



## AUCKLAND DISTRICT HEALTH BOARD

### COMMUNITY AND PUBLIC HEALTH ADVISORY COMMITTEE

**Minutes of the Community and Public Health Advisory Committee  
meeting held on Monday 4 February 2008 in the  
Marion Davis Library, Building 43, Auckland City Hospital, Grafton  
commencing at 9:00 am**

#### 1. ATTENDANCE AND APOLOGIES, CONFLICTS OF INTEREST

##### **Committee Members**

Rob Cooper (Chair)	Jo Agnew
Susan Buckland	Harry Burkhardt
Dr Chris Chambers	Brian Fergus
Dr Ian Scott	Pat Snedden
Bob Tizard	Seiuli Dr Juliet Walter
Ian Ward	

##### **In Attendance**

Rev Alfred Ngaro

##### **Management in Attendance**

Garry Smith – Chief Executive  
Dr Denis Jury – Chief Planning & Funding Officer  
Greg Balla – Director Performance and Provider Development  
Dr Celia Palmer – Clinical Leader, Planning & Funding  
Taima Campbell – Executive Director Nursing  
Kerry Hiini – Planning & Funding Manager  
Janice Mueller – Director Allied Health  
Aseta Redican – GM Pacific Health  
Ian Bell - Board Administrator

##### **Apologies**

The Chair declared the meeting open at 9.55 am and opened the meeting with the karakia.

Rev Alfred Ngaro welcomed and acknowledged the honour of Seiuli Juliet Walker on the new Board. Seiuli was supported by her parents. Mrs Walker and Seiuli responded.

The Board Chair advised that new external members of the Committee will be determined in the next month. There were no notifications of conflicts of interest for any items on the agenda.

## **2. CONFIRMATION OF MINUTES 6 DECEMBER 2007**

Moved Harry Burkhardt, seconded Ian Scott

*That the minutes of the Community and Public Health Advisory Committee meeting held on 6 December 2007 be confirmed as a true and correct record.*

Carried

Denis Jury advised that the registration versus enrolment issues with a PHO had been resolved. A letter from the Chairman of the PHO had been received.

## **3. ACTION TABLE 6 DECEMBER 2007**

There were no actions from the previous minutes.

## **4. BUSINESS PLAN CHILD AND ADOLESCENT ORAL HEALTH SERVICES**

Wendy Hoskin, Planning and Funding Manager, was in attendance. The plan was in response to a Government initiative to upgrade all school dental services. The assets had previously been owned by Education but they were being transferred to Health. There had been no investment for a long period and Government was providing \$100m of which ADHB's share was expected to be \$9m. This had given an opportunity to look at appropriate service provision and it was proposed to reduce the present 65 clinics to 13 supported by a mobile diagnostic facility and transport to the hubs at an estimated investment of \$13.4m. There had been wide consultation and acceptance that there could not be assets on every previous site. The proposal was to put the plan to the MoH noting that for most DHBs their proposals exceeded the funds available.

Five models had been considered but the hub and spoke model supported by access through transport was supported as the best option. Hubs also gave a mix of staff to support therapists. Clinical advice had been not to provide treatment through mobile clinics.

The Committee raised the question of improving services for Maori, Pacific and Southern Indian populations and whether on-site diagnosis and off-site treatment was best for their education needs. There was general support for the proposal which also was aimed at capturing 0-5 year olds as early as possible into the system. Maori and Pacific had agreed to the proposal. There were acknowledged workforce issues in attracting Maori and Pacific. An extra coordinator would be employed to link with general practice and existing programmes i.e. Well Child.

There would be ongoing transport needs to cater for parents that could not afford to participate and the logistics could be quite difficult. Therapists were a registered professional with a prescribed scope of practice who had to refer to contracted dentists if the work was outside their prescribed scope, which was the present practice. Census data had been considered and taken into account to allow for new schools. The regional service was provided by Waitemata.

The plan was aimed at providing basic oral healthcare. Specialist treatment is publicly funded for children and adolescents although orthodontic treatment is not. This was to

address a major deficiency where there had been under investment for many years and it was acknowledged that, with more diagnostics, there may not be sufficient resources to provide treatment. There was also demand for therapists from the private sector. Schools had accepted that there was limited funding.

An issue would be the MoH funding the shortfall, not DHBs which was an issue for all DHBs.

Moved Chris Chambers, seconded Pat Snedden

*That the Community and Public Health Advisory Committee approves the business case for Proposed Investment in and Reconfiguration of Child and Adolescent Oral Health Services for submission to the Ministry of Health with the proviso that assessment, treatment and access to an appropriate level of care be prioritised to the most at risk populations.*

Carried

Fluoridation was an issue with the supply in Onehunga not fluoridated and subject to political policy at a Local Government level. This should be a health issue not sitting with local government.

## **5. PUBLIC HEALTH BILL**

Monica Briggs, ARPHS Service Manager, and Alastair Matheson, Programme Principal, were in attendance. They considered the Public Health Bill could go further to future proof it and presently the Director General can only issue non binding guidelines. In particular they would want to see strengthening of the section relating to non communicable diseases and that the set of principles that the Director General must take into account should relate to all the legislation not just the non communicable disease section. The submission would be a joint submission from the Auckland DHBs as the Auckland Regional Public Health Service was a regional service.

Moved Pat Snedden, seconded Ian Scott

*That the Auckland District Health Board Chair or CEO sign a letter of endorsement for the Auckland Regional Public Health Service submission on the Public Health Bill.*

Carried

## **6. PLANNING AND FUNDING MONTHLY REPORT**

Denis Jury spoke to his report noting that financials were satisfactory and the District Annual Plan planning was progressing on time and was covered in the Board agenda. The Pharmacy contract, while being a national process, the Auckland DHBs had maintained a different position and negotiated within the Auckland region to link the contract to outcomes that the DHB sought which included investment in high speed broadband. There were good relationships with the Auckland Pharmacy Advisory Group.

The Aged Residential Care contract was a national contract but had had flawed processes with a judicial review finding against DHBs. The Auckland regional DHBs



were looking at a more tailored contract for the Auckland region. Consultation on primary maternity services provision had been extended. Work was continuing on development of palliative care services to have a higher profile and be broader than just cancer. The development of the Primary Care Plan had arisen from the Primary Care Strategy. ADHB was involved with developing health assessments for children in the care of Child Youth and Family with a view to this service being established by May/June 2008. It was hopeful that this would attract further funding.

ADHB was actively involved in the refugee, new migrant and Asian populations including the Cabinet mandated Auckland Regional Settlement Strategy. With research, systems had been redesigned and accountability had been transferred through the A+ Trust. Research reported to Margaret Wilsher, Deputy Chief Medical Officer as part of the clinical partnership. The external review of Mental Health financial and planning processes by the MoH was related to such things as allocation of overheads.

There was an update on the "Our Health 2020" projects which included addressing chronic conditions looking at support over the whole health spectrum.

**7. GENERAL BUSINESS**

There were no items of general business.

**8. NEXT MEETING**

The meeting closed at 11:35 am

The next meeting is scheduled for  
9:00 am, Wednesday 5 March 2008  
Rangitoto Room  
Level 3, LabPlus  
Auckland City Hospital  
Grafton

**CONFIRMED**

**CHAIR:** ..... **DATE:** .....