


10.00am, 21 February 2012, Best Western Braeside,
Rotorua

Present: A Marsters, B Walker & E Nonu-Reid (MRN), C Hui, L Watkins (BOP), M Ranclaud (Lakes), J James (Taranaki), M Craft (Tairāwhiti), K Fell & R Poaneki (Waikato)

No.	Topic	Discussion Points	Planned Action	By
1.0	Whakatau / Welcome	<ul style="list-style-type: none"> R Poaneki accepted to chair meeting 		
1.1	Approval of Minutes	<ul style="list-style-type: none"> All agreed the previous minutes were a true and correct record 		
1.2	Matters Arising	<p>Waiting Times</p> <ul style="list-style-type: none"> Information received Belinda has made contact with Barry, some inconsistencies with the setup <p>Midland Projects</p> <ul style="list-style-type: none"> Project scopes for Youth Forensics, Forensics Futures Review, Medical Detox and High Complex Need Review will be emailed to everyone to offer amendments or additions Medical detox should occur in each DHB with regional consistency – Gail Goodfellow to undertake this project 	<ul style="list-style-type: none"> Eseta to send out to PMgrs 	<ul style="list-style-type: none"> Eseta
2.0	AGENDA ITEMS			
2.1	Blueprint II	<p>Regional Forums</p> <ul style="list-style-type: none"> Blueprint has been discussed at the regional forums and feedback given, Nga Purei Whakataa Ruamano coming up on 28 February All feedback will be collated and sent out to PF managers <p>General comments from Forums</p> <ul style="list-style-type: none"> Difficult to read and understand, words were interpreted differently and lack of definitions Some great concepts but how will this happen? Is MH monies to be used to develop other service programmes or will the fund be shared with other government sectors involved? Excellent model of care – whose examples are we using to drive service development? <p>Three Key Points</p> <ol style="list-style-type: none"> 1. Ringfence to be kept with option to opt out 	<ul style="list-style-type: none"> Feedback will be collated and sent out to everyone 	<ul style="list-style-type: none"> Eseta

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		2. Deprivation funding to be increased 3. Culturally appropriate		
2.2	Youth Forensics	<ul style="list-style-type: none"> ▪ Presentation tabled ▪ M Ranclaud, A Culver & E Nonu-Reid are on the reference group representing Midland region ▪ Questions within the presentation have gone to the regional forums for consultation ▪ Please refer to embedded document for feedback <div style="text-align: center;">  <p>S:\LDHB Planning & Funding\Midland Regi</p> </div> <ul style="list-style-type: none"> ▪ Agreement a project to be undertaken by D Mulligan with the following key stakeholders involved: <ul style="list-style-type: none"> ○ Arran Culver ○ Jik Loy ○ Carol Clarke? ○ Tracy Tangihaere ?? – Corrections ○ Rep from BOP – Aria ?? ○ Rep from Lakes – Tania Evelyn?? 	<ul style="list-style-type: none"> ▪ Regional forums feedback will be collated & send out ▪ Papers to the GMs re Rotorua Youth Facility ▪ Contact details ▪ To follow up ▪ To follow up 	<ul style="list-style-type: none"> ▪ Eseta ▪ Rachel ▪ Lesley ▪ Marita
2.3	Healthy Beginnings	<ul style="list-style-type: none"> ▪ Developing perinatal and infant mental health services in New Zealand – mothers and babies in mental health inpatient units who have severe mental health issues ▪ Early intervention via Plunket and other services – utilising assessment tools during pregnancy to monitor ▪ Do we need to look at this from a regional perspective? The need is small in some DHB areas ▪ Developing expertise of CAMHS services - are there regional expertise or do we look at training or a consult liaison? ▪ Support ICAMHS to develop innovative material for infants or look into a mother, baby unit nationally or super regionally? 	<ul style="list-style-type: none"> ▪ Make some queries with Colin Hamlin & WF Development training 	<ul style="list-style-type: none"> ▪ Eseta
2.4	Devolution of 09/10	<ul style="list-style-type: none"> ▪ Email correspondence received regarding 09/10 contracts continually funded CAMHS liaison and regional Dementia consult liaison positions ▪ This will be going to Minister to devolve the funding and will then go out to PDE the following year ▪ This is currently waiting for sign off from the Minister 	<ul style="list-style-type: none"> ▪ Lesley to circulate the email & keep everyone up to date with progress 	<ul style="list-style-type: none"> ▪ Lesley
2.5	Inpatient Eating Disorders	<ul style="list-style-type: none"> ▪ Waikato is considering purchasing a dedicated Thrive bed utilising their existing share of the existing Starship bed and topping up to make it a full 	<ul style="list-style-type: none"> ▪ Katherine to resend paper with prompts for 	<ul style="list-style-type: none"> ▪ Katherine / Eseta

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		bed. Waikato DHB would still prefer for there to be a regional approach. Starship Timeframe – contact as soon as possible <ul style="list-style-type: none"> ▪ Minister to withdraw funding from Starship and will use this to buy additional beds ▪ Waikato will be exiting Starship bed REDS <ul style="list-style-type: none"> ▪ How often are our clinicians making contact? Need information on the following: <ul style="list-style-type: none"> ○ Who is the FTE (no dedicated FTE?) ○ Summary of hours over a 6 months period including NHI number 	feedback to Eseta with timeframes <ul style="list-style-type: none"> ▪ Send out template for liaisons 	<ul style="list-style-type: none"> ▪ Eseta to follow up with REDS 												
2.6	Annual Plan	<ul style="list-style-type: none"> ▪ 3.2.1 Mental Health & Addiction Services tabled within the agenda ▪ Action #: 5 – 8 specific to Waikato only ▪ Action #: 10 – 14 Regional agreed actions <ul style="list-style-type: none"> ○ To include Youth Forensics ▪ Need to align Midland Plan to the Annual Plan (AP) ▪ Clinical Services Plan (CSP) is different to Annual Plan ▪ All agreed the CSP & AP should align 	<ul style="list-style-type: none"> ▪ All to include Youth Forensics in Annual Plans 	<ul style="list-style-type: none"> ▪ All 												
2.7	PRIMHD Update	Utilisation <ul style="list-style-type: none"> ▪ Te Utuhina Manaakitanga – underused by 753 ▪ Salvation Army – underused residential beds by 203, on track with detox beds ▪ Nova – underused by 61 ▪ Springhill – overused by 24 <table border="1" data-bbox="457 938 1010 1040"> <tbody> <tr> <td>Bay of Plenty</td> <td>332</td> <td>Lakes</td> <td>45</td> </tr> <tr> <td>Waikato</td> <td>200</td> <td>Tairāwhiti</td> <td>23</td> </tr> <tr> <td>Taranaki</td> <td>69</td> <td></td> <td></td> </tr> </tbody> </table> PRIMHD Rollout <ul style="list-style-type: none"> ▪ Majority of providers are compliant with 1 currently outstanding in Waikato ▪ Providers lacking the inputting of data ▪ Data quality with PRIMHD online working well ▪ Issues with access to InfoView reports – there are a lot of errors. The vendor data reports are different from InfoView reports (User group needs to investigate further) HISO Report PRIMHD – First Review of PRIMHD <ul style="list-style-type: none"> ▪ 23 recommendations heavily substantial ▪ Report is good and has picked up everything ▪ Inaccurate data due to variation of reporting 	Bay of Plenty	332	Lakes	45	Waikato	200	Tairāwhiti	23	Taranaki	69			<ul style="list-style-type: none"> ▪ Report to be circulated ▪ Draft up a letter for PMgrs to sign off to GMs giving access to regional data ▪ Agenda item for Kokiri steering group 	<ul style="list-style-type: none"> ▪ Belinda ▪ Belinda ▪ Eseta
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		<ul style="list-style-type: none"> ▪ Develop a template with the 23 recommendations to see how we measure up 	<ul style="list-style-type: none"> ▪ Develop & circulate 	<ul style="list-style-type: none"> ▪ Belinda
	<p>General Business</p>	<p>DSS Report</p> <ul style="list-style-type: none"> ▪ Report circulated seen to be “poor” ▪ Ian Nicholson maybe picking up project <p>Sleepovers</p> <ul style="list-style-type: none"> ▪ Nothing has happened over Christmas/New year period. <p>AOD Guidelines</p> <ul style="list-style-type: none"> ▪ Support training and supervision of qualification ▪ Agree regionally on the approach to look at individual providers around the % or number ▪ One standard for all regardless of services ▪ This will go into all contracts from 01 July 2012, all New Grads mentoring to be discussed with PMgrs prior to appointment <p>AOD Beds</p> <ul style="list-style-type: none"> ▪ Rachel to send through template to Belinda <p>Access to Springhill</p> <ul style="list-style-type: none"> ▪ Possible meeting in March / April ▪ We need to be supporting the viability of our regional beds which are underused <p>Te Utohina Manaakitanga & Salvation Army</p> <ul style="list-style-type: none"> ▪ TUMT cultural foundation with a whanau based approach with addiction treatment ▪ Reports can only be delivered based on providers responsiveness of data ▪ Salvation Army template to be sent out to everyone – meth beds have been full ▪ Need to look at regional coordination of referrals to drive transfers or increase of usage to our regional services <p>Waiting Times – B Walsh</p> <ul style="list-style-type: none"> ▪ To ensure child and youth are included in the reports ▪ Possible discrepancies in the data, Barry has been notified – still waiting on the outcome ▪ Eseta contacted the MoH regarding direct access to reports via Te Pou – MoH agreed ▪ Have found the data is dirty coming from the Provider Arm and Stage Two NGO providers in comparison with Stage 3 – 5 <p>Underspend from 11/12</p> <ul style="list-style-type: none"> ▪ Estimation of 100k underspend for current financial year ▪ Use of underspend for regional projects: <ul style="list-style-type: none"> ○ Development of Dementia Pathway from Primary through to Tertiary 	<ul style="list-style-type: none"> ▪ Draft a letter to AOD services attaching page 20 from Guidelines ▪ Develop FAQ sheet – post on website ▪ Follow up with action ▪ Follow up with Peter Kennerley re funding of Meth beds 	<ul style="list-style-type: none"> ▪ Rachel ▪ Eseta / Rachel ▪ Rachel ▪ Eseta

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		<ul style="list-style-type: none"> ○ Develop a Youth Forensics implementation plan (10/11 underspend) ○ Continuation of the roll out of Takarangi Core Competency framework ○ Perinatal services – need to bring perinatal together to see what is available and whether a regional advisory service would be of benefit. National baby unit – currently being progressed in northern district for a super regional approach <p>CAMHS Continuum Project</p> <ul style="list-style-type: none"> ▪ 2nd teleconference has taken place with good representation from REDs ▪ The standard Eating Disorders SLA will be adapted and used with no more than three pages ▪ The Consult Liaison role is funded by IDF and the roles is used across multiple disciplines of health. Eg. paediatric, cancer etc – there is concern about “what we are getting for this service”? 	<ul style="list-style-type: none"> ▪ Paper to be put up to GMs 	<ul style="list-style-type: none"> ▪ Eseta
3.0	Meeting Concluded	<ul style="list-style-type: none"> ▪ 2.00pm 		
3.1	Next Meeting	<ul style="list-style-type: none"> ▪ 22 May 2012, Best Western Braeside, Rotorua 		