

Disability Support Advisory Committee Minutes

MEETING DETAILS									
Date and Time	10:00am, Thursday, 18 November 2010								
Venue	Sir Douglas Robb Boardroom, Level 7, Building 14, Greenlane Clinical Centre, Epsom								
2	ATTENDANCE AND APOLOGIES								
	<p>The Chair declared the meeting open 10:04am.</p> <p>Committee Members</p> <table> <tr> <td>Jo Agnew (Chair)</td> <td>Susan Buckland</td> </tr> <tr> <td>Dr Brian Fergus</td> <td>Marie Hull-Brown</td> </tr> <tr> <td>Susan Sherrard</td> <td>Nanar Tan</td> </tr> <tr> <td>Rt Hon Bob Tizard</td> <td></td> </tr> </table> <p>In Attendance</p> <p>Lee Mathias Robyn Northey</p> <p>Management in Attendance</p> <p>Denis Jury – Chief Planning & Funding Officer Lisa Gestro – Manager Planning and Funding Janice Mueller - Director Allied Health Carolyn Simmons Carlsson – Professional Leader Occupational Therapy Ian Bell – Board Administrator</p> <p>Apologies</p> <p>Apologies had been received from Dairne Kirton, Garry Smith and Alison Paulin.</p>	Jo Agnew (Chair)	Susan Buckland	Dr Brian Fergus	Marie Hull-Brown	Susan Sherrard	Nanar Tan	Rt Hon Bob Tizard	
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3	CONFLICTS OF INTEREST								
	There were no notifications of any conflicts of interest for any item on the agenda.								
4	CONFIRMATION OF MINUTES 16 SEPTEMBER 2010								
	<p><u>Moved Marie Hull-Brown; seconded Bob Tizard</u></p> <p><i>That the minutes of the Disability Support Advisory Committee meeting held on 16 September 2010 be confirmed as a true and correct record.</i></p> <p><u>Carried</u></p> <p>The action for Workbridge to come and talk was to be followed up.</p>								
5	ACTION POINTS 16 SEPTEMBER 2010								
	<p>Regional Meeting</p> <p>No minutes were available from the regional meeting of 26 August 2010.</p> <p>Orientation Programme</p> <p>This was being discussed as to where it sat in the orientation programme.</p>								

6	CHAIRMAN'S REPORT
	The Chair advised that she would be attending the Health and Disability Commissioners "Making it Easier to Speak-up" Forum on 6 December 2010.
8.1	Integration Group – The Be. Accessible Campaign
	<p>The "Step Up" research came out of a lack of knowledge on disabilities and their needs in Auckland being a cooperative between the Auckland City Council, AUT and ADHB with the research report launched at AUT a year ago. Through accessibility reports and the relationships between the organisations came up with the Be. Accessibility brand which is awarded when certain criteria are met for all types of access. This was being lead by Minnie Baragwaneth who has been seconded from Auckland City Council and she had presented to Cabinet Ministers and the Rugby World Cup. The idea was supported by the new Auckland Council and a business case was being written at the moment to provide a structure to promote the brand. While there is a focus this year on accessibility for visitors there will be a legacy and follow on.</p> <p>ADHB had contributed \$45k to the project however capital expenditure recommend in any accessibility programme is subject to the normal ADHB prioritisation processes.</p>
8.2	Final Draft Report – Accessibility Audit
	The Committee suggested that the accessibility audit presentation made to the previous meeting be made to the new Committee and to the Senior Leadership Team.
7.1	DAP Report
	<p>The MoH had decided to devolve the interim funding pool with a letter to Chief Executives advising that it would be devolved regionally. A paper is being prepared for the Chief Executive to respond to the MoH by 10 December. Population based funding associated with the pool is currently in deficit so there would need to be innovative solutions. Under PBF ADHB's share would be 9.4% which of the interim funding pool would amount to \$2.7m but the need was \$4m so there is a gap of \$1.3m. This is to be managed on a regional basis with Counties Manukau and Waitemata however new clients would be funded through the DHB of domicile with a process over 3-4 years.</p> <p>Lee Mathias left the meeting at 10:40am.</p> <p>ADHB's view was to not have artificial boundaries and Cabinet had decided that it would be devolved and managed on a regional basis. The model is not shared across the region so there was a need for a new model however as mentioned above there is a process in place to get change and better outcomes and the risks would be managed regionally. There were 114 people affected in central Auckland. There was discussion regionally on a need for specialist residential care for younger people and for children a "Family Option".</p> <p>There were 8 projects in the gambit of the Committee with 4 on Health of Older People and 2 palliative care. There were no exceptions.</p>
8.3	Mainstream Programme
	<p>The project team was meeting during the week and needed more information from Mainstream hopefully before Christmas. There was a question that if ADHB had a vacancy could they use this programme or have to have a completely new role and so to try and take "special" out of the position.</p> <p>There was concern that people were set up to fail and that it was tokenism, that rather than a Disability Officer there should be a culture in the organisation and champions to pick up positions and make them succeed and this should be done as an equal opportunity employer anyway. Nanar Tan advised that she had been a recipient and that programme does need to be restructured and she could assist the project team. The Committee requested a report to the next</p>

	meeting.
8.1	Integration Group – The Be. Accessible Campaign (continued)
	<p>Minnie Baragwaneth was in attendance and presented to the Committee on the Be. branding which was the outcome of the Step Up research. There were 4 key points: need for an agency to strengthen and own across the region with a united approach; a common communication shared platform; build capacity of disabled people to have genuine value and to continue research.</p> <p>The involvement with the Rugby World Cup was a strategic opportunity with Millie as project manager of the accessibility work stream which had come up with the brand “make everyone’s experience of Auckland easy” with the Be. branding to develop total inclusion. Accreditation for the brand was through a access barrier free audit, training, having information available on the website and visible signage of Be..</p> <p>The Be. leadership was a programme to develop leadership which was looking for funding of \$11k for one year which would lead into other leadership programmes.</p> <p>Greenlane Surgical Unit - Ophthalmology</p> <p>Peter Lowry was in attendance and presented on the option of shifting Ophthalmology to Building 8 from Level 2, Building 4. The service had provided to 61,000 people per annum and this would have ground floor access separated into three areas, emergency, booked acutes and children. The proposal was in the planning stage and it was suggested that they get deeper understanding of the patient’s experience through including patients in the design.</p>
10.1	Auckland City Hospital Car Park Update
	<p>This was provided for information.</p> <p>Deaf Aotearoa</p> <p>Deaf Aotearoa wished to come and speak to the Committee in the next year.</p>
	MEETING
	The Chair thanked everyone for their support over the past three years.
	NEXT MEETING
	<p>The meeting closed at 12:10pm</p> <p>The next meeting is scheduled for 10:00am, Thursday, 27 January 2011 Sir Douglas Robb Boardroom Level 7, Building 14, Greenlane Clinical Centre, Epsom</p>
CONFIRMED	
CHAIR:	DATE: