

**MINUTES OF THE THAMES/COROMANDEL/HAURAKI
COMMUNITY HEALTH FORUM MEETING HELD
WEDNESDAY 26 NOVEMBER 2008,
THAMES WAR MEMORIAL CENTRE**

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| PRESENT: | <i>Frances Bicknell (Chair), Frances Burton, Laurie Franks, Robyn Pengelly, Kathy Archibald, Anne Hay, Jackie Gausden, Glen Wilson, Louise West, Fialoa Siatu, Barbara Rothseild, Sheryll Fitzpatrick, Bev Costello, Gayle Ryan, Robyn Ross, Janet Calley, Vanessa Witt, Chrissy Baird, Jacqui Mitchell, Hugh Kininmonth and Thelma Chantrey.</i> |
| IN ATTENDANCE: | <i>Janet Hanvey – Waikato DHB Representative Amy Thomsen – Waikato DHB Communications Consultant Jane Hudson & Adam Wardle – Waikato DHB Planning & Funding</i> |

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| WELCOME AND INTRODUCTIONS | <i>Chairperson welcomed everyone to the meeting and noted that agenda did not allow for initial discussion on local issues. Action: Andrea to change agenda template</i> |
| APOLOGIES | <i>Val Sparks, Janet Clissold, Ada McCallum, Margaret MacKay, Keith Trembath and Phyllis Hayward</i> |
| MINUTES OF PREVIOUS MEETING | <i>Minutes of previous meeting held Friday 5 September 2008 were tabled and taken as read.</i> |
| MATTERS ARISING FROM PREVIOUS MINUTES | <i>Arthritis services undervalued – Grant O’Brien has looked into this and unable to get the data needed, will hopefully have it for next meeting. Home help form not meeting needs – Grant O’Brien has passed this information on to the correct people.</i> |
| ITEM 1: | WAIKATO DISTRICT HEALTH BOARD UPDATE <i>Janet Hanvey attended for this item and provided a power point presentation covering a number of DHB and Health sector developments. Hand out was supplied for members.</i> |
| ITEM 2 | TRANSPORT PRESENTATION <i>Jane Hudson and Adam Wardle attended for this item and presented on work that has been done over last few month.</i> <ul style="list-style-type: none"> • <i>Transport plan – CPHAC has endorsed, engagement process will occur and communication plan in place to check it is understandable and useful. Updates planned.</i> • <i>National Transport Assistance Policy – A number of barriers, ensure DHB staff are aware</i> • <i>Other areas of Transport – e.g. hospital to hospital transfers, access to renal services, focus on DNA’s to see if some of reasons of transport.</i> <i>Discussion was held around highlighting renal increase and not others e.g. general surgery. Adam commented that the project is looking at transport for current services and not to increase services delivered locally. Access to scanning locally to be raised at local PHO</i> |

management group. A transport matrix to be developed which will structure to identify and identify areas of highest needs, focus on population priorities.

Meeting agreed that local groups needed to present at this point for Jane and Adam to hear.

Janet Cawley Team Leader, Community Health Services

Chrissie Baird, Vanessa Witt, Jacquie Mitchell were introduced and had worked on this project. Transport is also an issue for health professionals in terms of people not attending, scope focussed on what information out there already in terms of providers. A document was presented on transport options. This is a living document which will be reviewed regularly. Janet acknowledged Grant O'Brien's support with funding printing of document. The document has gone to medical centres, consumer advocates, CAB. A full distribution list is being developed. Janet thanked everyone for their input and noted that this is a starting point.

Sheryl Fitzpatrick, Transport Steering Group Community Waikato.

- Different focus and the CHS booklet fed into their work; have developed a transport strategy. Sheryl tabled an update and spoke to it around the history, terms of reference and mission. Suggested strategy is the development of a charitable trust, trustees representing stakeholders, employ manager and co-ordinator(s), MSD possible source of funding for set up and provide information to the DHB to inform this process.
- Number one reason for travel is general surgery. Numbers looked at about 5 years ago (Jane Chittenden report), what are the numbers now?
- Disabled/Mobility transport is a need.
- Important to ensure alignment of what various groups are doing, acknowledged transport issues have been on the agenda for a number of years. Te Korowai may consider exiting as costs exceeding DHB funding. Concern going over and over the same things. Suggested that it is a community plan not DHB plan. Adam clarified that it is not the DHB's decision; it is based on a community need. Question was raised is it about people travelling to Waikato or does it include people travelling to Thames, Adam confirmed it is about both, and solutions maybe different. Noted that PHN's contract with Pinnacle for children for petrol for children to get to appointments.
- Under the proposed strategy a co-ordinator would co-ordinate transport operators to meet individual/group requirements, and assist operators. Seeking community agreement to proceed. Tairua model was brought up, co-ordination of people attending the same clinic, but that will be difficult for the hospital to co-ordinate as not aware of needs.
- Jacquie offered her support, total mobility approach more likely to be successful and local people developing local solutions. There is a meeting next week for transport providers, which is focussing on transport.

Action Points

Community and DHB reps to assist with distribution of the booklet.

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| | <p>Sheryl will advise her network Amy – Webhealth and Internet</p> |
| ITEM 3: | <p>LOCAL ISSUES Jacquie gave an update on Thames Hospital.</p> <ul style="list-style-type: none"> • SCR coming to an end • October – opened Thames clinical centre and 500 attended open day. Staff/Community happy. • Ministry audit before patients move in, hoping to have inpatient open December. Will have public viewing if possible and official opening planned for February. • Primary birthing unit to be funded, detail design planning underway, complete 2009 • There is some service expansion, move to digital radiology environment in the future and take all opportunities to expand e.g. orthopaedic fracture clinic. • Birthing unit will operate much as it does now. The hospital consulted with women on what they wanted, LMC's plus 24/7 midwife service, can stay 2-3 nights if needed plus with partners, Breastfeeding clinic, education rooms, opportunity for community to improve environment for women and GPs to participate as well. • More room temporarily in current facilities while ward 6 moves out into new inpatient facilities. • Suggested put artist impression in next SCR update. • After hours over holidays, no clinics, elective surgery, gear up for increase acute admissions, staffing looking good, new ED after hours service in place since October, evaluated, appears successful, reduced demand on GPs. <p>Action point Artists impression of new birthing unit is next SCR update</p> |
| ITEM 4: | <p>GENERAL BUSINESS</p> <ul style="list-style-type: none"> • Hugh commented that smoking cessation programme now fully subsidised with ongoing support for 12 months. • Down a doctor in Thames as Bernard has closed his practice, and in Waihi two doctors retiring, recruitment is very difficult. • White ribbon day yesterday, encourage people to wear for the rest of the week. Men taking a stance against violence towards women and children. |
| DATE OF NEXT MEETING | <p>Wednesday 11 March 2009 10.00am – 12.00pm Thames War Memorial Civic Centre THAMES</p> |