. Mr Chesterman commented that an Australian newspaper recently reported an abundance of newly trained medical practitioners and the fear that this might lead to a drop in quality due to so few older more experienced practitioners remaining in the workforce.</i></p> <p><i>Some of the key issues facing the health system, in New Zealand according to Mr Chesterman included, challenging the nature of an extensive volunteer assisted system. Largely this was provided by elderly people and the sustainability of this was something that clearly needed to be questioned. Once we loose volunteers more gaps in services are likely to appear.</i></p> <p><i>Waikato DHB is predicting a \$30 million surplus in the current financial year and this offered opportunities for new services to be purchased</i></p>

through the prioritisation funding process. It needed to be mentioned however, the bulk of the surplus is budgeted by the organisation as they prepare to fund the new services and the redevelopment of the Waikato and Thames Hospital campuses. Once the new facilities come on stream, operational costs will begin to hit the organisation. Surpluses are therefore predicted to be a short term situation.

Commenting on service quality Mr Chesterman felt that the media attention on health services tended to portray a picture of a struggling system in trouble. In fact, in response to a question from Mr Chesterman most people in the audience were able to report positive health sector experiences they or others had received. "The media weren't necessarily interested in good new stories when it came to health or the Public sector", he said.

Nursing innovations in Australia had resulted in training being reduced from a three year to a two year 'fast-track' programme with the final year working and learning at the 'coal-face'. As Chair of the WINTEC Board, Mr Chesterman was going to discuss this option with the WINTEC as a possible option here in New Zealand to help with the workforce shortages.

Overflows and long waits in the Emergency Department were also an issue the DHB was concerned with. This appeared to be due to the high cost of attending Anglesea Clinic with many people needing a service but unable to afford the cost. The DHBs undertaking work in this area now and it is hoped some relief will become available.

Whai – Marama providing excellent services

High praise from the Community Policing service was given to the youth outreach services provided by Hamilton based provider Whai Marama Youth Connex. Staff of this organisation is a dedicated group of young people enthusiastic about their work and helping young people. The DHB should provide more of these services.

ITEM 6

NEXT MEETING:

**Wednesday 3rd December 2008
6.00pm – 8.00pm
Community House
MORRINSVILLE**