

# MINUTES

Minutes of: Primary Health Care Nursing Sector Reference Group

Date of Meeting: 17 July 2006

Present	Pam Williams (Mangere PHO), Janine Horsfall (CMDHB), Nardia Brooke (ProCare) Denise Kivell (CMDHB), Jill Trezise (East Tamaki Healthcare), Christine Lynch (CMDHB), Louise Troy (Plunket Society) Karlynnne Earp (School Nursing)
Apologies	Phillipa Bennetts, Pam Henry, Maria West Dale Oliff, Elizabeth Farrell, Dolly Rewha, Paula Renouf Trish Jackson-Potter, Bronwyn Anderson, Allan Moffitt, Meg Goodman Colleen Turnbull (Peoples Centre), Jean McQueen (East Health),  Karyn Sangster, Anne Blundell (TKOH)

**Guests:** Adrienne Laing (Gynae Service coordinator) & Lesley Powell (Nurse Specialist Sexual Health)

## MATTERS ARISING:

Item	Discussion	Action
1. Round Robin Key points	<p><u>Karlynnne:</u> Fed back on MOH/MSD/MOE Youth Seminar in Wellington. Positive outcome funding for Youth health</p> <p><u>Pam:</u> Smoking cessation programme keeping her busy-2 home visits this am. New regulation: no age limit on nicotine patches</p> <p><u>Jill:</u> Workload-severity of the pneumonia (6 associated deaths) Working on training for nurses to do IV's</p> <p><u>Nardia:</u> On the National PHO Taskforce-looking at funding &amp; size. Questions related to bureaucracy and working with only 4-6 PHO's? Congratulations extended to her on behalf of the group</p> <p><u>Louise:</u> Jenny Prince is now General Operations manager for Plunket</p>	
Child protection issues	<p>Plunket use the Manitoba Risk Assessment score Karylnne noted there is a WRAPGA youth assessment score</p> <p>Jill: Approx 3 per week referrals to CYPFS-domestic violence issues. Key identifier has been the Nurse coordinator</p> <p>Noted Mangere multi-agency meeting on the 25<sup>th</sup> July in response to Kahui twins. General discussion around how we need to manage the risk of not accommodating child abuse &amp; activating referrals to CYPFS</p>	
Gaps in service:	<ul style="list-style-type: none"> <li>Pam highlighted huge need for podiatry-only way to get a diabetic seen is to generate an OPD appt. Lower level podiatry</li> </ul>	DK to bring up with Allan

	<p>is going on in the community. Jill gave the eg of ETHC have trained people (6 days) to do foot assessments</p> <ul style="list-style-type: none"> <li>Community Dietician access- Plunket have major problems-discussion relative to LBD programme &amp; need for resource to assist</li> </ul>	DK to talk to LBD coordinator
Dec Planning day	Date to be yet confirmed	
Leadership for Nurse leaders	Underway. DK confirmed talking to all nurse leaders to formulate a plan. Nurse leader for Ta Pasifka underway	
Workforce projects	Update on Return to Nursing & Nurses new to NZ proposed programme 3 intakes of 30. Clinical placements maybe requested depending if any of the nurses indicate PHC as an option	
<b><u>Agenda</u></b>		
2. Lesley Powell-  Key message  Colposcopy referrals:  Other key points	<p>Discussion regarding Cervical Smear programme &amp; referral of women to colposcopy</p> <ul style="list-style-type: none"> <li>involved timeliness</li> <li>Referral management –quality of referral data especially contact details</li> </ul> <p>P1 within 1 week (often get ref 5<sup>th</sup> day) P2 with in 4 weeks P3 Within 6 months</p> <p>DHB is required to report to MOH these key measures hence need more awareness at point of referral</p> <ul style="list-style-type: none"> <li>Lab plus versus Diagnostic lab- Time delays in getting results was flagged</li> <li>Discussion re imminent release of immunisation (3 injections) NB: 70% infertility with 3<sup>rd</sup> episode of Chlamydia</li> <li>2nd Trimester terminations: Dr to Dr referral-delays in process can mean the service been sought off shore</li> </ul>	DK to contact IMAC
3 New Graduates  Preceptorship	<p>3 new grads out in PHC for Sept-currently sorting placements. All agreed profile has been raised. Discussed Nurse Entry to Practice &amp; successful accreditation-awaiting time frame.</p> <p>Discussion regarding preceptors. Question raised regarding funding. Plunket used the levelling system L 3 to precept which has a higher wage. Christine spoke on the DHB preceptor course- Changes have been made to assist PHCN to enrol on the course, good feedback. Recommendation for 1 day rather than 2 was submitted however to date it remains at 2 days with some pre-work. CMDHB Nurse Educators have been part of a greater regional group who have submitted the course as part of a credentialling framework</p>	
	<b>Next meeting 21<sup>st</sup> August 1-3pm</b>	