

Present: Akatu Marsters, Belinda Walker, Eseta Nonu-Reid (HealthShare), Joleen Turnbull, Dr Graham Mellsop (Chair), Maureen Emery, Michael O'Connell, Jeff Bennett & Luis Villa

Apologies: Marita Ranclaud, Rees Tapsell, Te Pare Kingi-Meihana & Graeme Judson

No.	Topic	Discussion Points	Planned Action	By
1.0	Whakatau / Welcome	<ul style="list-style-type: none"> Graham welcomed everyone 		
1.1	Approval of Minutes	<ul style="list-style-type: none"> April minutes accepted as a true and correct record 		
1.2	Matters Arising	<p>Letter to Cathy Cooney</p> <ul style="list-style-type: none"> Cathy received letter and has acknowledged, given thanks and accepted request for Graeme to be a representative on the Midland Steering group. A formal letter will be sent by Cathy Cooney acknowledging the above <p>Sign off of TOR</p> <ul style="list-style-type: none"> All unanimously agreed and accepted the TOR 		
2.0	AGENDA ITEMS			
2.1	Business as Usual	<p>Face to Face (F2F) meetings:</p> <ul style="list-style-type: none"> Significant items for approval Project scopes with regional focus need contentious discussion Look at structural type services and have discussions about how we might improve services eg. Adult MH, Child etc. It might not be the service but may be the innovative things being done locally that could transfer across the region – a broader approach to service delivery, this is a good process to go through as a governance <p>Teleconferences</p> <ul style="list-style-type: none"> Signing off projects and other Updates on work plan Key people and expert advisory groups Regional contracts held by specific DHBs ie. setup, monitoring, clinical input and data mining to assist decisions as part of evidence based <p>Up & Coming for F2F</p>	<ul style="list-style-type: none"> Send out calendar appointments to group for future F2F meetings & TC's Set out program to 	<p>Akatu</p> <p>Eseta</p>

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		<ul style="list-style-type: none"> ▪ Youth Forensics <ul style="list-style-type: none"> ○ Invite Arran Culver to present ▪ Regional IS <ul style="list-style-type: none"> ○ Grant Goodman to give overview of National IT strategy and regional platform ○ Look at common sets of developments and compare from a local, regional & national and look at standardising so all are on the same pathway and prioritise work ○ Need to look at how we are positioning ourselves so we are not blocked from giving MH&A perspectives ○ How does Primary Health fit into the IT strategy? ▪ Political Perspectives <ul style="list-style-type: none"> ○ An area of interest to look into 	<p style="text-align: center;">sub divide each meeting & organise guest speakers</p> <ul style="list-style-type: none"> ▪ Luis to forward questions to Eseta 	<ul style="list-style-type: none"> ▪ Luis
2.2	Working in Partnership with Planning & Funding	<ul style="list-style-type: none"> ▪ Briefing paper will be presented to new HealthShare CEO with Midland concerns – to include ‘working in partnership with planning & funding’ ▪ MRCG needs to be talking with P&F about how they can work better collaboratively and frame a relationship and how this can work with clinical governance testing against the issues ▪ Important to shape the thinking before regionalisation occurs to influence and challenge viewpoints. It is critical to take into account smaller DHBs as well as the larger ones. ▪ Suggested a F2F or video conference meeting with P&F or their representatives – Draft up a letter to MR PMgrs advising the interest from MRCG to work more collaboratively to provide sounds clinical input to decision making before rather than the latter. 	<ul style="list-style-type: none"> ▪ To discuss with new CEO ▪ Include this section into the MR PMgrs agenda for discussion ▪ Letter to be drafted 	<ul style="list-style-type: none"> ▪ All ▪ Akatu ▪ Eseta
2.4	KPI & Casemix Discussion	<p>Issues</p> <ul style="list-style-type: none"> ▪ What is chosen? ▪ How these are used? ▪ How do we use these locally, regionally and nationally? ▪ Relevance of looking at KPIs in casemix context PRIMHD data being used <p>Update from KPI meeting</p> <ul style="list-style-type: none"> ▪ Meeting held in March advising the wrap up of the project, no security of funding going forward but under negotiation ▪ All KPI data made accessible and was seen to be flat, incremental changes more for those DHBs who were involved over four year period and faster paced for those involved at a shorter period ▪ The data gave good clinical and financial results. This allowed for 		

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		<p>understanding of ones own service, how to utilise the data and also reinforcing data input</p> <p>DHB vs DHB vs NGO vs Casemix</p> <ul style="list-style-type: none"> ▪ MRCG group should guide the planning and funding decisions ▪ Identify there are shared issues and systems, central government can't take data in isolation need to have context and conversations occurring <p>All MRCG members to read KPI report and come to next meeting with suggestion on:</p> <ul style="list-style-type: none"> ▪ Which KPI indicators do you want to consider regionally that makes sense to MRCG <p>Discussion</p> <ul style="list-style-type: none"> ▪ Midland has a higher investment in NGO sector than any other region nationally, a need for serious benchmarking across our region and how this is progressing nationally ▪ MRCG to look at final report of the KPI project and include what we want to happen at this level based on what would best suit local and regional approaches ▪ Relevance of KPI information to justify why its important to relook at financial situations and or ensuring area of expertise are running effectively. 	<ul style="list-style-type: none"> ▪ Maureen to take to National meeting & update at next meeting 	<ul style="list-style-type: none"> ▪ Maureen
2.5	School Treatment Services	<ul style="list-style-type: none"> ▪ Investment in Child & Youth mental health & addiction, \$11M of new money being made available by MoH for new and additional services for intervention in schools ▪ Opportunity to look at this regionally but require more information to look at how this can be approached ▪ It was suggested we invite Arran Culver and Jim Boyle to give a presentation 	<ul style="list-style-type: none"> ▪ Eseta to approach Marita for a briefing paper 	<ul style="list-style-type: none"> ▪ Eseta
	General Business	<p>HealthShare CEO</p> <ul style="list-style-type: none"> ▪ Opportunity for new CEO to meet this group and vice versa – invite him to come along to a meeting ▪ Request for a paper with background information on the new CEO for the MRCG group <p>Midland MH&A Staffing</p> <ul style="list-style-type: none"> ▪ Currently recruiting a new Midland Workforce Development Coordinator ▪ Midland MH&A are submitting an RFP to MoH for PRIMHD NGO Information Implementation, Quality Improvement and Sector Intelligence programme, if successful we will recruit an additional 2FTE in Business Analyst and PRIMHD support person roles 	<ul style="list-style-type: none"> ▪ Invite to our July meeting ▪ Eseta to circulate a briefing of new CEO 	<ul style="list-style-type: none"> ▪ Eseta ▪ Eseta

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3.0	Meeting Concluded	<ul style="list-style-type: none"> ▪ 12.00pm 		
3.1	Next Meeting	<ul style="list-style-type: none"> ▪ Teleconference: <ul style="list-style-type: none"> ○ Thursday, 28 June 2012 ○ 9.30am – 11.30am ○ Dial in: 083033 Pin no: 531483 ▪ Face to Face: <ul style="list-style-type: none"> ○ Thursday, 12 July 2012 ○ 9.30am – 2.00pm ○ Hamilton Airport Conference Centre, Hamilton 	Please confirm calendar appointment attendance or apologies	