

Canterbury

District Health Board

Te Poari Hauora o Waitaha

Minutes – Friday 21 June 2019

Canterbury DHB Disability Steering Group (DSG)

Attendees: Gordon Boxall (Chair), Allison Nichols-Dunsmuir, Kay Boone, Paul Barclay, Prudence Walker, Simon Templeton, Kathy O'Neill, Dave Nicholl, Jane Hughes, Tyler Brummer, Catherine Swan, Jacqui Lunday Johnstone, Sekisipia Tangi, Ngaire Button, Kathryn Jones, Lara Williams (Administrator)

Guests: Bella Bartley, Ester Vallero

Apologies: Maureen Love, George Schwass, Mick O'Donnell, Waikura McGregor, Susan Wood

	Agenda Item	Summary of Discussion	Action/Who
1	Karakia Timatanga	Gordon welcomed the group. Prudence gave a Karakia.	
2	Apologies above Previous minutes, matters arising and any conflicts of interest for today's agenda items	Welcome to Bella Bartley, Pacific Lead and Contract Relationship Manager, Disability Directorate; Ministry of Health Conflicts of interest, none. Matters Arising – none. May 24 th minutes passed as correct record.	
3	Focus on the needs of Pacific people.	Bella Bartley Pacific Lead and Contract Relationship Manager Disability Directorate; Ministry of Health. Bella spoke of improving outcomes for Pacific families, meeting their needs, and encouraging people and families to engage with providers. All providers must be welcoming and have an understanding of Pacific cultures. There are few Pacific providers in the South Island. Sekisipia Tangi has previously highlighted the gap that exists of people engaging with the providers. There is a hesitancy on the part of Pacific disabled people. Le Va, based in Auckland offers cultural competencies training around NZ by arrangement. https://www.leva.co.nz/training-education/engaging-pasifika Le Va has developed disability service information in Pacific languages. Bella suggested sending the link out to the PHO's and asking them to print out some copies for display for their clients. www.leva.co.nz/resources/words-matter-disability Bella discussed the National Pasifika Disability Plan Faiva Ora and confirmed that ACC figures aren't included in the Plan. DSG asked what is working well in other places? One approach that is working is connectors in the community and DSG explained the navigator situation in Canterbury. Bella will ensure disability is represented in Pacific community innovation	Action point: <i>Kathy to organise MoH resources to be circulated to DSG</i>

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		<p>grants. Applications invited from Canterbury communities looking for funding opportunities. Workforce development funding and training grants coming up in July. System transformation is open to Pasifika communities.</p> <p>Bella encouraged DSG to email her to give feedback on policies being developed by the CDHB. She encouraged CDHB take the initiative, for example, to investigate what our system has in place for rehabilitation of Pasifika people with a disability, caused, for example by stroke or a heart condition, before discharge to home. If we could develop this pathway, it could make a real difference to peoples' lives and is an achievable target.</p> <p>Bella and her team can be available by video conference to continue the conversation with DSG.</p>	
4	<p>Issues for people with disabilities from CALD, Refugee and Migrant backgrounds.</p>	<p>Welcome to Ester Vallero, CALD Health Manager, Pegasus Health. CALD stands for Culturally and Linguistically Diverse.</p> <p>The CALD Health Advisory Group advises on issues of health and equity. This includes access to translation and interpreter services, workforce cultural awareness, and improving the diversity of the workforce. It is important to have CALD representation on working groups. Eg diabetes working group. Ester can help with sourcing CALD representative if we are looking for someone.</p> <p>There is a CALD Framework that should be used in initiatives. CDHB should be looking at CALD issues in their Health Pathways work, as there could be a risk of putting people all in the same box when their needs are very different. CALD, Pathways and Individual Care Plans are an area that CDHB could explore.</p> <p>Work is being done to improve translation and interpreter services and systems. For example, more and better health resources; interpreter standards. Video is being tested as a resource.</p> <p>Booking appointments is a big challenge for CALD people. Accessing the health system is predominantly by phone for many services, and can be a barrier to good outcomes.</p> <p>The recent Mosque attacks highlighted the importance of service providers collaborating and reaching out to support people in ways that suit their individual circumstances.</p> <p>Ester invited a DSG member to attend the CALD Health Advisory Group, so disability issues could be raised as appropriate.</p>	<p>Action point: CALD Health Frameworks will be circulated with minutes</p> <p>Action point: Those interested in attending CALD HAG to contact Kathy for Ester's details.</p>
5	<p>General Business</p> <p>Accessibility Charter</p>	<p>Rebecca Price, Ministry of Education Accessibility Advisor attended today's ACWG meeting. Rebecca is an Occupational Therapist within the MoE's South Island property team, advising on all stages of new builds and refurbishing school properties. The aim is to meet current and future needs for accessibility, and she is present when all decisions are made. Over 13 years,</p>	

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	<p>Working Group Update</p>	<p>Rebecca has built up extensive expertise and become an integral part of the design and build process, arguably saving the Ministry money from avoidance of expensive rebuilding, and providing suitable learning environments. Rebecca gave an example of a school that used a contractor instead of her, and had to rebuild 80 doorways and add colour contrast to all stairs.</p> <p>The ACWG knows that the CDHB lacks technical accessibility expertise, and is considering whether to have that in-house or contracted (or both). It also needs to consider the economic case for the impact of health environments that help people get well quicker etc.</p> <p>The ACWG is in discussion with the project to move Specialist MH services from PMH, and refurbish a high needs facility at Hillmorton. There are also ongoing concerns about PSAID and AT&R facilities. A site visit for Jacqui and Gordon will be arranged.</p>	
6	<p>Update on the refresh of the Action Plan</p> <p>What should our priorities be for next 3-5 years</p>	<p>In refreshing the Action Plan we need to document what actions have been achieved, where we have changed focus, what has become a higher priority under each objective. For instance, aids to daily living has been progressed. Before this is taken off the list, it would be nice to speak to the team involved. We should get project updates on agendas for the next couple of months.</p> <p>To gain input from the disability community, Prudence will work with Kathy on roadshow, to include three forums in Canterbury, two forums on West Coast. August forums.</p> <p>The refresh at objectives level needs to consider an equity focus and have language reviewed.</p>	<p>Action Point:</p> <p>Invite groups to speak on successful projects implemented.</p>
7	<p>Outpatients Experience Survey</p>	<p>The CDHB Outpatients Experience Survey was reviewed recently and there are no questions about accessibility or inclusion. It is suggested that a demographic question be added using the Washington Group Short set of questions (adding a free text 'other' to acknowledge not all disabilities are captured.) This would result in useful information if we could analyse the surveys by disabled/not disabled, and also to know more about which category of disabilities affect our outpatients.</p>	<p>Action Point</p> <p>Allison to follow up with Quality and Safety, conveying DSG ideas</p>
8	<p>Given our priorities who would we like to hear from?</p>	<p>Health Pathways' approach to disability and other equity issues.</p>	<p>Action Point:</p> <p>Erin from HealthPathways to speak with us</p>
9	<p>What's made a difference to a disabled person's life</p>	<p>Congratulations offered to Prudence on her appointment as Chief Executive for Disabled Persons Assembly (DPA) NZ. Prudence was thanked for her considerable contribution to DSG.</p> <p>Prudence closed the meeting with a suitable Karakia.</p>	

	Agenda Item	Summary of Discussion	Action/Who
10	Next Meeting	Next meeting Friday 26 July 2019 11am-1pm 32 Oxford Terrace	