

# Disability Support Advisory Committee Meeting



Board Room, Community Services Building,  
Southland Hospital Campus, Invercargill

Lead Director: Hywel Lloyd, Interim Executive Director Quality and Clinical Governance Solutions

02/08/2021 03:30 PM - 05:00 PM

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10. <a href="#">Home and Community Support Services</a>	Sharon Adler	04:30 PM-05:00 PM	28



**APOLOGIES**

An apology has been received from Dr Ben Pearson, Crown Monitor.



**FOR INFORMATION/NOTING**

<b>Item:</b>	<b>Interests Registers</b>
<b>Proposed by:</b>	Jeanette Kloosterman, Board Secretary
<b>Meeting of:</b>	Disability Support Advisory Committee, 2 August 2021

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**Recommendation**

**That the Board receive and note the Interests Registers.**

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**Purpose**

To disclose and manage interests as per statutory requirements and good practice.

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**Changes to Interests Registers over the last month:**

- Moana Theodore - Royal Society Te Apārangi Council removed
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**Background**

Board, Committee and Executive Team members are required to declare any potential conflicts (pecuniary or non-pecuniary) and agree how these will be managed. A member who makes a disclosure must not take part in any decision relating to their declared interest.

Interest declarations, and how they are to be managed, are required to be recorded in the minutes and separate interests register (s36, Schedule 3, NZ Public Health and Disability Act 2000).

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**Appendices**

- Board, Executive Leadership Team, and external DSAC members' Interests Registers

Disability Support Advisory Committee Meeting - Interests Register

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER**

Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
<b>Pete Hodgson</b> (Board Chair)	22.12.2020	Trustee, Koputai Lodge Trust (unpaid)	Mental Health Provider	
	22.12.2020	Chair, Callaghan Innovation Board (paid)		
	22.12.2020	Chair, Local Advisory Group, New Dunedin Hospital		
	22.12.2020	Member, Steering Group, New Dunedin Hospital		
	22.12.2020	Board Member, Otago Innovation Ltd (paid)		
	25.02.2021	Board Member, Quitta Ltd (unpaid)	Nicotine replacement therapy under development.	
<b>Peter Crampton</b> (Deputy Board Chair)	16.04.2021	Employment: Professor, Kōhatu Centre for Hauora Māori, University of Otago (appointed July 2018)		
	16.04.2021	Member, Health Quality and Safety Commission Board (appointed April 2020)		
	16.04.2021	Member, Expert Advisory Group for WAI claimants related to historical underfunding of Māori PHOs (appointed September 2020)		
	16.04.2021	Honorary Fellow, Royal New Zealand College of General Practitioners		
	16.04.2021	Fellow, New Zealand College of Public Health Medicine		
	16.04.2021	Wife, Alison Douglass, is a member of the Health Practitioners Disciplinary Tribunal		
	25.06.2021	Director and Shareholder, Kiwood Limited	Nil (farm forestry plot).	
<b>Ilka Beekhuis</b>	09.12.2019	Patient Advisor, Primary Birthing FIT Group for Dunedin Hospital Rebuild		
	09.12.2019	Member, Otago Property Investors Association		
	09.12.2019	Member, Spokes Dunedin (cycling advocacy group)		
	15.01.2019	Paid member, Green Party		
	15.01.2019	Former employee of University of Otago (April 2012-February 2020)		
	07.07.2020	Trustee, HealthCare Otago Charitable Trust		
	12.09.2020	Co-Director, OffTrack MTB Ltd	No conflict (Husband's bike tourism company).	
<b>John Chambers</b>	09.12.2019	Employed as an Emergency Medicine Specialist, Dunedin Hospital		
	09.12.2019	Employed as Honorary Senior Clinical Lecturer, Dunedin School of Medicine	Possible conflicts between SDHB and University interests.	
	09.12.2019	Elected Vice President, Otago Branch, Association of Salaried Medical Specialists	Union (ASMS) role involves representing members (salaried senior doctors and dentists employed in the Otago region including by SDHB) on matters	

Disability Support Advisory Committee Meeting - Interests Register

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER**

Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
	09.12.2019	Wife is employed as Co-ordinator, National Immunisation Register for Southern DHB		
	09.12.2019	Daughter is employed as MRT, Dunedin Hospital		
<b>Kaye Crowther</b>	09.12.2019	Life Member, Plunket Trust	Nil	
	09.12.2019	Trustee, No 10 Youth One Stop Shop	Possible conflict with funding requests.	
	14.01.2020	Trustee, Director/Secretary, Rotary Club of Invercargill South and Charitable Trust		
	14.01.2020	Member, National Council of Women, Southland Branch		
	07.10.2020	Trustee, Southern Health Welfare Trust	Trust for Southland employees - owns holiday homes and makes educational grants.	
<b>Lyndell Kelly</b>	09.12.2019	Employed as Specialist, Radiation Oncology, Southern DHB	Involved in Oncology job size and service size exercise and may be involved in employment contract negotiations with Southern DHB.	
	18.01.2020	Honorary Senior Lecturer, Otago University School of Medicine		
	18.01.2020	Daughter is Medical Student at Dunedin Hospital		
	25.06.2021	Trustee, New Zealand Brain Tumour Trust		
<b>Terry King</b>	28.01.2020	Member, Grey Power Southland Association Inc Executive Committee		
	28.01.2020	Life Member, Grey Power NZ Federation Inc		
	28.01.2020	Member, Southland Iwi Community Panel	ICP is a community-led alternative to court for low-level offenders. The service is provided by Nga Kete Matauranga Pounamu Charitable Trust in partnership with police, local iwi and the wider community.	
	14.02.2020	Receive personal treatment from SDHB clinicians and allied health.		
	03.04.2020	Client, Royal District Nursing Service NZ Ltd		
	12.01.2021	Nga Kete Matauranga Pounamu Trust Board Member		
<b>Jean O'Callaghan</b>	13.05.2019	St John Volunteer, Lakes District Hospital	No involvement in any decision making.	
<b>Tuari Potiki</b>	09.12.2019	Employee, University of Otago		
	09.12.2019	Chair, Te Rūnaka Ōtākou Ltd* (also A3 Kaitiaki Limited which is listed as 100% owned by Te Rūnaka Ōtākou Ltd)	Nil, does not contract in health.	Updated to include A3 Kaitiaki Limited on 19 October 2020.
	09.12.2019	Member, Independent Whānau Ora Reference Group		
	09.12.2019	*Shareholder in Te Kaika		
	24.06.2021	Te Rau Ora Directorship		
	24.06.2021	Needle Exchange Services Trust (NEST) member		
<b>Lesley Soper</b>	09.12.2019	Elected Member, Invercargill City Council		
	09.12.2019	Board Member, Southland Warm Homes Trust		
	09.12.2019	Employee, Southland ACC Advocacy Trust		

Disability Support Advisory Committee Meeting - Interests Register

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER**

Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
	16.01.2020	Chair, Breathing Space Southland (Emergency Housing)		
	16.01.2020	Trust Secretary/Treasurer, Omaui Tracks Trust		
	19.03.2020	Niece, Civil Engineer, Holmes Consulting	Holmes Consulting may do some work on new Dunedin Hospital.	
	21.07.2020	Trustee, Food Rescue Trust		
	21.07.2020	Shareholder 1%, Piermont Holdings Ltd	Corporate Body for apartment, Wellington	
<b>Moana Theodore</b>	15.01.2019	Employee, University of Otago		
	15.01.2019	Co-director, National Centre for Lifecourse Research, University of Otago		
	<del>15.01.2019</del>	<del>Member, Royal Society Te Apārangi Council</del>	Removed 01.07.2021	
	15.01.2019	Shareholder, RST Ventures Limited		
	27.04.2020	Nephew, Casual Mental Health Assistant, Southern DHB (Wakari)		
	17.08.2020	Health Research Council Fellow		
<b>Andrew Connolly</b> (Advisor)	21.01.2020 (updated 02.06.2021)	Employee, Counties Manukau DHB. Currently seconded to Ministry of Health as Acting Chief Medical Officer		
	21.01.2020 (updated 02.06.2021)	Clinical Advisor to the Board, Waikato DHB		
	21.01.2020	Health Quality and Safety Commission		
	21.01.2020	Health Workforce Advisory Board		
	21.01.2020	Fellow Royal Australasian College of Surgeons		
	21.01.2020	Member, NZ Association of General Surgeons		
	21.01.2020	Member, ASMS		
	05.05.2020	Member, Ministry of Health's Planned Care Advisory Group	Will be monitoring planned care recovery programmes.	
	06.05.2020	Nephew is married to a Paediatric Medicine Registrar employed by Southern DHB		
<b>Roger Jarrold</b> (Crown Monitor)	16.01.2020 (Updated 28.01.2021)	Advisor to Fletcher Construction Company Limited	Have had interaction with CEO of Warren and Mahoney, head designers for ICU upgrade.	
	16.01.2020 (Updated 28.01.2021)	Chair, Audit and Risk Committee, Health Research Council		
	16.01.2020	Trustee, Auckland District Health Board A+ Charitable Trust		
	16.01.2020	Former Member of Ministry of Health Audit Committee and Capital & Coast District Health Board		
	23.01.2020	Nephew - Partner, Deloitte, Christchurch		
	16.08.2020	Son - Auditor, PwC, Auckland	PwC periodically undertake work for SDHB, eg valuations	
	05.04.2021	Financial Advisor, DHB Performance, Ministry of Health		
	18.06.2021	Treasury: Health Reform Challenge Panel		
<b>Benjamin Pearson</b> (Crown Monitor)	21.07.2021	Consultant Paediatrician, South Canterbury DHB		



**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
EXECUTIVE LEADERSHIP TEAM**

*Management of staff conflicts of interest is covered by SDHB's Conflict of Interest Policy and Guidelines.*

<b>Employee Name</b>	<b>Date of Entry</b>	<b>Interest Disclosed</b>	<b>Nature of Potential Interest with Southern District Health Board</b>
<b>Hamish BROWN</b>	25.02.2021	Portobello Maintenance Company	Nil, Body Corporate for residential area.
<b>Kaye CHEETHAM</b>		Nil	
<b>Rory DOWDING</b>	18.01.2021	Change Quest Ltd	Stepfather (Ross Hanson) and his trading entity (Change Quest Ltd) are at times employed as a contractor to SDHB HR Directorate
<b>Mike COLLINS</b>	15.09.2016	Wife, NICU Nurse	
	01.07.2019	Capable NZ Assessor	Asked from time to time to assess students, bachelor and masters students final presentation for Capable NZ.
	21.05.2020	Director, New Zealand Institute of Skills and Technology	
	20.11.2020	Chair, South Island CIOs	
<b>Matapura ELLISON</b>	12.02.2018	Director, Otākou Health Ltd	Possible conflict when contracts with Southern DHB come up for renewal.
	12.02.2018	<del>Director Otākou Health Services Ltd</del>	Removed 28.06.2021.
	12.02.2018	Deputy Kaiwhakahaere, Te Rūnanga o Ngai Tahu	Nil
	12.02.2018	Chairperson, Kati Huirapa Rūnaka ki Puketeraki (Note: Kāti Huirapa Rūnaka ki Puketeraki Inc owns Puketeraki Ltd - 100% share).	Nil
	12.02.2018	Trustee, Araiteuru Kokiri Trust	Nil
	12.02.2018	National Māori Equity Group (National Screening Unit)	
	12.02.2018	SDHB Child and Youth Health Service Level Alliance Team	
	12.02.2018	Otago Museum Māori Advisory Committee	Nil
	12.02.2018	Trustee, Section 20, BLK 12 Church & Hall Trust	Nil
	12.02.2018	Trustee, Waikouaiti Maori Foreshore Reserve Trust	Nil
	29.05.2018	Director & Shareholder (jointly held) - Arai Te Uru Whare Hauora Ltd	Possible conflict when contracts with Southern DHB come up for renewal.
	28.06.2021	Director, Te Kura Taka Pini Limited	100% owned by Te Rūnanga o Ngai Tahu.
<b>Chris FLEMING</b>	25.09.2016	Lead Chief Executive for Health of Older People, both nationally and for the South Island	
	25.09.2016	Chair, South Island Alliance Leadership Team	

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
EXECUTIVE LEADERSHIP TEAM**

<b>Employee Name</b>	<b>Date of Entry</b>	<b>Interest Disclosed</b>	<b>Nature of Potential Interest with Southern District Health Board</b>
	25.09.2016	Lead Chief Executive South Island Palliative Care Workstream	
	10.02.2017	Director, South Island Shared Service Agency	Shelf company owned by South Island DHBs
	10.02.2017	Director & Shareholder, Carlisle Hobson Properties Ltd	Nil
	26.10.2017	Nephew, Tax Advisor, Treasury	
	18.12.2017	Ex-officio Member, Southern Partnership Group	
	30.01.2018	CostPro (costing tool)	Developer is a personal friend.
	30.01.2018	Francis Group	Sister is a consultant with the Francis Group.
	20.02.2020	Member, Otago Aero Club	Shares space with rescue helicopter.
	23.09.2020	Arvida Group (aged residential care provider)	Sister works for Arvida Group (North Island only)
<b>Hywel LLOYD</b>	16.06.2021	GP, Mosgiel Health Centre	
	16.0.2021	Wife, Nurse, Paediatric Outpatients	
<b>Nigel MILLAR</b>	04.07.2016	Member of South Island IS Alliance group	This group works on behalf of all the SI DHBs and may not align with the SDHB on occasions.
	04.07.2016	Fellow of the Royal Australasian College of Physicians	Obligations to the College may conflict on occasion where the college for example reviews training in services.
	04.07.2016	Fellow of the Royal Australasian College of Medical Administrators	Obligations to the College may conflict on occasion where the college for example reviews training in services.
	04.07.2016	NZ InterRAI Fellow	InterRAI supplies the protocols for aged care assessment in SDHB via a licence with the MoH.
	04.07.2016	Son - employed by Orion Health	Orion Health supplies Health Connect South.
	29.05.2018	Council Member of Otago Medical Research Foundation Incorporated	
	12.12.2019	Daughter employed by Harrison-Grierson	A NZ construction and civil engineering consultancy - may be involved in tenders for DHB or new Dunedin Hospital rebuild work
<b>Nicola MUTCH</b>		Chair, Dunedin Fringe Trust	Nil
	02.04.2019	Husband - Registrar and Secretary to the Council, Vice-Chancellor's Advisory Group, University of Otago	Possible conflict relating to matters of policies, partnership or governance with the University of Otago.

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
EXECUTIVE LEADERSHIP TEAM**

<b>Employee Name</b>	<b>Date of Entry</b>	<b>Interest Disclosed</b>	<b>Nature of Potential Interest with Southern District Health Board</b>
<b>Patrick NG</b>	17.11.2017	Member, SI IS SLA	Nil
	27.01.2021	Daughter, is a junior doctor in Auckland and is involved in orthopaedic and general surgery research and occasionally publishes papers	
	23.07.2020	Wife, Chief Data Architect, Inde Technology	
<b>Gilbert TAURUA</b>	05.12.2018	Prostate Cancer Outcomes Registry (New Zealand) - Steering Committee	Nil
	05.04.2019	South Island HepC Steering Group	Nil
	03.05.2019	Member of WellSouth's Senior Management Team	Reports to Chief Executives of SDHB and WellSouth.
	21.12.2020	Te Whare Tukutuku	Te Whare Tukutuku is sponsored by the NZ Drug Foundation and Te Rau Ora. Programme is designed to increase education and awareness on Maori illicit drug use to primary care and in Maori communities funded by MoH Workforce NZ.
<b>Nigel TRAINOR</b>	17.05.2021	Daughter, Sonographer (works part-time for Dunstan Hospital)	
<b>Jane WILSON</b>	16.08.2017	Member of New Zealand Nurses Organisation (NZNO)	No perceived conflict. Member for the purposes of indemnity cover.
	16.08.2017	Member of College of Nurses Aotearoa (NZ) Inc.	Professional membership.
	16.08.2017	Husband - Consultant Radiologist employed fulltime by Southern DHB and currently Clinical Leader Radiology, Otago site.	Possible conflict with any negotiations regarding new or existing radiology service contracts. Possible conflict between Southern DHB and SMO employment issues.
	16.08.2017	Member National Lead Directors of Nursing and Nurse Executives of New Zealand.	Nil
<b>Greer HARPER</b>	24.08.2020	Paul Harper (father) is the current Chair of HealthSource NZ which is owned by the four northern DHBs.	

Disability Support Advisory Committee Meeting - Interests Register

SOUTHERN DISTRICT HEALTH BOARD  
 INTERESTS REGISTER  
 DISABILITY SUPPORT ADVISORY COMMITTEE EXTERNAL APPOINTEES

Committee Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
<b>Kiringāua Cassidy</b> (External Appointee)	10.07.2020	Nil		
<b>Paula Waby</b> (External Appointee)	18.07.2020	Board Member, Association of Blind Citizens NZ		
	18.07.2020	Adaptive Communications Adaptive Technology Trainer, Blind Low Vision NZ		
	18.07.2020	Business Owner of Blind-Sight Limited		
	18.07.2020	World Blind Union Representative for Blind Citizens NZ		
	18.07.2020	Disabled Persons' Assembly Committee		

## Southern District Health Board

### Minutes of the Disability Support Advisory Committee meeting held on Tuesday, 1 June 2021, commencing at 3.00 pm, in the Board Room, Wakari Hospital Campus, Dunedin

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<b>Present:</b>	Dr Moana Theodore Mrs Kaye Crowther Dr John Chambers	Chair Deputy Chair
<b>In Attendance:</b>	Mr Pete Hodgson Dr Lyndell Kelly Mr Terry King Mr Tuari Potiki Mr Chris Fleming Ms Gail Thomson  Mr Rory Dowding  Dr Nigel Millar Dr Nicola Mutch Mr John Marrable Ms Jeanette Kloosterman	Board Chair Board Member Board Member Board Member Chief Executive Officer Executive Director Quality & Clinical Governance Solutions Acting Executive Director Strategy, Primary and Community Chief Medical Officer ( <i>by Zoom</i> ) Executive Director Communications Chair, Disability Working Group Board Secretary

#### 1.0 WELCOME

The Chair welcomed everyone and the meeting commenced with a round of introductions.

#### 2.0 APOLOGIES

Apologies were received from Mr Kiringāua Cassidy, Prof Peter Crampton, Ms Paula Waby, and Mr Andrew Connolly, Board Advisor.

An apology for an early departure was received from Mr Tuari Potiki.

#### 3.0 COMMITTEE MEMBERSHIP

The Chair reported that there was a vacancy on the Committee, as Odele Stehlin, Iwi Governance Committee (IGC) representative, had stepped down. The contribution made by Ms Stehlin was acknowledged and the Chair advised that she had approached IGC for a replacement.

The Chair also acknowledged the contribution of Ms Gail Thomson during her time as Executive Director, Quality and Clinical Governance Solutions and lead Director for the Disability Support Advisory Committee, in particularly her leadership and support for launching the Disability Strategy.

The Chair reported that the Board had appointed Prof Peter Crampton, Deputy Board Chair, to the Committee.

#### **4.0 DECLARATION OF INTERESTS**

The Interests Registers were circulated with the agenda (tab 3) and noted.

The Chair asked for any changes to the registers and reminded everyone of their obligation to advise the meeting should any potential conflict arise during discussions.

#### **5.0 PREVIOUS MINUTES**

***It was resolved:***

**“That the minutes of the meetings held on 1 February 2021 and 7 April 2021 be approved and adopted as a correct record.”**

M Theodore/K Crowther

#### **6.0 CHAIRS' UPDATE**

##### **Disabled Persons Assembly**

The Chair reported that she and the Executive Director Quality and Clinical Governance Solutions had attended the May 2021 meeting of the Disabled Persons Assembly (DPA) to talk about the Disability Strategy and answer questions.

One of the issues raised at the DPA meeting was what impact would the Health reforms have on the Southern Disability Strategy. The Chair:

- Noted that the changes announced by the Minister of Health did not specifically include reforms to the disability support system and there would be a separate announcement later in the year. The Minister did note, however, that treating disability support services solely as a health issue was problematic; and
- Advised that the Southern Disability Strategy 2021 would be important in informing health and disability services moving forward, as it described the vision and priorities of the people of the Southern District.

*Mr Hamish Brown, Project Director, Dr John Adams, Chair, Clinical Leadership Group, and Mr Simon Crack, Project Manager, Dunedin Hospital Development and Transformation Support, joined the meeting.*

#### **7.0 PAULA'S STORY**

It was agreed that a video recording of a patient with lived experience of disability would be played at each future meeting.

The Committee was shown a video recording of Paula Waby's story and experiences with the health system, and what could be improved.

The Executive Director Quality and Clinical Governance Solutions (EDQ&CGS) reported that a Quality and Clinical Governance Hub would be formally launched after the Clinical Council meeting the following week, which would include the Disability Strategy and a section for patient stories.

## 8.0 NEW DUNEDIN HOSPITAL – HOW ARE THE PRINCIPLES OF UNIVERSAL DESIGN BEING IMPLEMENTED?

Mr Hamish Brown, Project Director, Dunedin Hospital Development and Transformation Support, outlined the status of the new Dunedin Hospital project, then presented an update on how accessibility considerations were being incorporated into the new hospital's design, some accessibility challenges and opportunities to be investigated, and the next steps for ensuring accessibility and universal access remain prioritised (tab 10).

During his presentation, Mr Brown advised that:

- At each stage of the design process an accessibility review was undertaken by Jason Strawbridge of Strawbridge Accessibility;
- At the later stages of the design more emphasis would be placed on wayfinding;
- Community Health Council representatives, including disability champions, were involved with the approximately 30 Facilities in Transformation (FiT) groups, which were informing the design.

Dr Adams and Mr Crack reiterated that patient accessibility was front and centre of design, as well as accessible facilities for staff with disabilities.

Dr Adams and Messrs Brown and Crack then responded to questions from members and offered to update the Committee on a regular basis.

### ***It was resolved:***

#### **"That the Committee note:**

- **The new Dunedin Hospital design progress to date, including accessibility issues under consideration, and**
- **That the project will continue to prioritise accessibility considerations as the design focus on internal layouts becomes more detailed over the coming months."**

*Dr Adams and Messrs Brown and Crack left the meeting.*

## 9.0 REVIEW OF ACTION SHEET

The Committee received the action sheet (tab 7) and advice from the Executive Director Quality and Clinical Governance Solutions (EDQ&CGS) that the Annual Plan disability metrics would be reported on when updates were available.

## 10.0 DISABILITY STRATEGY AND ACTION PLAN IMPLEMENTATION

### **Disability Working Group Update**

Mr John Marrable, Chair of the Disability Working Group (DWG), presented an update on the DWG, its terms of reference, membership, and highlights from its first meeting (tab 9.1), then responded to questions.

The EDQ&CGS informed the Committee that the draft Disability Action Plan table (Appendix 3) set out all the actions from the Disability Strategy and Action Plan. The Executive Director Quality and Clinical Governance Solutions would be the overarching executive sponsor and the business owner to oversee all the actions would be William Robertson, Consumer Experience Manager.

***It was resolved:***

**"That the Committee note the report and the progress made on establishing the Disability Working Group and endorse the Group's updated Terms of Reference."**

J Chambers/K Crowther

**11.0 SNAPSHOT OF NATIONAL TRAVEL ASSISTANCE FOR THE DISABLED COMMUNITY**

The Committee received information on the National Travel Assistance Scheme, in particular as it pertained to consumers with disabilities (tab 11), and the EDQ&CGS responded to questions.

**12.0 TERMS OF REFERENCE**

The Committee reviewed the revisions to its terms of reference (tab 12).

***It was resolved:***

**"That the Committee confirm the changes to its terms of reference and recommend that they be approved by the Board."**

M Theodore/J Chambers

The meeting closed with a karakia at 4.10 pm.

Confirmed as a true and correct record:

Chair: \_\_\_\_\_

Date: \_\_\_\_\_



**Southern District Health Board**  
**DISABILITY SUPPORT ADVISORY COMMITTEE MEETING**  
**ACTION SHEET**  
**As at 23 July 2021**

<b>DATE</b>	<b>SUBJECT</b>	<b>ACTION REQUIRED</b>	<b>BY</b>	<b>STATUS</b>	<b>EXPECTED COMPLETION DATE</b>
February 2021	<b>Annual Plan Disability Metrics</b> (Minute 11.0)	Where a milestone is to be delivered in a future quarter, commentary to be added on its status.	EDQCGS	Actioned	
June 2021	<b>Patient Stories</b> (Minute 7.0)	To be added to the agenda as a standing item.	EDQCGS		



## KOHA KAI AND THE DISABILITY SECTOR

**Presenter:** Janice Lee, Project Lead, and members of Koha Kai

There are a number of community organisations working to meet the needs of disabled people within the Southern region. This presentation is about the work of one such organisation, Koha Kai [KOHA KAI – ENCOURAGE A LIFE OF PURPOSE](https://kohakai.co.nz/) (<https://kohakai.co.nz/>). Koha Kai are a charity originally established by a small group of people, many of whom have various disabilities. Koha Kai was set up to support the development of skills that would empower people to become independent and autonomous within their own lives. In relation to the kaupapa of SDHB's Disability Support Advisory Committee (DSAC); understanding the types of services undertaken by providers and organisations within the Southern region can help to inform DSAC's responsibilities in relation to meeting the needs of disabled people. This includes forming relationships and sharing learnings between organisations.



## **FOR INFORMATION**

**Item:** Disability Working Group - Update  
**Proposed by:** John Marrable, Chair of Disability Working Group  
**Meeting of:** 2 August 2021

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## **Recommendation**

That the Committee notes the contents of this report and the progress made on establishing the Disability Working Group.

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## **Purpose**

1. To update the Committee on the Disability Working Group and progress on implementing the disability strategy, including key messages from its June and July meetings.
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## **Specific Implications For Consideration**

2. Financial
    - Actions emerging from the DWG may have costs associated with them. If and when this occurs, budget approval will be sought in line with Southern DHB's normal delegations policy.
  3. Workforce
    - Some actions will require input from Southern DHB staff and these should be factored into their normal work plans.
  4. Equity
    - The prioritised actions from the Action Plan will address issues of equity for consumers and their family and whānau that are members of the disabled community in Otago and Southland.
  5. Other
    - xxx
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## **Background**

6. The Disability Working Group has met twice since the last meeting of the Disability Support Advisory Committee: on 11 June and 9 July. Key messages from the June and July meetings are attached at Appendices 1 and 2 respectively.
  7. Work continues to align Group's priorities with the Southern DHB disability strategy and with the NZ disability strategy.
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## **Discussion**

8. The Disability Working Group has mapped six Outcomes from the NZ Disability Strategy to its goals and priorities:
  - a. Outcome 2 – Employment and economic security;
  - b. Outcome 3 – Health and wellbeing;

- c. Outcome 5 – Accessibility;
  - d. Outcome 6 – Attitudes;
  - e. Outcome 7 – Choice and control;
  - f. Outcome 8 – Leadership.
9. The following high level areas have been identified as the priorities for the Group over the next six to 12 months:
- a. Disability Awareness training for staff
  - b. Physical accessibility to SDHB facilities
  - c. SDHB’s recruitment process
  - d. Patient/Whānau engagement
  - e. COVID-19 vaccination programme
10. Appendix 3 shows high level actions against each of the outcomes, as well as more specific actions in each area, which are expanded from the five priority areas.
11. The action plan is very much a “living document” and should not be considered the finished article. It will continue to evolve and develop – be added to and have things removed. Co-design is a central pillar of the action plan and this extends to the design and development of the plan itself, so we expect it to change with input from disabled people, their families, whanau and communities.

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**Next Steps & Actions**

- 12. Southern DHB is in the process of appointing a Disability Lead for up to eight hours per week. The Disability Lead will have lived experience and will have direct responsibility for operationalising the strategic priorities.
  - 13. Socialise the action plan across the Southern region and increase awareness of it.
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## Appendices

### **Appendix 1**                      DISABILITY WORKING GROUP

#### Key Messages June 2021

*Members:* John Marrable (Chair), Jasmin Taylor, Simon Fogarty, George, William Todd

*Standing members:* Mel Warhurst, Andy Crossman, William Robertson, Sam Potter

*In attendance:* Doug Funnell (Min of Health), Charlotte Adank

*Apologies:* Sharron Adler

The Disability Working Group members met on Friday 11 June 2021.

- Members reviewed the action list of items that were discussed at the May meeting.
- The Chair, John Marrable updated members that he had presented at the Disability Support Advisory Committee (DSAC) on May 19 and provided an update on the first meeting of the Disability Working Group.
- The final Terms of Reference for the Disability Working Group were reviewed by members and will be uploaded to the Southern health website disability page.
- The Disability Working Group had an update from Mel Warhurst about a pilot programme that planned for Dunedin administration around an Accessibility Game - led by Julie Woods. Members agreed that with this pilot it would be important to evaluate what staff learnt from this activity. The Working Group will develop some questions to ask the 20 participants once they had completed their activities before the end of July.
- Members reviewed actions that had been outlined in the Disability Strategy and common themes were identified by all members as important. It was agreed a lot of items interconnected for example if staff awareness of disability issues was raised, this could lead onto being a more successful employer of people with disabilities and therefore becoming more aware of issues from IT, accessibility perspective.
- Members discussed whether the Covid vaccination rollout should be identified as a priority in the Action Plan that would be developed. The following areas ranked highly with all members:
  - Disability Awareness training for staff
  - Physical accessibility
  - Recruitment process
  - Patient / Whānau engagement

Next meeting: 9 July 2021

## Appendix 2: Disability Working Group

### Key Messages July 2021

## DISABILITY WORKING GROUP

### Key Messages July 2021

*Members:* John Marrable (Chair), Jasmin Taylor, Simon Fogarty, George

*Standing members:* Mel Warhurst, William Robertson, Mike Burrows, Sharon Adler

*In attendance:* Charlotte Adank, Hywel Lloyd

*Apologies:* William Todd, Andy Crossman, Doug Funnell,

The Disability Working Group members met on Friday 9 July 2021.

- Hywel Lloyd, Acting Executive Director for Quality and Clinical Governance Solutions, was introduced to the Disability Working Group. Hywel is the DHB Executive responsible for sponsoring the Disability Strategy and the work that needs to happen.
- Iwi representative for this group – this has been requested and awaiting confirmation.
- The Disability Working Group (DWG) was provided an update from Mel Warhurst about the pilot programme that occurred with Dunedin administration staff called the Accessibility Game led by Julie Woods. Feedback from participants had been good to date and the group would be coming together next week. The DWG has developed some questions for participants to gauge what they have learnt from this programme.
- Charlotte Adank (DHB Disability Lead – Covid Vaccination) updated the working group on what was happening with the Covid vaccination roll-out to the disability community. A national disability network had been set up by the Ministry of Health to support DHBs with connecting, communicating, and rolling out the vaccination to the disability community. Members were advised that the Covid Programme Team have been working with Disability Support Service providers across the Southern district and building a relationship and understanding of what they required for the people they support in residences (Group 2b). It was decided that outreach clinics, with vaccinators going out to familiar residential settings, was the best model for delivery of the vaccine for this population group. This has been an extensive exercise as the DHBs historically did not have the relationship with these providers, as they are normally managed by the Ministry of Health. In terms of the number of people each provider supported, the Ministry had to provide DHBs with this data to enable planning.  
Invitations would be sent out to people with underlying health conditions or disabilities (Group 3) next week inviting them into one of the clinics across the district. The difficulty the DHB has is we do not have a system of knowing who these people are, so they cannot be contacted directly, and we are heavily reliant on community networks which the communication has been sent out through.



The Ministry of Health had recently requested information from DHBs around accessibility for the disability community to the vaccination clinics. The DWG had agreed at the June meeting that undertaking some accessibility audits of the vaccination clinics would be something that should be prioritised. The Chair and some members from the disability community would undertake an audit of the Dunedin Meridian Vaccination Clinic this afternoon and provide recommendations. The Southland site would have an accessibility audit undertaken before the end of July.

- Members reviewed a paper around the action plan which aligns actions to the New Zealand Disability Strategy 2016-2026<sup>1</sup>. Of the eight outcomes identified in this strategy, there are six key outcome areas that connect in with the work for the DHBs. DWG members will review and feedback to the Chair and Charlotte in the coming weeks.
- John Marrable (Chair) will present to Disability Support Advisory Committee (DSAC) in August on work that has happened.
- A newsletter has been created and sent out through disability networks as well as going on Pulse. [Disability Strategy News and Updates 2 \(mailchi.mp\)](#)

**Next meeting:** Friday 13 August 2021

Further information about the Disability Strategy can be found on the Southern Health website <https://www.southernhealth.nz/disability-strategy>

Email [disability@southerndhb.govt.nz](mailto:disability@southerndhb.govt.nz)

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<sup>1</sup> <https://www.odi.govt.nz/nz-disability-strategy/>

NZ Strategy Outcome	High Level Action	Specific Action(s)
Outcome 2 – Employment and economic security: We have security in our economic situation and can achieve our potential.	Increase the number of disabled people in paid employment	Explore resources from other organisations, eg MSD that can help disabled people apply for roles at Southern. Look at vacancies and the associated position descriptions to consider roles that could be undertaken by a disabled person – including any adaptations to position description or environment to facilitate this. Make recruitment systems accessible to all.
	Increase the capability of hiring managers to recruit disabled people	HR support to prepare hiring managers, including staff training in recruiting disabled people
	Record the number of disabled people working with/for Southern DHB	Systems currently capture only new employees since 2017. Retrospective data capture project is required to get details of all staff.
	Ensure that Southern DHB is a place that disabled people can work safely, have equal access and feel part of the team.	Set up group for disabled staff to share experiences and identify improvements from a staff perspective.
Outcome 3 – Health and wellbeing: We have the highest attainable standards of health and wellbeing.	Improve the health outcomes of disabled people through a co-design approach.	Engage a person with lived experience as Southern DHB's Disability Lead. Engage with consumers with lived experience, eg through the Community Health Council advisor network. Ensure, with the person's permission, that family and whanau are active participants in a disabled person's care.
	Have robust data and evidence to inform decision-making.	Ensure new patient information system (PICS) has the capability to record when a consumer has a disability, and the nature of that disability. Data to be used to engage appropriately with disabled people (eg not send letters to blind people).
	Increase understanding of the different support needs of disabled people.	Health literacy programme.
	COVID-19 Vaccination programme for disabled people.	Ensure that vaccination centres in the Southern region are accessible by disabled people.

<p>Outcome 5 – Accessibility: We access all places, services and information with ease and dignity.</p>	<p>Ensure that the principles of universal co-design and the needs of disabled people are understood and taken into account when design systems, processes, etc.</p>	<p>Through the Disability Working Group, work with disabled people, their whanau and communities of interest to ensure accessibility and equity.</p>
	<p>Southern DHB facilities are accessible to all.</p>	<p>Carry out accessibility audits of all existing facilities: includes tracking a disabled patient’s journey through the health system. Ensure signage is appropriate and assists navigation through facilities. Ensure disabled people are represented in the new hospital build project.</p>
	<p>Improve the accessibility of information provided by Southern DHB.</p>	<p>Key messages and health alerts to be provided in New Zealand Sign Language (both at time of announcement and in video format), Easy Read formats, multiple languages, including te reo and the main community languages (eg Mandarin and Arabic).</p>
<p>Outcome 6 – Attitudes: We are treated with dignity and respect</p>	<p>All Southern DHB employees treat everyone with dignity and respect.</p>	<p>Staff disability awareness training – both mandatory new employee training and refresher training for existing employees on a regular basis. Use of patient stories to highlight good and bad practice and provide opportunities for improvement. Increase the range of disability awareness training available to Southern DHB staff.</p>
	<p>Recognise disabled people, their families and whanau as experts in themselves.</p>	<p>Working with disabled people in a co-design approach.</p>
	<p>Increase awareness and visibility of issues impacting on disabled people.</p>	<p>Create regular Southern DHB wide disability newsletter. Patient stories published to the Southern DHB intranet. Create a forum for staff and consumers to share stories and experiences.</p>

<p>Outcome 7 – Choice and control: We have choice and control over our lives</p>	<p>Operationalise co-design philosophy.</p>	<p>Engage regularly with disabled people, families, whanau and communities to ensure two-way communications that inform decision making. Engage more staff with lived experience to work with the Disability Lead to operationalise the strategy.</p>
	<p>Disabled people have a voice in the Southern district's health system.</p>	<p>Create networks with, and across, the disability sector to ensure that disabled people from all across the district can have their say – and be heard. Expand the Disability Working Group to be even more representative of the community. Create a newsletter to go out to the community highlighting the work and achievements of the Disability Working Group and seeking input from disabled people, their families and whanau.</p>

## FOR INFORMATION

<b>Item:</b>	Covid-19 Immunisation Programme Update
<b>Written by:</b>	Demelza Halley, Project Manager, SDHB COVID-19 Vaccine Programme
<b>Approved by:</b>	Hamish Brown, SDHB COVID-19 Vaccine Programme Incident Controller
<b>Meeting of:</b>	2nd August 2021

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## Recommendation

That DSAC **notes** the progress of the Covid-19 Immunisation Programme and the work undertaken to support people with disability to access the COVID-19 vaccination.

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## Purpose

1. To inform DSAC of the progress of the Covid-19 Immunisation Programme and the work undertaken to support people with disability to access vaccinations.
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## Background

2. The COVID-19 Vaccination programme is the largest public health vaccination event in New Zealand's history using the Pfizer (Comirnaty) vaccine, with two doses delivered a minimum of 21 days apart.
3. The programme is being coordinated by the Ministry of Health (MoH) and delivered by District Health Boards (DHB's) via a commissioning model.
4. The week beginning 11 July, Southern DHB reached a milestone of 93,073 vaccinations. Of these, 55% were completed in the Southern DHB run clinics in Dunedin and Invercargill. Increasing numbers (45%) are being undertaken by primary care in rural areas. Delivery to group 3 is underway with 47,000 vaccinations completed.
5. As at 14 July 2021, 839,554 first doses and 564,789 doses have been delivered nationally.
6. National data about progress to vaccinate the people that identify as having a disability is not available to individual DHB's.
7. People with disability living in residential settings or receiving supported living payments fall into **Group 2** of the roll-out sequence.
8. People with disability who are **not** in a residential setting or receiving supported living payments fall into **Group 3** of the roll-out sequence:

**The COVID-19 Vaccine roll out sequence (MOH):**

From February	From March	From May	From 28 July
Group 1 – <a href="#">Border and MIQ workers and the people they live with</a>	Group 2 – <a href="#">High-risk frontline workers and people living in high-risk places</a>	Group 3 – <a href="#">People aged 65 and over, and those who are at risk of getting very sick from COVID-19</a>	Group 4 – <a href="#">General population – aged 16 years and over</a>
<i>Underway</i>	<i>Underway</i>	<i>Underway – expect an invitation from your DHB by the end of July</i>	<i>From 28 July, starting with people aged 60 years and over</i>

9. The Ministry of Health are continuing to work on sharing more detailed data from providers, their Disability Directorate, and other agencies (eg ACC) to help identify individuals that should have earlier access to vaccinations or supported vaccinations. Data sharing agreements are being put in place to make this possible.
10. Med-safe has approved the use of the Pfizer vaccine in 12-15-year olds. Formal approval by Cabinet/MoH is yet to be given.

## Discussion

11. Southern DHB has dedicated resource within the programme team to support the roll-out of vaccinations for people with a disability. The project team work closely with the Ministry of Health Disability Leads and leads from other District Health Boards to share resources, ideas and lessons learned.
12. The project team is also working closely with disability providers across the district to identify and vaccinate nearly a thousand individuals living in residential settings. A range of vaccination solutions including attending mass clinics, attending a clinic at a familiar location such as a day base or disability provider office or an in-home vaccination have been offered.
13. Specific solutions such as clinics with sign language support are being planned.
14. Vaccinations are underway for 722 of 907 residential clients. Targeted invites have been sent to those of the 100 plus people who receive supported living payments. 600 first doses have been completed and 199 second doses as at 15 July.
15. Media: <https://www.rnz.co.nz/news/national/446563/dunedin-clinic-offering-vaccination-support-for-people-with-intellectual-disabilities>.
16. In the Southern Region all Aged Residential Care facilities (including D3, D6 and Hospital level) have been vaccinated.
17. The SDHB CVIP project team is working with the Ministry of Education to assess the possibility of vaccination clinics in special education schools for those over the age of 16 along with carers and whanau.
18. The Ministry of Health have also identified individuals in our district who receive the Supported Living Allowance and we have invited them to book vaccinations or require support to make a vaccination possible.
19. On 17 July invitations to book vaccinations will be disseminated through providers and contacts to share with anyone that is;
  - a) A person with disability, 16 years or over, or

- b) A person, 16 years or over, living at the same location as a person with disability of any age, or
- c) A carer for person with disability of any age

This is being supported by a MoH led national communications campaign.

- 20. Vaccinations are available at centres in Dunedin and Invercargill, as well as general practices and pharmacies across the district, with more locations opening during August and as the programme scales up.
- 21. Our current vaccination clinic spaces in Dunedin and Invercargill are fully accessible for wheelchairs and mobility aids and have space for those that require a lower stimulus environment. We are currently undertaking accessibility/disability audits of these clinics and will work with the auditor to progress any recommendations.

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### **Next Steps & Actions**

- 22. SDHB will continue to progress vaccinations for this cohort with the support of the Ministry of Health, the Ministry of Education and disability providers.
  - 23. We will implement recommendations that arise out of the accessibility/disability assessments of our mass vaccination clinics.
  - 24. In our next update for DSAC, we anticipate having access to more data and reporting on our progress with this cohort.
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# Home & Community Support Services

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*“The home and community support services sector is a crucial part of the health and disability sector, enabling people to be supported within their homes who may otherwise require residential or hospital care.”*

Director-General’s Reference Group for In-Between Travel, July 2015.

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga



# Topics

- **HCSS in New Zealand**
- **HCSS in Southern**
- **Southern HCSS Alliance Activity & Accountability**
- **Alignment between National Work and Southern DHB HCSS**

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga

## HCSS in New Zealand

- Burning Platform for Change from
  - Funders,
  - Providers,
  - Support Workers and
  - Clients

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

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Whanaungatanga

## And Change we were given

- **Supporting Guidance from Ministry of Health**
  - interRAI as Comprehensive Clinical Assessment Tool
  - Complaints Categorisation Guidance
  - Medication Guidelines for the Home and Community Support Services Sector
- **Legislative Changes**
  - The Settlement Agreement (July 2014)
  - In-between Travel and Guaranteed Hours
  - Pay Equity

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Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga

## And more change

- Healthy Ageing Strategy 2016
  - National Framework for Home & Community Support Services (HCSS)
  - National Service Specification for HCSS
  - Companion Service Manual
  - Nationally consistent casemix funding methodology
  - National consistent outcomes and measurement framework

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Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
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# HCSS in Southern DHB

- Auckland Uniservices Report 2011
- Consultation, RFP, Alliance 2013
- Results:
  - 17 providers to 3 providers
  - Provider coverage of the entire region
  - Provider choice for clients
  - Alliance Agreement based on shared principles
  - Bulk Funding for Providers, distributed based on casemix methodology
  - Providers assessing non complex clients
  - Providers determining supports based on interRAI assessments and goals
  - Care Planning and regular reviews by Provider Registered Health Professionals
  - Regular reassessments by Clinical Needs Assessors/Registered Health Professionals
  - Registered Health Professional oversight of Support Workers
  - Focus on restorative care
  - Flexibility of supports
  - Ongoing service development as part of our Service Development Group

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga

## Southern DHB Alliance– matching game

- 40
- 4800
- 94
- 1103
- 608,000
- 27,700
- 500
- Visits per week
- Number of Support Workers
- Number of HOP Clients
- Spend in millions
- Annual Hours of service provision
- Percentage of Support Workers at least at Level 2 Qualification
- Number of new referrals per week (all services)

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga

# Southern HCSS Alliance Accountability

- Alliance Management Group
  - Dashboard
- Alliance Service Development Group
  - 6 monthly Quality Reporting
  - Carer Stress Tool
  - Stop & Watch
  - Fentanyl Patches
  - Insulin Management
  - Palliative Care

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga



## And more accountability

- Certification to NZS 8158:2012
- Southern DHB Contract Audits
- Southern DHB Feedback – Safety First
- HCSS Feedback System

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga

# Alignment between National Work and Southern

- Reviews and Reassessments
- Data Analysis and Benchmarking
- Tailoring services to Maori and Pacific populations
- Opportunity to use national resources for contract and funding (similar to ARC) and local resources for service development and provision

Kind  
Manaakitanga

Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga



# Questions?

Kind  
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Open  
Pono

Positive  
Whaiwhakaaro

Community  
Whanaungatanga