

NELSON BAYS PRIMARY HEALTH

**MINUTES OF OPEN BOARD MEETING HELD ON 28 JANUARY 2010
20 NEW STREET, NELSON – COMMENCING AT 5:30 p.m.**

PRESENT: Jan Morgan (Chair); Shane Graham; Philip Chapman; Sue Stevenson; Maria Briggs; Mere Wetere
IN ATTENDANCE: Andrew Dobbs (Chief Executive Officer – NBPH); Jane Kinsey (Programme Development Manager – NBPH); Ann James (Minute Secretary)
PUBLIC IN ATTENDANCE: Naomi Arnold (The Nelson Mail); Pat Curry (CEO Nelson Region Hospice)
APOLOGIES: Deirdre Magee; Lisa Lawrence; James Chisnall; Maria Briggs (late arrival)

Item	Decision / Discussion	Action	Who	When
1.	<p>Welcome / Karakia – Sue Stevenson</p> <p>Jan welcomed Pat Curry, Naomi Arnold and Jane Kinsey to the open forum.</p> <p>Open forum</p> <p>Pat Curry updated the Board as follows:</p> <ul style="list-style-type: none"> • Nelson Region Hospice recently received a funding boost (to 70% of budget). However this is not CPI adjusted. • Pat is exploring partnering options with NMDHB as a way to reduce operating costs, such as accessing the pharmacy at the hospital. • A doctor from the hospital Cardiology department recently completed three weeks locum work at the hospice. This has further strengthened the links with the DHB. It was good to have a physician working with them and gave opportunities of sharing information both ways. • The hope is that now he has gained some experience at the hospice that he will want to come back. His cardiology knowledge was very helpful to the hospice team. • The Hospice now has a 6 week assessment service for palliative care to see if patients are eligible to enter the hospice. Palliative care is an end-of-life service. The assessments seem to have improved life expectancy and this could be due to better treatment through care pathways. • Pat raised the question as to whether there is any opportunity to work with NBPH for chronic conditions management. • Andrew mentioned the chronic conditions funding stream that NBPH receives from NMDHB. NBPH has meetings with NMDHB and we have asked to make changes and are in consultation to make the changes. Perhaps there could be opportunities to meet with the hospice to see if there are opportunities to do things differently. • Pat clarified that the funding increase that the hospice recently received is for a four year period but is not CPI adjusted and is ring-fenced. It is doubtful that further funding will be forthcoming. • Pat agreed that it would be good to find out what other funding is available to people who are in the end stage of life. • The hospice needs to raise significant amounts every year to keep going. • The Nelson Region Hospice has an upcoming certification audit in May. <p>Jan thanked Pat for coming to update the Board.</p>			
2.	<p>Apologies</p> <p>Resolution</p> <p>That the apologies from Maria Briggs (late arrival 5.40 pm); Deirdre Magee, Lisa Lawrence and James Chisnall be accepted.</p>			

Item	Decision / Discussion	Action	Who	When
	Moved: Sue Stevenson Seconded: Mere Wetere CARRIED			
3.	Register of Interests None notified.			
4.	Confirmation of Agenda Confirmed as notified.			
5.	Confirmation of Minutes Resolution Moved that the minutes of 26 November 2009 be accepted as a true and correct record. Moved: Philip Chapman Seconded: Mere Wetere CARRIED			
6.	Matters Arising <ul style="list-style-type: none"> The statistics for the DUMP campaign have not yet been finalised. It has been a worthwhile campaign with a large amount of pharmaceuticals being handed in. Andrew reported that considerable amounts of current drugs such as paracetamol were handed in. Some of the more strange items were morphine dating back to the 1960s and false teeth. There will be a report on the DUMP campaign with the February Board pack. A question was raised about the capacity in the building for new contracts and staff. Andrew does not foresee this will be a problem as there are still some additional spaces available. NBPH has rented two rooms for the PMHI BIC counsellors at 94 Nile Street. Action Points <ul style="list-style-type: none"> a) <i>Mere Wetere requested a copy of the Tikanga Best Practice Guidelines be sent to her.</i> Andrew gave Mere a copy tonight and Mere confirmed that she saw an overview at the November Board meeting. b) <i>A request was made for a letter to be sent to the Iwi Health Board (this refers to the Tikanga Best Practice letter on pages 20-21 of the November Board pack, requesting permission from Māori Organisations to use the tool).</i> Andrew explained that after consulting with Luke, the belief is that the IHB does not need to give its permission to use the tool. The entity that gives us permission to utilise the best practice tool is not the Iwi Health Board. This was the reason that the letter was sent to local Iwi. All have replied that they agree to this (Andrew only included one letter in the Board pack as an example). Andrew clarified that the He Taure Tieke programme we adopted last year was complementary. Andrew said that He Taure Tieke is a longitudinal study; whereas the best practice tool gives guidelines on how to work with Māori for primary health care. c) <i>Arrange for VRA reports be broken down into male/female.</i> Andrew confirmed that the next VRA report will be broken down into male/female. Philip mentioned a recent report that says men's health has improved. This is attributed to the nationwide VRA focus. d) <i>Be Well Lifestyles team to present next meeting</i> Andrew confirmed that this will occur at the February Board meeting. 			
7.	Correspondence of Significant Interest			

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7.1	<u>Ngati Rarua Iwi Trust 26-11-09</u> Noted			
7.2	<u>Tahuna Medical Centre 24-11-09</u> Noted			
7.3	<u>Duncan Eddy 09-11-09</u> A card in circulation for Board members to sign			
7.4	<u>Tasman Regional Sports Trust 10-12-09</u> Andrew reported that the Grx ethical transfer of staff has gone well and the staff members have settled into the office.			
7.5	<u>NBPH – John Ayling 02-12-09</u> No further action required at this time as the next meeting scheduled for February.			

8. **Report | Chair**

Jan reported as follows:

In the last two months Jan attended the PHOA meeting with Andrew and the meeting minutes are enclosed with closed section of the Board pack.

Jan met with John Peters and Suzanne Win for their quarterly meeting (as specified by the MoU). These meetings are informal and give opportunities to speak frankly 'off the record'.

Jan has met with Andrew twice to discuss organisational matters for the new year. On Tuesday (26 January) Andrew and Jan attended the NMDHB District Annual Planning meeting. Kimi Hauora Wairau was represented at the meeting as well. Both PHOs were there at the invitation of the DHB.

Jan has been working with Maria and Philip regarding the recruitment of a new community representative. Short listing will occur in the near future.

9. **Report | Board Members**

Board members who had something to report are follows:

Sue Stevenson – Has been on holiday which was a great start to year.

Maria Briggs – Heart Children were the recipient of \$5K raised by house surgeons and staff at the Nelson Hospital who staged a talent show. Maria put on morning tea for them to thank them. Heart Children will use funds for emergency travel packs for families that need access to funds. A sample pack was showed to the hospital staff at the morning tea. The packs include a phone card, petrol voucher and toiletries, journal and information on where they can go in Auckland.

Maria continues to seek to recruit mentors for Big Brothers Big Sisters (BBBS). BBBS will be promoting their organisation at Whakatu Marae on Waitangi Day.

Jane Kinsey – Had a trip away for her holiday.

Philip Chapman – Worked through Christmas. He is going to be doing a presentation on *Sad Men* in Nelson in March (men in depression).

Philip has been invited to Christchurch to Pegasus to present to GPs on the same theme.

Philip will also be travelling to New Plymouth to do a presentation.

The *Male Room* is working to put in new schemes to target young

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	<p>men at risk, especially young men who do not access services.</p> <p><u>Shane Graham</u> – is on the rugby world cup steering group for the region. Shane noted that there may be health related issues associated with accessing health services with a large influx of fans. Shane has been seconded to National Board of Challenge 2000. This is a working group in Wellington for youth at risk and high end notifications for CYFS. His background in residential social work will help with this work.</p> <p>He is also on the BBBS national board.</p> <p><u>Mere Wetere</u> – Holiday and relaxed with family.</p> <p><u>Ann James</u> – Had holiday at home.</p>			
10.	<p>Report CEO <u>December 2009 and January 2010</u></p> <p>Andrew apologised that there are acronyms in the reports that are not in the back of the Board pack.</p> <p>Andrew has had contract negotiations with SLH and NMDHB. Philip drew attention to the Men's Be Well promotion in Golden Bay in March.</p> <p>There is considerable work going on with transferring data from SLH to NBPH for Nathan Bell. NBPH had a contract with SLH to manage the <i>back-end</i> data. NBPH now manages this, which will save money for the organisation. Another benefit is that NBPH has access to the data without having to go through a third party. The data is easier to manage and is clearer.</p> <p>Andrew responded to a question regarding the status of the Te Awhina Marae contracts. He explained that currently, the only contract is for a youth health programme ending in October. NBPH is currently negotiating with the interim managers at Te Awhina to continue the programme after October 2010.</p> <p>Andrew was asked to clarify what sort of referrals the Immunisation Coordinator mentioned on page 23.</p> <p>The five GRx staff are all part time staff. Feedback from other providers is that all GRx staff are pleased to be employed by NBPH.</p> <p>The MEND programme is still on the first course. Eleven families (eleven participants are Māori) are completing the course. The second programme is now fully subscribed and also consists of approximately 50% Māori. Andrew noted that the MEND programme is structured and can give flexibility regarding siblings. It is an Australian programme being piloted here for the first time.</p> <p>There was some discussion about House 44. Feedback that a Board member received was that the upkeep of the property could be improved and whether there was a way that NBPH could support this to occur. House 44 recently received a grant from Vodafone.</p> <p>Andrew clarified the difference between the PMHI service and the PMHI BIC service. The PMHI service is for GP consultations and referrals to counsellors where needed.</p>	<p>Andrew was asked to clarify what sort of referrals the Immunisation Coordinator mentioned on page 23.</p>	Andrew	asap

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	<p>The PMHI BIC service is a brief intervention service provided by NBPH counsellors who are on staff. It is for a maximum of 4 sessions for adults over 18 years of age with mild to moderate mental conditions.</p> <p>Andrew confirmed that the difference in uptake for the Māori/Pacifika service is being investigated.</p> <p>Andrew confirmed that NBPH recently received additional funding for the PMHI BIC service. An additional counsellor has been recruited for the Motueka based service and Jacqui Moulton will transfer to Nelson to focus on the Nelson/Richmond referrals.</p> <p>Compliments were paid to Huriana at the Whakatu Marae for her work to motivate the Māori community to be active. Shane would like to see her receive an award (possibly from the Chairperson's Discretionary Fund). She works well beyond the call of duty.</p>			
11.	<p>Remuneration Chair/Trustees/Committee Members Policy (Ver.4) Clarity about the meaning of the words '<i>those undertaking work for the Board are paid</i>' was sought. This covers such things as asking Board members to assist with Board welcomes (as an example).</p>	<p>Strategic Plan agenda item. Board remuneration policy</p>	Andrew	March 2010
	<p>The background to reviewing the amounts paid is based on the suggestion that \$200 per hour before PAYE is deducted brings the actual remuneration down to around \$134. Having said this, it should be noted that not all Board members choose to receive payment.</p> <p>Shane noted that the Finance and Audit Committee are happy with the rate as it is.</p> <p>The decision was to defer the review of the policy pending a Strategic Planning / Board Performance meeting.</p> <p>Things that could influence the amount could be an adjustment to the frequency of Board meetings.</p> <p>Andrew noted that the DHB are moving from six weekly meetings to two monthly. KHW are now meeting every two months to save some money.</p>			
12.	<p>General Business None notified</p>			
13.	<p>Register of NBPH Committees Noted</p>			
14.	<p>Otago University Report Jan commented that this is a good initiative and NBPH has supported this over the past five years.</p>			
15.	<p>Quarterly Report Congratulations were extended to staff. Andrew noted the report will be placed on the website www.bewell.org.nz The format of the reports have a section for each contract and highlight the work done to reduce inequalities for Māori</p>	<p>Include more information in quarterly reports regarding the Tapawera Outreach Clinics</p>	Andrew	ongoing

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	Sue Stevenson noted that she would like to see more information included about the Tapawere Outreach Clinics.			
16.	Glossary of Commonly Used Acronyms Noted			
17.	Strategic Plan Noted			
18.	Articles of Interest from NZ Doctor & Other Media Noted			

The meeting closed at 6:25 pm

The next meeting will be on 25 February 2010 at 5.30 p.m.

Confirmed: J.A. Morgan
Name: JAN MORGAN
Date: 25-2-10

Actions - Open Meeting 28th January 2010

a)	Andrew was asked to clarify what sort of referrals the Immunisation Coordinator mentioned on page 23.	Andrew	asap
b)	Strategic Plan agenda item. Board remuneration policy	Andrew	March 2010
c)	Include more information in quarterly reports regarding the Tapawera Outreach Clinics	Andrew	From now onwards