

MINUTES OF THE MEETING OF THE COMBINED COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE & THE DISABILITY SUPPORT ADVISORY COMMITTEE HELD ON TUESDAY, 27 OCTOBER 2009 AT 9:30 AM IN THE MAIN ROOM, EDUCATION CENTRE, TIMARU HOSPITAL CAMPUS, HIGH STREET, TIMARU

PRESENT

N. Anderson (Chair)
N. Whytock
J. Gilbert
T. Kennedy
C. Miller
B. Kora
R. Templeton
P. Bell
T. Linyard
S Eddington
K. Smith
F Pimm (apology for lateness)
S. Nolan (apology for lateness)
D. Williams

IN ATTENDANCE

M. Hill, GM Planning & Funding
K Foster, CEO Aoraki PHO
J. Williams, Minute Taker

APOLOGIES (Item 1)

C. Fleming, Chief Executive
G. Nind
R. Wallace
K. Wright
J. Wilson
P. Binns

DECLARATIONS OF INTEREST (Item 2)

The declarations of interest register was **noted**.

CONFIRMATION OF MINUTES OF MEETING HELD ON 25 AUGUST 2009 (Item 3)

The minutes of the meeting held on 25 August 2009 were **confirmed**.

MATTERS ARISING

Dr Williams provided an overview on the negative Health Status Indicators i.e. High Campylobacteriosis notification rate, High Cryptosporidiosis notification rate and High Salmonellosis notification rates. South Canterbury has some of the highest rates of

notifiable gastric infections in New Zealand and there is always a surge of incidences of these diseases in spring. The most likely reason for the high rates is South Canterbury's rural base a large proportion of the population who work on farms or meat processing plants.

Ngaire advised the Disability Support Advisory Committee met with the MOH and DPA last week and held a very informative meeting.

DSAC MEETING WITH MOH & DPA UPDATE (Item 4)

Mrs Whytock spoke to the report and advised the meeting was arranged to informally meet with representatives of the DPA to discuss issues for people with a disability accessing personal health and other services provided by the DHB. Alison Hearn and Jon Gaupset from the MOH attended to discuss Disability Service issues in South Canterbury and to address issues that have been discussed at the earlier meeting.

Ms Nolan raised the question of people with intellectual and mental health issues and difficulty in accessing PSAID services in Canterbury DHB. Management advised CDHB have advised these services are not regional and they can no longer provide services for out of region clients. Access to services is under discussion with the MOH and CDHB.

Mrs Templeton enquired what services are available in Timaru for families with young children who require respite care. Margaret advised there was no residential respite care available in Timaru for young children but will discuss with Lifelinks and report on how respite care is being provided to the next meeting.

EOI SELECTION PANEL (Item 5)

Management advised the EOI Selection Panel which has been appointed by the MOH to provide advice to the Ministry on proposals submitted in response to a call for "expressions of interest" to accelerate the implementation of the Primary Health Care strategy was provided for members information.

The Committee **received** the report.

DISTRICT ANNUAL PLAN OBJECTIVES – QUARTERLY PROGRESS REPORTING (Item 6)

Management advised $\frac{3}{4}$ of the indicators overall were on track with the District Annual Plan.

The Committee **received** the report and **noted** significant achievement year to date.

MOH ASSESSMENT OF SCDHB QUARTER FOUR 2008/09 PERFORMANCE (Item 7)

Management advised the DHB had received two outstanding performance ratings and three partially achieved performance ratings. Overall the SCDHB continued to be well performed in IDPs and had no 'not achieved' ratings in the final assessment for 2008/09.

The Committee **received** the report.

PRIMARY HEALTH CARE UPDATE (Item 8)

Management provided an update to the committees advising the appointments to the Establishment Board and appointment of the Establishment Board Manager had been made after talking to a number of stakeholders, including members of the Aoraki PHO. The Establishment Board and the Establishment Board Manager roles have a limited timeframe and would exist until 30 April 2010 after which the long term governance and management structure created would assume responsibility for primary healthcare in South Canterbury.

The Committee **received** the report.

SOUTH CANTERBURY RESIDENTS – ONCOLOGY RADIATION THERAPY (Item 9)

The Committee **received** the report.

PLANNING 2010/11 (Item 10)

Management advised the MOH planning timetable had altered since the agenda papers were circulated. . The draft Strategic Plan would now not be submitted to the MOH until September with the final Strategic Plan now due in November. The SOI and DAP would be required to be submitted together to the MOH in final draft in early March.

The Committee **received** the report and **noted** that the planning timetable may change, and the role that CPHAC/DSAC would have in the planning process.

Management to circulate to members the approved Board and Committee Meeting dates set for 2010.

ISSUES FOR AGENDA – Next Meeting (Item 11)

- Respite care for families with young children

There being no further business the meeting concluded at 10.35 pm.

Chair

Date