



West Coast

– District Health Board –

Te Poari Hauora a Rohe o Tai Poutini

**COMMUNITY AND PUBLIC HEALTH
AND
DISABILITY SUPPORT ADVISORY
COMMITTEE MEETING**

8 June 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 8 June 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**

27 April 2017

3. **Carried Forward/ Action Items**

REPORTS/PRESENTATIONS

9.35am

4. **Community and Public Health Update**

Derek Benfield
*Community and Public Health
West Coast Regional Manager*

9.35am – 9.45am

5. **Planning & Funding Update**

TBC
Team Leader, Planning & Funding

9.45am – 9.55am

6. **Health Target Q3 Report**

TBC
Team Leader, Planning & Funding

9.55am – 10.05am

7. **Alliance Update**

TBC
Team Leader, Planning & Funding

10.05am – 10.15am

8. **Maori Health Update**

Gary Coghlan
General Manager, Maori Health

10.15am – 10.25am

9. **General Business**

Elinor Stratford
Chair

10.25am – 10.30am

ESTIMATED FINISH TIME

10.30am

INFORMATION ITEMS

- Board Agenda – 12 May 2017
- Chair's Report to last Board Meeting
- 2017 Committee Work Plan (Working Document)
- West Coast DHB 2017 Meeting Schedule

NEXT MEETING

Date of Next Meeting: Thursday 27 July 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	Disclosure of Interest
CHAIR Elinor Stratford (Board Member)	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • West Coast Autism Support Group – Volunteer and Support Person • West Coast Special Olympics Steering Committee – Member • Parkinsons New Zealand – West Coast Committee Member
Cheryl Brunton	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Husband employed by West Coast DHB • Peer Support – Mum4Mum • Information Consultant for West Coast Disability Resource Service
Joseph Mason	<ul style="list-style-type: none"> • Representative of Te Runanga o Kati Wae Wae Arahura • Employee Community and Public Health, Canterbury DHB

Mary Molloy	<ul style="list-style-type: none"> • 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. • Chair of the West Coast Community Trust
Peter Neame	<ul style="list-style-type: none"> • White Wreath Action Against Suicide – Member & Research Officer
Francois Tumahai (Deputy Chair) (Board Member)	<ul style="list-style-type: none"> • 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)	<ul style="list-style-type: none"> • Nelson Marlborough District Health Board – Chair • Diabetes new Zealand – Life Member • South Island Board – Chair • National DHB Chairs - Chair
Chris Mackenzie (ex-officio)	<ul style="list-style-type: none"> • 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 Thursday 27 April 2017 commencing at 9.30am

PRESENT

Elinor Stratford (Chairperson); Lynnette Beirne; Sarah Birchfield; Cheryl Brunton; Joe Mason; Jenny McGill; Peter Neame;

APOLOGIES

Apologies were received and accepted from Mary Molloy, Chris Mackenzie, and Jenny Black (due to cancellation of plane)

EXECUTIVE SUPPORT

Philip Wheble (Interim General Manager, Grey/Westland); Sandy MacLean (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 Committee member for the West Coast Division of Parkinsons New Zealand.

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 (2/17)

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

“That the minutes of the meeting of the Community and Public Health and Disability Support Advisory Committee held on 10 March 2017 be confirmed as a true and correct record.”

3. CARRIED FORWARD/ACTION ITEMS

It was agreed that Outcomes around Alcohol Project be added to the carried forward list for late 2017.

The Carried Forward/Action Items were noted.

4. COMMUNITY & PUBLIC HEALTH UPDATE

Cheryl Brunton, Community & Public Health, presented this update on the following topics:

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). 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 Waioara 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 members also 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 hosted a workshop on Food Security in Greymouth on 26th April. Invitations were sent to individuals and organisations working with West Coasters who are struggling to provide sufficient nourishing food for themselves and their families. There was a very good response. The purpose of the workshop was 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. At the time of writing this report, planning for the workshop was well underway and some pre-work has been sent to participants. It is planned 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 Waioara, 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's 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 Hā, 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:

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.

Discussion took place regarding the Food Security workshop held in Greymouth, the workshop was very well received and a report is being prepared and will be provided to the Committee at a later date.

The Committee applauded the work being undertaken and positive feedback from the Health Promoting Schools, not just the with the section contained in the summary but with all projects and the staff going the extra mile to ensure the whole of the West Coast benefits from the ongoing work.

The Committee noted that the outcomes around "Teenagers, Alcohol and the Amazing Brain" project will come back to the Committee in late 2017.

The Committee also noted that there will be an update at the next Committee meeting around drinking water as survey results will be available.

The report was noted.

5. PLANNING & FUNDING UPDATE

Sandy MacLean, 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

- **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

Discussion took place regarding eligibility around B4 School checks and the Committee noted that the Ministry of Health provided the DHB with numbers. It was also noted that there have been discussions around what the actual 0 – 5 cohort over the last 2 years.

The report was noted.

6. 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.

Sandy MacLean also presented this report which provided the Committee with an update of progress made around the West Coast Alliance regarding:

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.

- Noted the good engagement with schools in the recent alcohol presentations by Nathan Wallis, “Alcohol and the Amazing Brain”.
- Noted again the importance of the system enablers (workforce, settings, integrated information systems & transport) for delivery on the workplans.
- 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.
- 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.
- 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.
- 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)

- 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.

The report was noted.

7. GENERAL BUSINESS

The Committee’s attention was drawn to the Grey District Council parking submission.

INFORMATION ITEMS

- Board Agenda – 24 March 2017
- Chair's Report to last Board meeting
- 2017 Committee Workplan
- West Coast DHB 2017 Meeting Schedule
- Community & Public Health 6 Monthly Report to the Ministry of Health

There being no further business the meeting concluded at 10.20am.

Confirmed as a true and correct record:

Elinor Stratford, Chair

Date

DRAFT

CARRIED FORWARD/ACTION ITEMS



COMMUNITY AND PUBLIC HEALTH AND DISABILITY SUPPORT ADVISORY COMMITTEE CARRIED FORWARD/ACTION ITEMS AS AT 8 JUNE 2017

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

UPCOMING PRESENTATIONS

TOPIC	STATUS
Consumer Council	September 2017
Drinking Water Systems and Protection	July 2017
Outcomes around Alcohol Project	Late 2017

TO: Chair and Members
Community and Public Health & Disability Support Advisory Committee

SOURCE: Community and Public Health

DATE: 6 June 2017

Report Status – For:	Decision <input type="checkbox"/>	Noting <input checked="" type="checkbox"/>	Information <input type="checkbox"/>
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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 and
Dr Cheryl Brunton, Public Health Specialist
Community and Public Health

Report approved for release by: Derek Benfield, Regional Manager, Community and Public Health

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

June 2017

Smokefree May

CPH staff, as part of the West Coast Tobacco Free Coalition have been raising awareness of Smokefree May and World Smokefree Day with a variety of activities including media articles and promotions at The Warehouse and Salvation Army in Greymouth, and on the main street of Westport. These promotions have included letting people know about the range of Stop Smoking services available on the West Coast.



Alcohol

Three West Coast CPH staff members attended the National Alcohol Public Health Workshop in Auckland in mid-May. This meeting covered both regulatory issues and health promotion. Topics included an update on the Ministerial Review on Alcohol Advertising and Sponsorship, using social media to address social supply of alcohol, and alcohol harm reduction projects in sports clubs. The meeting also discussed a recent decision by the Alcohol Regulatory and Licensing Authority (ARLA) in the matter of a Dannevirke supermarket single area. The ARLA decision has the effect of potentially undermining the work done to reduce exposure to alcohol in supermarkets, including recent High Court and Court of Appeal judgements. Whether or not this decision will be appealed will be known by the time of the June CPHAC/DSAC meeting.

Food Security

CPH hosted a workshop on Food Security in Greymouth on 26th April. Attendees included individuals and organisations working with West Coasters who are struggling to provide sufficient nourishing food for themselves and their families. We had a very good response, with approximately thirty people in attendance. The purpose of the workshop was to start to build a picture of what food insecurity looks like on the West Coast, find out what activities are already taking place to address this, as well as highlighting any gaps and potential future actions. We are now pulling together the discussions and findings from the workshop and have begun working with the CPH Information Team to compile a report on the workshop findings to help inform action.

Nutrition

CPH ran six cooking skills and nutrition sessions at Alternative Education, Greymouth. During the six week course it became apparent that the students' cooking skills and knowledge have developed and progressed, requiring a change in complexity of meals to continue their development. Alternative Education continues to be a very valuable setting to work in. The evaluations show that the students really enjoy cooking and are learning new things each session. In the last session, one student said that he really enjoyed learning to make his favourite dishes in different ways.

Kaumātua Flu Vaccination Clinic

CPH, working alongside Westland Medical Centre, West Coast DHB and Poutini Waioara, facilitated a flu vaccination clinic for kaumātua at Arahura marae in April. Twelve kaumātua received their vaccinations, as well as learning more information about vaccinations available for all whanau members, including their mokopuna.

Health Promoting Schools (HPS)

A Community Partnerships meeting at South Westland Area School (SWAS) is scheduled to take place on 31 May 2017. The school has been working actively on establishing and developing community partnerships over the past year. Those professionals working within the school and/or with students from SWAS have been invited and include Rural Nurse Specialist's, local Police, Resource Teacher, Learning and Behaviour (RTLb), WestREAP youth mentors, West Coast PHO Counsellor, and the HPS facilitator.

Lexia Copp from Runanga Primary School has been working with her class of years 6, 7 and 8, on a project regarding Runanga, to encourage a sense of belonging and community connectedness. Finding a gap, the students have developed a web site which explores local history, fun things to do, and the natural attractions of the locality. They are also in the process of creating a map of Runanga/Dunollie which encompasses the students' favourite places and includes the reasons for their choices. In 2018 it is planned to incorporate their parents' favourite places, and in 2019 their grandparents. The website will be launched in the near future!

Le Va Community Suicide Prevention Workshop

The Le Va Flo Talanoa workshop was held in Runanga on 16th May. Sixteen people attended to learn about suicide prevention with a strong community action focus. This was work which developed from the Runanga leaflet that was produced last year with the Runanga Action Group, and the follow-up to the Regent Theatre event in September with Eroni Clarke and Quintin Pongia. Positive discussion and learning took place, and we will continue to work with the Runanga community as required.

Submissions on Council Annual Plans

Over the last month CPH has made submissions regarding the Grey District Council and Buller District Council draft 2017/18 Annual Plans (Westland District Council did not consult this time around). Our submissions covered a range of issues including smokefree outdoor spaces, water quality and other environmental issues. We are now working on a submission for the West Coast Regional Council (WCRC), which is due at the end of June. Amongst other things, the WCRC is proposing a new organisational structure and staffing for Civil Defence and Emergency Management which will enhance capacity to plan for and respond to emergencies on the West Coast.

TO: Chair and Members
Community and Public Health & Disability Support Advisory Committee

SOURCE: Planning & Funding

DATE: 8 June 2017

Report Status – For:	Decision <input type="checkbox"/>	Noting <input checked="" type="checkbox"/>	Information <input type="checkbox"/>
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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 100% of patients admitted, discharged or transferred from Grey Base ED within six hours during quarter three. The West Coast continues to lead the country in performance against this target.
- **Elective Services Health Target:** West Coast DHB has provided 1,441 elective surgical discharges to 31 March; delivering 105% of planned discharges against year-to-date target.
- **ESPI 2 | First Specialist Assessment (FSA):** West Coast DHB is now within tolerance parameters for meeting the maximum 120 days' national wait time target for ESPI 2, with just one orthopaedic patient overdue for FSA as at 31 March 2017. A concerted effort was made in March to get those patients who were overdue seen.
- **ESPI 5 | FSA to Treatment:** West Coast DHB was also within compliance tolerance levels for ESPI 5, with only three patients exceeding the 120-day maximum wait time for surgery as at the end of March 2017 (two orthopaedic patients and one plastic surgery patient).

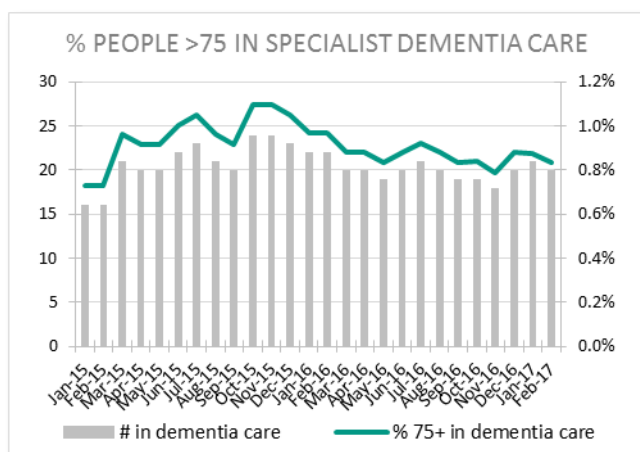
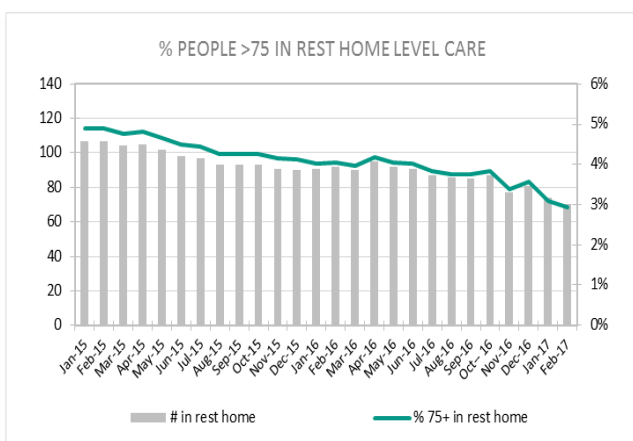
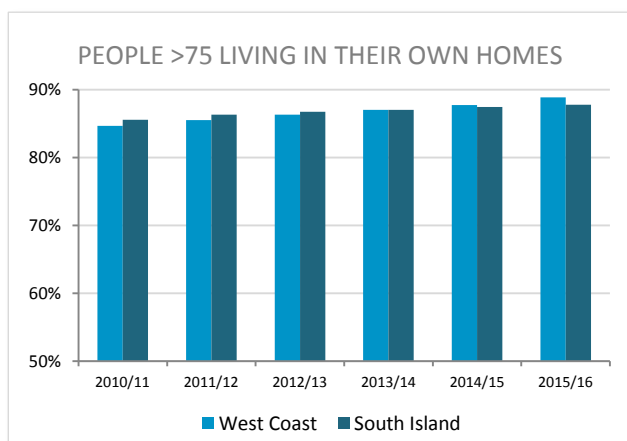
✗ Key Issues & Associated Remedies

- **Aged Residential Care Services:** Work is ongoing with Aged Residential Care Facility Granger House while the organisation is in receivership. The receiver has made a number of new appointments and West Coast DHB has added clinical oversight to support the safety of the residents.

Report prepared by: Planning & Funding

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

Health of Older Persons



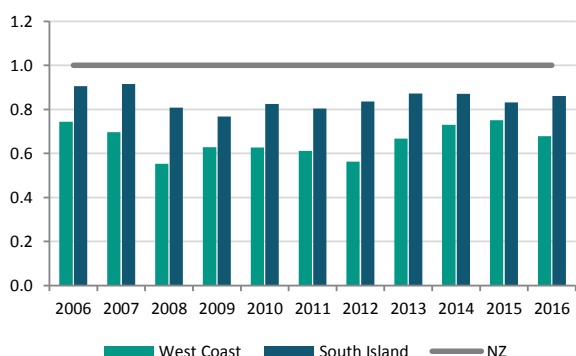
Achievements / Issues of Note

Home Base Support Services: Kiwiannia, the organisation operating Granger House and Kowhai Manor, is in receivership. There have been a number of new appointments and the receiver indicates an intention to achieve full compliance before putting the business on the market. West Coast DHB has added two days per week of onsite clinical oversight to support safe care of residents and there is monitoring of new admissions.

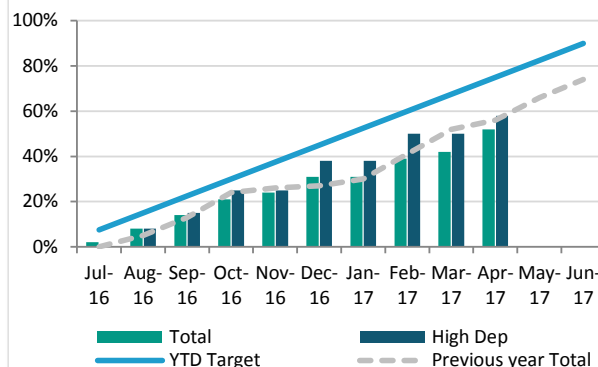
This situation highlights the need for Health of Older People services to work in an integrated way so that there is flexibility to provide the level of care required when and where it is needed. A clinically-led project group is meeting to progress future development of community and residential services, including dementia services.

Child, Youth & Maternity

ACUTE MEDICAL DISCHARGE RATE, CHILDREN (0-14)

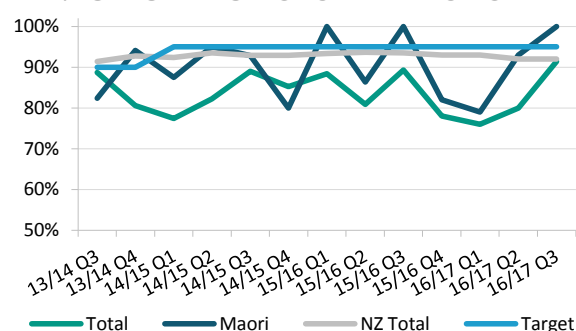


B4 SCHOOL CHECK COVERAGE

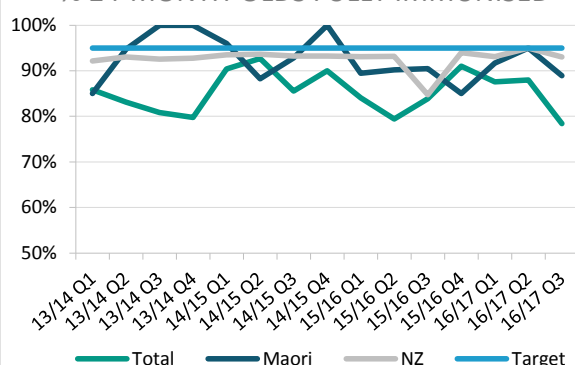


HEALTH TARGET:

% 8-MONTH-OLDS FULLY IMMUNISED



% 24-MONTH-OLDS FULLY IMMUNISED



Achievements / Issues of Note

Immunisation: During quarter three, 91.4% of all eight-month-olds were fully immunised with just one child missed. Coverage by ethnicity was achieved for all groups, with 100% of Maori and Asian children vaccinated and 96.4% of NZE children.

Opt-off (5) and declines (1) increased slightly this quarter to a combined 7.4%. This continues to make meeting the target impossible. We are pleased 99% of our consenting population were immunised.

B4 School Check Coverage: 206 children (including 23 high deprivation children) have received their B4 School Check as at the 28th of April. When taking into consideration the Gloriavale community who interacted with the service, we were 11% behind target at the end of April.

Work continues to find eligible children for their checks and the service has increased its flexibility to provide pop up clinics as necessary.

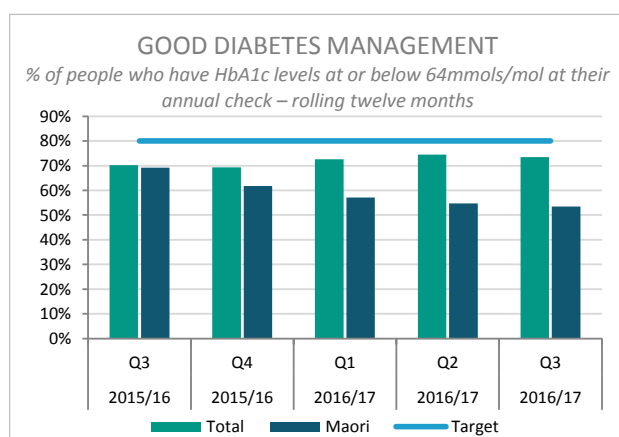
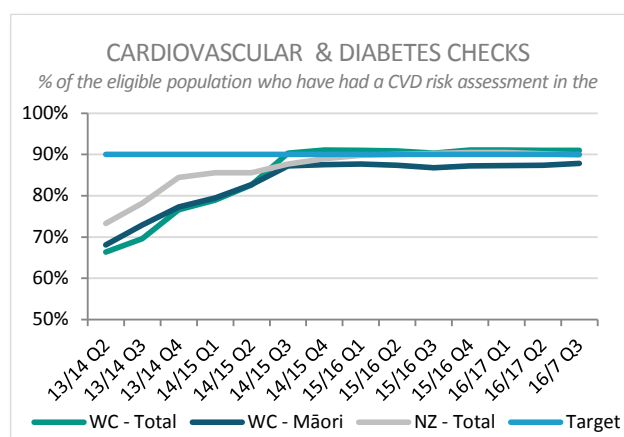
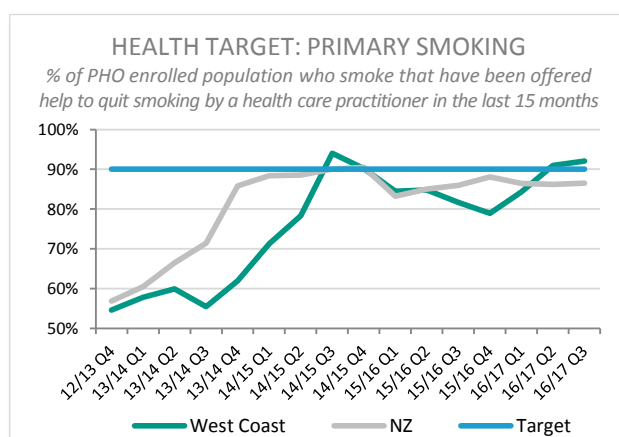
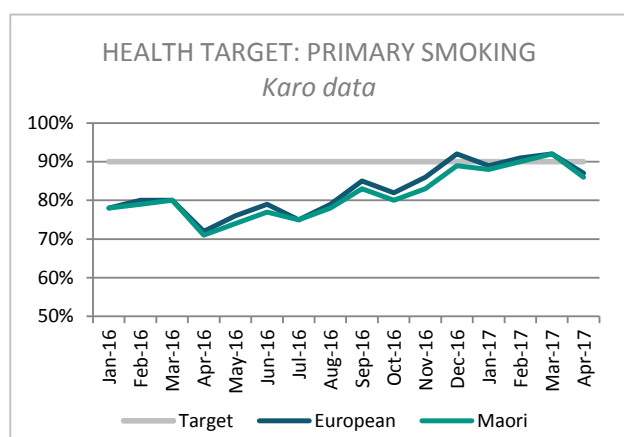
Mental Health

Achievements / Issues of Note

Service Transformation: A project team is progressing engagement with staff and other stakeholders to confirm a model of care that reflects previous work within today's context, particularly the primary and community services project.

While the scope of the project is the Mental Health System for the West Coast, there will be an initial focus on crisis response to ensure that access to urgent assessment and care is prioritised.

Primary Care & Long-Term Conditions



Achievements / Issues of Note

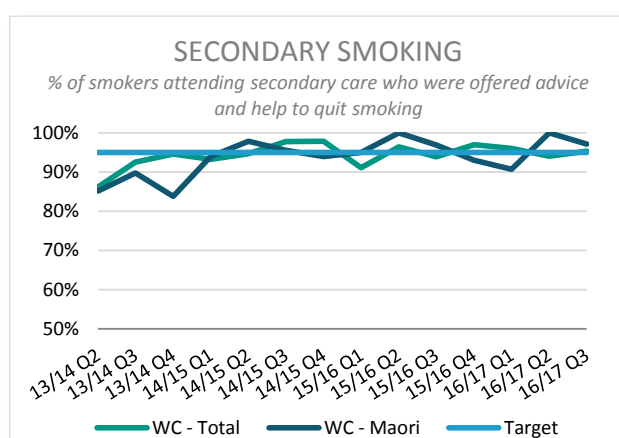
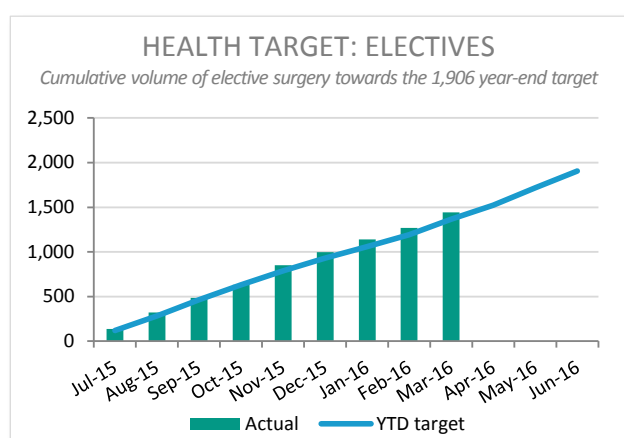
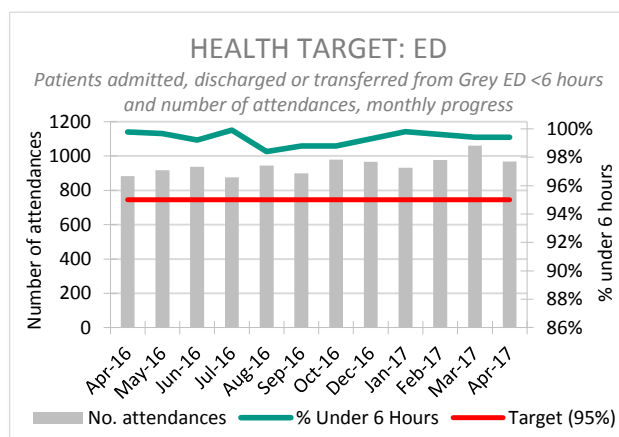
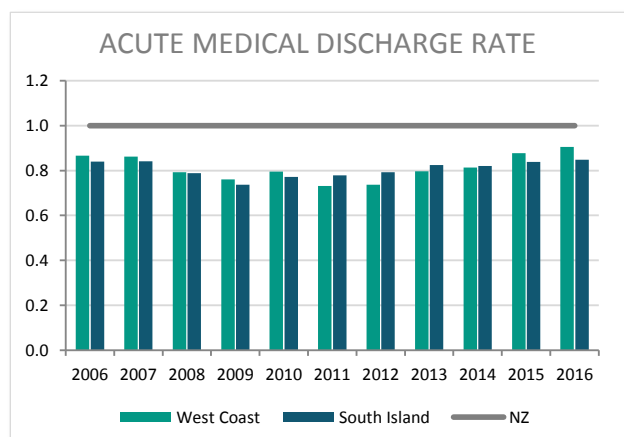
Health Target | Primary Care Smoking: West Coast health practitioners have reported giving 4,888 smokers cessation advice in the 18 months ending March 2017. This represents 92% of smokers against the 90% target. The DHB is pleased to have exceeded the target this quarter not only for total population but also for Māori and High Needs.

Cardiovascular and Diabetes Checks: The DHB again achieved a result of 91% of the eligible enrolled population having had a cardiovascular and diabetes risk assessment against the national target of 90%. Results for West Coast Māori remain lower at 87.8%.

Diabetes Management: 73.5% had good management of their disease in the twelve months to 31 March 2017 (defined by having an HbA1c level at or below 64mmols). This was down from 74.5% in December 2016. Results for our Māori population remained lower at 53.5% this quarter.

West Coast PHO is working with practice teams and the Healthy West Coast workstream to identify people due for their annual review as part of the Long-Term Conditions programme. This will help identify opportunities to improve our approach for Māori; we anticipate a culturally appropriate focus on prevention and early intervention will improve engagement with screening and support programmes, and ultimately good self-management of diabetes over time.

Secondary Care & System Integration



Achievements / Issues of Note

Health Target | ED: The West Coast DHB continued to achieve impressive results with 100% of patients admitted, discharged or transferred from Grey Base ED within six hours during quarter three. Of those attending, 94% of people were seen within just four hours.

Secondary Smoking: During quarter three, West Coast DHB staff provided 95.3% of all hospitalised smokers with smoking cessation advice and support against the 95% national target (97.1% for Maori).

Health Target | Electives: West Coast DHB remained 75 discharges ahead of year-to-date progress target as at the end of March (at 105% of target). West Coast DHB is required to deliver 1,906 elective and arranged discharges in 2016/17 and by the end of March had reached 1,441.

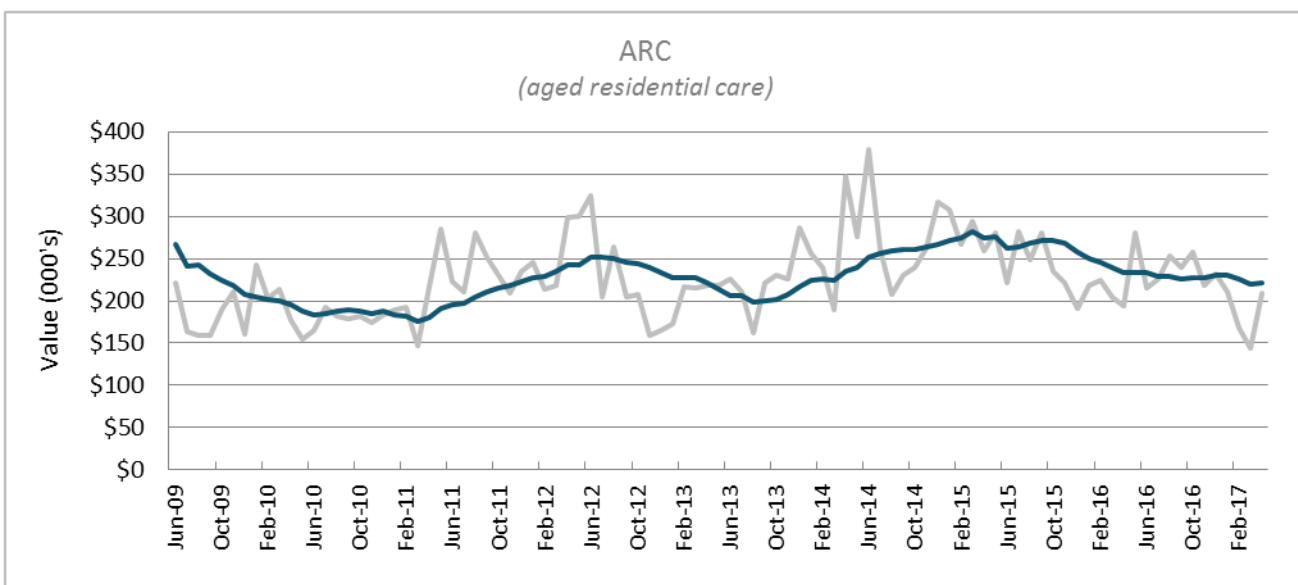
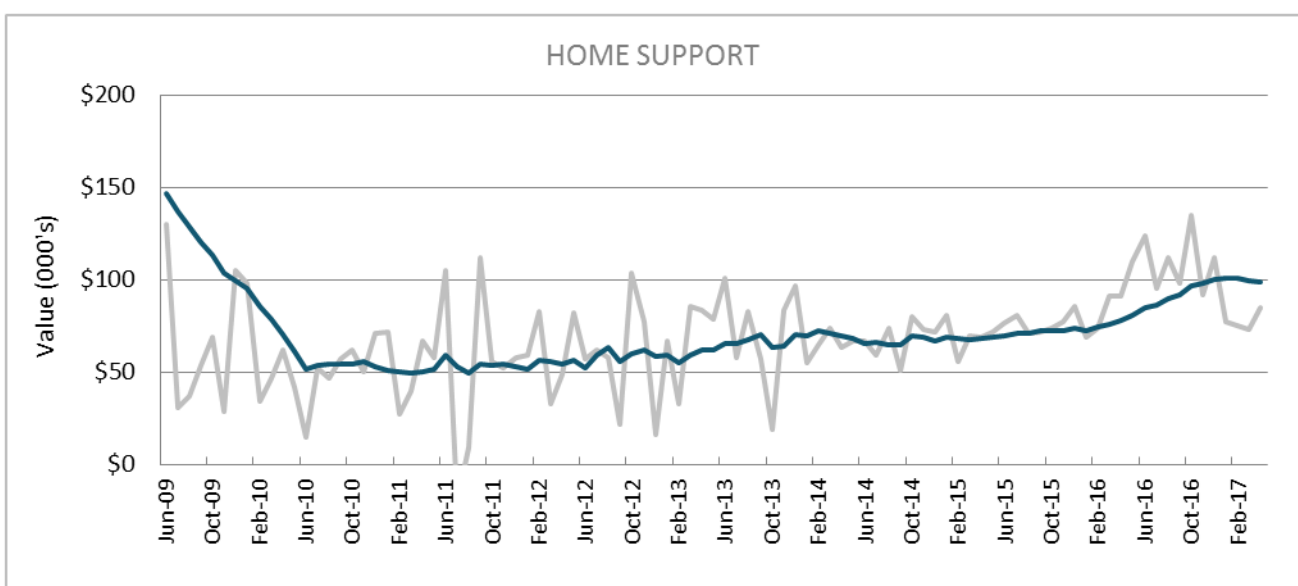
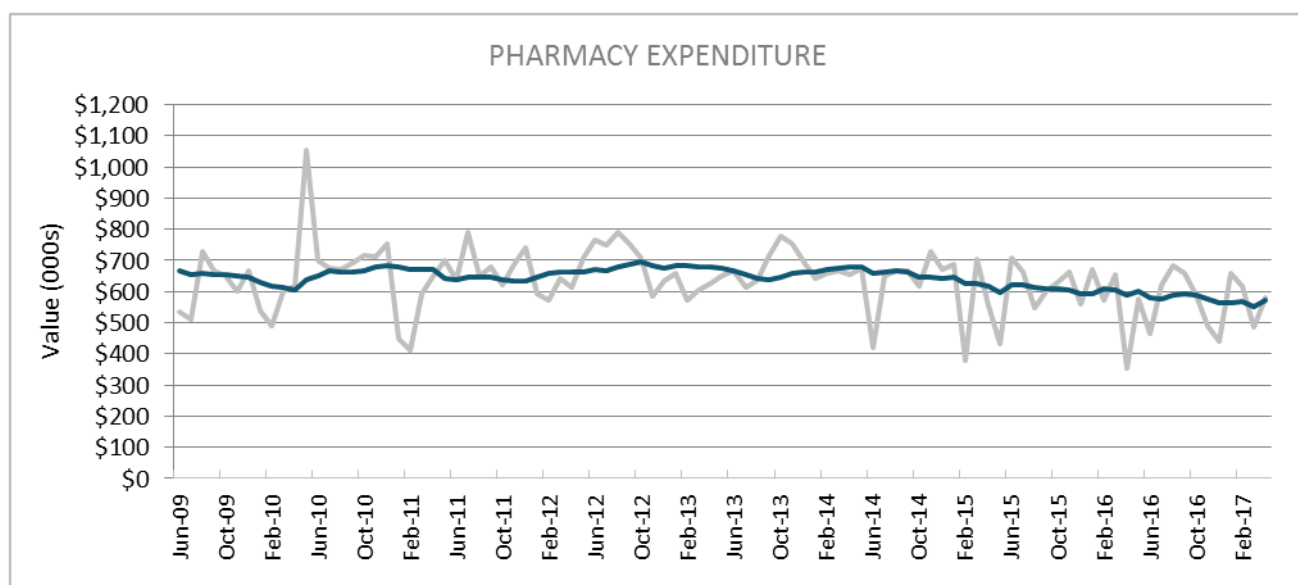
ESPI Compliance | ESPI 2 (First Specialist Assessment): There was just one orthopaedic patient waiting over 120 days for their outpatient First Specialist Assessment as at the end of March, following a concerted effort during the month to get outstanding non-complaint cases seen and assessed. While we are within tolerance parameters this month, we anticipate fluctuation in results due to delays in orthopaedic wait times for assessment referrals. This is impacted by capacity constraints in Canterbury which will likely continue to be stretched until new buildings are operational. We continue to work with our transalpine colleagues to mitigate this.

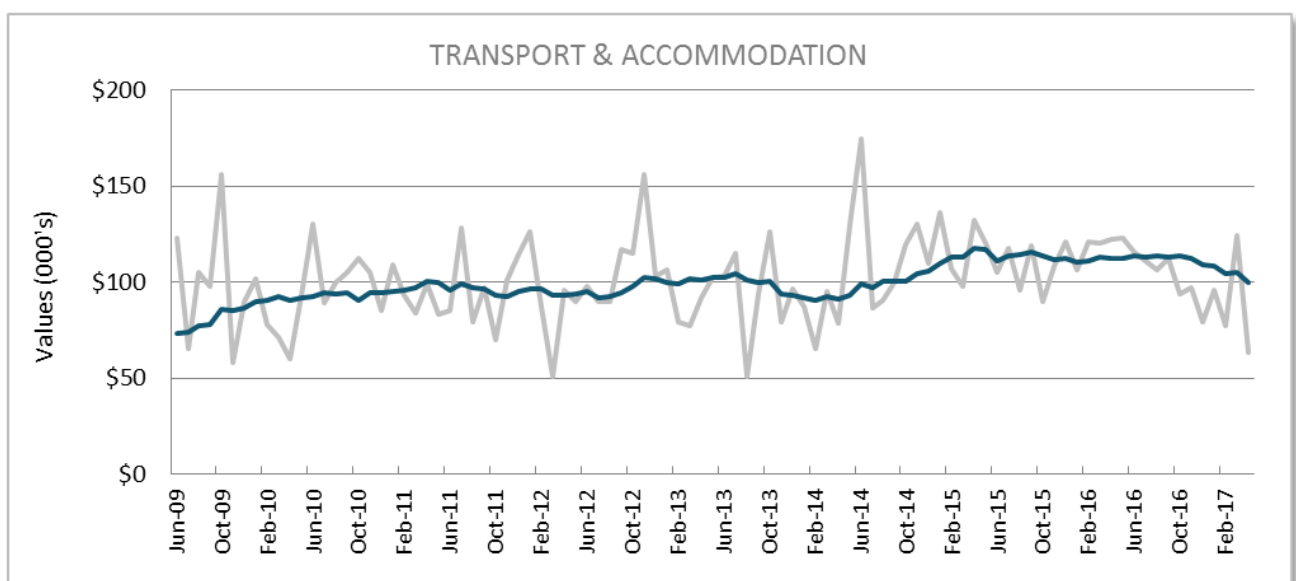
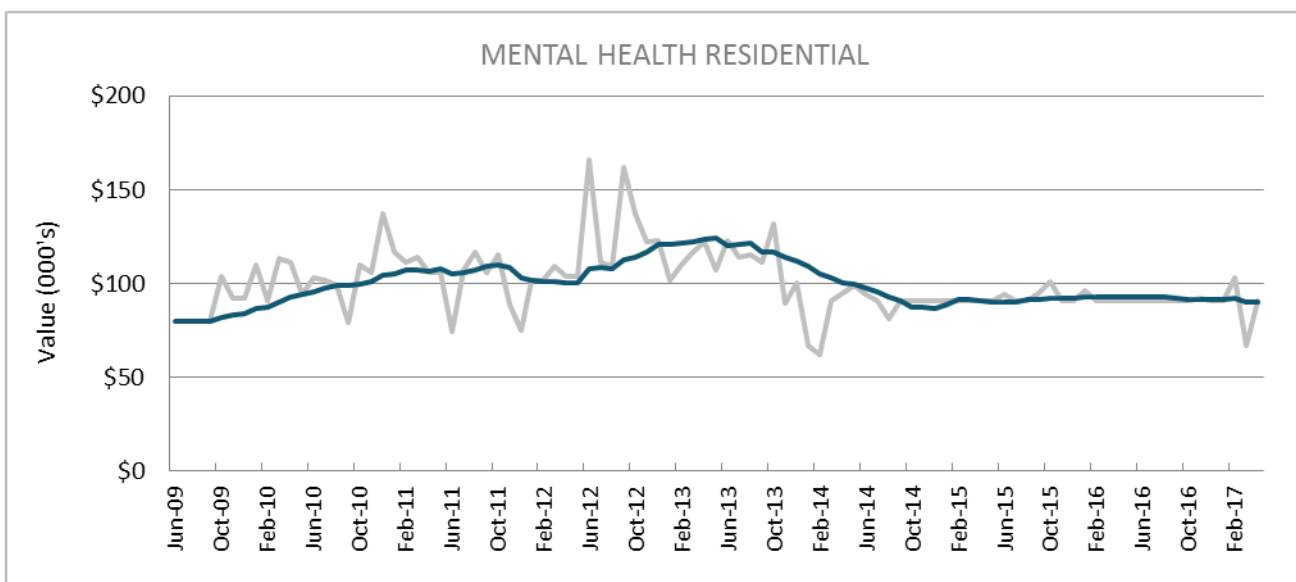
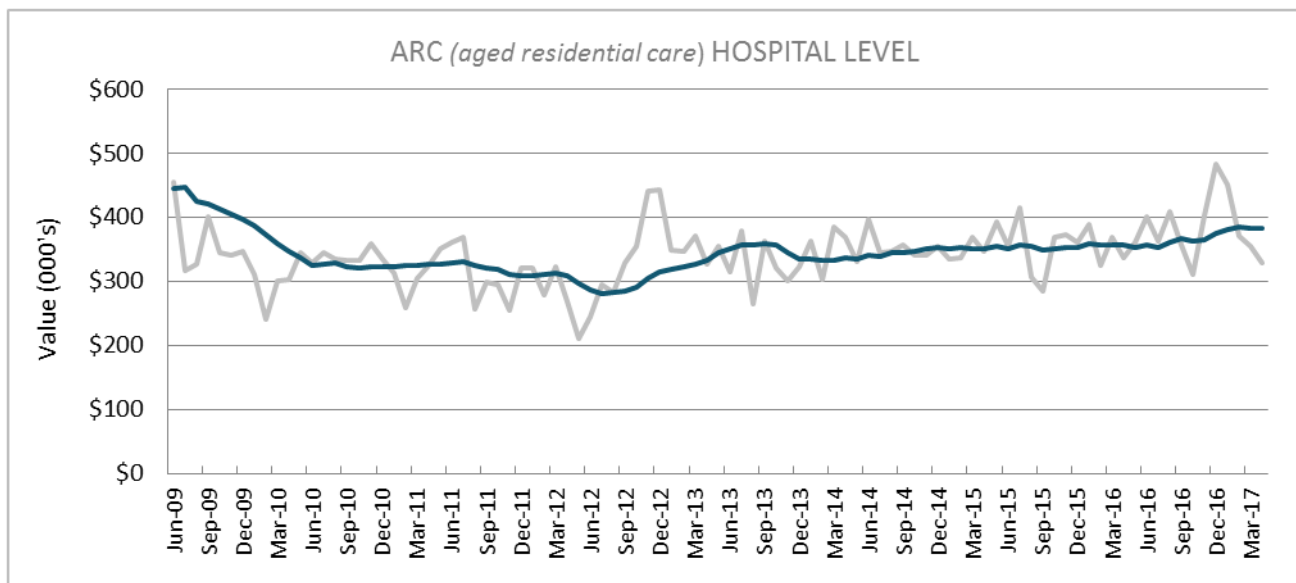
ESPI Compliance | ESPI 5 (FSA to Treatment): The DHB exceeded the 120-day maximum wait times from FSA to surgical treatment with two orthopaedic and one plastic surgery patient noncompliant as at end of March 2017. This result was within compliance tolerance levels, at 1.7% of total wait listed cases.

Financials

Planning and Funding Division Month Ended April 2017

Current Month				Year to Date				
Actual	Budget	Variance		SERVICES	Actual	Budget	Variance	
\$000	\$000	\$000	%		\$000	\$000	\$000	%
				EXPENDITURE				
				Primary Care				
33	28	-5	-16% ✗	Dental-school and adolescent	291	283	-8	-3% ✗
18	21	4	17% ✓	Maternity	196	213	17	8% ✓
1	1	0	20% ✓	Pregnancy & Parent	12	12	1	6% ✓
0	0	0	0% ✓	Sexual Health	0	0	0	0% ✓
2	4	2	49% ✓	General Medical Subsidy	19	42	22	54% ✓
513	522	9	2% ✓	Primary Practice Capitation	5,228	5,223	-5	0% ✗
91	91	0	0% ✓	Primary Health Care Strategy	910	911	1	0% ✓
87	87	0	0% ✓	Rural Bonus	874	874	0	0% ✓
6	4	-2	-48% ✗	Child and Youth	51	42	-9	-22% ✗
21	10	-11	-102% ✗	Immunisation	72	104	32	30% ✓
5	5	0	1% ✓	Maori Service Development	47	47	0	0% ✓
52	45	-7	-15% ✗	Whanau Ora Services	520	452	-68	-15% ✗
12	14	2	16% ✓	Palliative Care	150	138	-13	-9% ✗
0	6	6	100% ✓	Community Based Allied Health	51	63	13	20% ✓
23	10	-13	-124% ✗	Chronic Disease	118	104	-13	-13% ✗
24	61	37	60% ✓	Minor Expenses	352	609	257	42% ✓
888	912	24	3% ✓		8,891	9,119	227	2% ✓
				Referred Services				
26	26	1	2% ✓	Laboratory	261	261	0	0% ✓
579	666	87	13% ✓	Pharmaceuticals	5,771	6,659	888	13% ✓
605	692	87	13% ✓		6,032	6,920	888	13% ✓
				Secondary Care				
131	223	92	41% ✓	Inpatients	1,620	2,232	612	27% ✓
190	126	-64	-51% ✗	Radiolgy services	1,518	1,258	-260	-21% ✗
63	114	51	45% ✓	Travel & Accommodation	960	1,135	176	15% ✓
985	1,425	440	31% ✓	IDF Payments Personal Health	13,739	14,254	516	4% ✓
1,369	1,888	519	27% ✓		17,836	18,879	1,043	6% ✓
2,862	3,492	630	18% ✓	Primary & Secondary Care Total	32,759	34,918	2,159	6% ✓
				Public Health				
22	23	2	8% ✓	Nutrition & Physical Activity	163	233	70	30% ✓
12	11	0	-4% ✗	Tobacco control	118	111	-7	-6% ✗
33	34	1	4% ✓	Public Health Total	281	344	63	18% ✓
				Mental Health				
7	7	0	0% ✓	Dual Diagnosis A&D	71	71	0	0% ✓
	0	0	0% ✓	Inpatients	11	0	-11	✗
20	20	0	0% ✓	Child & Youth Mental Health Services	200	200	0	0% ✓
5	8	2	33% ✓	Mental Health Work force	124	75	-49	-66% ✗
37	61	23	39% ✓	Day Activity & Rehab	437	608	170	28% ✓
11	11	0	0% ✗	Advocacy Consumer	107	107	0	0% ✓
103	81	-22	-27% ✗	Other Home Based Residential Support	963	808	-155	-19% ✗
11	11	0	0% ✓	Advocacy Family	110	110	0	0% ✓
10	16	6	38% ✓	Community Residential Beds	73	158	85	54% ✓
66	66	0	-1% ✗	IDF Payments Mental Health	657	656	-1	0% ✗
270	279	9	3% ✓		2,754	2,792	39	1% ✓
				Older Persons Health				
0	0	0	100% ✓	Needs Assessment	0	1	1	100% ✓
85	84	-1	-1% ✗	Home Based Support	953	843	-110	-13% ✗
11	6	-5	-82% ✗	Caregiver Support	63	58	-5	-9% ✗
209	242	32	13% ✓	Residential Care-Rest Homes	2,106	2,417	310	13% ✓
9	9	0	2% ✓	Residential Care-Community	91	92	1	1% ✓
328	404	76	19% ✓	Residential Care-Hospital	3,830	4,042	213	5% ✓
12	10	-2	-15% ✗	Day programmes	121	100	-21	-21% ✗
4	11	7	65% ✓	Respite Care	80	110	30	27% ✓
1	1	0	0% ✓	Community Health	13	13	0	0% ✓
4	1	-3	-218% ✗	Minor Disability Support Expenditure	28	13	-15	-112% ✗
99	99	0	0% ✓	IDF Payments-DSS	992	993	1	0% ✓
763	868	104	12% ✓		8,277	8,683	406	5% ✓
1,032	1,147	113	10% ✓	Mental Health & OPH Total	11,031	11,475	444	4% ✓
3,928	4,674	746	16% ✓	TOTAL EXPENDITURE	44,071	46,737	2,666	6% ✓





TO: Chair and Members
West Coast District Health Board

SOURCE: Planning & Funding

DATE: 08th June 2017

Report Status – For:	Decision <input type="checkbox"/>	Noting <input checked="" type="checkbox"/>	Information <input type="checkbox"/>
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1. ORIGIN OF THE REPORT

The purpose of this report is to present the Committee with West Coast's progress against the national health targets for Quarter 3 (January-March 2017). The attached report provides an account of the results and the work underway for each health target.

DHB performance against the health targets is published each quarter in newspapers and on the Ministry and DHB websites. The Quarter 3 health target league table is attached to this report.

2. RECOMMENDATION

That the Committee note the West Coast's performance against the health targets.

3. SUMMARY

In Quarter 3, the West Coast has:

- Achieved the **shorter stays in ED** health target, with 100% of people admitted or discharged within six hours. The West Coast continues to maintain consistent performance against this health target.
- Achieved the **improved access to elective surgery** health target, with 1,441 elective surgical discharges year-to-date, delivering 105.5% of planned discharges against target.
- Achieved the **better help for smokers to quit** health target, with practitioners giving 4,888 smokers cessation advice in the 18 months ending March 2017. This represents 92% of smokers against the 90% target.
- Improved performance against the **faster cancer treatment health target** with results lifting from 76.2% to 83.3% narrowly missing the target. This result reflects only four patients whose treatment was non-compliant with target. Audits into patient pathways have taken place with no capacity issues identified
- Improved performance against the **increased immunisation health target**, missing only one child during this quarter and reaching all Maori children. West Coast vaccinated 91.4% of the eligible population.
- Performance slightly increased against raising **healthy kids health target** to 17%. Four children were identified as obese and not referred. This issue has been discussed at a national level and we will be looking to improve database access.

▪ APPENDICES

Appendix 1: Q3 2016/2017 WC Health Target Report.pdf

Report prepared by: Planning & Funding

Report approved by: Melissa Macfarlane, Accountability Team Leader, Planning & Funding

National Health Targets Performance Summary

Quarter 3 2016/17 (January – March 2017)

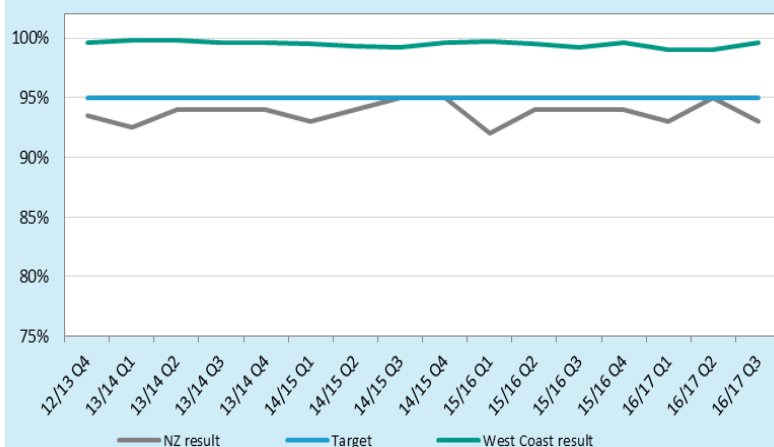
Target Overview

Target	Q4 15/16	Q1 16/17	Q2 16/17	Q3 16/17	Target	Status	Pg
Shorter Stays in ED Patients admitted, discharged or transferred from an ED within 6 hours	100%	99%	99%	100%	95%	✓	2
Improved Access to Elective Surgery West Coast's volume of elective surgery ¹	1,942	480	991	1,441	1,906	✓	2
Faster Cancer Treatment Patients receive their first cancer treatment (or other management) within 62 days of being referred with a high suspicion of cancer	80%	63%	76%	83%	85%	✗	3
Increased Immunisation Eight-month-olds fully immunised	78%	76%	80%	91%	95%	✗	3
Better Help for Smokers to Quit Smokers offered help to quit smoking by a primary care health care practitioner in the last 15 months	79%	84%	91%	92%	90%	✓	4
Raising Healthy Kids Percent of obese children identified at B4SC a referral offered and acknowledged for clinical assessment and healthy lifestyle interventions	New	40%	0%	17%	95%	✗	4

Shorter Stays in Emergency Departments

Target: 95% of patients are to be admitted, discharged or transferred from an ED within 6 hours

Figure 1: Percentage of patients who were admitted, discharged or transferred from ED within six hours



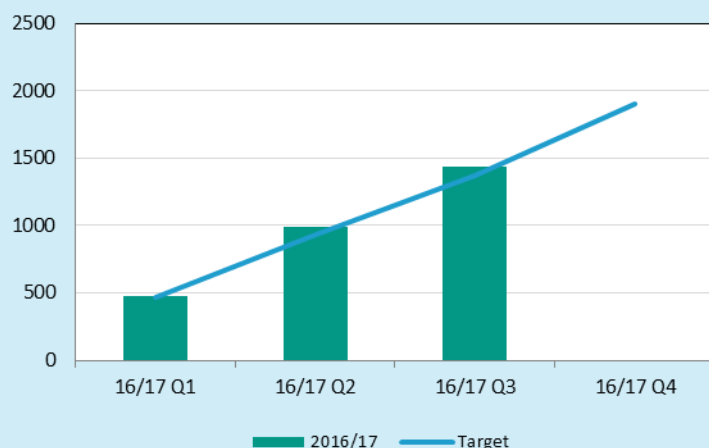
The West Coast continues to achieve the ED health target, with 99.6% of patients admitted, discharged or transferred from ED within 6 hours during quarter three.

To ensure we continue to achieve target the ED team is closely working with private GP providers to improve access to GP appointments. An urgent care workflow has been developed to help primary care better support after hours patient care.

Improved Access to Elective Surgery

Target: 1,906 elective surgeries in 2016/17

Figure 2: Elective surgical discharges delivered by the West Coast DHB ¹



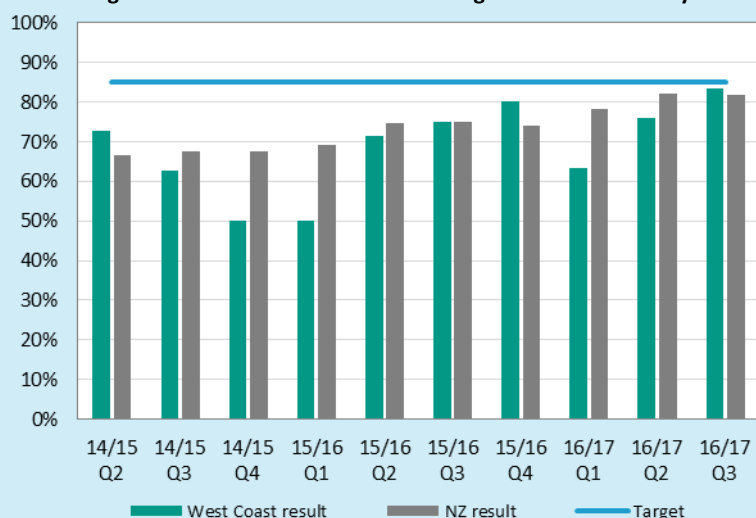
This quarter, West Coast DHB provided 1,441 elective surgical discharges, delivering 105.5% of planned discharges.

¹ Excludes cardiology and dental procedures. Progress is graphed cumulatively.

Faster Cancer Treatment

Target: Patients receive their first cancer treatment (or other management) within 62 days of being referred with a high suspicion of cancer

Figure 3: Percentage of West Coasters with a high suspicion of cancer receiving their first treatment or other management within 62 days



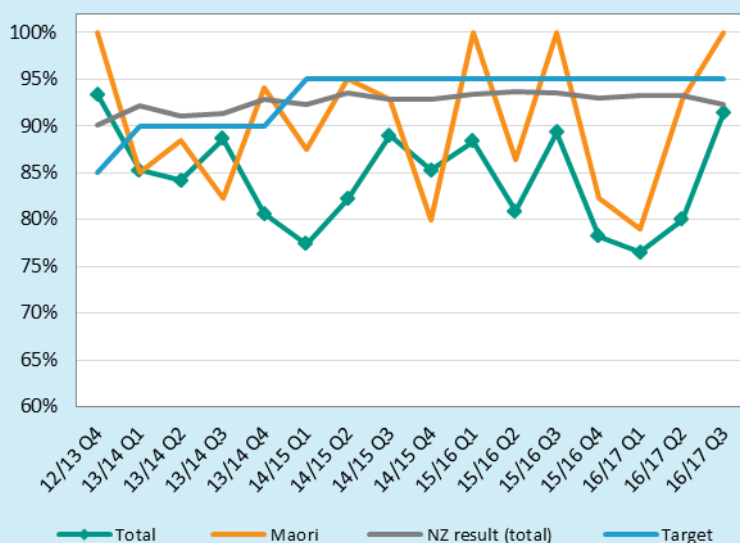
Performance increased this quarter to 83.3% of patients receiving their first cancer treatment (or other management) within 62 days of being referred with a high suspicion of cancer.

Small numbers are challenging with this result reflecting only four non-compliant patients. Audits into patient pathways have taken place with no capacity issues identified.

Increased Immunisation

Target: 95% of eight-month-olds are fully immunised

Figure 4: Percentage of West Coast eight-month-olds who were fully immunised



During quarter three, 91.4% of all eight-month-olds were fully immunised with just one child missed.

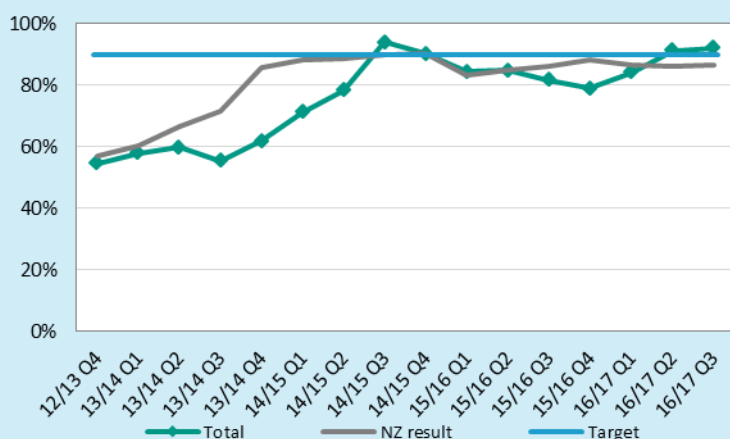
Coverage by ethnicity was achieved for all groups, with 100% of Maori and Asian children vaccinated and 96.4% of NZE children.

Opt-off (5) and declines (1) increased slightly this quarter to a combined 7.4%. This continues to make meeting the target impossible. We are pleased 99% of our consenting population were immunised.

Better Help for Smokers to Quit: *Primary*

Target: 90% of smokers in the community receive advice to quit

Figure 6: Percentage of PHO enrolled population who smoke that have been offered help to quit smoking by a health care practitioner in the last 15 months



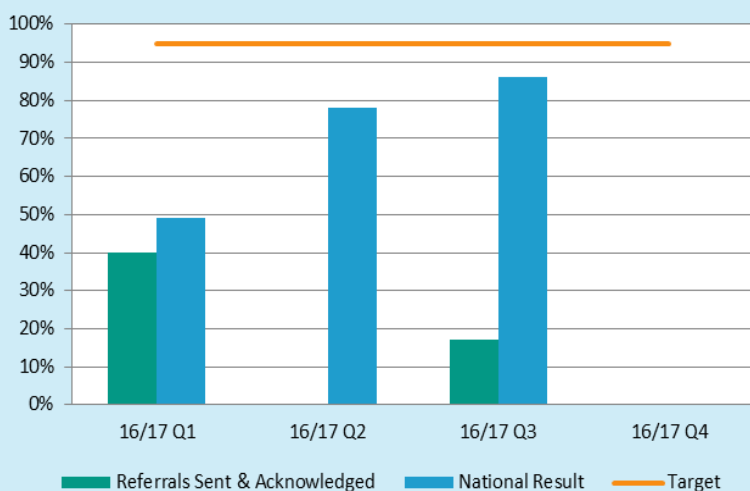
West Coast health practitioners have reported giving 4,888 smokers cessation advice in the 18 months ending March 2017. This represents 92% of smokers against the 90% target.

The DHB is pleased to have exceeded the target this quarter not only for total population but also for Maori and High Needs

Raising Healthy Kids

Target: 95% of obese children identified at B4SC will be offered a referral for clinical assessment and healthy lifestyle intervention

Figure 7: Percentage of obese children identified at B4SC offered a referral for clinical assessment and healthy lifestyle intervention.



NB: Data for this target is based on all *acknowledged* referrals for obese children



This quarter, six children were identified as obese with two referred. Of the two referrals, one declined and one was not acknowledged. This is counted as 1/6 children referred—17%. While this is a disappointing four children missed, technical issues are contributing to this with three of those four missed children having had an incorrect BMI calculation.

Key staff have met and investigated this result, identifying challenges in accessing the correct BMI at the B4 School Check (B4SC) due to limited database access from poor internet connectivity at clinic sites. This issue is being discussed at a national level and the DHB continues to work to find an off-line digital solution. Meanwhile, a hard copy chart is in use and B4SC staff are encouraged to offer referrals to children close to the 98th centile.

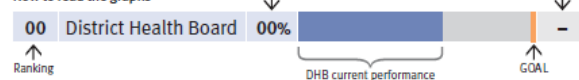
National Health Targets Performance Table – Quarter 3 2016/17 (January – March 2017)



My District Health Board

2016/17 QUARTER THREE (JANUARY-MARCH 2017) RESULTS

How to read the graphs



West Coast District Health Board
Te Poari Hauora a Rohe o Tai Poutini



Shorter stays in Emergency Departments

The target is 95 percent of patients will be admitted, discharged, or transferred from an Emergency Department (ED) within six hours. The target is a measure of the efficiency of flow of acute (urgent) patients through public hospitals, and home again.

	Quarter three performance (%)	Change from previous quarter
1 West Coast	100	▲
2 Wairarapa	98	▲
3 Waitemata	97	▲
4 Bay of Plenty	96	▲
5 South Canterbury	96	▲
6 Tairāwhiti	95	▲
7 Nelson Marlborough	95	▲
8 Counties Manukau	95	▲
9 Auckland	95	▲
10 Whanganui	94	▲
11 Canterbury	94	▲
12 Hawke's Bay	94	▲
13 Lakes	94	▲
14 Hutt Valley	93	▲
15 Northland	92	▲
16 Southern	92	▲
17 Capital & Coast	92	▲
18 Taranaki	92	▲
19 MidCentral	91	▲
20 Waikato	88	▲
All DHBs	94	95%



Improved access to elective surgery

The target is an increase in the volume of elective surgery by an average of 4,000 discharges per year. DHBs planned to deliver 142,690 discharges for the year to date, and have delivered 5,394 more.

	Quarter three performance (%)	Progress against plan (discharges)
1 Taranaki	113	▲
2 Northland	113	▲
3 Waikato	110	▲
4 Whanganui	109	▲
5 Waitemata	108	▲
6 Counties Manukau	107	▲
7 Hutt Valley	106	▲
8 Tairāwhiti	106	▲
9 West Coast	105	▲
10 MidCentral	105	▲
11 Nelson Marlborough	104	▲
12 Bay of Plenty	104	▲
13 Lakes	104	▲
14 Wairarapa	102	▲
15 Hawke's Bay	99	▼
16 Southern	98	▼
17 Canterbury	98	▼
18 Capital & Coast	98	▼
19 South Canterbury	96	▼
20 Auckland	96	▼
All DHBs	104	100%



Faster cancer treatment

The target is 85 percent of patients receive their first cancer treatment (or other management) within 62 days of being referred with a high suspicion of cancer and a need to be seen within two weeks. Results cover those patients who received their first cancer treatment between 1 October 2016 and 31 March 2017.

	Quarter three performance (%)	Change from previous quarter
1 Waitemata	92	▲
2 Canterbury	87	▲
3 Auckland	87	▲
4 Waikato	86	▲
5 Nelson Marlborough	85	▲
6 West Coast	83	▲
7 Southern	83	▲
8 Northland	83	▲
9 Bay of Plenty	82	▼
10 South Canterbury	81	▼
11 Lakes	80	▼
12 Wairarapa	79	▼
13 Tairāwhiti	79	▼
14 Capital & Coast	78	▼
15 Counties Manukau	76	▲
16 MidCentral	75	▼
17 Taranaki	72	▼
18 Hutt Valley	70	▲
19 Whanganui	69	▼
20 Hawke's Bay	69	▲
All DHBs	82	85%



Increased Immunisation

The national immunisation target is 95 percent of eight-month-olds have their primary course of immunisation at six weeks, three months and five months on time. This quarterly progress result includes children who turned eight-months between 1 January and 31 March 2017 and who were fully immunised at that stage.

	Quarter three performance (%)	Change from previous quarter
1 South Canterbury	96	▲
2 Canterbury	94	▲
3 Hawke's Bay	94	▲
4 Auckland	94	▲
5 Southern	94	▲
6 Counties Manukau	94	▲
7 MidCentral	93	▼
8 Wairarapa	93	▼
9 Whanganui	93	▲
10 Capital & Coast	93	▼
11 Hutt Valley	93	▼
12 Taranaki	92	▲
13 Waitemata	92	▲
14 West Coast	91	▲
15 Lakes	91	▼
16 Waikato	90	▼
17 Nelson Marlborough	89	▼
18 Northland	88	▼
19 Bay of Plenty	86	▲
20 Tairāwhiti	85	▼
All DHBs	92	95%



Better help for smokers to quit

The target is 90 percent of PHO enrolled patients who smoke have been offered help to quit smoking by a health care practitioner in the last 15 months.

	Quarter three performance (%)	Change from previous quarter
1 West Coast	92	▲
2 Tairāwhiti	92	▲
3 Bay of Plenty	90	▲
4 Lakes	90	▲
5 Counties Manukau	89	▲
6 Wairarapa	89	▲
7 Hutt Valley	89	▲
8 Auckland	88	▲
9 Waitemata	88	▲
10 MidCentral	87	▲
11 Canterbury	87	▲
12 Hawke's Bay	86	▲
13 Waikato	86	▲
14 Capital & Coast	86	▲
15 Taranaki	86	▲
16 South Canterbury	85	▼
17 Nelson Marlborough	84	▼
18 Whanganui	84	▲
19 Northland	82	▲
20 Southern	73	▼
All DHBs	86	90%



Raising healthy kids

The target is that by December 2017, 95 percent of obese children identified in the Before School Check programme will be offered a referral to a health professional for clinical assessment and family based nutrition, activity and lifestyle interventions. Data is based on all acknowledged referrals for obese children up to the end of the quarter from Before School Checks occurring in the six months between 1 September 2016 to 28 February 2017.

	Quarter three performance (%)	Change from previous quarter
1 Waitemata	100	▲
2 Whanganui	100	▲
3 Auckland	99	▲
4 Canterbury	93	▲
5 Hutt Valley	91	▲
6 Counties Manukau	91	▲
7 MidCentral	89	▲
8 Wairarapa	88	▲
9 Waikato	84	▲
10 Northland	83	▲
11 Hawke's Bay	81	▲
12 Lakes	79	▲
13 South Canterbury	79	▼
14 Southern	78	▲
15 Capital & Coast	73	▲
16 Tairāwhiti	70	▲
17 Nelson Marlborough	67	▲
18 Taranaki	61	▲
19 Bay of Plenty	55	▲
20 West Coast	17	▲
All DHBs	86	95%

This information should be read in conjunction with the details on the website www.health.govt.nz/healthtargets

Health target results are sourced from individual DHB reports, national collections systems and information provided by primary care organisations.

TO: Chair and Members
Community and Public Health & Disability Support Advisory Committee

SOURCE: Planning & Funding
Alliance Leadership Team

DATE: 8 June 2017

Report Status – For:	Decision <input type="checkbox"/>	Noting <input checked="" type="checkbox"/>	Information <input type="checkbox"/>
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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 May the ALT:

- Were pleased to review the Mental Health project plan and hear about the team leading this work.
- Acknowledged the good work put in to developing the Model of Care document that has been drafted by the Primary & Community project team.
- Noted the report regarding usage of Telehealth on the Coast and the positive impact this is having in terms of patients and the environment.
- Were pleased to note the planned changes to the eligibility criteria for accessing subsidised (free to patient) access to Sexual Health services at general practice with the upper age limit being raised to 24 across the Coast from 1st July.
- Were pleased to hear about the progress being made to provide Pregnancy & Parenting Education to hard to reach Māori through a collaborative approach by Plunket, Poutini Waioira and Lead Maternity Carer.

Health of Older Persons

- Work is ongoing with Home-Based Support Services(HBSS) to gather relevant data items to generate monthly reports on time from referral to assessment and number of HBSS clients with a care plan in place.
- 80% of people in Aged Residential Care facilities have had a subsequent interRAI Long Term Care Facility assessment completed within 230 days of the previous assessment. The HOP workstream is encouraged to see this significant improvement from 44% in the previous quarter.

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

- 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.
- 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)

- Following the presentation “Alcohol & the Amazing Brain” that was delivered to schools and community groups on the Coast, over 70% of the young people who attended have provided feedback regarding their experiences with alcohol; close to 1,000 responses from students in years 9-13. A follow up survey is being sent to adults who attended either the school or community sessions.
- West Coast DHB, PHO and Oranga Hā – Tai Poutini have taken part in the first Regional Tobacco Integration Network meeting. This meeting is aimed at reviewing the approach to Tobacco Control across the South Island. The regional Network is aligned to a National Network. This forms the beginning of phase two of the Tobacco Control Realignment process which begun in 2015. The focus of the work is currently on quality assurance for all training being provided to health professionals in regards to tobacco control and smoking cessation.
- Plunket will be partnering with a local Maori Lead Maternity Carer as well as the Tamariki Ora Nurse and Mama & Pepi Kaimahi from Poutini Waioara to deliver Pregnancy and Parenting Education. It is envisaged that existing relationships will encourage young Maori women in particular to engage in these sessions.
- Community & Public Health hosted a workshop for local stakeholders looking at the Food Security status of our community. A report from the workshop is being compiled and will guide future actions to support our vulnerable families.

Child and Youth

- Recruitment for the realigned Gateway Coordinator role is progressing well and it anticipated that this role will provide improved support for the Gateway programme as well as other initiatives that support vulnerable children and whanau.
- The PHO have raised the age at which young people can access free Sexual Health and Contraception advice via their general practice; from 1 July this will be available to all young people 24 and under.

Report prepared by:

Jenni Stephenson, Planning & Funding

Report approved for release by:

Stella Ward, Chair, Alliance Leadership Team

TO: Chair and Members
Community and Public Health & Disability Support Advisory Committee

SOURCE: General Manager, Maori Health

DATE: 8 June 2017

Report Status – For: Decision ☐ Noting ☒ Information ☐

1. ORIGIN OF THE REPORT

This report is provided to Community & Public Health & Disability Support Advisory Committee as a regular update.

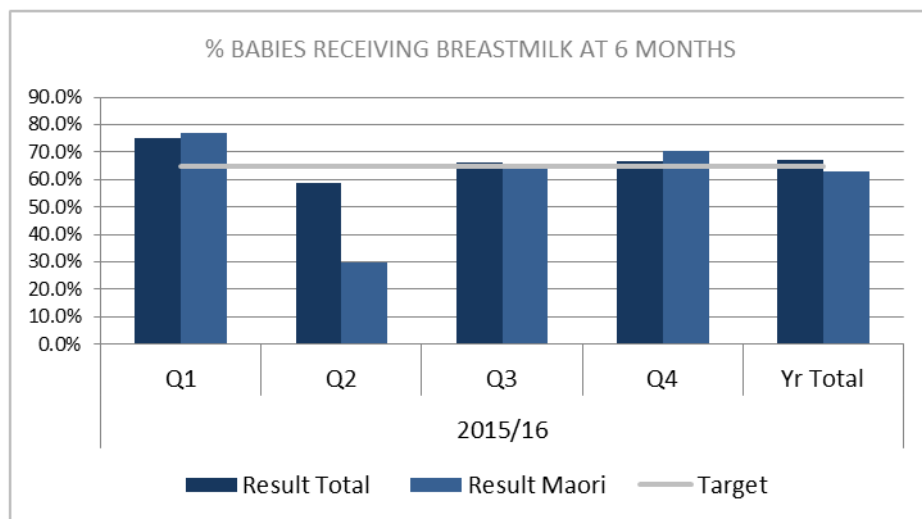
2. RECOMMENDATION

That the Community & Public Health & Disability Support Advisory Committee:

- i notes the Maori Health Plan Update.

Maori Health Quarterly Report – Q3, 2016/17

Tamariki Health and Wellbeing



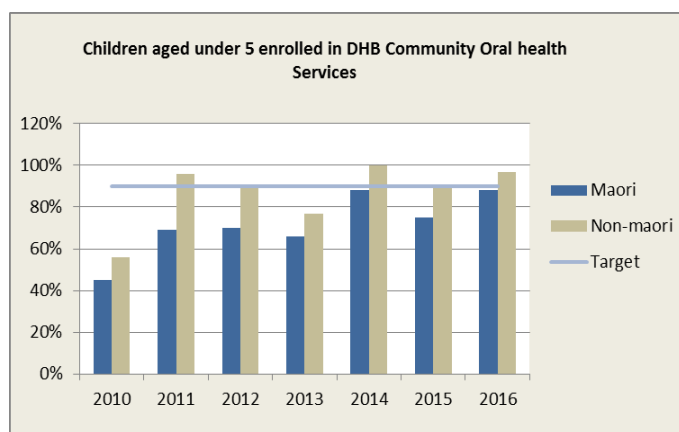
Comments: At year end for 2015/2016 the result for Maori receiving Breastmilk at 6 months was 63.2% at 6 months which is just 2% away from the 65% target. For non- Maori the result was 67.3. Our trendly data shows that from January to June 2016 Maori on the West Coast are leading nationally with 75% Maori babies being exclusively breastfed at 6 weeks, 62.5% at 3 months and 64.7% at the end of 6 months.

The Mama and Pepi service continues to focus on providing breastfeeding support to Maori mums. A pilot pregnancy and parenting course will be run by an LMC, Poutini Waiora - Mama and Pepi kaimahi and Tamariki ora nurse. This provides another avenue to deliver breastfeeding education sessions to pregnant Mums.

The Mum 4 Mum programme has now been running for 10 years with over 200 Mums trained across the West Coast to provide peer support around breastfeeding.

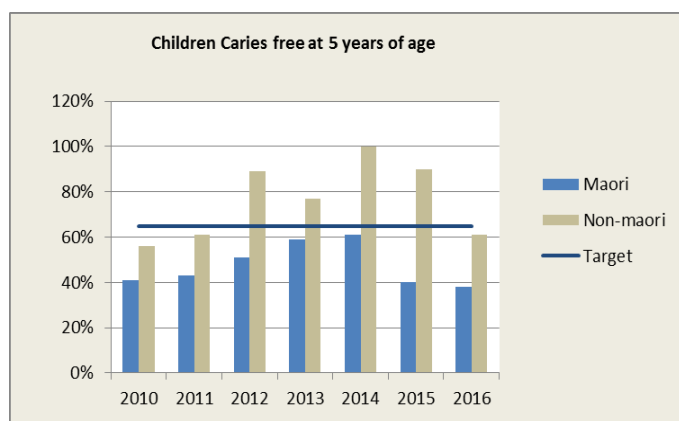
The Buller Workstream is developing local strategies aimed at engaging Maori mothers in breastfeeding education to increase breastfeeding rates.

Oral Health



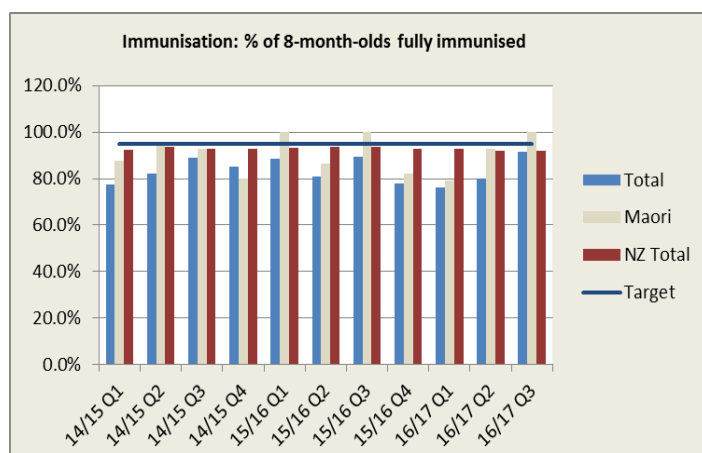
Enrolment rates in the pre-school oral health service continue to rise with 87.1% non-Maori and 75.2% Maori pre-schoolers enrolled at the end of 2016.

Children Caries free at 5 years of age is continuing to trend down with a 2% drop from 40% in 2015 to 38% in 2016. Non-Maori rates have also dropped significantly from 90% in 2015 to 61% in 2016.

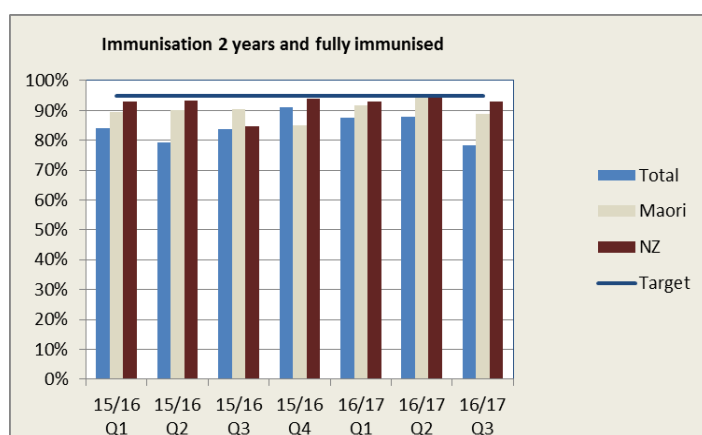


A targeted focus within the WCDHB System level measures framework will see strategies focused on increasing the percentage of pre-school children receiving their annual dental check on time and an all system approach to reducing the rate of dental decay among our Tamariki through targeted intervention with families, health promotion and oral health education provision for all health professionals who come into contact with children from 0-5.

Immunisation



8 Month Immunisation: In Quarter 3 100% of Maori babies were immunised on time (15 out of 15 eligible). 96% of non-Maori babies (53 out of 55 eligible).



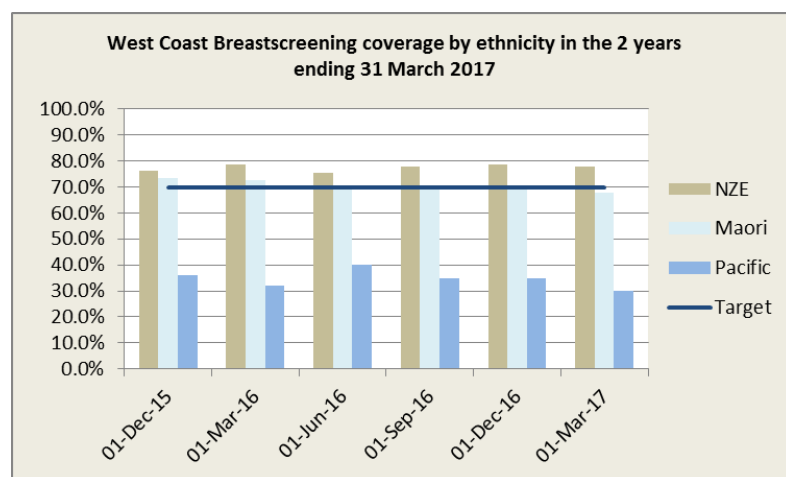
2 Year old Immunisation: In Quarter 3 89% of Maori children were immunised on time (16 out of 18 eligible). 98% of non-Maori children (43 from 44 children eligible).

Cancer

Table 1: BSA coverage (%) in the two years ending 31 March 2017 by ethnicity, women aged 50–69 years, West Coast Coverage

Ethnicity	Population	Women screened in last 2 years	2-year coverage	Additional screens to reach target*
Māori	378	256	67.70%	8
Pacific	20	6	30.00%	8
Other	4,204	3,220	76.60%	
Unspecified		21		
Total	4,602	3,503	76.10%	

*For the total population the number of additional screens is the number required to move from the total population coverage to 70%. This may not be the same as the sum of additional screens required for each ethnic group to reach 70%.

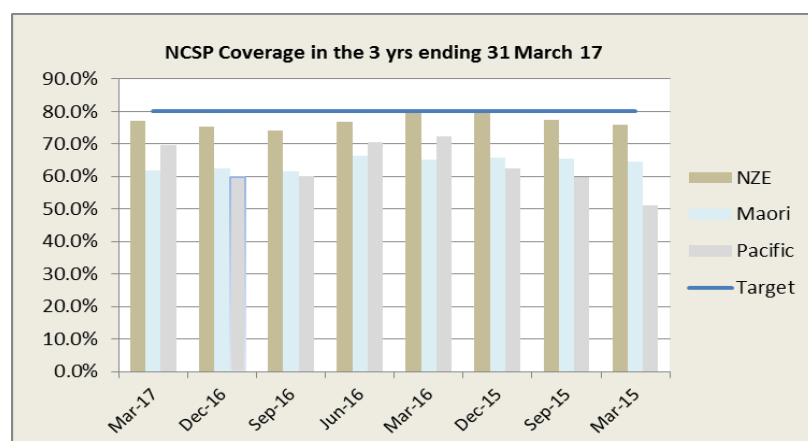


Comments: For the first time in many years we have not managed to reach target for Maori for Breastscreening.

A meeting was held with Breastscreen South Regional Manager and the Pacific and Maori Co-ordinators who work from Christchurch. Links were made at that meeting with Poutini Waiora Nurse and Kaiarataki and this connection has resulted in a more seamless approach to tracking those Maori overdue and linking them back with Breastscreen South.

Table 1: NCSP coverage (%) in the three years ending 31 March 2017 by ethnicity, women aged 25–69 years, Total Coverage

Ethnicity	Population	Women screened in last 3 years	3-year coverage	Additional screens to reach target*
Māori	884	572	64.70%	135
Pacific	86	44	51.20%	24
Asian	372	189	50.80%	108
Other	7,253	5,515	76.00%	287
Total	8,595	6,320	73.50%	556



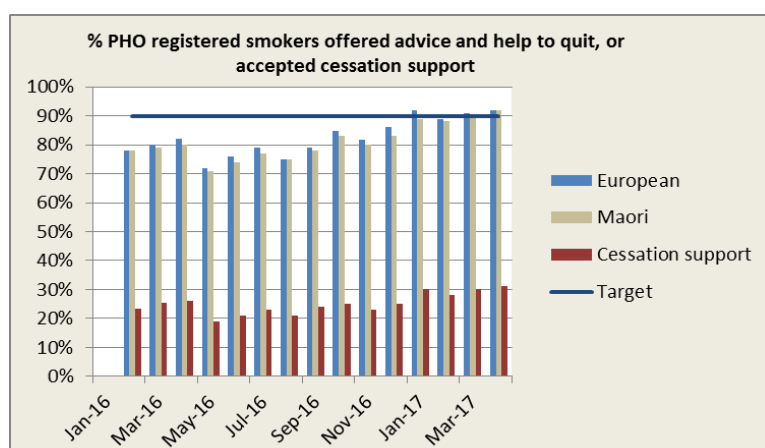
Comments: Q3 results show that there are 135 additional screens required to meet the target for Maori. Cross service interventions are currently being explored to ensure a robust pathway and provision of a range of access routes for women.

Smoking

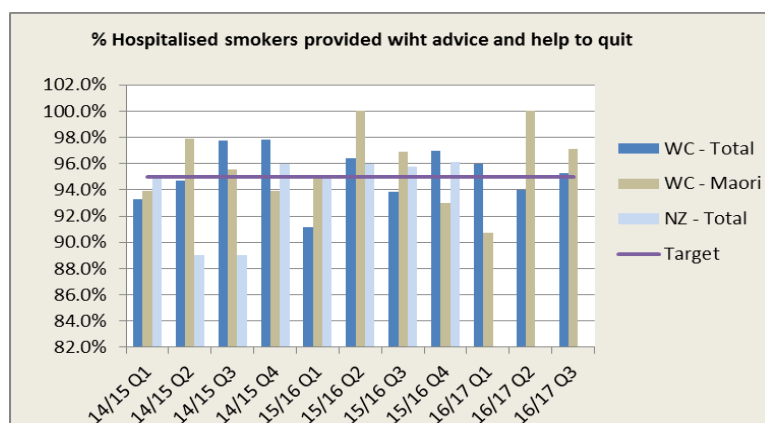


Coast Quit: In Quarter 3 23 Maori were enrolled in the Coastquit programme compared to 118 Non-maori and 1 Pacific Island enrollment. Maori enrollments make up 16% of all enrollments in Quarter 3. 27% of the people phoned for their follow-up were still smokefree in the 3-4 month period since commencing the Coast Quit programme.

Primary Smoking: In Quarter 3 92% of Maori and non-Maori patients were provided with Brief advice with 31% of those taking up the offer of cessation support.



Secondary Smoking: West Coast DHB staff provided 96.3% of hospitalised smokers with smoking cessation advice and support against the 95% target. The rate of advice for Maori was 97.1%.



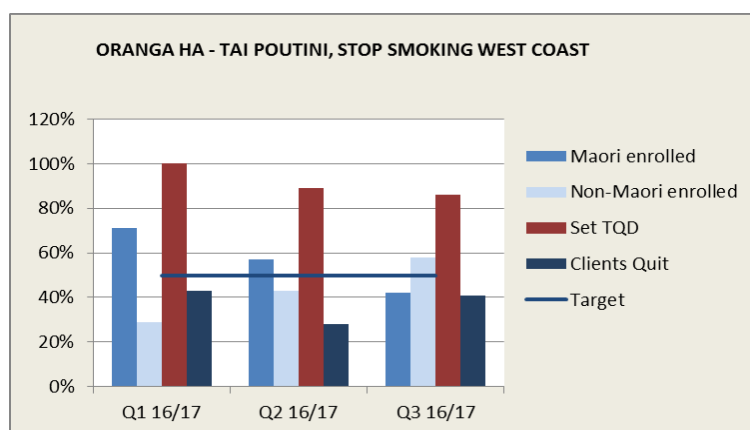
Oranga Ha: Oranga Ha – Tai Poutini, Stop Smoking West Coast has been delivering since July 2016. The service employs 3 x 0.6 FTE spread across the West Coast. Contractual targets are 278 enrolled with a 50% quit rate at 4 weeks, it is estimated to achieve 278 enrolled the service will need 480 referrals.

Quarter 3 is the first quarter that has seen the service working with a full FTE and this has been evident in the high number of referrals 117.

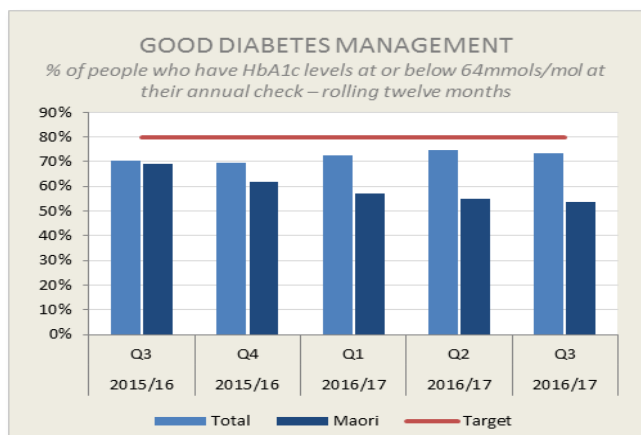
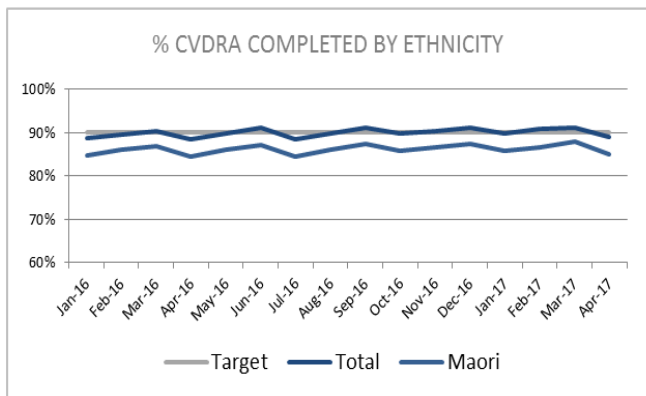
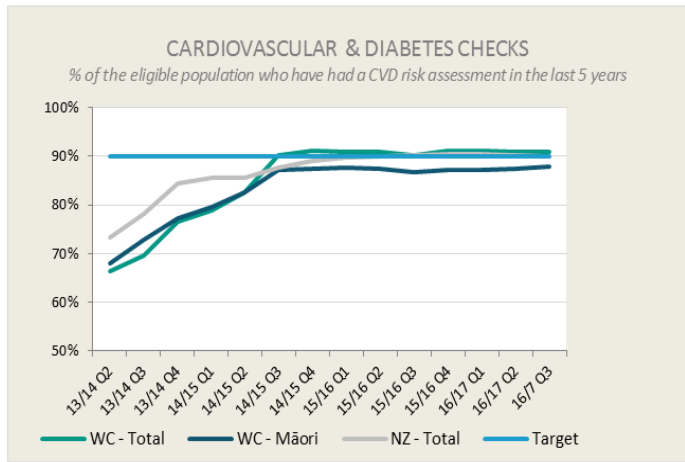
Quarter 1 showed pleasing results with 71% of the 41 referrals being Maori. In Quarter 2 57% of the 69 referrals were Maori with 42% in Quarter 3.

The challenge now is to increase the number of referrals coming from other sources such as primary care, secondary care, LMC, NGO's and other sources. In Quarter 2 and 3 90% of all referrals were self referrals coming from the significant promotional work of the cessation practitioners such as Facebook campaigns.

Initiatives to work more closely alongside the Maori Health Provider and hold clinics from their premises should see stronger relationships that will result in increased referrals from this service. The Buller Practitioner is based in the Poutini Waioara Westport office.



Adult Health



Cardiovascular and Diabetes Checks: West Coast DHB continued to achieve a result of 91% of the eligible enrolled West Coast population having had a cardiovascular and diabetes risk assessment (CVDRA) in the last 5 years as at the end of March 2017 (target: 90%). While continuing to be monitored, this measure ceased to be one of the formal six National Health Targets with effect from 1 July 2016.

A total of 256 cardiovascular risk assessments were conducted this quarter (this doesn't include patients with known diabetes). 38 of those risk assessments were for Maori (14.8%). By comparison Maori make up 10% (1073) of the eligible cohort for CVRA on the West Coast. (The eligible age range for Maori is male 35-74 years and for female 45-74 years). 88% of those eligible Maori have been screened: this includes 85% of eligible males and 91% of eligible females.

The smoking profile for CVRAs completed this quarter for Maori is 66% not smoking compared with other ethnicities screened not smoking 77%.

CVD Annual Reviews: 4.8% of the annual reviews conducted year to date was for Maori. For comparison Maori make up 6.5% of the enrolled population aged 45+ years – the prime age group of people in the LTC programme. 227 annual reviews were completed this quarter, 14 were for Maori (6.2%).

Diabetes Management: 69.3% of people with diabetes had good management of disease in the twelve months to 30 September 2016 (as defined by having an HbA1c level at or below 64mmols at time of diabetes check). Our internal target for this measure is 80%. This measure is only updated quarterly

269 reviews were conducted this quarter (830 year-to-date) as part of the LTC programme. 8.4% of the annual reviews conducted YTD were for Maori. For comparison Maori make up 6.5% of the enrolled population aged 45+ years – the prime age group of people in the LTC programme.

GM Maori Update

Kia ora Hauora Work Placement Programme

West Coast DHB has just completed this year's work placement programme in conjunction with Kia ora Hauora. The programme was run over 3 days from the 27-29 March. The students had access to many different careers within the Health sector including the local Maori Health Provider – Poutini Waiora, Westland Medical Centre, and Grey Hospital - Laboratory, Occupational Therapy, Emergency Department, Nursing, West Coast PHO and Community Public health.

Tipu Ora – Certificate in Hauora Maori Level 4 (West Coast)

Tipu ora have held their third three day Wananga for the Certificate in Hauora Maori level 4 in Greymouth. The course runs over 6 months and takes 20 weeks to complete with 6 three day Wananga. There are 16 participating in the training from across the West Coast and from various health and NGO services. Previously this certificate has been run out of Christchurch for the last 3 years and prior to that out of Rotorua and Auckland so it is a real coup to get it delivered locally. The course will close with a formal graduation in July which will be attended by Dame Tariana Turia.

Treaty of Waitangi – Greymouth

18 trainees attended the Treaty training held on the 18th April at St Johns.

Treaty of Waitangi – Buller

13 people attended the Treaty training held on the 26 April in the Buller

Tatau Pounamu – Chair Resignation

Chair Lisa Tumahai announced her resignation at the last Tatau Pounamu meeting on the 23 March 2017, Ned Tauwhare has been replaced as the second Ngati wae wae representative and Susan Wallace has been elected as the new Chair at the meeting on May the 18th.

Takarangi Cultural Competency Framework

The first training has been scheduled to take place on the 27/28 July on Te Tauraka Waka a Maui Marae. We are targeting around 20-25 trainees initially focusing on Senior Management and Clinical Managers and have had a great response across the sector. Those trained in TCF at the initial workshop will be skilled for and tasked with the responsibility of carrying this learning into their practice settings and with supporting the next layer of their workforce to undertake the training.

An initial presentation has been given to the Director of Nursing, GM Buller Health, Operations Manager CAMHS, Mental Health, Associate Director Allied Health GM Grey/Westland Health and Team Leader Community Public Health as an opportunity to ask further questions and to gain support for the sustained and supported growth of the Takarangi framework as a recognised part of core competency training throughout the sector. An implementation plan is being developed that will look at how we embed the training across the sector, some of the issues for future consideration are:

- A stronger systems approach will be required – including greater organisation/service level buy in and support (who needs to be involved? Key clinicians and managers)
- Alignment to the workforce development strategy, performance management systems and overall quality framework to ensure cultural competency is a core platform to best practice
- Training and supervision will need to be developed and delivered in a way that is directly related to the competencies
- A package will need to be developed beyond the introductory workshop that looks at ongoing competency based training and supervision
- There will need to be ongoing support of practitioners and services that engage with the framework
- Linkages to regional and local plans.

Dual Signage

Meetings have been held between Tatau Pounamu and the Facilities team to begin discussing options to include Dual Signage within the new facility.

Tumu Whakarae – letter to the Chair of DHB CEOs Group

Annual Plan Guidance to DHBs

The removal of the requirement for the DHBs to have standalone Annual Maori Health Plans has created some concern for GMs Maori across the country, given one potential impact of this is that the Maori health priorities become invisible in an integrated plan. However if achieving health equity for Maori is at the forefront of DHBs thinking this won't be an issue.

Tumu Whakarae strongly recommends that in relation to the integration of annual Maori Health Plans into Annual Plans that CEOs champion a Maori health equity approach in respective DHBs by: Approaching the Annual Plan in the same way we approached Annual Maori Health Plans.

- a. Where applicable report all Annual Plan indicators by ethnicity.
- b. Where an indicator shows a Maori health inequity or equity gap apply the Te Ara Whakawaiaora performance improvement methodology to that indicator (see snapshot below)
 1. Appoint a responsible Executive Champion
 2. Develop a robust improvement plan
 3. Systematic reporting and monitoring of performance against the indicator to the Governance Groups
 4. Share intelligence around the performance of this indicator

These actions will also enable DHBs to achieve outstanding performance rankings in line with DHB non-financial monitoring framework and performance measures provided by the MOH. This ranking can only be applied when a DHB has met the target agreed in its Annual Plan and has achieved the target level of performance for the Maori population group.

Tumu Whakarae has also agreed to continue to implement our performance improvement tools, namely Trendly and Health Excellence Seminars. We will be exploring opportunities to partner with our Ministry of Health colleagues from 2017/18 onwards with this endeavour.

Te Ara Whakawaiaora – Accelerating Improvements in Maori Health – A Snapshot

te ara whakawaiaora performance improvement.pdf - Adobe Acrobat Reader DC

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Te Ara Whakawaiaora – Accelerating Improvements in Māori Health

Te Matakite, TDHB Māori Health Plan is TDHB's primary vehicle to improve Māori health towards the whanau goals identified in the Pae Ora framework. The DHB continued to strengthen the processes and to embed these as a whole-of-system approach. This includes

- Spreading responsibilities for performance across the DHB to relevant funding and service managers
- A monitoring process which draws on the centralised web-based monitoring tool www.trendly.co.nz to access the latest performance data on Māori Health Plan national indicators and enables these to be compared across all DHB's to identify best performers
- Quarterly reporting to the joint TWPK / TDHB Boards meeting and publication of results to key stakeholders
- A Māori Health Plan Steering Group which functions at an executive level and includes representation from primary and secondary care.

INDICATOR LEGEND

Target attained
Within 10% of target
10-20% away from target
Greater than 20% away from target

SYMBOL	KEY
☑	Progressing well
⊕	Some progress
☒	No progress or worsening
⌋	Not yet sufficient time to judge
?	Further info or work required
↑	Increasing gap
↓	Decreasing gap
⊙	Eliminated gap

How the sector performed to improve Māori health

The table below summarises the performance of the sector during the year to improve Māori health status on ten national and three local Māori Health Plan priorities, as measured by 20 national and two local performance indicators. The data presented is as at June 2015 with the exception of ASH rates (Ambulatory Sensitive or avoidable Hospitalisations) and DNA rate (Did Not Attend) due to the end of year data being unavailable at the time of writing this report:

National Priorities & Indicators

	Health Issue	Indicator(s)/Target	Target	Māori	Non-Māori/Total	12 Month Change	Progress To Target	Disparity Gap	Reducing Disparities Progress	Māori June 2014
1	Data Quality	Ethnicity data accuracy in PHO registers	98%	84%	93%	-4%	▼	9%	☒	88%
2	Access to care	Percentage of Māori enrolled in PHOs	98%	84%	93%	-4%	▼	9%	☒	88%
		ASH 0-74 yrs	1978	2895	1518	+211	▼	1377	↑	2684
		0-4 yrs	4428	6270	3525	+926	▼	2745	↑	5344
		45-64 yrs	2255	3341	1391	+119	▼	1950	☒	3222
3	Child health	Exclusive breastfeeding at six weeks	68%	60%	72%	+7%	▲	12%	↑	53%
		Exclusive breastfeeding at three months	54%	50%	59	+10%	▲	9%	☒	40%

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27/04/2017

Tumu Whakarae

Ministry of Health – Strategic Engagement

In relation to MOH infrastructural changes Tumu Whakarae met with Alison Thom – Executive Leadership Team, Maori Leadership and has agreed to work with her to clarify key MOH leads and points of engagement on key Maori health matters in the future including Annual Planning, Workforce Development, Policy Performance Monitoring, and in particular in areas where Maori health outcomes are lagging.

Annual Planning 2017/18

A hui was held with Tatau Pounamu, Poutini Waiora, Community Public Health and the West Coast PHO to review the first draft of the Annual Plan, Workstream workplans and System Level Measures Framework and to incorporate their feedback into the 2nd draft of the plans to the Ministry.

The feedback was positive with Tatau Pounamu wanting a strong emphasis on models of care for youth primary mental health and ensuring access for Maori to mental health services was improved. Leading on from this they wanted assurance that reporting against mental health services and access for Maori was robust and regular with strong input from Maori into the Suicide Prevention Action Group and Mental Health working groups. Additionally a strong focus on Oral health and improving Maori outcomes was identified as a local priority.

It was also noted that some solid planning is occurring to ensure accountability for equity measures within the Annual Plan given the removal of the Maori Health Plan.

AGENDA – PUBLIC

WEST COAST DISTRICT HEALTH BOARD MEETING
to be held at St John, Waterwalk Road, Greymouth
on Friday 12 May 2017 commencing at 10.00am

Visit to Facilities Site

Please meet at the site entrance in Waterwalk Road where there is car parking.
Please ensure you wear sturdy footwear with closed in toes and bring your hard hat and jacket if you took one home with you after the last visit.

**10.00am
to
10.30am**

KARAKIA

ADMINISTRATION

10.40am

Apologies

1. Interest Register
2. Confirmation of the Minutes of the Previous Meetings
 - 16 March 2017
3. Carried Forward/Action List Items

REPORTS FOR NOTING

10.45am

- | | | |
|--|---|-------------------|
| 4. Chair's Update
(Verbal Update) | Jenny Black
<i>Chair</i> | 10.45am – 10.55am |
| 5. Chief Executive's Update | David Meates
<i>Chief Executive</i> | 10.55am – 11.10am |
| 6. Clinical Leader's Update | Mr Pradu Dayaram
<i>Medical Director, Facilities Development</i>
Cameron Lacey
<i>Medical Director</i> | 11.10am – 11.20am |
| 7. Mental Health Update | Cameron Lacey
<i>Medical Director</i> | 11.20am – 11.40am |
| 8. Finance Report | Justine White
<i>General Manager, Finance</i> | 11.40am – 11.50am |
| 9. Wellbeing Health & Safety Update | Michael Frampton
<i>General Manager, People & Capability</i> | 11.50am – 12noon |
| 10. Reports from Committee Meetings | | |
| - CPH&DSAC
27 April 2017 | Elinor Stratford
<i>Chair, CPH&DSA Committee</i> | 12noon – 12.10pm |
| - Hospital Advisory Committee
27 April 2017 | Michelle Lomax
<i>Chair, Hospital Advisory Committee</i> | 12.10pm – 12.20pm |
| 11. Resolution to Exclude the Public | Board Secretariat | 12.20pm |

INFORMATION ITEMS

- 2017 Meeting Schedule

ESTIMATED FINISH TIME

12.20pm

NEXT MEETING: Friday 23 June 2017

COMMUNITY & PUBLIC HEALTH & DISABILITY SUPPORT ADVISORY COMMITTEE MEETING UPDATE 27 APRIL 2017



TO: Chair and Members
West Coast District Health Board

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

DATE: 12 May 2017

Report Status – For:	Decision	<input type="checkbox"/>	Noting	<input checked="" type="checkbox"/>	Information	<input type="checkbox"/>
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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 27 April 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 – 27 April 2017.

3. 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

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). 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 members also 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 hosted a workshop on Food Security in Greymouth on 26th April. Invitations were sent to individuals and organisations working with West Coasters who are struggling to provide sufficient nourishing food for themselves and their families. There was a very good response. The purpose of the workshop was 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. At the time of writing this report, planning for the workshop was well underway and some pre-work has been sent to participants. It is planned 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's 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 Hā, 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:

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.

Discussion took place regarding the Food Security workshop held in Greymouth, the workshop was very well received and a report is being prepared and will be provided to the Committee at a later date.

The Committee applauded the work being undertaken and positive feedback from the Health Promoting Schools, not just the with the section contained in the summary but with all projects and the staff going the extra mile to ensure the whole of the West Coast benefits from the ongoing work.

The Committee noted that the outcomes around "Teenagers, Alcohol and the Amazing Brain" project will come back to the Committee in late 2017.

The Committee also noted that there will be an update at the next Committee meeting around drinking water as survey results will be available.

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

- **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.

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 March the ALT:

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

- 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.

The report was noted.

d) GENERAL BUSINESS

- i. The Committee noted that the Grey District Council (GDC) has called for submissions on their new draft parking policy for the Greymouth Central Business District. The submission deadline is 15 May 2017. Discussion took place regarding a submission process for the West Coast DHB.

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
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**

REPORTS/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

WORKPLAN FOR CPH&DSAC 2017 (*WORKING DOCUMENT*)

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