

**NOTES OF THE PATEA COMMUNITY MEETING
HELD TUESDAY 19TH JULY 2011 AT 7PM – 8.30PM
AT THE PATEA OLD FOLKS HALL**

Sandra Boardman (TDHB GM Planning, Funding & Population Health), Fran Davey (TDHB Administration Assistant), Rebekah Barr (TDHB Administration Assistant), hosted by Patea Lions Club, Marie Dwyer (Chair Person).

Information packs including the draft proposal, submission form and frequently asked questions we placed at the entrance of the hall so people could collect them on their way in.

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. Will having a doctor on call increase the waiting times in ED? Because we will have to wait for the doctor to get there?

A. Having overnight ED doctor cover provided by a doctor on call is something we are going to have to review.

Q. Where are all the extra doctors and nurses going to come from?

A. We are currently running a training programme that will from this year onwards see medical graduates training in Taranaki. In the long term this proposal is designed to make GPs jobs more attractive and in turn make them want to work in our region. Graduating GPs want to work as part of a wider healthcare team and with the implementation of Integrated Family Health Networks, like the Patea Medical Centre, we think this will attract GPs to Taranaki.

Q. How are these changes going to be funded?

A. 1/3 of the savings will be spent on improving primary care services. We cannot improve hospital services until primary care is running well.

Q. Will the number of doctors and nurses increase or decrease?

A. They will increase in the community.



Q. Are palliative care patients in New Plymouth going to go into a rest home?

A. New Plymouth palliative care patients already go to a rest home when the Hospice is full.

Q. Why have we not seen any costings for the proposed changes?

A. Our financial team completed high level analysis to come up with the proposed savings in the proposal but detailed financial analysis will not be completed until the Steering Group meeting on the 29th of August.

Comment. It seems as though South Taranaki is being trailed as a guinea pig.

Q. The first slide of your presentation said that you have had input from businesses. Why then have they signed a letter saying they do not agree with the proposal?

A. We asked businesses what they like and do not like about the current health care services, before the proposal was developed.

Q. What are you doing in North Taranaki to cut costs?

A. Any changes to models of health care in South Taranaki will also be made in North Taranaki.

Q. Why are you taking money from South Taranaki to build a new building in New Plymouth?

A. The savings from South Taranaki are in no way being used towards the new building at Base Hospital.

Q. Can nurses commence treatment without direction from a doctor?

A. The Director of Nursing ensures me that it is within a nurses scope of practice to assess patients and that they can commence treatment without the direction of a doctor.

Q. Did the doctors who attended the public meetings in Hawera not come to Patea tonight because they now realise just how far away Hawera is?

A. The doctors who went to the meetings in Hawera had to have a whole day away from seeing patients. They came to the Hawera meeting because we knew those meetings would be the largest and that members of other communities such as Patea and Kaponga would also attend the Hawera meeting.

Q. What are the benefits of an Integrated Family Health Centre (IFHC)?

A. In the past when you called your GP the receptionist gave you the next available appointment with either the GP or the nurse. IFHC have doctors and nurses answering the in the mornings. They are better able to assess whether you need to see the doctor or if you are able to see the nurse. An IFHC has a wider team, including pharmacists, nurses, allied health staff etc, all working together to help the patient.

Q. Why were Southcare nominated to be a IFHC?

A. Southcare were not nominated, they volunteered to develop an IFHC as part of the Midlands Health Network business case for better, sooner, more convenient primary care. Patea Medical Centre were also identified in the same business case.

Q. Have you thought about the appropriateness for Maori to receive palliative/intermediate care in a rest home? Also the appropriateness for younger patients?

A. The appropriateness for Maori has not been raised before and would be something we would have to consider. Hospice tell us that there already a few younger palliative care patients going to rest home facilities.

Comment. Board members living in North Taranaki are going to be making decisions about Hawera Hospital that are going to affect South Taranaki residents.

Q. How do you intend to improve transport services?

A. The manager of the Community Development team for the South Taranaki District Council came up with an idea that could see the South Taranaki District Council working together with the District Health Board, the Regional Council and other organisations such as WITT to operate transport services to provide a more frequent service for Taranaki residents.

Q. Wouldn't it be better to provide Hawera Hospital with an operating theatre?

A. The reason there are no operating theatres at Hawera Hospital is because of the other services required for that level of care such as ICU.

Q. What is the Taranaki DHBs intention to improve Mental Health Crisis? I think this has been neglected in the past.

A. I agree that it has been neglected in the past. We have a community Mental Health Team working from Hawera Hospital and we could see room to up skill them. We also want to allow GPs to have direct access to a psychiatrist for urgent telephone advice.

Comment. Patea is a Maori community and to us face to face contact is very important. I think it is insulting that you would even mention video and email consultations to our community.

Q. How many high needs schools have been consulted with?

A. We have not consulted with any schools, but we do have a meeting with playcentre parents and the Youth Supporters Network.

Many people that attended the meeting noted that they liked some things in the proposal but had issues with other areas and these were what they raised their concerns on.

The meeting finished at 8.30 pm.