


Minutes of Midland Region Portfolio Managers Forum

Held Thursday, 3rd December 2009, Ventura Inn, Hamilton

Present:: Katherine Fell Connie Hui Jenny James (T Conf) Judith Lee Vivienne Marin
 Rachael Poaneki Marita Ranclaud Eseta Nonu-Reid

Apologies: Lesley Watkins Linda Wilkinson

No.	Topic	Discussion Points	Planned Action	By
1.0	Whakatau / Welcome with Karakia & Morning Tea	<ul style="list-style-type: none"> ▪ Eseta welcomed everybody. ▪ Nominations for Chair. Katherine 		
1.1	Apologies	<ul style="list-style-type: none"> ▪ Read 		
1.2	Previous minutes & matters arising	<ul style="list-style-type: none"> ▪ Kath moved and Marita seconded the minutes as a true and correct record ▪ Matters Arising ▪ Katherine, 2.1 I don't remember any agreed plan action, can that be taken out. All agreed ▪ Marita has not done the cross match for the CAMHS specs, ▪ Katherine has done most of them. Lesley was going to do a clause to flick round to us about the night support clause, but she is not well at the moment. ▪ Define night response, is it a sleep over, telephone response etc. Lesley said that she was going to liaise with Richmond about it. ▪ Sleepover was the only thing defined as work in the court finding against IHC, and being on call was not work. Eseta to draft up a definition. ▪ Some agreement about the residential rates we paid would be good,. We need to be careful when using prices paid by differing Dubs as the c=actual costs of service delivery vary dependant cost of facilities e.g. cost differ in rural and urban areas and city size. 	<ul style="list-style-type: none"> ▪ Eseta draft up a definition of Night Response and email to members for comment. ▪ Eseta send Haehaetu Phillips' engagement plan out to everyone  S:\LDHB Planning & Funding\Midland Regi	20/12/09

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2.0	AGENDA ITEMS			
2.1	Regional - Confidential	▪		
2.2	MoH Addictions and Detox Reviews	<p>Review Discussion</p> <ul style="list-style-type: none"> ▪ Eseta's understanding is that we have to collate this information. Some of the information they are asking for isn't reported, it would have to be extracted from different places. Quantity of demand that is not met. ▪ Do you want a DHB response or a regional response? Wait list has to be by DHB. ▪ Eseta - What do we need to split out by DHB? <p>Waikato DHB Funding Plan Document</p> <ul style="list-style-type: none"> ▪ It has been sent out by email all the Midland DHBs ▪ Please read it, talk to Julie and Francie, they can show your analyst what to change the data to fit your DHB. Julie has said in her email that she is willing to teleconference or videoconference to show them what to do. 	Response to be undertaken by DHB	PMgrs
2.3	Eating Disorders Update	<p>Update</p> <ul style="list-style-type: none"> ▪ Eseta - It is good to see that we are getting the information from them. Northern districts are not together on their plan. The ministry has guaranteed them four years capacity funding. This is not enough for Northern Districts. ADHB GM P&F has said that they are not going to accept the contract as they want NDSA to carry the contract and take all the risk. The midland region is really working together. ▪ Starship – ED beds in Starship refit, which is going ahead, the location is the hold up at the moment. There were no forensic beds in the plans. ▪ Eseta is grateful to Sue and Lynn for representing Midland at the model of care workshop 	Continue to provide updates at each meeting	Eseta
2.5	Group Round-up	<p>A Brief Update PRIMHD</p> <ul style="list-style-type: none"> ▪ Vivienne – During the last meeting in Wellington we were advised that the Ministry web based portal will require a VPN. Each NGO will require one, there is a cost involved, negotiations are with Telstra Clear, \$100 set up \$30-\$50 per month at the cheapest. Bill Elp needs to go to the executive steering group. ▪ Vivienne – four organisations in five regions have been mapped ▪ Vivienne will continue to work alongside the NGOs then go to the Portfolio Managers to look at the specs and do the mapping. ▪ Digital certificates are per computer \$150/month. We are trying to find ways around it. 	<ul style="list-style-type: none"> ▪ Send Jenny a copy of Progress to Health ▪ Do a paper for the GM's meeting in Feb 2010 regarding NGO funding and other options for VPN. 	Vivienne Eseta

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		<p>Perhaps one computer per provider rather than all computers. Primary computer that is submitting the data must have Explorer 8 or better.</p> <p>Clinical Leadership Forum Meetings for next year</p> <ul style="list-style-type: none"> ▪ At the last clinical directors and managers joint meeting Rees was tasked nationally to canvas around how we could pull better synergies together. We should be looking at some of our meetings being collapsed with the clinical leaders. The options for combined meetings are; <ul style="list-style-type: none"> a) Every second meeting is a joint meeting. <ul style="list-style-type: none"> ○ Therefore three face to face MRPM meetings ○ Three joint meetings with MRCL (quarterly), and ○ Teleconference meetings for MRPM if something comes up. b) Half / half – combined in the morning then split in the afternoon, Eseta – I can only go to one meeting; we have to move into an environment where there are joint discussions. Currently we meet at least 5 times a year. c) One day MRPM and one day MRCL – two days in a row is too much. ▪ Option a) was accepted by all for 2010 meetings. 	Discuss Option a) with CLF in new year	Eseta Marita
2.4	Midland Strategic Plan – High Level Action Plan Development	<ul style="list-style-type: none"> ▪ Midland Region Mental Health and Addictions Strategic Plan 2009 – 2015 was signed off by the GMs last month. This is guidance and assistance for those who have DAP sections that need to be written up. ▪ Discussion on the challenges in the Midland Strategic Plan: Agreed Goals for each Challenge: <ol style="list-style-type: none"> 1) Implementation of Lets Get Real, real skills plus Sei Tapu for Pacific, Takarangi Framework for addictions 2) Implementing the national service framework 3) Takarangi, Sei Tapu 4) Workforce and recovery Lets Get Real, eating disorders capability and capacity, 5) Review, sub regional, needs to be named. 6) The EOI process is part of the work plan. 7) Detox needs another look at. Coexisting disorders guidance document will provide a lot of help. Methamphetamine strategy. 8) Regionalisation, joint CCL and PM meeting will solve this 9) PRIMHD 10) The regional forums are a key example of working together. It is all about doing 	Send Waikato DAP presentation to group	Katherine

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		things without additional funding.		
2.6	EOI Primary Health Agenda Item added	Hard copies of the EOI Primary Health were handed out to everyone for discussion. <ul style="list-style-type: none"> ▪ Timeframes are very tight and to ensure that robust feedback and discussion occurs it is important that the services are encouraged to review the document as it develops and to feedback. ▪ EOI went through and feedback to be put onto NING 	Canvass the regional forums for feedback and upload to NING Upload feedback from PMgrs	Eseta Katherine
2.5	Group Round-up continued	Katherine thanked everyone and wished all a merry Christmas.		
3.0	Next Meeting	Meeting dates for 2010 to be sent out		