

NOTES OF THE OPUNAKE COMMUNITY MEETING HELD TUESDAY 12TH JULY 2011 AT 7PM – 8.30PM AT SANDFORDS EVENT CENTRE

Sandra Boardman (TDHB GM Planning, Funding & Population Health), Jackie Broughton (TDHB Project Manager), Rebekah Barr (TDHB Administration Assistant), hosted by Opunake Businesses Association, Sharon Alridge (Chair Person).

Information packs including the draft proposal, submission form and frequently asked questions were handed out as people arrived at the events centre.

Sandra Boardman presented the Powerpoint which gave an overview of where the information for the draft proposal had come from, who was involved in the process and what the main points of the draft proposal were.

After the presentation the group were provided an opportunity to ask questions below is some of the questions and answers captured from the evening;

Q. What concerns did the Bishops Action Foundation (BAF) note that Opunake people had?

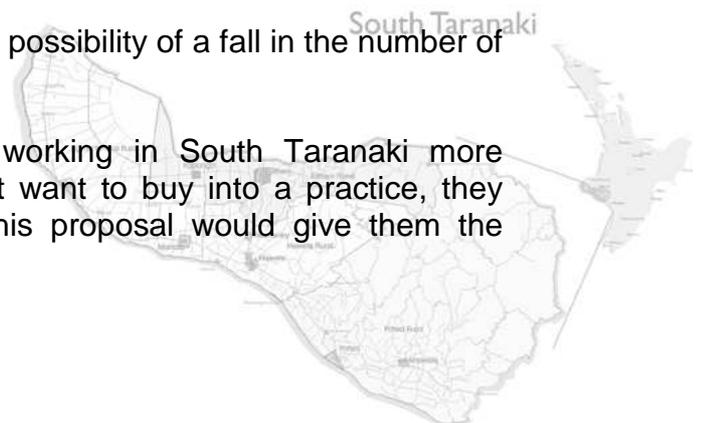
A. One of the concerns the community of Opunake has is around there not being a pharmacy in town. This, along with the other concerns would need to be addressed during the implementation planning.

Q. 9 years ago Hawera Hospital was built and South Taranaki has approximately 1/3 of the population of Taranaki. Can the District Health Board (DHB) offer quality health care to South Taranaki residents while trying to save \$1.1 million?

A. Yes. This is all about the balance between hospital services and those provided in the community. Hospital services are more expensive than primary care services because they are provided 24 hours a day.

Q. Does the proposal take into account the possibility of a fall in the number of GPs?

A. The proposal is designed to make working in South Taranaki more attractive to GPs. Graduating GPs do not want to buy into a practice, they prefer to work as part of a team and this proposal would give them the opportunity to do just that.



Q. Is there a sponsorship programme available for a graduate wanting to practice in a small town such as Opunake? Or could that be something the community could do to support our town?

A. There is not currently a funding package to entice GPs to work here, but if that was something the community wanted to do it is a great idea.

Q. I am concerned about having a nurse diagnose me when I arrive at the emergency department. Is this safe practice?

A. That concept is not a new idea, it already happens and is considered safe.

Q. Are you proposing to have specialists visiting the local communities?

A. Yes, that is exactly the type of service we want to be able to offer in the future.

Q. What does the DHB plan to do to improve transport services?

A. The DHB hopes to work in conjunction with other organisations in the community such as the South Taranaki District Council, the Taranaki Regional Council and WITT who all offer transportation throughout the region in the hope that we can provide a transport service that is more frequent.

Q. What cuts are being made to administration services?

A. The Taranaki DHB has a maximum number of administration and management staff set by the Ministry. Our administration staff are below these set figures. If the proposal goes ahead then yes there will be a decrease in administration staff due to the coordination of services.

Q. Will the maternity beds be in a rest home or at the hospital?

A. There is no change proposed to the current maternity service. However we want to know if people would prefer a service much like at Elizabeth R in Stratford.

Q. What would happen if there was a very serious emergency and Hawera Hospital could not cope with the incoming patients because of all the cuts being made?

A. The districts Emergency plan would come into action if there was a serious emergency such as a volcanic eruption. During the Christchurch earthquake emergency services from around New Zealand were sent to Christchurch to help and the same thing would happen in Taranaki.

Q. This proposal says people will have to go to New Plymouth if they need to be in hospital for longer than 36 hours. It takes almost an hour to get from

Opunake to New Plymouth which would see a delay in the emergency treatment needed in the first golden hour.

A. There is a nationwide plan being rolled out by St John to allow ambulance paramedics to electronically beam heart rate data from the ambulance to the Hospital where a specialist will tell the ambulance staff what medicines to administer. This would mean patients would receive treatment within the vital golden hour.

Q. What extra support is going to be provided to the Opunake Medical Centre?

A. The major focus of this proposal to provide more resources in primary care to South Taranaki. Occupational therapy, community nurses and allied health staff a just a few of the services that could be provided to the Opunake community.

Comment. Why do you not just tell New Plymouth staff that they are going to be working in Hawera Hospital for a shift? Instead of taking services out of South Taranaki, put them back in.

Q. You are proposing that there is going to be a lot of work required for St John ambulance staff. How much consultation has been had with St John? I spoke to the CEO who said there had been none.

A. There was a St John paramedic at the 3 day workshop held at the end of April.

The meeting finished at 8.30 pm.