

# **WAITOMO/OTOROHANGA COMMUNITY HEALTH FORUM MEETING HELD FRIDAY 20<sup>th</sup> JUNE 2008 AT THE OTOROHANGA PUBLIC LIBRARY**

## **MINUTES OF MEETING**

**Present:** Attendance register not filled in

**Apologies:** Jeff Johnston, Jill O'Reilly and Thia Priestley.

Mark Ammon – Chair of the Waitomo Otorohonga Community Health Forum, opened the meeting and welcomed people. Grant O'Brien (Waikato DHB) was delayed in Taumarunui and arrived late.

The Waikato DHB update was presented and stimulated discussion around transport and the Waikato DHB's Prioritisation process.

### **TRANSPORT**

Transport is an issue affecting all rural communities. Rising fuel prices and the need to travel out of town for an increasing range of services is being felt hard by many local people. Volunteers who had traditionally provided transport services in many rural communities are also 'feeling the pinch' and dwindling in numbers.

The Waikato DHB advised that a review was being undertaken on the Transport and Accommodation Policy (TNA). This Policy is managed centrally by the Ministry of Health (MoH) with each DHB given a 'notional budget allocation based on certain population characteristics including age structure, deprivation and rurality. The review had identified a number of barriers to the smooth operation of this policy which were likely to be contributing to an under spend for the 07/08 financial year.

A stock take had been completed and this identified that a number of people eligible for this funding were not taking up this option. Lengthy form filling, long wait to receive a reimbursement, difficult eligibility criteria and low reimbursement rates (20c/km) are contributors towards the under spend.

The Waikato DHB is to consider what changes within the Policy are able to be made to improve the uptake and acceptability of this policy to people. Some rural areas do not receive transport support; where in others limited community transport contract grants have been made to local services. Achieving good equitable coverage across the region is the goal the DHB would like to achieve.

### **PRIORITISATION PROCESS**

This is the process used by the Waikato DHB to allocate surplus funds. The situation arises where DHB's have surplus funding after the MoH imposed annual Service Coverage Guidelines are met.

In any prioritisation process, community groups and contract holders are encouraged to submit proposals for new services or increases in service volumes for consideration by the Board. In 07/08 an additional \$7m has been allocated to such proposals.

The DHB advised that a further round was likely to be held during the 2008/09 financial year and the Forum may wish to identify a local initiative(s) that could be worthy of submitting for consideration.

## **GENERAL BUSINESS**

### ***Board Representation:***

The election of DHB Board members using the Single Transferable Voting system (STV) had disadvantaged rural communities according to members present at the forum meeting. Rural communities were missing out on having a voice at the Board table on important health issues affecting these communities. Under the old system of Ward voting, rural folk often knew who they were voting for therefore felt confident that their local issues could be discussed and represented adequately.

The DHB was encouraged to raise this concern at the highest level. While members accepted that there were rural members sitting around the Board table, they were largely unknown in the Waitomo/Otorohanga community.

*Action: The CEO to be encouraged to raise this with the Chair and at national CEO's.*

### ***Workforce Recruitment:***

Health professionals are in short supply and rural communities are likely to feel the effects of this before urban settings. Increasingly the specialisation of health services means that there are fewer generalists on the ground and many complex procedures unavailable in small rural communities and require travel to the nearest secondary Hospital. However, one key fact is that the rural sector remains the largest group of people within the Waikato DHB region, at approx. 2/3rds of the total DHB population living outside of Hamilton more and more people were being required to travel to the city to access a range of health services.

Murray Loewenthal advised the meeting of a local initiative based in the King Country that aimed to “grow their own health professionals”. This exciting local initiative had been recognised by the Waikato Primary Health Organisation (PHO) Rural Advisory Group (RAG) as worthy of grant funding to establish a paid co-ordinator position to lead the development of this home grown initiative. The North King Country Health Workforce Development Group will encourage local people interested in a career in health to access the information and support they need in addition to foster employment opportunities within the local health sector for locals wanting to return or people wanting to work in the area.

This community development initiative is a prime example of a community helping itself says Murray Lowenthal. With additional funding it may be possible to roll this initiative out to other rural areas, he says.

***After Hours:***

The Waikato DHB is in the process of implementing its After Hours Plan which aims to reduce the after hours burden on rural GP's. This three year plan is expected to change the way after hours services are provided while at the same time reducing the hours that rural GP's must work.

Year one activity involves the establishment of After Hours Hubs at each of the Rural Hospitals, introduction of Telephone Nurse Triage Services across all rural areas and new funding to the Order of St John, Whitianga, Whangamata, Coromandel and Matatmata communities to stimulate thinking around local solutions. After Hours Hubs would provide services through the ED from 8pm or 10pm (respectively) and on weekends for the majority of rural people.

Recent changes in After Hours services in Otorohanga have resulted in people being referred to Anglesea Clinic in Hamilton. An After Hours Hub has existed in Te Kuiti for some time and this service is also available to people living in Otorohanga.

***Future meeting dates:***

It was noted that meeting dates had not been provided for the remainder of the year. The Waikato DHB to send these out ASAP.

**No further business. The meeting finished at 3pm**

**NEXT MEETING**

Wednesday 27<sup>th</sup> August 2008

1.00pm – 3.00pm

(TE KUITI) Venue TBC

**LAST MEETING FOR THE YEAR**

Thursday 27<sup>th</sup> November 2008

2.00pm – 4.00pm

(OTOROHANGA) Venue TBC

**ACTION LIST FROM THE WAITOMO/OTOROHANGA COMMUNITY  
HEALTH FORUM MEETING HELD ON 20<sup>th</sup> JUNE 2008**

<b>1.</b>	<b>Board Representation.</b> The CEO to be encouraged to raise this with the Chair and at national CEO's.	<b>Before next meeting</b>
<b>2.</b>	<b>Future meeting dates.</b> Waikato DHB to send these out.	<b>Included in minutes</b>