



**THE WEST COAST HEALTH SYSTEM**  
- supporting you to be well



# West Coast District Health Board Public Health Plan 2013-14



*West Coast District Health Board*  
*Te Poari Hauora a Rohe o Tai Poutini*

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# 1. WEST COAST DISTRICT HEALTH BOARD'S PUBLIC HEALTH PLAN FOR 2013–14

- West Coast DHB Aim: To provide a people-centred, single health system for the West Coast, that is integrated and visible<sup>1</sup>.
- West Coast DHB Values:
  - Manaakitanga – caring for others
  - Whakapapa – identity
  - Integrity
  - Respect
  - Accountability
  - Valuing people
  - Whanaungatanga – family and relationships.
- This plan accompanies the West Coast DHB Annual Plan 2013-14 and has been endorsed by the Executive Management Team and the Board of the West Coast DHB.
- It describes public health services provided or funded by the WCDHB and its Public Health Unit, Community and Public Health.
- It describes key relationships with other agencies.
- The plan is based on a South Island planning template utilising the Core Public Health Functions framework (as agreed in the South Island Public Health Partnership plan).

## a. Our Public Health Service

- Community and Public Health (a division of the Canterbury DHB) provides public health services throughout the West Coast DHB region, as well as within Canterbury and South Canterbury. Public health services on the West Coast are also provided through the Planning and Funding Division of the West Coast DHB and by the West Coast Primary Health Organisation. This plan focuses on the work of Community and Public Health, and also includes activities of Planning and Funding and the West Coast Primary Health Organisation, but does not cover non-DHB funded public health providers, such as non-government organisations, Māori and Pacific providers and private providers.
- The West Coast District Health Board serves a population of 32,900 people, spread over a large area from Karamea in the north to Jackson's Bay in the south (and Otira in the east) – as such, it has the most sparse population of the 20 DHBs in New Zealand. The population is spread across three Territorial Local Authorities (TLAs): Buller, Grey and Westland Districts.
- The West Coast population is slightly older than the rest of New Zealand, with a higher proportion of people aged over 65. This differs for the Māori population (nearly one in ten West Coasters are Māori), which is much younger (75% of West Coast Māori are aged under 54 years). At the time of the 2006 Census, the West Coast population was more socioeconomically deprived than the total New Zealand population. For example, those in the most deprived groups (NZDep deciles 6 – 10) made up 61% of the West Coast population, compared with less than 50% of the total New Zealand population.<sup>2</sup>
- The work of this plan is guided by the following public health principles:
  - a. focusing on the health of **communities** rather than individuals
  - b. influencing **health determinants**
  - c. prioritising improvements in **Māori health**
  - d. reducing **health disparities**
  - e. basing practice on the best available **evidence**
  - f. building effective **partnerships** across the health sector and other sectors
  - g. remaining **responsive** to new and emerging health threats.

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<sup>1</sup> 2011-12 WCDHB Annual Report

<sup>2</sup> CPH Region NZDep2006 data by ethnic group.

## b. Our Key Priorities

- West Coast DHB strategic imperatives, as specified for 2012-13, are:
  - Achieving the Minister's health targets
  - Managing our financial performance to achieve financial sustainability
  - Delivering better, sooner, more convenient health care
  - A 'Transalpine Approach'
  - Facility development and refurbishment
  - Provision of wrap-around services for older people.
- The five South Island DHBs have identified four strategic outcomes. The first of these outcomes is that: "People are healthier and take greater responsibility for their own health". The focus therefore is on "The development of services that better protect people from harm and support people to reduce risk factors, make healthier choices and maintain their own health and wellbeing".<sup>3</sup>

The vision for the future of the West Coast health system is of an integrated system that wraps care around the patient to support people to stay safe and well in their own homes and communities wherever possible.

## c. Alignment with National and Regional Strategic Health Priorities

- This plan aligns with national and regional priorities and includes activities that support strategic health initiatives.
- The plan is aligned with and sits alongside the West Coast DHB Annual Plan and Statement of Intent 2013-14 and the WCDHB Māori Health Plan 2013-14. The plan contents reflect Government, Ministry of Health and WCDHB priorities. Community and Public Health activities are carried out under the public health service specifications as agreed by the Ministry of Health.
- The NZ Public Health and Disability Act lays out the responsibilities that DHBs have in ensuring Māori health gain as well as Māori participation in health services and decision making. The West Coast DHB works in partnership with Māori to reduce inequalities and improve the health status of Māori.
- The South Island Public Health Partnership is a collaboration of the three South Island Public Health Units (PHUs) – Nelson Marlborough (NMDHB), Community and Public Health (CPH) and Public Health South (Southern DHB). The partnership aims to facilitate the three PHUs working together – collaborating on leadership and sharing planning, resources and strategic work.
- Community and Public Health has statutory responsibilities under the Health Act 1956 that are conducted by Medical Officers of Health (MOsH), Health Protection Officers, and those acting under delegation from the MOH.
- Reporting against this plan will meet the requirements of the Ministry of Health reporting schedule and ISE (Information Supporting the Estimates of Appropriation) reporting as outlined in the planning and reporting package for 2013-14.

## d. A Renewed Focus

- The five core public health functions agreed by the Public Health Clinical Network<sup>4</sup> and included in the draft revised Ministry of Health Tier One Public Health Service Specifications are:
  1. Health assessment and surveillance
  2. Public health capacity development
  3. Health promotion
  4. Health protection
  5. Preventive interventions.
- This plan groups public health initiatives according to their primary public health function. 'Outcomes and activities' tables are presented for each of the core functions. Within these tables there are columns for each of the following:
  - Short term outcomes – *the results that we're working towards*
  - Short term outcome indicators – *how we'll monitor progress towards the results*
  - Activities – *what we'll do to get the result, and*
  - Responsibilities – *who will do it.*

<sup>3</sup> West Coast DHB Annual Plan 2012-13, p. 14

<sup>4</sup> Available at <http://www.cph.co.nz/Files/CorePHFunctionsNZ.pdf>

- The core public health functions are interconnected; core functions are rarely delivered individually. Effective public health service delivery generally combines strategies from several core functions to achieve public health outcomes in one or more public health issue or setting.
- The appendix outlines how public health strategies from a range of core functions are combined across the West Coast DHB to address priority health issues, and specifies targets for that work.

## 2. KEY RELATIONSHIPS

The Public Health work of the WCDHB involves partnership with many health and non-health agencies. Some key partners of Community and Public Health are listed below. Formal agreements are noted in parentheses.

### **Local authorities:**

West Coast Regional Council  
Buller District Council  
Grey District Council  
Westland District Council  
District Licensing Agencies

### **Government agencies:**

Alcohol Regulatory and Licensing Authority  
Department of Conservation  
Environmental Protection Authority  
Environmental Science and Research  
Health Promotion Agency  
Liquor Licensing Authority  
Ministry of Business, Innovation and Employment  
Ministry of Education  
Ministry for the Environment  
Ministry of Health  
New Zealand Fire Service  
New Zealand Police

### **Māori /Iwi agencies:**

Te Runanga o Ngati Waewae  
Te Runanga o Maakaawhio  
Rata Te Awhina Trust

### **Educational institutions:**

Education Facilities and Settings  
Tai Poutini Polytechnic

### **West Coast DHB:**

Infection Control Nurse Specialist, Grey Hospital  
Grey Hospital Infection Control Committee  
Immunisation Coordinator  
Immunisation Advisory Group  
Public Health Nurses  
Rural Nurse Specialists

### **Non-government organisations/networks:**

Action on Smoking and Health (ASH)  
Active West Coast  
Buller and Westland Sports Trusts  
Cancer Society

Family Planning Association  
Disability Information Service  
Heart Foundation  
Healthy West Coast Governance Group (Terms of Reference, joint work plan)  
Laboratories  
Liaison on Alcohol and Drugs  
Medical Centres  
Mental Health Foundation  
Smokefree South Island  
Sport West Coast  
West Coast Tobacco Free Coalition  
West Coast Primary Health Organisation  
West Coast Youth Workers Collective

### 3. HEALTH ASSESSMENT AND SURVEILLANCE

“understanding health status, health determinants and disease distribution”

#### a. Strategies

- **Monitoring, analysing and reporting** on population health status, health determinants, disease distribution, and threats to health, with a particular focus on health disparities and the health of Māori.
- Detecting and investigating **disease clusters and outbreaks** (both communicable and non-communicable).

#### b. Outcomes and Activities

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
<b>Health assessment</b>	Robust population health information available for planning health and community services	Availability of information for planning	<p>Monitor, analyse and report on key health determinants, including:</p> <ul style="list-style-type: none"> <li>alcohol related harm</li> <li>smoking status (e.g. from ASH Year 10 data and 2013 Census and WCPHO reports).</li> </ul> <p>Develop health status reports and health needs analyses for specific populations as required.</p> <p>Develop disease-specific reports for conditions of concern, eg Pertussis.</p> <p>Contribute to related work of partner organisations, eg WCPHO and WCDHB through the Healthy West Coast Workstream.</p>	<p>CPH, P&amp;F WCDHB and WCPHO</p> <p>CPH</p> <p>CPH</p> <p>CPH, WCPHO and WCDHB</p>

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
	Improved public understanding of health determinants	Availability of information to public	Disseminate information in existing and dedicated reports (eg WCDHB Quality Accounts, WCDHB website, WCDHB Community Report, print, broadcast and social media).	CPH, WCDHB Communications Team and WCPHO
<b>Surveillance</b>	Prompt identification and analysis of emerging disease trends, clusters and outbreaks	Timeliness and effectiveness of reports for identifying trends and outbreaks of concern	<p>Review, analyse and report on communicable diseases data, including via web applications and written reports (eg Public Health Information Quarterly, weekly reports on notifiable diseases and influenza –May to September).</p> <p>Produce disease-specific reports for communicable diseases of concern, eg Pertussis, other diseases causing outbreaks</p> <p>Review, analyse and report on other disease data (eg alcohol-related harm, and diseases relevant to West Coast context)</p>	<p>CPH</p> <p>CPH</p> <p>CPH, P&amp;F WCDHB</p>

## 4. PUBLIC HEALTH CAPACITY DEVELOPMENT

“enhancing our system’s capacity to improve population health”

### a. Strategies

- Developing and maintaining public health **information systems**.
- Developing **partnerships** with iwi, hapū, whānau and Māori to improve Māori health.
- Developing partnerships with Pacific leaders and communities to improve Pacific health
- Developing **human resources** to ensure public health staff with the necessary competencies are available to carry out core public health functions.
- Conducting **research, evaluation and economic analysis** to support public health innovation and to evaluate the effectiveness of public health policies and programmes.
- **Planning, managing, and providing expert advice** on public health programmes across the full range of providers, including PHOs, Planning and Funding, Councils and NGOs.
- **Quality management** for public health, including monitoring and performance assessment.

### b. Outcomes and Activities

	<i>the results that we’re working towards</i>	<i>how we’ll monitor progress towards the results</i>	<i>what we’ll do to get the result</i>	<i>who will do it</i>
<b>Public health information systems</b>	Public health information accessible to public health, partner organisations and the public	Availability and accessibility of public health information	Review and maintain public health information systems (common file structure; databases; intranet, extranet and public websites, including Healthscape, SIPHAN, Health Pathways, HIIRC, NIR; Community Health Information).  Contribute to development and implementation of national, regional and local public health information systems, including West Coast STI Surveillance System.	CPH, P&F WCDHB and WCPHO  CPH, WCPHO and WCDHB

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
<b>Partnerships with iwi, hapū, whānau and Māori</b>	Effective partnerships with iwi, hapū, whānau and Māori	Joint processes and initiatives	<p>Take a whānau ora approach to working with local iwi, hapū, whānau and Māori around</p> <ul style="list-style-type: none"> <li>-health information and analysis</li> <li>-proposals and policies with health implications</li> <li>-health determinants and outcomes.</li> </ul> <p>Develop and implement CPH Māori Health Plan.</p>	<p>CPH</p> <p>CPH (Māori Health Portfolio)</p>
<b>Partnerships with Pacific and other ethnic leaders and communities</b>	Effective partnerships with Pacific and other ethnic communities	Joint processes and initiatives	<p>Work with local Pacific and other ethnic leaders and communities around</p> <ul style="list-style-type: none"> <li>-health information and analysis</li> <li>-proposals and policies with health implications</li> <li>-health determinants and outcomes.</li> </ul> <p>Contribute to WCDHB ethnic specific plans as appropriate.</p>	<p>CPH</p> <p>CPH, P&amp;F WCDHB and WCPHO</p>
<b>Human resources</b>	A highly skilled public health workforce	Workforce Development Plans Record of training opportunities (Training calendar)	<p>Develop and implement CPH and South Island public health workforce development plans, including Health in All Policies and Whānau Ora approaches, and the new HPS direction for public health, other health sector and non-health staff.</p> <p>Maintain and contribute to SIPHAN-based training calendar.</p> <p>Explore/facilitate training for CPH staff in the Treaty, inequalities, Health in All Policies, Te Reo, Hauora Māori, and</p>	<p>CPH, SI Partnership (Capacity Building)</p> <p>CPH, SI Partnership (Capacity Building)</p> <p>CPH</p>

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			undergraduate and postgraduate study in public health as appropriate to staff development needs.	
<b>Research, evaluation, economic analysis</b>	Information available on priority public health issues and effectiveness of public health interventions	Research / evaluation reports and publications	Support public health research and evaluation, eg research into impacts of mine closures with a particular focus on improving Māori health and reducing health disparities.  Media releases about items of interest including Year 10 ASH data, alcohol trends, etc.  Pursue conference presentations and peer-reviewed publication where appropriate.	CPH  CPH  CPH
<b>Planning and advising on public health programmes</b>	Population health interventions are based on best available evidence and advice	Planning advice / reports	Develop reports and advice to support robust public health interventions, with a focus on improving Māori health and reducing health disparities, including evidence reviews, needs assessments, GIS analysis.  Contribute to national, regional and local public health infrastructure and supports, including Public Health Association, Health Promotion Forum, South Island Public Health Partnership, National Public Health Clinical Network, National Health Promoting Schools Group, New Zealand College of Public Health Medicine, Healthy West Coast Workstream, PASHANZ, West Coast Tobacco Free Coalition, Active West Coast, WCDHB Child Youth Health Committee and West Coast	CPH, P&F WCDHB and WCPHO  CPH

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			Immunisation Advisory Group.	
<b>Quality management</b>	A continuous improvement culture and robust quality systems for all public health work	Quality improvement plan and reports Accreditation results	Develop, implement and maintain the quality improvement plans including Internal Audit Plan and provision of information, training and support to staff. Present annual quality report to CPH SMG. Contribute to the WCDHB organisation-wide quality programme. Maintain IANZ accreditation of drinking water unit.	CPH  CPH  CPH  CPH/SIDWAU
	Effective regional delivery of public health core functions	Reports of South Island Public Health Partnership	Contribute to management and work groups as per <i>South Island Public Health Partnership Plan 2012-15</i> : Population health information Population health capacity building Issues-specific work groups Management group.	CPH

## 5. HEALTH PROMOTION

“enabling people to increase control over and improve their health”

### a. Strategies

- Developing public and private sector **policies** beyond the health sector that will improve health, improve Māori health and reduce disparities.
- Creating physical, social and cultural **environments** supportive of health.
- Strengthening **communities’ capacity** to address health issues of importance to them, and to mutually support their members in improving their health.
- Supporting **people to develop skills** that enable them to make healthy life choices and manage minor and chronic conditions for themselves and their families.
- Working in **partnership with other parts of the health sector** to support health promotion, prevention of disease, disability, injury, and rational use of health resources

### b. Outcomes and Activities

	<i>the results that we’re working towards</i>	<i>how we’ll monitor progress towards the results</i>	<i>what we’ll do to get the result</i>	<i>who will do it</i>
<b>Policy</b>	Policies beyond the health sector that will improve health, improve Māori health, and reduce disparities	New policies reflect health priorities	<p>Develop and make available resources to support health impact assessment (HIA) and a “health in all policies” (HiAP) approach.</p> <p>Support health and non-health sector staff with appropriate tools to support a HiAP approach, eg the IRPG (Integrated Recovery Planning Guide), Te Pae Mahutonga, HPSTED etc. Ensure these tools are available to all partner agencies.</p> <p>Support settings (workplaces, sports clubs, schools) to develop policies which support health.</p> <p>Engage with and co-ordinate efforts of</p>	<p>CPH (Policy)</p> <p>CPH (Policy)</p> <p>CPH</p> <p>CPH</p>

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			<p>key external agencies, including local iwi, to identify and support HiAP opportunities, including relevant Ministry of Education initiatives, housing, community resilience &amp; wellbeing in response to mine closures.</p> <p>Develop joint work plans with a range of stakeholders.</p> <p>Support and coordinate development of WCDHB and regional position statements and submissions on public health issues.</p>	<p>CPH</p> <p>CPH, SI Partnership (Population Health Information)</p>
<b>Social environments, media</b>	Communities educated and aware of health issues and healthy choices and behaviours	Communications Plan, record of campaigns and information delivered	<p>Develop and implement CPH public health communications plan.</p> <p>Deliver relevant and timely public health information and campaigns (including World Smokefree Day, Mental Health Awareness Week, National Heart Week. Matariki , Waitangi Day and Ask the Professional columns in the Messenger)</p>	<p>CPH</p> <p>CPH, WCDHB and WCPHO</p>
<b>Education settings</b>	ECECs, schools and tertiary settings that support healthy choices and behaviours	Education settings evaluation reports	<p>Develop and support health promoting schools initiatives reflecting national strategic direction and guided by the draft service specification 2013/14.</p> <p>Support school initiatives that promote student voice, healthy lifestyles and environments, emotional and mental wellbeing, improved attendance and hygiene, whānau engagement.</p> <p>Work with young people to encourage healthy choices e.g. Smokefree, alternatives to alcohol.</p> <p>Support the Buller Smokefree Youth</p>	<p>CPH, WCDHB PHNs</p> <p>CPH</p> <p>CPH</p> <p>CPH</p>

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			<p>Coordinator</p> <p>Support schools with information about alcohol and sexual health especially prior to the school balls being held.</p> <p>Continue to develop the Good Memories No Regrets campaign, raising awareness of safe sex and safe drinking.</p>	<p>CPH</p> <p>CPH</p>
<b>Workplaces</b>	Workplaces that support healthy choices and behaviours	Workplace initiatives and evaluation reports	<p>Work with priority workplaces to develop health promoting workplaces.</p> <p>Work with workplaces to encourage smoking cessation among staff.</p>	<p>CPH</p> <p>CPH and WCPHO</p>
<b>Marae and Other Māori Settings</b>	Marae and other Māori settings that support healthy choices and behaviours	Marae other Māori settings' initiatives and evaluation reports	<p>Work in a whānau ora approach with Māori in settings to support healthy choices and make healthy lifestyle changes.</p> <p>Settings include: Kohanga Reo, Rata Te Awhina Trust, Marae and Whare Oranga Pai.</p>	CPH
<b>Other community settings</b>	Other community settings that support healthy choices and behaviours	Setting initiatives and evaluation reports	<p>Work with event organisers and other community groups to develop health promoting settings e.g. Waitangi Day, Relay for Life, Waka Ama Festival, Kapa Haka festival.</p> <p>Support active transport through advocacy and membership on the WC Regional Transport Committee, West Coast Road Safety Committee. Support initiatives such as Bikewise, bike to work day and walk to work day.</p> <p>Identify ways of working with early childhood centres to promote Smokefree</p>	<p>CPH, WCDHB, WCPHO and Rata Te Awhina Trust</p> <p>CPH, WCDHB</p> <p>CPH, WCDHB and WCPHO</p>

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			lifestyles.	
<b>Community capacity</b>	Communities able to address health issues of importance to them	Changes achieved by community partnerships	Support communities to address priority issues, including community engagement initiatives and development of sound health promotion projects, eg community resilience & wellbeing in response to mine closures, supporting delivery of the Prime Minister's Youth Mental Health initiative.  Encourage community members to participate in submission-making process.	CPH, WCDHB and WCPHO  CPH
<b>Individual skills</b>	People with skills to enable healthy choices and behaviours	ABC coverage in primary and secondary care. Smoking quit rates Evaluation of other initiatives	Extend ABC coverage in primary and secondary care including quit card, hospital cessation service and Coast Quit. Deliver Aukati Kai Paipa as per the MoH contract.  Develop and deliver other lifestyle intervention support (eg Appetite for Life, Green Prescription, fall prevention programmes, breastfeeding support, cooking programmes).  Support mental wellbeing initiatives. Support delivery of the Prime Minister's Youth Mental Health initiative. Deliver safe sexual health training and resources to priority groups.	WCDHB, WCPHO and CPH  CPH  CPH, WCDHB and WCPHO  CPH, WCPHO (Primary Mental Health Team) and other WCDHB Teams/Services (e.g. Oral Health, Mental Health) CPH, Family Planning, WCDHB
<b>Healthcare settings</b>	Hospitals and community healthcare settings that support healthy choices and behaviours	Healthcare initiatives and evaluation reports	Work with hospital and community healthcare providers to develop health promoting settings (eg promoting active transport, Smokefree and healthy food	CPH, WCPHO and WCDHB

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			availability).	

## 6. HEALTH PROTECTION

“protecting communities against public health hazards”

### a. Strategies

- Developing and reviewing public health laws and regulations<sup>5</sup>.
- Supporting, monitoring and enforcing compliance with legislation.
- Identifying, assessing, and reducing communicable disease risks, including management of people with communicable diseases and their contacts.
- Identifying, assessing and reducing environmental health risks, including biosecurity, air, food and water quality, sewage and waste disposal, and hazardous substances.
- Preparing for and responding to public health emergencies, including natural disasters, hazardous substances emergencies, bioterrorism, disease outbreaks and pandemics.

### b. Outcomes and Activities

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
<b>Communicable disease control</b>	Reduced incidence of notifiable diseases Reduced incidence of influenza	Notifiable diseases and influenza rates and trends	Investigate cases and contacts as per protocols and Communicable Disease Control Manual 2012. Quality data entry in EpiSurv in a timely manner. Investigate outbreaks as outlined in the Outbreak Response Procedure and ESR guidelines Contribute to the development of shared South Island protocols.	CPH, WCDHB (PHNs, RNSs and Infection Control Service)  CPH  CPH, WCDHB (PHNs, RNSs and Infection Control Service)  CPH

<sup>5</sup> Public health legislation covers a wide variety of issues, including communicable disease control, border health protection, food quality and safety, occupational health, air and drinking water quality, sewerage, drainage, waste disposal, hazardous substances control, control of alcohol, tobacco and other drugs, injury prevention, health information, screening programmes, and control of medicines, vaccines and health practitioners.

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			<p>Provide public information and advice, including promoting immunisation and hand hygiene and condom distribution.</p> <p>Work with priority settings and communities to increase immunisation and improve infection control.</p> <p>Provide vaccinator and programme authorisations as per Medicines Regulations.</p>	<p>CPH, WCDHB Infection Control Committee, WCDHB Immunisation Advisory Group</p> <p>CPH</p> <p>CPH</p>
<b>Drinking water quality</b>	<p>Improved water quality and protection measures in community drinking water supplies</p> <p>Increased public awareness of the importance of drinking water quality</p>	<p>% of small and large community supplies complying with DWS</p> <p>% of community supplies with approved PHRMP</p> <p>Media coverage of drinking water gradings</p>	<p>Support local authorities to maintain catchment protection</p> <p>Review and prioritise all community supplies and work with prioritised communities and TLAs and regional bodies to improve water quality.</p> <p>Carry out functions and duties of a DWA as defined under the Health Act.</p> <p>Undertake Annual Survey</p> <p>Ensure water carriers are registered.</p> <p>Respond to high-risk transgressions.</p>	<p>CPH/SIDWAU</p> <p>CPH</p> <p>CPH</p> <p>CPH</p> <p>CPH</p> <p>CPH</p>
<b>Air quality</b>	Improved outdoor air quality	Air quality monitoring results	Work with stakeholders to identify and address potential health issues.	CPH
<b>Sewage</b>	Less disease caused by human contact with sewage	<p>Sewage-related outbreaks</p> <p>Environmental contamination events</p>	<p>Work with councils to promote and ensure safe sewage disposal.</p> <p>Work with councils to manage risks of unplanned contamination events.</p> <p>Liaise with councils to provide public advice on safe sewage disposal, sewage overflows, and waterways</p>	<p>CPH</p> <p>CPH</p> <p>CPH</p>

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			contamination.	
<b>Recreational water</b>	Less disease caused by contamination of beach, river and pool water	Waterborne disease outbreaks Beach and river water gradings	Agree recreational water protocols with councils annually and monitor implementation.  Work with councils to provide public information and advice, including health warnings and media releases.	CPH  CPH
<b>Housing</b>	Less disease caused by inadequate housing	Housing quality improvements	Work with national, local and community organisations to ensure warm and dry housing, especially for vulnerable groups (including identification and referral of vulnerable households).	CPH, WCDHB P&F and WCPHO
<b>Resource management</b>	Regional and local council resource management practices and decisions reflect health priorities	Evaluation of council decisions, implementation and enforcement	Work with councils to ensure health issues are identified and considered in RMA processes.  Assess and submit on consent applications.	CPH  CPH
<b>Hazardous substances</b>	Public protected from exposure to hazardous substances	Reports of public exposure	Work with councils and other agencies to reduce public exposure to hazardous substances, including responding to hazardous substance emergencies and complaints.  Conduct investigations where required. Provide public information and advice.  Process applications for application of vertebrate toxic agents under HSNO legislation.  Conduct field audits of VTA activity where appropriate.	CPH  CPH CPH  CPH

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
<b>Early childhood education centres</b>	Health hazards reduced in ECECs	Compliance with ECC Regulations, including infection control and lead exposure	Visit, assess and provide advice to ECECs. Work with councils to ensure appropriate placement of new ECECs.	CPH CPH
<b>Emergency preparedness</b>	WC districts prepared for emergencies impacting on public health	Effective emergency responses as required	Develop and maintain emergency plans. Deliver new MoH CIMS Health Emergency Management training package. Participate in Public Health exercise with Public Health South and Nelson/Marlborough Public Health. Contribute to the development of an integrated South Island Public Health Business Continuity Plan.	CPH, WCDHB, WCPHO CPH CPH CPH
<b>Tobacco</b>	Reduced tobacco sales, especially to minors Reduced exposure to second-hand smoke	Retailer display compliance at inspection. Retailer compliance during controlled purchase operations. Number and nature of workplace complaints.	Respond to public complaints. Complete education visit/compliance check prior to CPO/complaint. Inspect retailers and licensed premises for compliance in response to complaints. Conduct controlled purchase operations. Provide public and retailer information and advice	CPH CPH CPH CPH CPH
<b>Alcohol</b>	Less alcohol-related harm	ED presentations Police data (violence, road traffic crashes) Retailer compliance during controlled purchase operations	Set up ED alcohol data collection system. Monitor licensed premises. Investigate all on-, off-, club, and special licence applications and provide Medical Officer of Health reports to DLA where necessary. Conduct controlled purchase operations.	WCDHB, CPH CPH CPH CPH

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			<p>Contribute to training of Duty Managers</p> <p>Work with Police and DLA to support community alcohol initiatives, eg alcohol accords.</p> <p>Support councils' development of Local Alcohol Policies (LAP's).</p> <p>Work with event organisers, eg for Wildfoods Festival, to encourage development of Event Management Plans.</p>	<p>CPH</p> <p>CPH</p> <p>CPH</p> <p>CPH</p>
<b>Other</b>	Public protected from other health hazards	Evidence of harm to public	Undertake other regulatory health protection work using a risk-based approach, including six-monthly inspections of solaria as per May 2012 request.	CPH

## 7. PREVENTIVE INTERVENTIONS

“population programmes delivered to individuals”

### a. Strategies

- Developing, implementing and managing **primary prevention programmes** (targeting whole populations or groups of well people at risk of disease: eg immunisation programmes).
- Developing, implementing and managing population-based **secondary prevention programmes** (screening and early detection of disease: eg. cancer screening).

### b. Outcomes and Activities

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
<b>Immunisation</b>	Increased immunisation coverage, especially for priority groups	Immunisation rates	<p>Immunisation coordination - work strategically to improve immunisation coverage especially for tamariki and rangatahi.</p> <p>Immunisation promotion eg Pertussis vaccination among frontline healthcare workers, immunisation within ECECs and schools.</p> <p>Immunisation delivery.</p>	<p>CPH, WCDHB (P&amp;F, PHNs, RNSs, WCDHB Immunisation Advisory Group) and WCPHO</p> <p>CPH, WCDHB (Communications Team, PHNs and Outreach Co-ordinator) and WCPHO</p> <p>WCPHO, WCDHB (Outreach Co-ordinator, PHNs, RNSs)</p>
<b>Lifestyle interventions</b>	Systematic identification of and response to risk factors	Completeness of practice and hospital information on smoking, alcohol intake, and physical activity	<p>Explore a project to assist pregnant women to quit smoking.</p> <p>Implement the ABC Smoking Cessation Strategy in primary care and the community.</p> <p>Meet the smokefree health target.</p> <p>Meet PPP smoking targets, including smoking status documentation and</p>	<p>WCDHB,WCPHO,CPH</p> <p>WCDHB,WCPHO,CPH</p> <p>WCPHO,WCDHB</p> <p>WCPHO,WCDHB</p>

	<i>the results that we're working towards</i>	<i>how we'll monitor progress towards the results</i>	<i>what we'll do to get the result</i>	<i>who will do it</i>
			<p>delivery of brief advice and cessation support to smokers.</p> <p>Deliver Coast Quit and packages of care smoking cessation initiatives.</p>	WCPHO
<b>Screening and early detection</b>	Early detection of cancer	Coverage rates for cervical and breast cancer screening	<p>Participate in Cervical Screening Strategic and Working Groups to develop regional strategies to increase uptake.</p> <p>Maintain current levels of uptake of breast screening through a planned approach.</p>	<p>WCPHO, WCDHB</p> <p>WCPHO, WCDHB</p>
	Early detection of diabetes and cardiovascular disease	Coverage of diabetes and CVD screening programmes	Promote CVD risk assessments and diabetes screening in primary care settings and the community to increase uptake.	WCPHO,WCDHB

## 8. GLOSSARY/DEFINITIONS

ABC – Ask; Brief Advice; Cessation support. A memory aid approach to smoking cessation for health practitioners.

ACC – Accident Compensation Corporation

AHMC –Alcohol Harm Minimisation Co-ordinator

AKP - Aukati Kai Paipa – A face to face smoking cessation service, offered to Māori and their whānau.

ASH – Action on Smoking and Health – A charity working to eliminate death and disease caused by tobacco.

CIMS – Coordinated Incident Management System – The managed response to incidents within New Zealand amongst multiple agencies.

CPH – Community and Public Health

CPO – Controlled Purchase Operation

CSNZ – Cancer Society New Zealand

CVD – Cardiovascular Disease

DLA – District Licensing Agency

DWA - Drinking Water Assessment

DWS – Drinking Water Standards

ECC – Early Childcare Centre

ECEC – Early Childhood Education Centre

ED – Emergency Department

EpiSurv – National notifiable disease surveillance database.

ESR – Environmental Science and Research

GIS – Geographical Information Systems

Healthscape – The CPH database which records information about CPH activities, and relationships with other organisations.

Healthy West Coast Governance Group –a tripartite alliance of CPH, the WCDHB and WCPHO for joint planning and delivery of health promotion.

HIA – Health Impact Assessment – A systematic procedure to judge what potential (and sometimes unintended) effects a policy, plan, programme or project will have on a population and how those effects will be spread across that population.

HiAP – Health in All Policies

HIIRC – Health Improvement and Innovation Resource Centre. An online resource providing health information.

HPS – Health Promoting Schools

HPSTED – Health Promotion and Sustainability Through Environmental Design

HSNO – Hazardous Substances and New Organisms

HSTLC - Hazardous Substances Technical Liaison Committee

IANZ – International Accreditation New Zealand

IHR - International Health Regulations

IRPG – Integrated Recovery Planning Guide

ISLA – Immunisation Service Level Alliance

MOH – Medical Officer of Health

MoU – Memorandum of Understanding

NGO – Non Government Organisation

NIR – National Immunisation Register

PASHANZ – Promoters Advocating Sexual Health in Aotearoa New Zealand

PEGS - (Preparation, Education, Giving Up and Staying Smokefree) A smoking cessation programme promoted through Primary Care.

PHN – Public Health Nurse

PHO – Primary Health Organisation

PHRMP – Public Health Risk Management Plan

P & F – Planning and Funding

PPP – PHO Performance Programme

Pratique – The license given to a ship to enter a port which states that it is free from contagious disease.

Quality Accounts – Reports provided by health providers on the quality of their services, presented in a similar way to financial accounts showing how an organisation has used its money.

RMA – Resource Management Act

RNSs – Rural Nurse Specialists

RW – Recreational Water

SIDWAU – South Island Drinking Water Assessment Unit

SIPHP - South Island Public Health Partnership

SIPHAN – South Island Public Health Analyst Network

SMG – Strategic Management Group

STI – Sexually Transmitted Infection

Te Pae Mahutonga – A model for Māori Health Promotion. Te Pae Mahutonga is the Māori name given to the constellation of the Southern Cross: four stars with two stars as pointers.

TLA – Territorial Local Authority

VTA – Vertebrate Toxic Agent

WCPHO – West Coast Public Health Organisation

WCDHB – West Coast District Health Board

## 9. APPENDIX

### West Coast Prevention/Early Detection and Intervention Targets 2013-2014

	Community		Primary Care		Secondary Care	
<b>Tobacco</b>						
<b>Goal</b> Increase the number of successful quit attempts and reduce smoking prevalence amongst the West Coast population.  <i>To reduce the major risk factor of long-term conditions and inequalities in health outcomes, particularly for Māori and Pacific people, who have disproportionately higher smoking rates.</i>	Three CPOs carried out and appropriate enforcement action taken as necessary.	CPH	90% of enrolled patients who smoke and are seen in General Practice, will be provided with advice and help to quit.	WCPHO WCDHB	95% of hospitalised smokers will be provided with advice and help to quit.	WCPHO WCDHB
	75% of year 10 students have never smoked	CPH	4 ABC training sessions are delivered in primary care. 100% of community pharmacies are delivering the ABC.	WCPHO WCDHB	Progress is made towards providing 90% of women who identify as smokers at the time of confirmation of pregnancy advice and support to quit.	WCPHO WCDHB CPH
	≥100 people enrol with the Aukati Kai paipa smoking cessation programme.	CPH	>250 people enrol with the Coast Quit smoking cessation programme	WCPHO		
<b>Alcohol</b>						
<b>Goal</b> Reduce the harm caused by alcohol.  <i>To reduce a major risk factor of harm and</i>	3 monitoring visits per year to high-risk premises	CPH				
	95% of duty managers trained complete the Host Responsibility	CPH				

	Community		Primary Care		Secondary Care	
<i>long term conditions</i>	course.					
	Programmes to reduce the harm caused by alcohol are identified in the hospital and community health settings.					WCDHB WCPHO CPH
<b>Nutrition and Physical Activity</b>						
<b>Goal</b> Empower people and communities to take positive action to improve health & wellbeing. <i>To support healthy eating and physical activity and reduce the risk factors of long-term conditions.</i>	Five community nutrition courses delivered	CPH	360 Green Prescription referrals  74% of infants are fully or exclusively breastfed at 6 weeks and 40% at 6 months.  17 Mum-4-Mum Breastfeeding Peer support counselors trained	WCPHO  WCPHO WCDHB  WCPHO	152 mothers referred to lactation support and specialist advice consults in the community.  96% of mothers are breastfeeding on hospital discharge.	WCDHB  WCDHB
<b>Immunisation and Vaccine-Preventable Disease</b>						
<b>Government expectation</b> 85% of eight months olds will have their primary course of immunisation (six weeks, three months and five months immunisation events) on time by July 2013, 90 % by July 2014 and 95% by	Provide public information and advice, including promoting immunisation and hand hygiene.	CPH	85% of all West Coast children fully immunised at eight months by July 2013 and 95% by December 2014.	WCPHO WCDHB		
	Work with priority settings and communities to increase immunisation and improve infection control	CPH	95% of all West Coast children fully immunised at aged two.	WCPHO WCDHB		
	All cases and contacts of vaccine preventable disease investigated	CPH	90% of newborns enrolled with a GP or Well Child Tamariki Ora	WCPHO		

	<b>Community</b>		<b>Primary Care</b>		<b>Secondary Care</b>	
December 2014.	per protocols		provider by 2 weeks of age.	<b>WCDHB</b>		
<b>Goal</b> Decreased number of cases of vaccine-preventable diseases in the community.	All outbreaks of vaccine preventable disease investigated and control measures instituted as outlined in the Outbreak Response Procedure and ESR Guidelines.	<b>CPH</b>				