

COMMUNITY AND PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE MEETING

Thursday 27 April 2017

9.30am

Board Room, Corporate Office Grey Base Hospital

AGENDA AND MEETING PAPERS

ALL INFORMATION CONTAINED IN THESE COMMITTEE
PAPERS IS SUBJECT TO CHANGE

The functions of CPHAC & DSAC, in accordance with their Terms of Reference and the New Zealand Public Health and Disability Act 2000 are:

"With respect to Community and Public Health, is to provide advice and recommendations to the Board of the West Coast District Health Board on:

- the health needs of the resident population of the West Coast District Health Board; and
- any factors that the Committee believes may adversely affect the health status of the resident population; and
- the priorities for the use of the health funding available.

With respect to Disability Support, are to provide advice and recommendations to the Board of the West Coast District Health Board on:

- the disability support needs of the resident population of the West Coast District Health Board; and
- the priorities for the use of the disability support funding provided."

The aim of the Committee's advice must be:

- to ensure that the services that the West Coast District Health Board provides or funds, along with the policies it adopts, will maximize the overall health gain for the resident population of the West Coast District Health Board; and
- to ensure that the kind of disability support services that the West Coast District Health Board provides or funds, along with the policies it adopts, will promote the inclusion and participation in society, and maximise the independence, of people with disabilities within the resident population of the West Coast District Health Board."

The Committee's advice to the Board must be consistent with the priorities identified in the New Zealand Health Strategy, the New Zealand Disability Strategy and with the Strategic Plan and the Disability



COMMUNITY & PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE MEETING To be held in the Board Room, Corporate Office, Greymouth Hospital Thursday 27 April 2017 commencing at 9.30am

ADMINISTRATION 9.30am

Karakia

Apologies

1. Interest Register

Update Committee Interest Register and Declaration of Interest on items to be covered during the meeting.

2. Confirmation of the Minutes of the Previous Meeting

10 March 2017

3. Carried Forward/ Action Items

REF	PORTS/PRESENTATIONS		9.35am
4.	Community and Public Health Update	Cheryl Brunton Medical Officer of Health, Community and Public Health	9.35am – 9.45am
5.	Planning & Funding Update	Sandy McLean Team Leader, Planning & Funding	9.45am – 9.55am
6.	Alliance Update	Sandy McLean Team Leader, Planning & Funding	9.55am – 10.05am
7.	General Business	Elinor Stratford Chair	10.05am – 10.15am

ESTIMATED FINISH TIME 10.15am

INFORMATION ITEMS

- Board Agenda 24 March 2017
- Chair's Report to last Board Meeting
- 2017 Committee Work Plan (Working Document)
- West Coast DHB 2017 Meeting Schedule
- C&PH 6 Monthly report to Ministry of Health (July-December 2016)

NEXT MEETING

Date of Next Meeting: Thursday 8 June 2017



E Te Atua i runga rawa kia tau te rangimarie, te aroha, ki a matou i tenei wa Manaaki mai, awhina mai, ki te mahitahi matou, i roto, i te wairua o kotahitanga, mo nga tangata e noho ana, i roto i tenei rohe o Te Tai Poutini mai i Karamea tae noa atu ki Awarua.

That which is above all else let your peace and love descend on us at this time so that we may work together in the spirit of oneness on behalf of the people of the West Coast.

COMMUNITY AND PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE MEMBERS' INTERESTS REGISTER



COMMUNITY AND PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE REGISTER OF MEMBERS' CONFLICTS/INTEREST

(As disclosed on appointment to the Board/Committee and updated from time-to time, as necessary)

Member	nt to the Board/Committee and updated from time-to time, as necessary) Disclosure of Interest
CHAIR Elinor Stratford (Board Member)	 Clinical Governance Committee, West Coast Primary Health Organisation Committee Member, Active West Coast Chairperson, West Coast Sub-branch - Canterbury Neonatal Trust Trustee, Canterbury Neonatal Trust Member, Arthritis New Zealand, Southern Regional Liaison Group President of the New Zealand Federation of Disability Information Centres
Lynnette Beirne	 Patron of the West Coast Stroke Group Incorporated Daughter employed as nurse for West Coast DHB Chair of West Coast DHB Consumer Council Consumer Representative on WCDHB Falls Coalition Committee Consumer Representative on WCDHB Stroke Coalition Committee Running a Homestay for DHB Students
Sarah Birchfield	 West Coast Autism Support Group – Volunteer and Support Person West Coast Special Olympics Steering Committee - Member
Cheryl Brunton	 Medical Officer of Health for West Coast - employed by Community and Public Health, Canterbury District Health Board Senior Lecturer in Public Health - Christchurch School of Medicine and Health Sciences (University of Otago) Member - Public Health Association of New Zealand Member - Association of Salaried Medical Specialists Member - West Coast Primary Health Organisation Clinical Governance Committee Member - National Influenza Specialist Group Member, Alliance Leadership Team, West Coast Better Sooner More Convenient Implementation Member - DISC Trust
Jenny McGill	 Husband employed by West Coast DHB Peer Support – Mum4Mum Information Consultant for West Coast Disability Resource Service
Joseph Mason	 Representative of Te Runanga o Kati Wae Wae Arahura Employee Community and Public Health, Canterbury DHB
Mary Molloy	 Spokesperson for Farmers Against 1080 Executive Member - Ban 1080 Political Party Director, Molloy Farms South Westland Ltd Trustee, L.B. & M.E. Molloy Family Trust Executive Member, Wildlands Biodiversity Management Group Inc.

Member	Disclosure of Interest
	Chair of the West Coast Community Trust
Peter Neame	• White Wreath Action Against Suicide - Member & Research Officer
Francois Tumahai (Deputy Chair) (Board Member)	 Te Runanga o Ngati Waewae - Chair Poutini Environmental - Director/Manager Arahura Holdings Limited - Director West Coast Regional Council Resource Management Committee - Member Poutini Waiora Board - Co-Chair Development West Coast - Trustee West Coast Development Holdings Limited - Director Putake West Coast - Director Waewae Pounamu - General Manager Westland Wilderness Trust - Chair Wife, Lisa Tumahai, is Chair, Tatau Pounamu Advisory Group
Jenny Black (ex-officio)	 Nelson Marlborough District Health Board – Chair Diabetes new Zealand – Life Member South Island Board – Chair National DHB Chairs - Chair
Chris Mackenzie (ex-officio)	 Development West Coast – Chief Executive Horizontal Infrastructure Governance Group – Chair Mainline Steam Trust - Trustee



DRAFT MINUTES OF THE COMMUNITY AND PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE held in the Board Room, Corporate Office, Grey Base Hospital on Friday 10 March 2017 commencing at 9.30am

PRESENT

Elinor Stratford (Chairperson); Lynette Beirne; Sarah Birchfield; Cheryl Brunton; Joe Mason; Mary Molloy; Peter Neame; Jenny Black (ex-officio).

APOLOGIES

Apologies were received and accepted from Jenny McGill, Francois Tumahai & Chris Mackenzie.

EXECUTIVE SUPPORT

Philip Wheble (Interim General Manager, Grey/Westland); Karyn Bousfield (Director of Nursing & Midwifery); Gary Coghlan (General Manager, Maori Health); Kathy O'Neill (Planning & Funding); and Kay Jenkins (Minutes).

WELCOME

Joe Mason led the Karakia.

1. INTEREST REGISTER

Additions/Alterations to the Interest Register

Sarah Birchfield advised that she is now a member of the West Coast Special Olympics Steering Committee.

Declarations of Interest for Items on Today's Agenda

There were no interests declared for items on today's agenda.

Perceived Conflicts of Interest

There were no perceived conflicts of interest.

2. MINUTES OF THE PREVIOUS MEETING

Resolution (1/17)

(Moved: Lynette Beirne; Seconded: Cheryl Brunton - carried)

"That the minutes of the meeting of the Community and Public Health and Disability Support Advisory Committee held on 1 December 2016 be confirmed as a true and correct record."

3. CARRIED FORWARD/ACTION ITEMS

The Carried Forward/Action Items were noted.

4. COMMUNITY & PUBLIC HEALTH UPDATE

Claire Robertson, Community & Public Health, presented this update on the following topics:

Smokefree

All three stop smoking practitioners within the new service Oranga Hā – Tai Poutini (Stop Smoking West Coast) have completed their training and are now delivering the cessation service. A Facebook campaign over the January period was successful in increasing the visibility of the service as well as resulting in 61 referrals through the Facebook link during the month of January.

A tobacco controlled purchase operation (CPO) was carried out in Westland, Grey and Buller Districts over two days in January by CPH and Ministry of Health Smokefree Enforcement staff. There were no sales of cigarettes to the underage volunteer in any the premises subject to the CPO. This is a pleasing result, however, CPH will continue to remain vigilant regarding cigarette sales to under 18 year olds.

Alcohol

CPH staff assisted West Coast Police to conduct alcohol controlled purchase operations (CPOs) in the Westland District in late December. There was one sale to the underage volunteer in Franz Josef and a Police prosecution is pending. The Alcohol Licencing Officer, alongside West Coast Police staff, monitored the Boxing Day horse races in Westport for compliance with the Sale and Supply of Alcohol Act. In line with their colleagues elsewhere in New Zealand, West Coast Police are strongly opposed to allowing BYO alcohol at such events.

With support from the Health Promotion Agency, Nathan Wallis visited students from the 7 West Coast secondary/area schools during the week of the 20th – 24th February to talk about "Teenagers, Alcohol and the Amazing Brain". Virtually all Year 9-13 students attended a session with Nathan during the week. There were also three community meetings in Hari Hari, Hokitika and Reefton. Young people's use of alcohol and the wider drinking culture have been identified by schools and the wider community as a wellbeing priority. This is part of an ongoing project with schools and communities to talk openly about alcohol and for people of all ages to be much more aware of the harms that are associated with alcohol.

In April, Rachael Dixon, the Chair of the Health Education Association (NZHEA) will visit the West Coast to run a workshop for schools on how to better include alcohol education in the curriculum.

Te Hā o Kawatiri Healthy Homes Curtain Bank

CPH continues to coordinate with Te Hā o Kawatiri, Community Energy Action (CEA), Poutini Waiora and the WCDHB, with respect to a curtain bank in Westport which will service the West Coast. The curtain bank will be in operation shortly.

Falls Prevention

A weekly tai chi class started in Karamea recently with an instructor who went through the training CPH supported last year. We are also trialling an additional class in Greymouth to support a growth in participant numbers.

Accessible West Coast

CPH has had input into a number of workshop on the West Coast to discuss and scope issues of accessibility across the West Coast. The group has committed to developing a Coalition that will focus on improving accessibility across the West Coast.

Westland Safe Community Accreditation

Community and Public Health is an active member of the Westland Safe Community Coalition. The Coalition has been working towards Westland becoming accredited as a Safe Community for some time. This has now been and was marked at a ceremony at the Westland District Council on the 23rd of February.

Drinking Water

CPH's West Coast Trainee Drinking Water Assessor (DWA) passed an external accreditation audit in November. This process is part of the accreditation of the South Island Drinking Water Assessment Unit which is run by CPH under contract to the Ministry of Health. It is designed to ensure that all work carried out by DWAs complies with legislation and best practice.

There were a number of water transgressions in some West Coast water supplies over the last three months. Adverse weather over the summer has been affecting supplies that are currently not treated, as well as ones where the source water is susceptible to degradation in storm events. However, for one of these at least (Kumara), it was noted that the Council recently agreed to fund an upgrade which will significantly improve this water supply. Of most concern is the ongoing history of transgressions in the Punakaiki water supply, which has again been on a boil water notice over the summer period. Buller District Council has been communicating regularly with CPH on this issue, but it is clear that further action needs to be taken to address this pattern of continuing non-compliance with Drinking Water Standards.

Discussion took place regarding Cyclone Ita which caused a lot of damage at Punakaiki and changed the source water conditions and affected the filters.

Emergency Response

As an emergency response agency, CPH staff were on stand-by for the recent extreme weather event on the West Coast. From a public health perspective the biggest impact of the so-called "weather bomb" event was the impact on water supplies noted above.

Mental Wellbeing

The "Pause Breathe Smile" mindfulness programme is being run this term in Grey Main School with the Year 3-4 class. Sessions are also being run for teaching staff as part of their professional development. This is leading to more of a whole school approach to incorporating mindfulness. Reefton Area School will participate in a similar programme in Term 2 with both staff and students, which will be co-facilitated with BullerREAP.

Nutrition

CPH will host a workshop on Food Security on 26th April. Invitations will be sent out shortly to individuals and organisations working with West Coasters who are struggling to provide sufficient nourishing food for themselves and their families. The purpose of the workshop is to start to build a picture of what food insecurity looks like on the West Coast, what activities are already taking place to address this, as well as highlighting any gaps and potential future actions.

Discussion took place regarding the ongoing problems at Punakaiki and the Committee noted that the damage caused in the bush by Cyclone Ita changed the source water conditions which in turn affect the filters. The Council are working on a solution to this which is a huge technical problem.

The report was noted.

5. DISABILITY ACTION PLAN UPDATE

Kathy O'Neill, Team Leader, Planning & Funding, presented a summary of activities undertaken in progressing the Priority Actions of the Disability Action Plan 2016-26.

The Committee noted that since the report was written there has been more engagement with People & Capability around the "Lifecycle Review" and more information is being received about staff with disabilities and the recruitment/health & wellbeing/training around people with disabilities.

Discussion took place regarding unmet need and the challenges around defining this.

The update was noted.

6. PLANNING & FUNDING UPDATE

Kathy O'Neill, Team Leader, Planning & Funding, presented this update. The report provided the Committee with an update on progress made on the Minister of Health's Health and Disability priorities and the West Coast DHBs Annual Plan key priority areas as follows:

Key Achievements

- Cardiovascular and Diabetes Checks: West Coast DHB continued to surpass the 90% target for Cardiovascular and Diabetes Checks for the period to 31 December 2016 - with 91.0% of the eligible enrolled West Coast population having had a cardiovascular risk assessment in the last 5 years. This is the eighth quarter in a row where the West Coast PHO teams have met or exceeded the national target.
- ED Health Target: Performance continues to be impressive with 99.8% (100%) of patients admitted, discharged or transferred from Grey Base ED within six hours during January 2017. The West Coast continues to lead the country in performance against this target.
- Elective Services Health Target: This quarter, West Coast DHB provided 991 elective surgical discharges, delivering 106.7% of planned discharges against target.
- Primary Care Smoking Health Target: West Coast health practitioners have reported giving 4,886 smokers cessation advice in the 15 months ending December 2016. This represents 91% of smokers against a 90% national target.

Key Issues & Associated Remedies

- B4 School Check Coverage: Since November, a further 41 children (5 high deprivation children) have received their B4 School Check bringing the year-to-date result to 31% (38% for high deprivation) of the eligible population so far receiving their Checks.
- ESPI 2 | FSA (First Specialist Assessment): The DHB was non-compliant against the maximum 120 days' wait time target for seventeen orthopaedic and seven plastic surgery patients as at 30 December. A number of these patients have since been seen, however delays in assessment for orthopaedic referrals remain an issue, due to transalpine staffing and service constraints. We anticipate a February recovery for plastic surgery cases.
- ESPI 5 | FSA to Treatment: Performance against ESPI 5 was more positive with only 5 plastic surgery patients exceeding the 120-day maximum wait times as at the end of December 2016. We anticipate a February recovery for plastic surgery cases.

The Committee noted that orthopaedics is a challenge going forward and a plan is in place to deal with plastics.

The report was noted.

7. ALLIANCE UPDATE

Kathy O'Neill, Team Leader, Planning & Funding, presented this update which provided an overview of progress made around the West Coast Alliance. The update covered: the Alliance Leadership Team; Health of Older Persons; Integrated Family Health Service Workstreams; Healthy West Coast; & Child and Youth.

Alliance Leadership Team (ALT)

At the last meeting in February the ALT:

- Received a presentation given by Fran Cook about the Primary & Community Project. The
 ALT noted the scale of this project but were pleased that many of the streams of work will
 enable the Alliance workstream goals.
- Noted the positive progress of all the workstreams.
- Noted that the Annual Planning process is well underway.

Health of Older Persons

- The membership of the Health of Older Persons Workstream has been reviewed and reinvigorated. The team would like to note there was excellent engagement at the initial planning meeting for 2017-18 Workplan.
- Work continues to refine and improve falls data collection within partners' systems as well as improving data quality in support of clearer referral pathways.
- The team have had preliminary discussions to identify Fracture Liaison Service functions that could be completed by incumbents in other clinical areas in the absence of having an established Falls Liaison Service.
- It has been noted that there has been an increase in 'hits' for the Cognitive Impairment Pathway on HealthPathways.

Integrated Family Health Service (IFHS) Workstreams (Grey | Westland, Buller & Reefton)

- As an outcome of ongoing discussions within the workstream and with staff regarding greater integration of services based in Reefton, a proposal was put to staff around how the DHB could support this through structural changes, combining of cost centres and administrative functions.
- Feedback was provided by staff and was generally supportive of the direction with a few areas that needed further consideration.
- Single cost centres and an administrative team have been agreed as a first steps that will be implemented.
- A working group will be put together to look at how an integrated nursing team could work in the future while ensuring key core competencies continue to be supported.
- Reefton has also brought on new nursing staff under an integrated position description that allows them to move across services, supporting each as required.

Healthy West Coast (HWC)

- Good work is underway to improve the coordination of the delivery of nutrition support for people in the community and increased support is being provided through the PHO's 'BetaMe' online support and smartphone app which was launched in January.
- The Coast's new Stop Smoking service, Oranga Hā Tai Poutini has had good success through a Facebook advertising campaign generating over 50 new self-referrals to the service. These self referrals bring highly motivated clients and therefore quit rates at 4 weeks (the standard reporting metric required by MoH) are above the 50% target.

Child and Youth

– Both the Child & Youth workstream and the Youth Health Action Group had the opportunity to hear a presentation by Dr Jean Simpson of the NZ Child & Epidemiology Service on their 2015 report "The Health Status of Children & Young People in Canterbury and West Coast". The presentation promoted discussions regarding many of the topics covered but in particular the issues facing young people with mental illness.

The report was noted.

8. HEALTH TARGET Q1 REPORT

Kathy O'Neill, Team Leader, Planning & Funding, presented this update.

The Committee noted the results against the targets and in particular the improvement in the Faster Cancer Treatment target. It was also noted that these are very small numbers and management continue to see fluctuations in this area.

The report was noted.

9. MAORI HEALTH UPDATE

Gary Coghlan, General Manager, Maori Health, presented this update which was taken as read.

Mr Coghlan spoke regarding the Health Equity Lens which is a work in progress, however the use of the equity tool across the system is influencing planning and development.

The Committee noted in particular the work being undertaken around better access for Rural Areas; Maori Nurse Workforce; and cultural competency training.

The update was noted.

10. DRAFT WEST COAST PUBLIC HEALTH PLAN

Claire Robertson, Community & Public Health presented the draft West Coast Public Health Plan to the Committee. It was noted that this is a companion to the West Coast Annual Plan and also the basis of Community & Public Health's contract with the Ministry of Health and how this is operationalised.

Resolution (2/17)

(Moved: Mary Molloy/seconded: Elinor Stratford – carried)

That the Community and Public Health & Disability Support Advisory Committee recommend to the Board that they:

i. Endorse the draft West Coast DHB Public Health Annual Plan

11, 2017 DRAFT COMMITTEE WORKPLAN

The Committee discussed the draft 2017 work plan and members noted that this is a working document and feedback can be provided to the Chair at any time. Suggestions were made regarding some presentations.

12. GENERAL BUSINESS

- i. The Committee noted that the DSS Newsletter will now be included in the information papers as it becomes available.
- ii. The Chair advised that she had received an invitation to "Y Mobility" from 10am 12noon today which is situated in the Y Furniture Shop.
- iii. Thanks were extended to management for their attendance in the recent public meetings.
- iv. Discussion took place regarding the amended regulations around the use of 1080.

INFORMATION ITEMS

- Board Agenda 10 February 2017
- Chair's Report to last Board meeting
- West Coast DHB 2017 Meeting Schedule

There being no further business the meeting concluded at 10.50am.

Confirmed as a true and correct record: Elinor Stratford, Chair Date

CARRIED FORWARD/ACTION ITEMS



COMMUNITY AND PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE CARRIED FORWARD/ACTION ITEMS AS AT 27 APRIL 2017

	DATE RAISED/	ACTION	COMMENTARY	STATUS
	LAST UPDATED			
1.	1 December 2016	Water Quality	On-going updates to be provided to the Committee	As required

UPCOMING PRESENTATIONS

TOPIC	STATUS
Consumer Council	June/July 2017
Drinking Water Systems and Protection	To be scheduled

COMMUNITY AND PUBLIC HEALTH UPDATE



TO: Chair and Members

Community and Public Health & Disability Support Advisory Committee

SOURCE: Community and Public Health

DATE: 27 March 2017

Report Status – For:	Decision	Noting <a>V	Information	
±		8		

1. ORIGIN OF THE REPORT

This report is a standing agenda item, providing information regarding the work of Community and Public Health on the West Coast.

2. RECOMMENDATION

That the Community and Public Health & Disability Support Advisory Committee i notes the Community and Public Health Update

3. **SUMMARY**

The purpose of this report is to provide the Committee with information and highlights of Community and Public Health's work.

4. APPENDICES

Appendix 1: Community and Public Health Update

Report prepared by: Claire Robertson – West Coast Team Leader

Community and Public Health

Report approved for release by: Dr Cheryl Brunton, Public Health Specialist and

Derek Benfield, Regional Manager, Community and Public Health

REPORT to CPHAC/DSAC COMMUNITY AND PUBLIC HEALTH (CPH)

April 2017

Smokefree

CPH and the other members of the West Coast Tobacco Free Coalition will be promoting Smokefree lifestyles during May. World Smokefree Day is on 31 May. Promotions will be held in Westport and Greymouth during Smokefree May. The theme this year is "It's about Whānau". Whānau is a driving force for many people being motivated to quit to protect others from the harms of second-hand smoke.



The Oranga Hā – Tai Poutini (Stop Smoking West Coast) service continues to enrol clients and 51 people have already successfully quit smoking (defined as smokefree at 4-weeks post target quit date) with the help of the service's stop smoking practitioners. Following on from the success of January's Facebook campaign, another Facebook campaign will be run during April and May. As well as promoting the service, this will also showcase clients who were successful in quitting after the last campaign.

Alcohol

CPH staff joined West Coast Police and the Westland District Licensing Inspector in a meeting with Westland Racing Club Committee members to discuss the sale and supply of alcohol at future race meetings at Hokitika Racecourse. Clarity was provided to the club in respect of BYO not being permitted on a Special-Licence. The meeting was very constructive in paving the way to BYO free future events.

As part of the 'Teenagers, Alcohol and the Amazing Brain' project, a survey has been conducted recently with Year 9-13 students from West Coast secondary and area schools. More than 900 students have taken part. They have been asked about their perceptions of alcohol and its use among other teenagers. The CPH Information Team have assisted with developing the survey and will analyse the survey data and prepare a report on the findings.

Also part of this project, and following on from Nathan Wallis' presentations last month, a workshop for teachers with Rachael Dixon of the NZ Health Education Association was held earlier this month. Rachael had some great ideas for incorporating alcohol education into the curriculum and the teachers who attended are keen to work on this.

Te Pūtahitanga & Tāne Ora

Alongside WCDHB, Poutini Waiora and members of Te Hā o Kawatiri, CPH attended a meeting with Te Pūtahitanga for an update on their work and some examples of other region's initiatives funded through Te Pūtahitanga. While they were together, group membersalso discussed further the idea of having a focus on Tāne Ora (Māori men's wellbeing). It was agreed that this kaupapa is important and an area of need identified by whānau, community and partners but that the right process needs to be followed, including being specific about what it is within the kaupapa of Tāne Ora we would like to achieve.

Nutrition

CPH will host a workshop on Food Security in Greymouth on 26th April. Invitations have been sent to individuals and organisations working with West Coasters who are struggling to provide sufficient nourishing food for themselves and their families. We have had a very good response so far and estimate that 25-30 people will attend. The purpose of the workshop is to start to build a picture of what food insecurity looks like on the West Coast, what activities are already taking place to address this, as well as highlighting any gaps and potential future actions. Planning for the workshop is well underway and some pre-work has been sent to participants. We plan to compile a report on the workshop findings to help inform action.

CPH has been running an Appetite for Life with the Hauora Tinana group at Poutini Waiora, Hokitika. About 15 people have been attending, and the response so far has been very positive. There are two more sessions to be run in this course. Future Appetite for Life courses are currently being planned.

CPH ran two nutrition workshops at Westport Kindergarten, reaching 26 parents and 2 teachers which is a fantastic turn out. Westport Kindergarten have signed up for the Heart Foundation' Healthy Heart Award, and CPH is supporting them on their journey with this. There were a lot of questions around fussy eating, packet free lunchboxes, label reading, low sugar yoghurts, the use of fluoride toothpaste and sugary drinks.

Health Promoting Schools

A Community Partnerships meeting was held recently at Grey High. The participants included the school pastoral team (school senior leadership, year deans, and school counsellors) as well as outside representatives from statutory agencies, NGOs and health and social services. The purpose of the meeting was for the school's pastoral team to meet providers and hear about services available to their students, including referral criteria and processes. It was agreed that this would be a regular bi-monthly meeting.

TPP wellbeing day

Another successful wellbeing event was held at Tai Poutini Polytech with 100+ students attending over lunchtime on 3rd April. The theme again was the Wellbeing WoF, promoting the 5 ways to wellbeing & local services & activities. Approximately 15 local services were present, including CAMHS, Poutini Waiora, Sexual Health services, St Johns, ANZ bank, belly dancing & a local DJ played some tunes. We provided healthy kai tasters with recipes, promoting healthy eating on a budget, and also promoted Oranga Hã, getting 4-5 sign ups. CPH are hoping to run a Stop Smoking group within TPP.

Pause Breathe Smile - Grey Main

CPH has completed another Pause Breathe Smile (PBS) programme with P3-4 class (26 students) at Grey Main. A weekly session for staff was also completed as part of their PD. This was to give the teachers some knowledge & information about mindfulness within the classroom, but also as a way of promoting positive staff wellbeing. Working with teaching staff has meant that a wider impact has been had within the school & PBS has been spread more widely throughout the whole school with various teachers using some of the mindfulness practices within their classrooms. Classroom Teacher feedback:

Thank you so much for all of you have done for me and P1 you have given us so many different strategies that we now use on a daily basis.

Staff feedback:

Your advice has been very helpful. I will make sure I use the techniques when needed.

Further PBS is starting at Reefton Area School in term 2, with 2 classes & also staff sessions, again in response to concerns about staff wellbeing.

PLANNING & FUNDING UPDATE



TO: Chair and Members

Community and Public Health & Disability Support Advisory Committee

SOURCE: Planning & Funding

DATE: 27 April 2017

Report Status – For: Decision 🗖 Noting 🛂 Information 🗖	Report Status – For:	Decision	Noting	Information	
--	----------------------	----------	--------	-------------	--

1. ORIGIN OF THE REPORT

This report is a standing agenda item, highlighting the progress made on the Minister of Health's health and disability priorities and the key priority areas from the West Coast DHB's Annual Plan.

2. RECOMMENDATION

That the Committee notes the Planning & Funding Update.

3. **SUMMARY**

✓ Key Achievements

- **ED Health Target:** Performance continues to be impressive with 99.4% of patients admitted, discharged or transferred from Grey Base ED within six hours during March 2017. The West Coast continues to lead the country in performance against this target.
- Elective Services Health Target: West Coast DHB has provided 1,193 elective surgical discharges to 28 February. Delivering 106% of planned discharges against target.

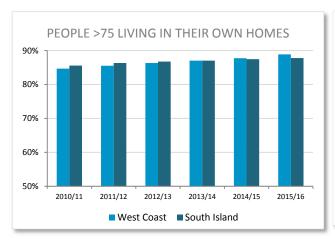
✗ Key Issues & Associated Remedies

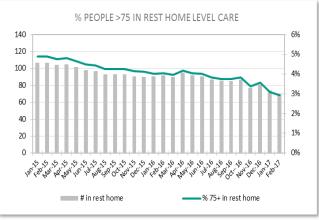
- Aged Residential Care Services: A HealthCert (Ministry of Health) audit of Greymouth's Kowhai/Granger facilities in February resulted in the Ministry withdrawing certification for Kowhai Manor. The DHB moved to support the residents and their families. The level of need for each individual was assessed and Kowhai residents were supported into alternative accommodation.
- ESPI 2 | First Specialist Assessment (FSA): For the third month in a row, West Coast DHB was non-compliant against the maximum 120 days' national wait time target, with 49 orthopaedic and 13 plastic surgery patients overdue for FSA as at 28 February 2017. A concerted effort was undertaken to get these overdue patients seen in March and it is anticipated that this will reflect us being back within overall ESPI compliance tolerance levels once month-end data is confirmed. Delays in assessment for orthopaedic referrals remain an issue, due to transalpine staffing and service constraints.
- **ESPI 5** | **FSA to Treatment:** Performance against ESPI 5 was more positive than ESPI 2, with only six patients exceeding the 120-day maximum wait time as at the end of February 2017 (five orthopaedic and one plastic surgery patient). This is within ESPI compliance tolerance levels. We anticipate a March recovery for the overdue cases.

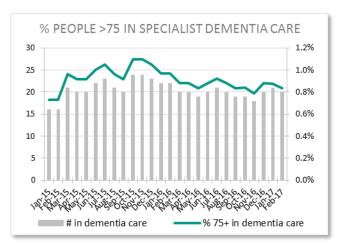
Report prepared by: Planning & Funding

Report approved for release by: Carolyn Gullery, General Manager, Planning & Funding

Health of Older Persons





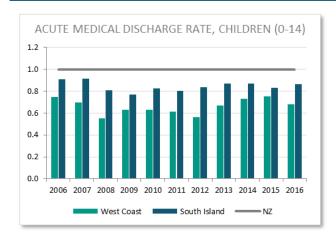


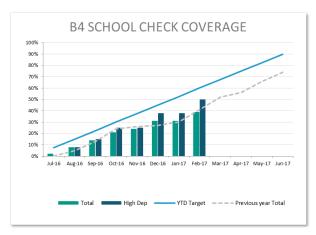
Achievements / Issues of Note

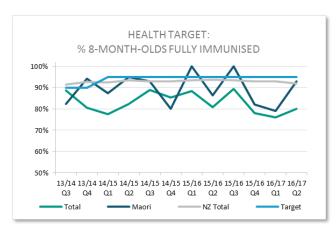
Aged Residential Care: A HealthCert (Ministry of Health) audit of Greymouth's Kowhai/Granger facilities in February resulted in Ministry withdrawing certification for Kowhai Manor. Over three weeks a group of registered nurses who work with the West Coast DHB met with each resident and undertook an assessment to check their level of need. Based on these assessments the Complex Clinical Care Network (CCCN) team worked with families to ensure the moving of residents to their new homes was a success. This has now been completed and all residents have been moved.

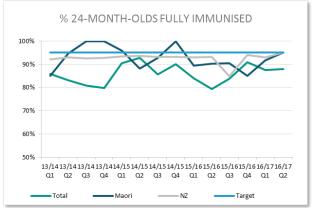
The DHB is providing additional support to the second facility, Granger house, and has appointed a temporary manager Mary Pecekajus. Mary is a registered nurse with expertise in aged residential care facility management and will be in the temporary manager position for six weeks (March to April). The situation is being monitored closely.

Child, Youth & Maternity









Achievements / Issues of Note

Immunisation: West Coast DHB's Quarter two two-year-old immunisation result was 88%, against the national target of 95%. This quarter saw strong outcomes for all key ethnicity groups. Pacific and Asian children (100%), New Zealand European (NZE) and Maori (95%), which means the performance target was reached for these key groups. Unfortunately the Other (25%) group was not achieved.

Despite the target not being reached, all consenting children were reached this quarter. Of the 72 eligible children, 63 consented to be vaccinated with six opting off and three declining immunisation, this is a combined total of nine children or 12% making it impossible to reach the target.

B4 School Check Coverage: 154 children (20 high deprivation children) have received their B4 School Check as at the 28th of February. This brings the year-to-date result to 39% (50% for high deprivation) of the eligible population having so far received their checks. Twenty-eight children received a B4 School Check at Gloriavale during October. Inclusion of these in the total brings the result to 46%.

Work continues to find eligible children for their checks and the service has increased its flexibility to provide pop up clinics as necessary for example in Westport and Karamea during February.

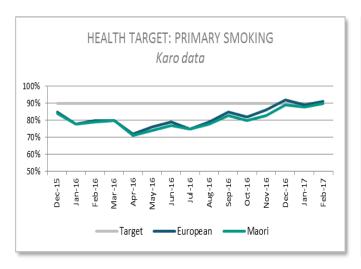
Mental Health

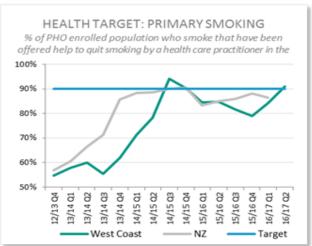
IMPROVING THE HEAL	TH STATUS OF PEOPLE	WITH SEVERE	MENTAL ILLI	NESS THROUG	H IMPROVED A	ACCESS - QUAF	RTER 2 2016/17
		Target	Q4 1415	Q2 1516	Q4 1516	Q2 1617	Progress
	o Total		6.1%	6.27%	5.46%	5.16%	-0.3%▼
Age 0-19	o Maori	>3.8%	8.52%	7.73%	6.86%	5.41%	-1.45%▼
	o Other		5.53%	5.93%	3%	5.1%	2.1%
	o Total		4.99%	5.12%	5.24%	5.54%	0.3%▲
Age 20-64	o <i>Maori</i>	>3.8%	8.45%	7.88%	7.79%	7.96%	0.17%
	o Other		4.61%	4.8%	4.95%	5.26%	0.31%
	o Total		1.6%	1.74%	2.4%	2.33%	-0.07%▼
Age 65+	o <i>Maori</i>	3%	1.74%	1.84%	2%	2.59%	0.59%
	o Other		1.59%	1.84%	2.04%	2.32%	0.28%

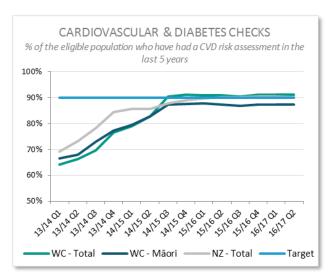
Achievements / Issues of Note

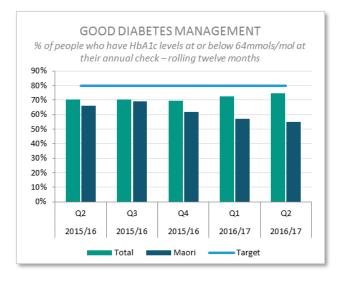
Service Transformation: After a thorough recruitment process for the Specialist Mental Health Service Operations Manager role, an appointment has now been made. Over the next month the appointee will transition into the position with a comprehensive handover.

Primary Care & Long-Term Conditions









Achievements / Issues of Note

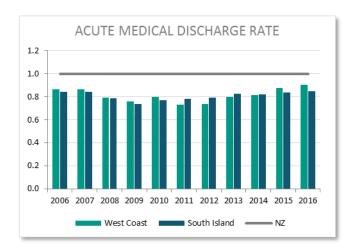
Health Target | Primary Care Smoking: The DHB was pleased to note an improvement in performance during quarter two. West Coast health practitioners reported giving 4,886 smokers cessation advice in the 15 months ending December 2016. This represents 91% of smokers against the 90% national target.

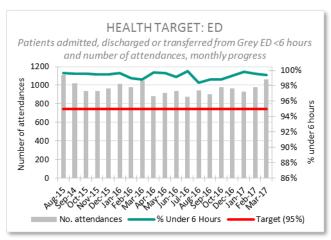
Cardiovascular and Diabetes Checks: The DHB achieved a result of 91% of the eligible enrolled population having had a cardiovascular and diabetes risk assessment in the last five years as at the end of December 2016 (against the national target of 90%). Results for West Coast Maori remain lower at 87.4%.

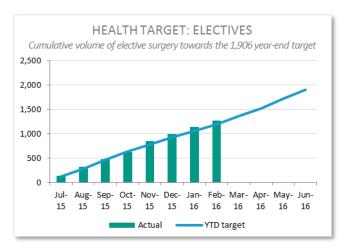
Diabetes Management: 74.5% of people with diabetes had good management of the disease in the twelve months to 31 December 2016 (as defined by having an HbA1c level at or below 64mmols at time of their diabetes check). This was up from 69.3% as at 30 September 2016. Results for our Maori population were lower however, at just 55% for the December quarter.

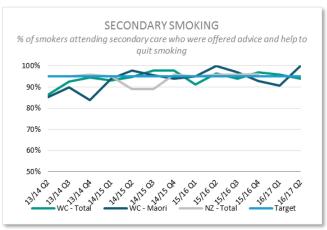
As highlighted last meeting, we are actively working with the West Coast Primary Health Organisation (PHO), Poutini Waiora and the Healthy West Coast Workstream to identify opportunities to improve our approach for Maori patients who have conditions such as diabetes and cardiovascular disease. We anticipate that a culturally appropriate focus on prevention and early intervention and will help to improve engagement with screening programmes.

Secondary Care & System Integration









Achievements / Issues of Note

Health Target | ED: The West Coast DHB continued to achieve impressive results with 99.4% of patients admitted, discharged or transferred from Grey Base ED within six hours during March 2017. Of those attending, 94.8% of people were seen within just four hours.

Secondary Smoking: During quarter two, West Coast DHB staff provided 94.1% of all hospitalised smokers with smoking cessation advice and support against the 95% national target (100% for Maori). This equates to 288 smokers receiving advice from 306 who were discharged from hospital during this period.

Health Target | Electives: West Coast DHB was 75 discharges ahead of year-to-date progress target as at the end of February (at 106% of target). West Coast DHB is required to deliver 1,906 elective and arranged discharges in 2016/17 and by the end of February had reached 1,193.

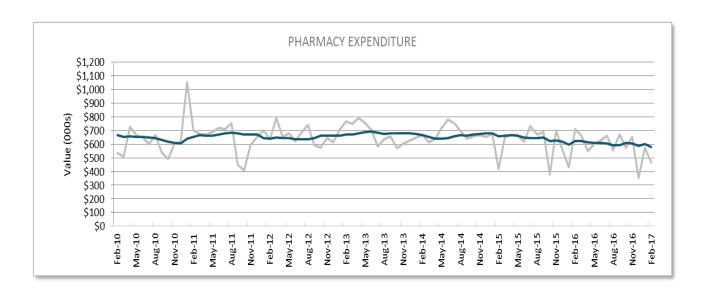
ESPI Compliance | **ESPI 2** (**First Specialist Assessment**): There were 62 patients awaiting outpatient appointments as at the end of February, including 49 orthopaedic and 13 plastic surgery patients. A number of patients who were non-compliant have been seen in the interim, following a concerted effort in March to get these cases reviewed. We anticipate a March recovery of this situation to bring ESPI compliance back within tolerance levels. Delays in orthopaedic wait times for assessment referrals remain an ongoing issue and will likely continue in the immediate future due to transalpine staffing and service constraints.

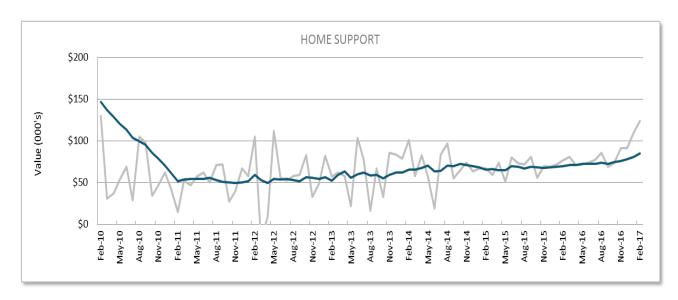
ESPI Compliance | **ESPI 5 (FSA to Treatment):** The DHB exceeded the 120-day maximum wait times from FSA to surgical treatment for five orthopaedic and one plastic surgery patient as at end of February 2017. As above, a number of patients who were non-compliant have been provided their surgery in the interim, following a concerted effort in March to get these cases undertaken. We anticipate a March recovery of this situation to bring ESPI compliance back within tolerance levels.

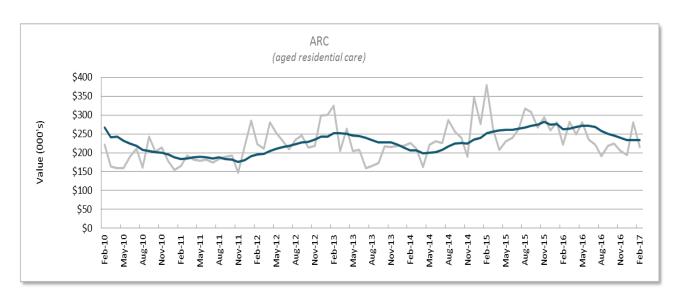
Financials

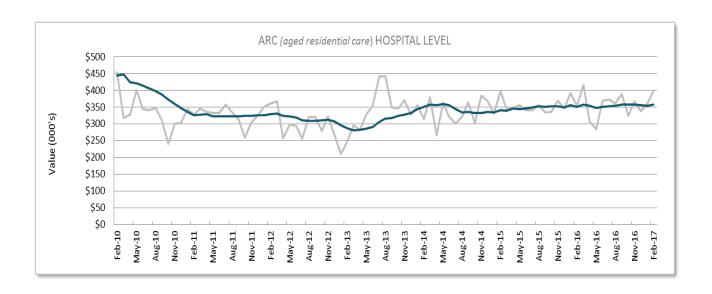
Planning and Funding Division Month Ended February 2017

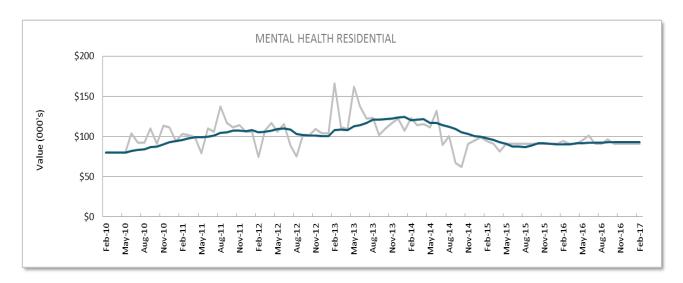
	Current Mont	h				Year to	Date	
Actual	Budget	Varia	nce	SERVICES	Actual	Budget	Varia	nce
\$000	\$000	\$000	%		\$000	\$000	\$000	%
				EXPENDITURE				
	20		100/	Primary Care	210	225	_	201
15	28	14	48%	Dental-school and adolescent	219	227	7	3%
26	21	-5	-22% ×	Maternity	159	171	12	7%
1	1	0	20%	Pregnancy & Parent Sexual Health	10	10	0	2%
0	0 4	0 4	100%	General Medical Subsidy	0 16	0 33	17	51%
516	522	6	1%	Primary Practice Capitation	4,199	4,178	-21	-1%
91	91	0	0%	Primary Health Care Strategy	728	729	-21 1	0%
87	87	0	0% ✓	Rural Bonus	699	699	0	0%
4	4	0	-4% ×	Child and Youth	40	33	-7	-21%
3	10	7	70%	Immunisation	26	83	57	68%
5	5	0	1%	Maori Service Development	38	38	0	0%
52	45	-7	-15% ×	Whanau Ora Services	417	362	-55	-15%
23	14	-10	-71% ×	Palliative Care	128	110	-17	-16%
0	6	6	100%	Community Based Allied Health	58	51	-7	-14%
10	10	0	0% ×	Chronic Disease	84	84	0	0%
31	61	30	49% 🗸	Minor Expenses	306	487	181	37%
865	912	47	5% v	•	7,126	7,295	168	2%
				Referred Services				
26	26	0	0% ×	Laboratory	210	209	-1	-1%
615	666	51	8% 🗸	Pharmaceuticals	4,705	5,327	623	12%
641	692	51	7% ✓		4,915	5,536	622	12%
				Secondary Care				
122	223	101	45%	Inpatients	1,243	1,785	542	30%
139	126	-13	-11% ×	Radiolgy services	1,171	1,006	-164	-16%
78	114	36	32%	Travel & Accommodation	772	908	136	15%
1,399 1,737	1,425 1,888	27 151	2% ×	IDF Payments Personal Health	11,309 14,495	11,403	95 608	1%
3,244	3,492	248	8% <u>*</u>	Primary & Secondary Care Total	26,536	15,103 27,934	1,398	4% 5%
3,244	3,472	240	170	Public Health	20,550	21,734	1,570	070
43	23	-20	-86% ×	Nutrition & Physical Activity	129	186	57	31%
11	11	0	0% 🗸	Tobacco control	95	89	-6	-7%
54	34	-20	-58% ×	Public Health Total	224	275	51	19%
				Mental Health				
7	7	0	0% 🗸	Dual Diagnosis A&D	57	57	0	0%
0	0	0	✓	Inpatients	11	0	-11	
20	20	0	0% 🗸	Child & Youth Mental Health Services	160	160	0	0%
5	8	2	33% 🗸	Mental Health Work force	114	60	-54	-91%
39	61	21	35%	Day Activity & Rehab	363	486	123	25%
11	11	0	0% ×	Advocacy Consumer	85	85	0	0%
103	81	-22	-27% ×	Other Home Based Residential Support	757	647	-110	-17%
11	11	0	3%	Advocacy Family	88	88	0	0%
10	16	6	38%	Community Residential Beds	78	127	49	38%
66	66	0	-1% ×	IDF Payments Mental Health	525	524	0	0%
271	279	8	3% ✓	Older Persons Health	2,237	2,234	-3	0%
0	0	0	100%	Needs Assessment	0	1	1	100%
75	84	9	11%	Home Based Support	795	675	-121	-18%
6	6	-1	-9% X	Caregiver Support	45	47	2	-10% 4%
169	242	73	30%	Residential Care-Rest Homes	1,753	1,933	181	9%
8	9	1	9% 🗸	Residential Care-Community	73	73	1	1%
371	404	33	8% 🗸	Residential Care-Hospital	3,148	3,234	86	3%
10	10	0	2% 🗸	Day programmes	105	80	-25	-31%
3	11	8	73%	Respite Care	64	88	24	27%
1	1	0	0% 🗸	Community Health	10	10	0	0%
12	1	-11	-820% ×	Minor Disability Support Expenditure	21	11	-11	-100%
99	99	0	0% 🗸	IDF Payments-DSS	794	795	0	0%
755	868	112	13% 🗸		6,808	6,946	138	2%
1,026	1,147	119	10% 🗸	Mental Health & OPH Total	9,046	9,180	134	1%

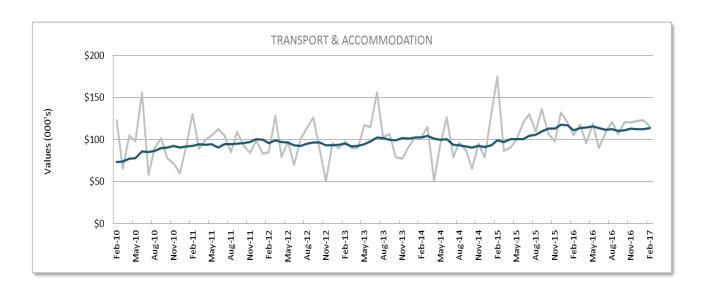












ALLIANCE UPDATE



TO: Chair and Members

Community and Public Health & Disability Support Advisory Committee

SOURCE: Planning & Funding

Alliance Leadership Team

DATE: 27 April 2017

Report Status – For:	Decision	Noting 🗸	Information	
Report Status - Por.	Decision 🗖	roung 🔛	IIIIOIIIIauoii 🗀	

1. ORIGIN OF THE REPORT

This report is a standing agenda item, highlighting the progress made by the West Coast Alliance.

2. **RECOMMENDATION**

That the Committee;

i. Notes the Alliance Update.

3. **SUMMARY**

Progress of Note:

Alliance Leadership Team (ALT)

At the last meeting in March the ALT:

- Were pleased to note the clarity in this year's workstream workplans and the workstream leads have been congratulated on this.
- O Noted the good engagement with schools in the recent alcohol presentations by Nathan Wallis, "Alcohol and the Amazing Brain".
- O Noted again the importance of the system enablers (workforce, settings, integrated information systems & transport) for delivery on the workplans.
- o Endorsed both the draft Annual Plan and the draft System Level Measures framework Improvement Plan.

Health of Older Persons

- Work has commenced with Information Services Group to collect data on falls from Emergency Department events to begin identifying patients for the fracture liaison service.
- The workstream noted the closure of Kowhai Manor following MOH withdrawal of certification on failure of their recent audit.
- O The workstream will be considering how the gap left by the closure of Kowhai Manor Aged Residential Care facility can be managed in a proactive and sustainable manner.

Integrated Family Health Service (IFHS) Workstreams (Grey | Westland, Buller & Reefton)

- The patient portal is now live and will be tested with a select group of patients initially at Grey Medical.
- O Development work is underway to create a primary urgent care service to provide greater access for communities to primary care. The service is being designed to ensure that it

- supports the primary practices in continuing to provide planned and proactive care to our communities.
- O The Proposal for change for integrating the workforce at Reefton was approved and as at 1st July the team will be fully integrated

Healthy West Coast (HWC)

- O Subject matter expert, Nathan Wallis visited the West Coast in February and spoke to all year 9-13 students from the seven secondary and area schools. There were also three community meetings about alcohol use and its impacts on brain development.
- Rachael Dixon from the Health Education Association (NZHEA) is visiting the Coast in April to run a workshop for secondary teachers on integrating alcohol education into the curriculum for year 9-11 students.

Child and Youth

 Initial discussions have taken place between the DHB Sexual Health service, Community & Public Health, PHO and school based health service (Public Health Nursing) regarding how to reorganise contraceptive advice and treatment in light of the closure of the Greymouth Family Planning clinic.

Report prepared by: Jenni Stephenson, Planning & Funding **Report approved for release by:** Stella Ward, Chair, Alliance Leadership Team



WEST COAST DISTRICT HEALTH BOARD MEETING to be held at West Coast PHO Board Room, 163 Mackay Street, Greymouth on Friday 24 March 2017 commencing at 10.15am

KARAKIA
ADMINISTRATION
10.15am

Apologies

- 1. Interest Register
- 2. Confirmation of the Minutes of the Previous Meetings
 - 10 February 2017
- 3. Carried Forward/Action List Items (there are no carried forward items)

REP	PORTS		10.20am
4.	Chair's Update (Verbal Update)	Jenny Black Chairperson	10.20am - 10.30am
5.	Chief Executive's Update	David Meates Chief Executive	10.30am – 10.45am
6.	Clinical Leader's Update	Karyn Bousfield Director of Nursing & Midwifery Stella Ward Executive Director Allied Health Mr Pradu Dayaram Medical Director, Facilities Development	10.45am – 10.55am
7.	Finance Report	David Meates Chief Executive	10.55am – 11.05am
8.	Wellness Health & Safety Report	Michael Frampton General Manager, People & Capability	11.05am – 11.15am
9.	Disability Action Plan Update	Melissa Macfarlane Team Leader, Planning & Funding	11.15am – 11.25am
10.	Health Target Report – Quarter 2	Melissa Macfarlane Team Leader, Planning & Funding	11.25am – 11.35am
11.	Maori Health Update	Gary Coghlan General Manager, Maori Health	11.35am – 11.45am
12.	Draft West Coast DHB Public Health Plan 2017-18	Cheryl Brunton Medical Officer of Health Claire Robertson Team Leader, Community & Public Health	11.45am – 11.55am

13. Reports from Committee Meetings

- CPH&DSAC Elinor Stratford 11.55am – 12.05pm 10 March 2017 Chair, CPH&DSA Committee

- Hospital Advisory Committee Michelle Lomax
10 March 2017 Chair, Hospital Advisory Committee

12.05pm - 12.15pm

14. **Resolution to Exclude the Public**Board Secretary 12.15pm

INFORMATION ITEMS

- 2017 Meeting Schedule
- List of Common Acronyms Working Document

ESTIMATED FINISH TIME 12.15pm

NEXT MEETING: Friday 12 May 2017

COMMUNITY & PUBLIC HEALTH & DISABILITY SUPPORT ADVISORY COMMITTEE MEETING UPDATE 10 MARCH 2017



TO: Chair and Members

West Coast District Health Board

SOURCE: Chair, Community & Public Health & Disability Support Advisory Committee

DATE: 24 March 2017

Report Status – For:	Decision	Noting	$\overline{\mathbf{V}}$	Information	

1. ORIGIN OF THE REPORT

This report is provided to the West Coast DHB Board as an interim update on the Community & Public Health & Disability Support Advisory Committee (CPH&DSAC) meeting of 10 March 2017.

For the Board's information the functions of CPH&DSAC, in accordance with their Terms of Reference and the New Zealand Public Health and Disability Act 2000:

"With respect to Community and Public Health, is to provide advice and recommendations to the Board of the West Coast District Health Board on:

- the health needs of the resident population of the West Coast District Health Board; and
- any factors that the Committee believes may adversely affect the health status of the resident population, and
- the priorities for the use of the health funding available

With respect to Disability Support, are to provide advice and recommendations to the Board of the West Coast District Health Board on:

- the disability support needs of the resident population of the West Coast District Health Board, and
- the priorities for the use of the disability support funding provided."

The aim of the Committee's advice must be:

- to ensure that the services that the West Coast District Health Board provides or funds, along with the policies it adopts, will maximise the overall health gain for the resident population of the West Coast District Health Board, and
- to ensure that the kind of disability support services that the West Coast District Health Board provides or funds, along with the policies it adopts, will promote the inclusion and participation in society, and maximise the independence, of people with disabilities within the resident population of the West Coast District Health Board."

The Committee's advice to the Board must be consistent with the priorities identified in the New Zealand Health Strategy, the New Zealand Disability Strategy and with the Strategic Plan and the Disability Support Action Plan of the West Coast District Health Board."

2. RECOMMENDATION

That the Board:

i. notes the Community & Public Health & Disability Support Advisory Committee Meeting Update – 10 March 2017.

SUMMARY

ITEMS OF INTEREST FOR THE BOARD

a) COMMUNITY AND PUBLIC HEALTH UPDATE

This report was provided to the Committee with updates as follows:

Smokefree

All three stop smoking practitioners within the new service Oranga Hā – Tai Poutini (Stop Smoking West Coast) have completed their training and are now delivering the cessation service. A Facebook campaign over the January period was successful in increasing the visibility of the service as well as resulting in 61 referrals through the Facebook link during the month of January.

A tobacco controlled purchase operation (CPO) was carried out in Westland, Grey and Buller Districts over two days in January by CPH and Ministry of Health Smokefree Enforcement staff. There were no sales of cigarettes to the underage volunteer in any the premises subject to the CPO. This is a pleasing result, however, CPH will continue to remain vigilant regarding cigarette sales to under 18 year olds.

Alcohol

CPH staff assisted West Coast Police to conduct alcohol controlled purchase operations (CPOs) in the Westland District in late December. There was one sale to the underage volunteer in Franz Josef and a Police prosecution is pending. The Alcohol Licencing Officer, alongside West Coast Police staff, monitored the Boxing Day horse races in Westport for compliance with the Sale and Supply of Alcohol Act. In line with their colleagues elsewhere in New Zealand, West Coast Police are strongly opposed to allowing BYO alcohol at such events.

With support from the Health Promotion Agency, Nathan Wallis visited students from the 7 West Coast secondary/area schools during the week of the 20th – 24th February to talk about "Teenagers, Alcohol and the Amazing Brain". Virtually all Year 9-13 students attended a session with Nathan during the week. There were also three community meetings in Hari Hari, Hokitika and Reefton. Young people's use of alcohol and the wider drinking culture have been identified by schools and the wider community as a wellbeing priority. This is part of an ongoing project with schools and communities to talk openly about alcohol and for people of all ages to be much more aware of the harms that are associated with alcohol.

In April, Rachael Dixon, the Chair of the Health Education Association (NZHEA) will visit the West Coast to run a workshop for schools on how to better include alcohol education in the curriculum.

Te Hā o Kawatiri Healthy Homes Curtain Bank

CPH continues to coordinate with Te Hā o Kawatiri, Community Energy Action (CEA), Poutini Waiora and the WCDHB, with respect to a curtain bank in Westport which will service the West Coast. The curtain bank will be in operation shortly.

Falls Prevention

A weekly tai chi class started in Karamea recently with an instructor who went through the training CPH supported last year. We are also trialling an additional class in Greymouth to support a growth in participant numbers.

Accessible West Coast

CPH has had input into a number of workshop on the West Coast to discuss and scope issues of accessibility across the West Coast. The group has committed to developing a Coalition that will focus on improving accessibility across the West Coast.

Westland Safe Community Accreditation

Community and Public Health is an active member of the Westland Safe Community Coalition. The Coalition has been working towards Westland becoming accredited as a Safe Community for some

time. This has now been and was marked at a ceremony at the Westland District Council on the 23rd of February.

Drinking Water

CPH's West Coast Trainee Drinking Water Assessor (DWA) passed an external accreditation audit in November. This process is part of the accreditation of the South Island Drinking Water Assessment Unit which is run by CPH under contract to the Ministry of Health. It is designed to ensure that all work carried out by DWAs complies with legislation and best practice.

There have been a number of water transgressions in some West Coast water supplies over the last three months. Adverse weather over the summer has been affecting supplies that are currently not treated, as well as ones where the source water is susceptible to degradation in storm events. However, for one of these at least (Kumara), we note that the Council has recently agreed to fund an upgrade which will significantly improve this water supply. Of most concern is the ongoing history of transgressions in the Punakaiki water supply, which has again been on a boil water notice over the summer period. Buller District Council has been communicating regularly with CPH on this issue, but it is clear that further action needs to be taken to address this pattern of continuing non-compliance with Drinking Water Standards.

Emergency Response

As an emergency response agency, CPH staff were on stand-by for the recent extreme weather event on the West Coast. From a public health perspective the biggest impact of the so-called "weather bomb" event was the impact on water supplies noted above.

Mental Wellbeing

The "Pause Breathe Smile" mindfulness programme is being run this term in Grey Main School with the Year 3-4 class. Sessions are also being run for teaching staff as part of their professional development. This is leading to more of a whole school approach to incorporating mindfulness. Reefton Area School will participate in a similar programme in Term 2 with both staff and students, which will be co-facilitated with BullerREAP.

Nutrition

CPH will host a workshop on Food Security on 26th April. Invitations will be sent out shortly to individuals and organisations working with West Coasters who are struggling to provide sufficient nourishing food for themselves and their families. The purpose of the workshop is to start to build a picture of what food insecurity looks like on the West Coast, what activities are already taking place to address this, as well as highlighting any gaps and potential future actions.

Discussion took place regarding the ongoing problems at Punakaiki and the Committee noted that the damage caused in the bush by Cyclone Ita changed the source water conditions which in turn affect the filters. The Council are working on a solution to this which is a huge technical problem.

The report was noted.

b) PLANNING & FUNDING UPDATE

This report provided the Committee with an update on progress made on the Minister of Health's health and disability priorities and the West Coast DHBs Annual Plan key priority areas as follows:

Key Achievements

• Cardiovascular and Diabetes Checks: West Coast DHB continued to surpass the 90% target for Cardiovascular and Diabetes Checks for the period to 31 December 2016 - with 91.0% of the eligible enrolled West Coast population having had a cardiovascular risk assessment in the last 5 years. This is the eighth quarter in a row where the West Coast PHO teams have met or exceeded the national target.

- **ED Health Target:** Performance continues to be impressive with 99.8% (100%) of patients admitted, discharged or transferred from Grey Base ED within six hours during January 2017. The West Coast continues to lead the country in performance against this target.
- Elective Services Health Target: This quarter, West Coast DHB provided 991 elective surgical discharges, delivering 106.7% of planned discharges against target.
- Primary Care Smoking Health Target: West Coast health practitioners have reported giving 4,886 smokers cessation advice in the 15 months ending December 2016. This represents 91% of smokers against a 90% national target.

Key Issues & Associated Remedies

- **B4 School Check Coverage**: Since November, a further 41 children (5 high deprivation children) have received their B4 School Check bringing the year-to-date result to 31% (38% for high deprivation) of the eligible population so far receiving their Checks.
- ESPI 2 | FSA (First Specialist Assessment): The DHB was non-compliant against the maximum 120 days' wait time target for seventeen orthopaedic and seven plastic surgery patients as at 30 December. A number of these patients have since been seen, however delays in assessment for orthopaedic referrals remain an issue, due to transalpine staffing and service constraints. We anticipate a February recovery for plastic surgery cases.
- **ESPI 5** | **FSA to Treatment:** Performance against ESPI 5 was more positive with only 5 plastic surgery patients exceeding the 120-day maximum wait times as at the end of December 2016. We anticipate a February recovery for plastic surgery cases.

The report was noted.

c) ALLIANCE UPDATE

This report provided an update of progress made around the West Coast Alliance regarding:

Alliance Leadership Team (ALT)

At the last meeting in February the ALT:

- Received a presentation given by Fran Cook about the Primary & Community Project. The ALT
 noted the scale of this project but were pleased that many of the streams of work will enable the
 Alliance workstream goals.
- Noted the positive progress of all the workstreams.
- Noted that the Annual Planning process is well underway.

Health of Older Persons

- The membership of the Health of Older Persons Workstream has been reviewed and reinvigorated. The team would like to note there was excellent engagement at the initial planning meeting for 2017-18 Workplan.
- Work continues to refine and improve falls data collection within partners' systems as well as improving data quality in support of clearer referral pathways.
- The team have had preliminary discussions to identify Fracture Liaison Service functions that could be completed by incumbents in other clinical areas in the absence of having an established Falls Liaison Service.
- It has been noted that there has been an increase in 'hits' for the Cognitive Impairment Pathway on HealthPathways.

Integrated Family Health Service (IFHS) Workstreams (Grey | Westland, Buller & Reefton)

• As an outcome of ongoing discussions within the workstream and with staff regarding greater integration of services based in Reefton, a proposal was put to staff around how the DHB could support this through structural changes, combining of cost centres and administrative functions.

- Feedback was provided by staff and was generally supportive of the direction with a few areas that needed further consideration.
- Single cost centres and an administrative team have been agreed as a first steps that will be implemented.
- A working group will be put together to look at how an integrated nursing team could work in the future while ensuring key core competencies continue to be supported.
- Reefton has also brought on new nursing staff under an integrated position description that allows them to move across services, supporting each as required.

Healthy West Coast (HWC)

- Good work is underway to improve the coordination of the delivery of nutrition support for people in the community and increased support is being provided through the PHO's 'BetaMe' online support and smartphone app which was launched in January.
- The Coast's new Stop Smoking service, Oranga Hā Tai Poutini has had good success through a Facebook advertising campaign generating over 50 new self referrals to the service. These self referrals bring highly motivated clients and therefore quit rates at 4 weeks (the standard reporting metric required by MoH) are above the 50% target.

Child and Youth

 Both the Child & Youth workstream and the Youth Health Action Group had the opportunity to hear a presentation by Dr Jean Simpson of the NZ Child & Epidemiology Service on their 2015 report "The Health Status of Children & Young People in Canterbury and West Coast". The presentation promoted discussions regarding many of the topics covered but in particular the issues facing young people with mental illness.

The report was noted.

d) HEALTH TARGET REPORT – Q2

This report is included in today's Board papers for noting.

e) MAORI HEALTH PLAN UPDATE

This update is included in today's board papers for noting.

f) DISABILITY ACTION PLAN UPDATE

This update is included in today's board papers for noting.

g) WEST COAST DHB 2017-18 PUBLIC HEALTH PLAN

This plan is included in today's papers and is recommended by the Committee for endorsement.

h) COMMITTEE WORK PLAN 2017

The Committee discussed the draft 2017 work plan and members noted that this is a working document and feedback can be provided to the Chair at any time. Suggestions were made regarding some presentations.

i) GENERAL BUSINESS

- i. The Committee noted that the DSS Newsletter will now be included in the information papers as it becomes available.
- ii. The Chair advised that she had received an invitation to "Y Mobility" from 10am 12noon today which is situated in the Y Furniture Shop.
- iii. Thanks were extended to management for their attendance in the recent public meetings.
- iv. Discussion took place regarding the amended regulations around the use of 1080.

Report prepared by: Elinor Stratford, Chair, Community & Public Health & Disability Support

Advisory Committee



COMMUNITY & PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE MEETING To be held in the Board Room, Corporate Office, Greymouth Hospital Friday 10 March 2017 commencing at 9.30am

ADMINISTRATION 9.30am

Karakia

Apologies

1. **Interest Register**

Update Committee Interest Register and Declaration of Interest on items to be covered during the meeting.

Confirmation of the Minutes of the Previous Meeting 2.

1 December 2016

Carried Forward/ Action Items 3.

REF	PORTS/PRESENTATIONS		9.35am
4.	Community and Public Health Update	Claire Robertson Team Leader, Community and Public Health	9.35am – 9.45am
5.	Disability Action Plan Update	Kathy O'Neill	9.45am – 9.55am
		Service Development Manager, Planning & Funding	
6.	Planning & Funding Update	Kathy O'Neill	9.55am – 10.05am
		Team Leader, Planning & Funding	
7.	Alliance Update	Kathy O'Neill	10.05am –
		Team Leader, Planning & Funding	10.15am
8.	Health Target Q2 Report	Kathy O'Neill	10.15am –
		Team Leader, Planning & Funding	10.25am
9.	Maori Health Update	Gary Coghlan	10.25am –
		General Manager, Maori Health	10.35am
10	Community & Public Health	Claire Robertson	10.35am –
	2017-2018 Public Health Plan	Team Leader, Community & Public Health	10.45am
11.	2017 Committee Work Plan	Board Secretariat	10.45am –
			10.50am
12.	General Business	Elinor Stratford	10.50am –
		Chair	10.55am

ESTIMATED FINISH TIME 10.55am

INFORMATION ITEMS

• Board Agenda – 10 February 2017

- Chair's Report to last Board Meeting
- West Coast DHB 2017 Meeting Schedule

NEXT MEETING

Date of Next Meeting: Thursday 27 April 2017

WORKPLAN FOR CPH&DSAC 2017 (WORKING DOCUMENT)

	10 March	27 April	8 June	28 July	14 September	26 October	23 NOvember
STANDING ITEMS	Karakia	Karakia	Karakia	Karakia	Karakia	Karakia	Karakia
	Interests Register	Interests Register	Interests Register	Interests Register	Interests Register	Interests Register	Interests Register
	Confirmation of Minutes	Confirmation of Minutes	Confirmation of Minutes	Confirmation of Minutes	Confirmation of Minutes	Confirmation of Minutes	Confirmation of Minutes
	Carried Forward Items	Carried Forward Items	Carried Forward Items	Carried Forward Items	Carried Forward Items	Carried Forward Items	Carried Forward Items
STANDARD REPORTS	Health Target Q2 Report 2016/17 Maori Health Plan Update	Planning & Funding Update	Health Target Q3 Report 2016/17 Maori Health Plan Update	Planning & Funding Update	Health Target Q4 Report 2016/17 Maori Health Plan Update	Planning & Funding Update	Health Target Q1 Report 2017/18
	·	Community & Public Health	·	Community & Public Health Update	·	Community & Public Health Update	Maori Health Plan Update
	Planning & Funding Update	Update	Planning & Funding Update	,	Planning & Funding Update		Planning & Funding Update
	Community & Public Health Update	Alliance Update	Community & Public Health Update	Alliance Update	Community & Public Health Update	Alliance Update	Community & Public Health Update
	Alliance Update		Alliance Update		Alliance Update		Alliance Update
	2017 Committee Work Plan						
PRESENTATIONS	As required	As required	As required	As required	As required	As required	As required
PLANNED ITEMS	West Coast Public Health Annual Plan						
GOVERNANCE AND SECRETARIAT							
DSAC Reporting	Disability Action Plan	As available	As available	As available	As available	As available	As available
INFORMATION ITEMS	Latest Board Agenda Chair's Report to Board from last meeting	Latest Board Agenda Chair's Report to Board from last meeting	Latest Board Agenda Chair's Report to Board from last meeting	Latest Board Agenda Chair's Report to Board from last meeting	Latest Board Agenda Chair's Report to Board from last meeting	Latest Board Agenda Chair's Report to Board from last meeting	Latest Board Agenda Chair's Report to Board from last meeting
	2017 Schedule of Meetings	Committee Work Plan	Committee Work Plan	Committee Work Plan	Committee Work Plan	Committee Work Plan	Committee Work Plan
		2017 Schedule of Meetings C&PH 6 Monthly report to MoH (July – Dec 2016	2017 Schedule of Meetings	2017 Schedule of Meetings	2017 Schedule of Meetings	C&PH 6 Monthly report to MoH (Jan – July 2017) 2017 Schedule of Meetings	2018 Schedule of Meetings

WEST COAST DHB – MEETING SCHEDULE JANUARY – DECEMBER 2017

DATE	MEETING	TIME	VENUE
Friday 10 February 2017	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Friday 10 March 2017	CPHAC & DSAC	9.30am	Boardroom, Corporate Office
Friday 10 March 2017	HAC	11.00am	Boardroom, Corporate Office
Friday 10 March 2017	QFARC	1.30pm	Boardroom, Corporate Office
Friday 24 March 2017	BOARD	10.15am	West Coast PHO Boardroom
Thursday 27 April 2017	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 27 April 2017	HAC	11.00am	Boardroom, Corporate Office
Thursday 27 April 2017	QFARC	1.30pm	Boardroom, Corporate Office
Friday 12 May 2017	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 8 June 2017	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 8 June 2017	HAC	11.00am	Boardroom, Corporate Office
Thursday 8 June 2017	QFARC	1.30pm	Boardroom, Corporate Office
Friday 23 June 2017	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 27 July 2017	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 27 July 2017	HAC	11.00am	Boardroom, Corporate Office
Thursday 27 July 2017	QFARC	1.30pm	Boardroom, Corporate Office
Friday 11 August 2017	BOARD	10.15am	Arahura Marae
Thursday 14 September 2017	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 14 September 2017	HAC	11.00am	Boardroom, Corporate Office
Thursday 14 September 2017	QFARC	1.30pm	Boardroom, Corporate Office
Friday 29 September 2017	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 26 October 2017	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 26 October 2017	HAC	11.00am	Boardroom, Corporate Office
Thursday 26 October 2017	QFARC	1.30pm	Boardroom, Corporate Office
Friday 3 November 2017	BOARD	10.15am	St John, Waterwalk Rd, Greymouth
Thursday 23 November 2017	CPHAC & DSAC	9.00am	Boardroom, Corporate Office
Thursday 23 November 2017	HAC	11.00am	Boardroom, Corporate Office
Thursday 23 November 2017	QFARC	1.30pm	Boardroom, Corporate Office
Friday 8 December 2017	BOARD	10.15am	St John, Waterwalk Rd, Greymouth

The above dates and venues are subject to change. Any changes will be publicly notified.

1. HEALTH ASSESSMENT AND SURVEILLANCE

"understanding health status, health determinants and disease distribution"

	Short Term Outcomes	Status of service delivery (key performance measures)			Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
Health assessment	Robust population health information available for planning health and community services	Number of reports.	Formal/informal feedback. Accessibility of reports, including web statistics.	On track	
		Number of reports	Accessibility of reports. Formal/informal feedback.	On track	
		Number of reports.	Accessibility of reports. Formal/informal feedback		
			Timely response to queries Formal/informal feedback	On track	
		Number of meetings	Records of meetings and outcomes (including joint planning processes and sharing of population	On track	

	Outcomes		(key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
			health information). Quality of working relationship		
	Improved public understanding of health determinants	Number of media reports. 4 WCDHB Community Reports 1 Quality Accounts 10 Ask a Professional articles in the Messenger 6-weekly CPHAC/DSAC reports 6-weekly Tatau Pounamu reports	Impact of media reports	On track	
Surveillance	Prompt identification and analysis of emerging disease trends, clusters and outbreaks	Number of reports. 4 PHI Quarterly Weekly surveillance reports	Accessibility of reports. Formal/informal feedback	On track	
		Number of reports.	Accessibility of reports. Formal/informal feedback	On track	
		Number of reports. Record of progress.	Formal/informal feedback	On track	
			Timely response to queries Formal/informal feedback	On track	
		Quarterly reports	Formal/informal feedback	On track	

Highlights:

The Buller Community Profile, prepared by CPH, was launched in July. A summary of the findings was presented to health and social service organisations at a meeting in Westport. The report was prepared for the Buller Interagency Forum. CPH, as a member of the Buller Interagency forum, has since been involved in the development of an action plan addressing priorities identified through the profile. The profile has also received a considerable amount of subsequent media coverage and very positive feedback from the Mayor of Buller District and other members of the Interagency Forum.

2. PUBLIC HEALTH CAPACITY DEVELOPMENT

"enhancing our system's capacity to improve population health"

	Short Term Outcomes (the results that we're working towards)	Status of service delivery (key performance measures)		Reasons not on track and actions taken to ensure on track	
		Quantity	Quality	Status	
Public health information systems	Public health information accessible to public health, partner organisations and the public	Level of utilisation WC CFS restructure is implemented	Completeness and currency of information Operational systems and documentation in place Staff consistently record their work in Healthscape	On track	
			Nature and effectiveness of systems, including degree of integration.	On track	
Partnerships with iwi, hapū, whānau and Māori	Effective partnerships with iwi, hapū, whānau and Māori	Number of initiatives supported.	Formal/informal feedback.	On track	
		Progress against plan		On track	

	Short Term Outcomes	Status of service delivery	ry (key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
			Record of interactions and outcomes	On track	
Partnerships with Pacific and other ethnic leaders and communities	Effective partnerships with Pacific and other ethnic communities	Number of initiatives supported. Meet with New Coasters network a minimum of four times per year.	Formal/informal feedback. Record actions and feedback in Healthscape.	On track	
		Progress towards plan development/implemen tation.		On track	
Human resources	A highly skilled public health workforce	Training participation (for public health, other health sector and non- health staff). Two Health Protection staff attend required Health Protection competency training to maintain designation.	Training feedback	On track	
		Extent of training recorded.	Training evaluations. Formal/informal feedback.	On track	
		Record of contribution		On track	
Research, evaluation,	Information available on priority public	Number and accessibility of reports.	Formal/informal feedback	On track	

	Short Term Outcomes	Status of service delivery	(key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
economic analysis	health issues and effectiveness of public health interventions				
		Number of times shared	Formal/informal feedback	On track	
		Number of media reports. Two media releases in West Coast newspapers on Year 10 ASH data.	Impact of media reports.	On track	
		Number of presentations and publications.	Impact of presentations and publications.	On track	
Planning and advising on public health programmes	Population health interventions are based on best available evidence and advice	Number of reports.	Accessibility of reports. Formal/informal feedback	On track	
		Extent of contribution.	Impact of contribution.	On track	
Quality management	A continuous improvement culture and robust quality	Progress against plan, e.g. review of policies and procedures and internal audits		On track	

Short Term Outcomes	Status of service delivery	Status of service delivery (key performance measures)		Reasons not on track and actions taken to ensure on track
(the results that we're working towards)	Quantity	Quality	Status	
systems for all public health work				
	Number of CFS migrations	Internal audits completed as per audit schedule. CFS structure aligns with agreed work plan	On track	
	Number of CFS folder audits	CFS audit improvements identified and implemented	On track	
	1 report annually	Progress against improvements and recommendation log.	On track	
		Health Excellence criteria self-assessed for CPH	On track	
	At least one contribution annually to WCDHB Quality Accounts	Progress towards quality programme.	On track	
	Number of accredited Drinking Water Assessors. One assessment annually.	Accreditation maintained. Quality Management System continuously improved	On track	
	CARs closed on time	Monthly unit admin meetings review progress of CAR log.	On track	
Effective regional delivery of		Partnership evaluation. Progress against plan.	On track	

Short Term Outcomes	Status of service delivery (key performance measures)			Reasons not on track and actions taken to ensure on track
(the results that we're working towards)	Quantity	Quality	Status	
public health core functions		Quality framework assessed for a potential common model for public health services		

Highlights:

- CPH West Coast continues to report six-weekly to the Tatau Pounamu Committee (WCDHB Manawhenua Advisory Committee). This continues to strengthen our relationship with Manawhenua and other Māori leaders in the community. Tatau Pounamu members were involved in the development of the new stop smoking service, Oranga Hā Tai Poutini, Stop Smoking West Coast and provided letters of support for the proposed service throughout the ROI and RFP process.
- The Team Leader is meeting monthly with Te Kaihautū of Poutini Waiora, to plan how our organisations can work together to better meet the needs of Māori in the community. There are many examples of more collaborative planning and service delivery over this reporting period, including working together in the Buller Healthy Homes Curtain Bank project, Oranga Hā Tai Poutini, Corrections Health Clinics, and the Kawatiri Health Hui.
- The full CPH West Coast team participated in a two-part Te Tiriti workshop, to explore further what Te Tiriti means for our work in public health and to identify areas of focus from a planning and workforce development perspective over the next 12 months. These will be incorporated into our staff workplans and the subsequent annual planning round.
- A staff member began a Post Graduate Diploma in Health Science (Human Nutrition).
- One staff member has completed the Tipu Ora Certificate and another the Tipu Ora Diploma.
- The Team Leader completed the Public Health Leadership Programme.
- HPO/DWA trainee has passed IANZ audit and is on track to submit all remaining paperwork evidence in this financial year.

Our new HPO has settled into the West Coast role and has attended national training events including a HSNO Foundation Course.

Issues/challenges/risks and actions taken:

Creating partnerships with Pacific communities and leaders is proving difficult, as West Coast Pacific communities are small and there are, as yet, no formal Pasifika organisations on the West Coast. CPH staff do have some contacts with local Pasifika people and CPH is linked into the New Coasters Network which consists of people from a wide range of cultures and ethnicities, including Pasifika.

3. HEALTH PROMOTION

"enabling people to increase control over and improve their health"

	Short Term Outcomes	Status of service delivery (key performance measures)		Reasons not on track and actions taken to ensure on track	
	(the results that we're working towards)	Quantity	Quality	Status	
Building Healthy Policy	Increased numbers of sustainable policies and practices that support health and wellbeing, improve Māori health, and reduce disparities	Record of contributions.	Impact of contributions	On track	
		Record of contributions.	Impact of contributions	On track	
		Training opportunities and participation.	Formal/informal feedback	On track	
		Record of contributions.	Formal/informal feedback	On track	
		Measures as specified in nominated work plans	Formal/informal feedback, including evaluation of joint work plans.	On track	

	Short Term Outcomes	Status of service delivery	(key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
		Number of position statements and submissions	Impact of position statements and submissions	On track	
Built Environments	Built environments promote health, and support healthy choices and behaviours	Number of submissions	Impact of submissions	On track	
			Number of recommendations Implemented into plans.	On track	
Creating supportive environments	Settings that support healthy choices and behaviours	Number supported Progress towards gardens noted.		On track	
		Number of submissions/workshops	Number of positive outcomes recorded.	On track	
Education settings	ECECs, schools and tertiary settings that support healthy choices and behaviours	Number of schools engaged and with action plans developed.	Schools fully engaged to implement their action plan. Action plans conform to HPS specifications.	On track	
		Number of schools engaged in the stages of HPS inquiry Number of completed evaluations using the	Information entered into National HPS Database as required.	On track	

	Short Term Outcomes	Status of service delivery (Status of service delivery (key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
		template set out in the National HPS framework.			
		Electronic and hard copy distribution of HPS magazine. Record of presentations.		On track	
			Outcomes entered into Healthscape.	On track	
Workplaces	Workplaces that support healthy choices and behaviours	Number of workplaces engaged.	Outcomes of workplaces initiatives.	On track	
		Number of referrals. Number of quit attempts.		On track	
Marae and Other Māori Settings	Marae and other Māori settings that support healthy choices and behaviours	Number of Māori settings worked with. Record of initiatives	Evaluation findings	On track	
Other community settings	Other community settings that support healthy choices and behaviours	Number of events supported	Evaluation findings.	On track	
		Meetings attended and opportunities of change recorded.		On track	

	Short Term Outcomes	Status of service delivery ((key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
		Number of initiatives recorded	Evaluation findings	On track	
Community action	Effective community action initiatives	Record of new networks established or linked into. Number of initiatives supported and evaluated. Number of groups engaged.	Evaluation findings.	On track	
		Number of submissions made.		On track	
			Evaluation of CPH input and support of project	On track	
Develop personal skills	People with skills to enable healthy choices and behaviours Communities aware of health issues and healthy choices and behaviours		Evaluation findings.	On track	
		Numbers of interventions made and evaluated. Number of participants Community linkages engaged with – e.g.	Evaluation findings	On track	

	Short Term Outcomes	Status of service delivery (key performance measures)	Reasons not on track and actions taken to ensure on track	
	(the results that we're working towards)	Quantity	Quality	Status	
		Homebuilders, Salvation Army.			
			Level of access to services Awareness of Five Ways to Wellbeing	On track	
		Number of training sessions delivered	Formal/informal feedback	On track	
		Progress against strategies		On track	
		Number and type of messaging	Evaluation of reach and impact of individual campaigns	On track	
Reorient health service	Preventative and population approaches support healthy choices and behaviours in healthcare settings	Sustained quit attempt rates MoH targets met.		On track	
		Number of initiatives supported recorded and evaluated. New West Coast Health System Healthy Food and Beverage policy is	Evaluation findings	On track Not on track	Awaiting outcome of DHB-RDA negotiations. Attending regular teleconferences with MoH and DHBs regarding progress and continuing local conversations around WCDHB

Short Term Outcomes	Status of service delivery (key performance measures)			Reasons not on track and actions taken to ensure on track
(the results that we're working towards)	Quantity	Quality	Status	
	fully implemented by end 2016.			Healthy Food and Drink policy, including taking the lead role in the working group.
(Activity: SI: Promote a population health approach to tackling obesity with other parts of our DHB and via SI Service Level Alliances and workstreams)	Record of progress		On track	
	Alcohol Harm Reduction Strategy in place by end of 2016.		Not on track	Discussions are being held within the West Coast Alliance's Alliance Leadership Team around resourcing from the WCDHB to move this project forward.
(Activity: Top three physical activity and nutrition priorities: -Work in partnership with stakeholders to improve and support opportunities for physical activity -Create supportive	Record of activity and outcomes	Formal and informal feedback	On track	
environments in ECEC and school communities	Record of activity/progress	Formal and informal feedback	On track	

Short Term Outcomes	Status of service delivery (key performance measures)			Reasons not on track and actions taken to ensure on track
(the results that we're working towards)	Quantity	Quality	Status	
-Deliver community nutrition & cooking programmes with vulnerable/high needs groups	Number of programmes and participants (Deliver community nutrition and cooking programmes with vulnerable/high needs groups)	Formal and informal feedback	On track	

Highlights:

- CPH West Coast's Māori Health Promoter has been invited to be a Community Advisor for Te Hā O Kawatiri.
- Supporting Te Hā o Kawatiri and partners (i.e. Community Energy Action, WCDHB and Poutini Waiora) to progress Healthy Homes in Buller. The curtain bank in Westport is due to open early 2017. However, due to a good relationship with the Healthy Homes partners a number of whānau have already been provided with curtains.
- Working with the local kaumātua at Arahura around their wellbeing priorities as health promoters in their own whānau. This resulted in an evolving collaborative project with Arahura community members, CPH, West Coast Regional Council (WCRC) and ESR regarding concerns about water quality of the Arahura awa. A hui was held at Arahura Pā to share information about existing water monitoring and ways in which CPH, ESR and the WCRC could work with local iwi to address their concerns, including the possibility of carrying out an integrated catchment assessment with them. As an initial result of the hui, the WCRC has made a commitment to include additional locations on the awa as regular water monitoring sites this summer. CPH staff are continuing to liaise with the community about further actions.
- Improving our collaborative way of working with the local Māori health and social service provider, Poutini Waiora through sharing of space. Smoking cessation workers have been running clinics from both the Hokitika and Westport offices of Poutini Waiora. From

December there will be a CPH Stop Smoking Practitioner based in the Westport Poutini Waiora office. This has benefits for users of the service with more people in one place to provide the care clients may require.

- The Westland District has met the conditions to be accredited as a Safer Community. CPH is a member of the Safer Community Coalition and have supported the development of the strategic direction that will inform future projects for the Coalition. The accreditation ceremony will be held in February, where CPH will sign as a partner organisation.
- CPH is supporting a new community development project; Incredible Edible West Coast. This is designed to support more local and sustainable food production.
- Getting the Little Lungs Pūkahukahu Iti early childhood programme started on the West Coast.
- Working with ECECs to create positive environments supporting healthy kai and physical activity. This has included working collaboratively with the Heart Foundation to encourage centres to sign up to the Healthy Heart Award (HHA). CPH has been supporting centres with this, providing workshops for parents, professional development for staff and resources and support with menu development. At this stage 11 centres across the West Coast are engaged.
- Developed a strong relationship with Alternative Education in Greymouth. Currently there are 10 vulnerable youth attending this programme. We have delivered two blocks of 4-6 nutrition sessions this year. Nearing the end of the second block it has become obvious that the students are a lot more confident making basic healthy kai and also that they now work more cooperatively.
- Working in partnership with Te Rito and Buller Family Whānau Violence Prevention Groups to support schools and the wider school communities in ensuring they have an understanding of the Vulnerable Children's Act 2014, and Children, Young Persons and their Families Act 1989.
- Supporting schools in enhancing equity for minoritised students and their whānau, in the development of whānau relationships and contributions within schools; directly through HPS and school relationships and also through a teacher-led innovation fund research project with six West Coast schools involved.
- Supporting the establishment of a student council at Karamea Area School.
- Seven community Tai Chi instructors received further training. This included four current community instructors and three new instructors. CPH is planning to assist the development of a community class in Karamea in 2017.

- CPH has supported the development of a network of people who are focused on improving accessibility across the West Coast. An Accessibility Strategy for the West Coast is currently being developed. This has the support of the four West Coast Councils although only the Grey District has a strategy in place currently. It is envisioned Councils will adopt the Strategy in 2017.
- Ongoing work with the Runanga community (Runanga Action Group) in developing local suicide awareness following an increase in young male suicides in the area. We have supported the community in producing a resource to promote help-seeking and a community event with 50 volunteers delivering this resource to the community. A wider community event was also held in Greymouth, with the support of Le Va and the NRL promoting the same messages mates looking after mates, community connectedness and help seeking. 120 people attended this forum. Future workshops with Le Va are being planned targeting the rugby league community.
- CPH has been successful in an application to the Health Promotion Agency's Community Action on Alcohol Partnership Fund. The funding will support five workshops across the West Coast on 'Teenagers, Alcohol and the Amazing Brain' delivered by Nathan Mikaere-Wallis. This was an area of priority identified by schools. The project will extend more widely than the workshops to include the development of school alcohol policies and review of the alcohol health promotion component of the curriculum.
- CPH, with the support of its Healthy West Coast partners, has been successful in securing a contract for delivering stop smoking services to the West Coast community. The service, Oranga Hā Tai Poutini, Stop Smoking West Coast, has been developed to meet the needs of West Coast communities. Three practitioners have been employed, one based in Westport, with the service currently in the establishment phase.

Issues/challenges/risks and actions taken:

- Engaging our target population groups is a continuous challenge in the nutrition area. We have found this particularly difficult with Appetite for Life, which has resulted in some discussions around what we could do to improve the outcome. This challenge is also evident in the ECEC nutrition setting but not as significant as most of the teachers are putting a lot of effort into conversations with parents. This is an ongoing discussion.
- Following the adoption of Smokefree outdoor dining by the Westland District Council, there have been challenges for CPH staff in working with local businesses to help implement the policy, including signage etc. CPH West Coast staff are currently working with CPH Christchurch staff and the Cancer Society to learn about how they are approaching this work in Christchurch.

- It is challenging for the HPS facilitator to manage travel time/distances and the number of schools engaged with, within the 0.6FTE. The cluster approach to workforce development and support helps mitigate this to an extent, except at times schools also require individual support specific to their identified wellbeing priorities.
- Te Hā o Kawatiri's application to Te Putahitanga Whānau Ora funders for the South Island, for funding to insulate homes of at risk Māori whānau has been turned down because the agency felt the funding fell outside their scope. We have approached the Regional Council to reinstate its previous targeted rates fund as an alternative source of funding, however, this has also been declined. Buller District Council are considering putting a targeted rate in place but this would not be available outside of Buller.
- The suicide postvention work has been ongoing in this period and continues to challenge all the services on the Coast. Negative and ill-informed local media coverage and the challenges arising from the implementation of the plan resulting from the WCDHB's Mental Health Service Review have also contributed to a challenging environment for this work.

Other comments:

- CPH has started a small working group to explore and address the issue of food security/insecurity on the West Coast. This has surfaced
 following observation and comments from participants/clients attending nutrition courses, and also from teachers at ECECs and
 schools. We are in the initial stages of this work and our steps forward will be carefully considered.
- Without close working partnerships with other school partners, the opportunities and support offered to schools would not be as effective or hold such positive outcomes. We are grateful for these committed relationships.
- CPH, alongside Poutini Waiora and the WCDHB, has begun some work connecting with young Māori parents from Greymouth and Westland. The nutrition health promotion staff have been involved. This is an area where engagement has previously been an issue.

4. HEALTH PROTECTION

"protecting communities against public health hazards"

	Short Term Outcomes	Status of service delivery (key performance measures)		Reasons not on track and actions taken to ensure on track	
	(the results that we're working towards)	Quantity	Quality	Status	
Communicable disease control	Reduced incidence of notifiable diseases Reduced incidence of influenza	Disease rates (as compared with previous years).		On track	
		Statistics as outlined in the ESR Annual Data Quality Report and Annual Outbreak Report.	Data quality as outlined in the ESR Annual Data Quality Report.	On track	
		1 audit		On track	
		Progress against Outbreak Debrief Report action points.	Outbreaks controlled	On track	
		Number of media releases and promotional		On track	

	Short Term Outcomes	Status of service delivery	y (key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
		opportunities undertaken.			
		Records of (intra- WCDHB and interagency) meetings attended/settings worked with.	Impact of contribution as evidenced by meeting minutes.	On track	
		Documented numbers of authorised vaccinator & programme applications and approvals.		On track	
		Progress against Plan		On track	
		Six-monthly review carried out and data provided to South Island Alliance and MoH.		On track	
Drinking water quality	Optimised adequacy, safety and quality of drinking water on West Coast	Record of interactions with suppliers concerning their legislative obligations (in SIDWAU filing system).		On track	
	Prevention of spread of disease to the public through	Record of interactions with suppliers concerning their legislative obligations		On track	

	Outcomes		(key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
	reticulated water supplies				
			DWA activities completed within legislative time frames	On track	
			Annual survey data delivered by required date.	On track	
			Gradings completed and entered on WINZ	On track	
		Record of registration		On track	
		Record of responses and outcomes		On track	
Sewage	Reduced incidence and impact of environmental hazards from the treatment and disposal of sewage	Record of external meetings attended and agreed actions.		On track	
		Record of contribution.		On track	
		Record of contribution.		On track	
Recreational water	Reduced incidence and impact of environmental		Agreed protocol in place	On track	

	Short Term Outcomes	Status of service delivery	ery (key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
	hazards associated with recreational water				
		Number of media releases produced in relation to RW including micro quality and algal bloom events.		On track	
		Record of information on NZS5862 provided during investigations		On track	
Housing	Less disease caused by inadequate housing		Actions and/or outcomes from key housing stakeholder meetings/interactions reflect public health input.	On track	
Resource management	Public health issues are identified and addressed in decisions made on the sustainable management of natural and physical resources and social environments	Number of applications assessed (scoped) Number of submissions made. Number of hearings where submissions/evidence presented.	All submissions are peer- reviewed and follow CPH submission procedure	On track	

	Short Term Outcomes	Status of service delivery	ery (key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
		Record of external meetings attended and agreed actions. Record of formal advice given.		On track	
Hazardous substances	Public protected from exposure to hazardous substances	Progress towards development of HSCC Record of external (including HSCC) meetings attended and agreed actions. Record of formal advice given.		On track	
		Number of investigations. Provide summaries for the past year (to 30 June) and estimates for the coming year (1 July to 30 June) of the nature and level of hazardous substances activities	Outcome of investigations.	On track	
		Record of advice given, including website utilisation.		On track	
		Number of VTA applications processed.	100% of VTA permissions are peer reviewed	On track	

	Short Term Outcomes	Status of service delivery	Status of service delivery (key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
		Number of audits.	Outcome of audits. 100% of permissions are audited either by desk top or field audit (report % of field audits and % of desk top audits).	On track	
Early childhood education centres	Reduced incidence and impact of health issues in ECECs	Number of ECECs assessed in terms of meeting requirements of ECC 1998/2008 Regulations.		On track	
		Number of meetings held with MoE and TAs.		On track	
Emergency preparedness	WC districts prepared for emergencies impacting on public health		Emergency plans are current. Related plans are jointly reviewed and interoperable.	On track	
			Debrief reports	On track	
		Record of training.	Evaluation of training	On track	
			Performance against exercise performance measures.	On track	
		Progress towards plan completion, implementation.	Feedback from other PHUs	On track	
Sustainability	Greater understanding of		Evidence of activity to improve understanding of	On track	

	Short Term Outcomes	Status of service delivery	(key performance measures)		Reasons not on track and actions taken to ensure on track
	(the results that we're working towards)	Quantity	Quality	Status	
	and action on sustainability		sustainability and to promote sustainable practices.		
		Number of submissions.	Formal feedback received and recorded.	On track	
Tobacco	Reduced tobacco sales, especially to minors Reduced exposure to second-hand smoke	Number of complaints	Complaints responded to within 5 days.	On track	
		Number of visits/checks	% of retailers inspected.	On track	
		Minimum of three CPOs conducted.	CPO compliance.	On track	
		Record of advice, information given.		On track	
Alcohol	Less alcohol- related harm	ED data reports available six-monthly	WCDHB has staff training in place to improve data quality	On track	
		Number of licensed premises monitored.		On track	
		Number of licence applications processed	Percentage processed within 15 working days.	On track	
		Minimum of 5 CPOs conducted.	CPO compliance.	On track	

	Short Term Outcomes (the results that we're working towards)	Status of service delivery (key performance measures)			Reasons not on track and actions taken to ensure on track
		Quantity	Quality	Status	
		Number of premises visited during CPO.			
		Record of contribution. Training courses held six-weekly		On track	
		Record of meetings attended and agreed actions.		On track	
			Health impacts of LAPs.	On track	
		Record of meetings, number of plans in place.		On track	
		Progress against work plan.		On track	
Other psychoactive substances	Improved compliance with Psychoactive Substances Act 2013	Number of licensed retail premises assessed for compliance. Number of premises visited during CPOs.	CPO compliance	On track	
Other	Public protected from other health hazards	All regulatory health protection work documented in Healthscape	All regulatory health protection work carried out in accordance with Environmental Health Protection Manual	On track	

Highlights:

- The Grey District Council has worked with Community Energy Action from Christchurch to install insulation in Council-owned pensioner housing. 103 of the 118 units were insulated. CEA also provided advice and other product to the occupants to support a healthier home environment. CEA evaluated this intervention with 90% of occupants reporting an improvement in the warmth and dryness of their unit.
- Regular attendance of CPH West Coast Protection staff at the WCDHB Infection Control Committee has been re-established.
- HPOs and WC Team Leader regularly attend the WC CDEM Readiness Response Committee which has incorporated the HSCC role as all/most network agencies attend this meeting. This has provided an excellent opportunity to strengthen networks.
- All CPH staff took part in Day 1 of national Civil Defence Exercise Tangaroa. This was a valuable opportunity to test our emergency response, including an evacuation of our offices and relocation to a safe site away from Greymouth. The MOoH, Team Leader and HPOs also took part in the local interagency workshops on Days 2 and 3 of the exercise. We believe this has resulted in an improved understanding by other agencies of the public health role in an emergency response and recovery. We received positive feedback on our response from both the internal and external exercise evaluators. We have made some improvements to our preparedness, including updating our 'EOC in a Box' and evacuation kit as a result of what we learnt through participation in this exercise.
- Very large input into DOCs Battle for Our Birds (BFOB) 2016 campaign. This represented the largest area treated with VTAs for some years and all VTA permissions were issued and managed within allowed timeframes. Field audits were undertaken for selected prioritised operations.
- CPH's Alcohol Licensing Officer (ALO) has established regular meetings with the District Licensing Inspectors (DLI) and Police in each of the Grey, Westland and Buller Districts. This regular interaction has enhanced collaborative working between the agencies and an increasingly proactive approach to alcohol harm reduction. As an example, in the later part of this year there has been constructive joint agency work with local racing clubs with respect to BYO at horse racing meetings across the West Coast. For decades it has been the 'norm' for the public to be permitted to bring alcohol to these race meetings, in effect breaching the conditions of the special licences. This practice has potentially left open the possibility that race meeting organisers could be committing an offence under s235.

- The West Coast MOoH, Westland DLI and Police have been successful in persuading the Glacier Base Café and Hot Pools to withdraw their application seeking an on-licence allowing alcohol to be consumed in the hot pools.
- CPH's ALO has succeeded in getting the Grey District Council to install new public signs around the Greymouth township depicting the 'Local Alcohol Ban Area' after establishing that the old signage did not depict the entire area covered by the revised bylaw.
- The ALO has arranged and supervised CPOs in the Grey and Buller Districts' on and off-licence premises that resulted in no sales of alcohol to the two volunteers.
- The SFEO has arranged and conducted a CPO in Westland District, with the support of Ministry of Health. No sales were made to the volunteer.

Issues/challenges/risks and actions taken:

- Even with the support of our Christchurch DWAs, there are ongoing workload challenges for the West Coast-based DWA, limiting the time spent visiting councils and contractors.
- There were no fully compliant council community drinking-water supplies in this year's annual drinking water survey. All councils have failed to submit analysis of continuous data required for compliance and several water supplies have yet to have approved Water Safety Plans (WSPs) and in others, WSPs have expired. Letters have been written to all Council CEOs and water managers outlining the results of these compliance reports. These are being followed up, with priority being given to those supplies without current WSPs.
- The Westland District Council has put on hold plans to build a new wastewater treatment plant for Franz Josef on a site out of the Waiho River flood plain after it was badly damaged by a major flood last year. CPH submitted in support of these works at the Westland District's draft LTP hearings but it appears that the cost of the proposed new plant and the almost universal opposition of local ratepayers and accommodation providers has led to the Council's current stance.
- There is an imbalance in the amount of HPO/MOoH time/resource being used to do the VTA work (issuing and managing permissions as well as dealing with related OIAs and investigating complaints and incidents) due to the increased numbers and size of aerial operations this year. This limits the time available to be involved in other health protection work regarding RMA applications, recreational water issues, waste management and waste water treatment improvements.

• Alcohol has been identified as a risk factor within the vulnerable population of young people affected by recent suspected suicides on the Coast. Creative ideas about more effective ways to work with this group around safer drinking are being discussed but it remains a challenge. We may have to rethink who our partners are and work with different non-traditional partners to be more effective in this work.

Other comments:

• See comment above regarding Healthy Homes. The difficulty in accessing funding support to address poor quality housing and its effects will continue to have negative impacts on the health and wellbeing of West Coasters, particularly the most vulnerable.

5. PREVENTIVE INTERVENTIONS

"population programmes delivered to individuals"

	Short Term Outcomes (the results that we're working towards)	Status of service delivery (key performance measures)			Reasons not on track and actions taken to ensure on track
		Quantity	Quality	Status On track or Not on track	
Immunisation	Increased immunisation coverage, especially for priority groups		Record of initiatives. Formal/informal feedback.	On track	
		Record of promotion initiatives	Record of outcomes	On track	
		Record of delivery initiatives and outcomes.	Record of outcomes	On track	
Lifestyle interventions	Systematic identification of and response to risk factors	Record of progress		On track	
		Number of practices provided with ABC training.		On track	
		Health Target Quarterly Report		On track	

	Short Term Outcomes (the results that we're working towards)	Status of service delivery (key performance measures)			Reasons not on track and actions taken to ensure on track
		Quantity	Quality	Status On track or Not on track	
		IPIF Quarterly Reports.		On track	
		Quarterly report to WCDHB Smokefree manager, including enrolments in cessation programmes.		On track	
Screening and early detection	Early detection of cancer	Record of strategies	Record of outcomes	On track	
		Record of strategies	Record of outcomes	On track	
	Early detection of diabetes and cardiovascular disease	Quarterly report on utilisation. Numbers, age group, ethnicity and conditions identified.		On track	