



## MINUTES

### EASTERN WHEATBELT DISTRICT HEALTH ADVISORY COUNCIL (DHAC)

Date: Wednesday 20 April 2022

Time: 10:00am – 11.30pm

Merredin Health Service

**MICROSOFT TEAMS MEETING**

<b>Attendees:</b> Sandra Waters – A/Chair (Kununoppin & Districts Representative) Subin Daniel (Acting Ops Manager Eastern Wheatbelt) Chris Cox (Merredin HSM/DoN) Dianne Kelly (Cunderdin Representative) Zoe Ashby-Deering (Primary Health Manager) Philip Negri (Bruce Rock Representative), Romolo Patroni (Merredin Representative) Marie Foster (WAPHA Regional Coordinator Wheatbelt)	<b>Secretariat:</b>  Janae de Lacy A/PA Eastern Wheatbelt
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<b>Apologies:</b> Jannah Stratford (Wyalkatchem Representative) Lynne White (Kellerberrin Representative) Janine Gliddon (Regional Aboriginal Health Consultant) (Narembene Representative), (Quairading Representative) (Southern Cross Representative)
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<b>Visitors:</b> Melita Jensen
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<b>Cultural Acknowledgement</b> I respectfully acknowledge and pay my respects to the Aboriginal custodians of the many traditional lands and language groups of Western Australia. We also respectfully acknowledge the wisdom of the past, present and emerging Traditional Owners of this land on which we are meeting today, the Noongar people. It is a privilege to be standing on Noongar Country.
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Presentations	Presenter	Time

#	Agenda Item Title	Speaker	Papers	Action	Time
1.0	Welcome and Apologies				09:30
1.1	<ul style="list-style-type: none"> <li>Welcome and Apologies</li> <li>Acknowledgment of Country</li> </ul>				
2.0	Review of Minutes & Action Register				
2.1	<b>Previous Minutes dated February 2022:</b> <ul style="list-style-type: none"> <li>Endorsed by Sandra Waters</li> </ul>				
3.0	Actions Arising				
3.1	Action 5.12: J. de Lacy to contact Jannah – no reply received – to be followed up for next meeting				
4.0	New Business				



4.1	<p>Eastern Terms of Reference</p> <ul style="list-style-type: none"> <li>• DHAC TOR Template displayed by Z. Ashby Deering</li> <li>• Group discussed and edited to suit Eastern</li> <li>• Meetings changed to state bi-monthly</li> <li>• Membership discussion showed the importance of an aboriginal community representative as Janine Gliddon is currently on leave. Indigenous membership is to be actioned</li> <li>• M. Foster nominated Ricky Pickett a locally respected community member with great interfamily connections.</li> <li>• Action: Janine Gliddon to be contacted to confirm if attendance is still wanted or if a new representative will be suitable</li> <li>• Dependant on J. Gliddon's response, S. Daniel may nominate another representative</li> </ul> <p></p> <p>eDoc - WB - Eastern Wheatbelt DHAC Meeting</p>
5.0	<b>Standard Items for Discussion</b>
5.1	<p><b>Operations &amp; Regional Report</b></p> <ul style="list-style-type: none"> <li>• No report due to late invite – apology was given</li> <li>• Provided a verbal update on his position as Ops Manager, acting until June.</li> <li>• S. Daniel to send close contact document and J. deLacy to circulate with minutes</li> </ul> <p></p> <p>Please add to DHAC minutes.msg</p>
5.2	<p><b>Medical &amp; Nursing Report</b></p> <ul style="list-style-type: none"> <li>• No report due to late invite – apology was given</li> <li>• Provided group with a farewell message as C. Cox is leaving for Harvey 29 April 2022</li> <li>• Group was thanked for their ongoing support and their strong links with the community.</li> <li>• RATs have been introduced to ED, the community have responded well to ongoing concierge at both reception and ED.</li> <li>• Theatre dates and relative SARS restrictions have been discussed and will be advised to group upon confirmation</li> <li>• Antiviral medication implemented to the Wheatbelt community explained by M. Jensen</li> <li>• DHAC group members individually farewelled Chris and thanked him for his guidance during his time in Merredin, wishing him all the best.</li> </ul>
5.3	<p><b>Primary Health Report</b></p> <ul style="list-style-type: none"> <li>• Report received and delivered</li> <li>• Short face to face appointments in place, Telehealth appointments are prioritised</li> <li>• Helpful COVID19 close contact updates to be sent with minutes</li> <li>• Z. Ashby-Deering to continue circulating vaccination clinic posters to HSMs and DHAC members</li> <li>• Mobile phones available for isolating individuals</li> <li>• Resource bags available for aboriginal community members</li> </ul> <p></p> <p>Primary Health Update_ DHAC.msg</p>
5.4	<p><b>Bruce Rock Report</b></p> <ul style="list-style-type: none"> <li>• P. Negri spoke with K. Govender confirming no COVID community transfer in Bruce Rock</li> <li>• Staffing reported with junior nurses upskilling and registered nurses recruited</li> <li>• COVID delays put Memorial House at a stand still with building prices escalating</li> <li>• St John are struggling to recruit members</li> </ul>

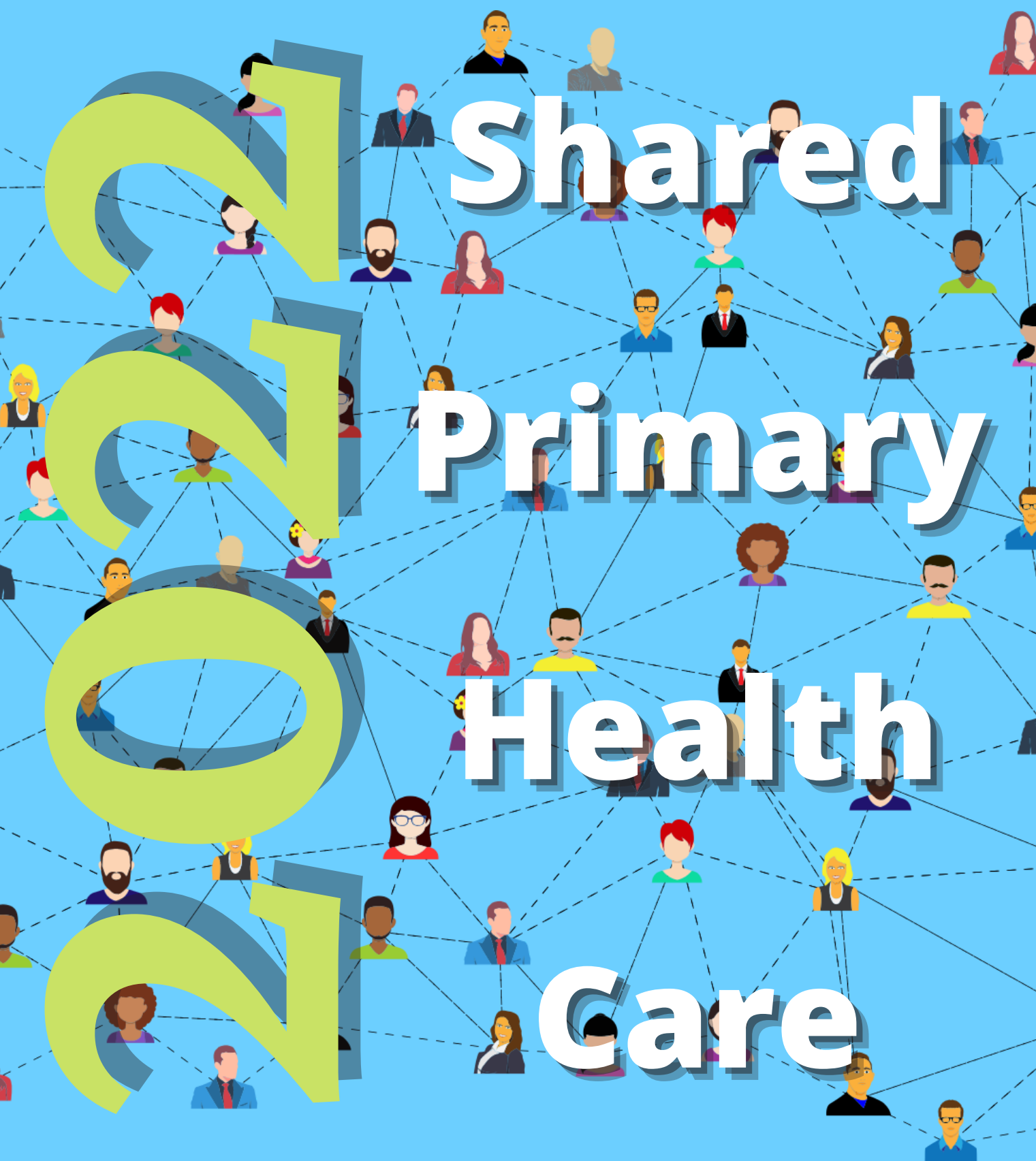


5.5	<b>Cunderdin Report</b> <ul style="list-style-type: none"> <li>LHAG meeting reported</li> <li>Senior group days continue with a planned trip to Nungarin Museum and Mangowine, which has received a high amount of interest.</li> <li>Cunderdin-Pingelly review of the old hospital movements are in process, with building to remain standing until feedback is received.</li> <li>Lions Club emergency wallet received and to be distributed as a great resource for ambulance workers</li> <li>Accreditation to take place August 2022</li> <li>Health care statistics offered to be sent to J. deLacy</li> <li>4 full time palliative care nurses to start in Cunderdin soon</li> <li>D. Kelly placed apology for June meeting</li> </ul>				
5.6	<b>Kellerberrin Report</b> <ul style="list-style-type: none"> <li>No report received</li> </ul>				
5.7	<b>Kununoppin &amp; Districts Report</b> <ul style="list-style-type: none"> <li>No report given due to no recent LHAG meeting</li> </ul>				
5.8	<b>Merredin Report</b> <ul style="list-style-type: none"> <li>Regular COVID vaccination clinics continue</li> <li>Merredin CRC are supplying free RAT tests to community</li> <li>Berringa main door issues and complaints discussed. C. Cox provided clarification on repair plans with installation of sliding door. C Halton to review the new replacement meets the standard needs of quality and safety.</li> </ul>				
5.9	<b>Narembeen Report</b>				
5.10	<b>Quairading Report</b>				
5.11	<b>Southern Cross Report</b>				
5.12	<b>Wyalkatchem Report</b> <ul style="list-style-type: none"> <li>Jannah Stratford to be contacted</li> <li>S. Daniel (also Wyalkatchem HSM) reported on the concierge process at the hospital, as Koorda Nurses Post is in a shire building WACHS concierge precautions cannot be actioned, only upon arrival of patients to medically leased rooms.</li> <li>Reported staffing is stable and junior staff are being supported</li> <li>There is hope to upgrade accommodation through the Shire</li> </ul>				
6.0	<b>Standing Items for Noting /Information</b>				
6.1	<b>Correspondence</b> <ul style="list-style-type: none"> <li></li> </ul>				
6.2	<b>Site Compliments &amp; Complaints</b> <ul style="list-style-type: none"> <li></li> </ul>				
6.3	<b>Wheatbelt Mental Health Consumer Advisory Council</b> <ul style="list-style-type: none"> <li>Representative for Mental Health suggested to become DHAC member</li> <li>Nathan Coleman was suggested by M. Foster and S. Daniel</li> <li>S. Daniel to contact Northam to request N. Coleman as Mental Health Representative</li> </ul>				
7.0	<b>Other/New Business or Late Items</b>				
7.1	<b>DHAC Member Invite to Eastern Management Team (EMT) Meetings:</b> April 27 May 25 June 22 July 27 August 24 September 28 October 26 November 23 December 21 (possible date change for Dec)	W Hooper		Information	



7.2	<b>WAPHA Report</b> <ul style="list-style-type: none"><li>• Marie Foster, the WAPHA regional coordinator: a new member of the DHAC group, delivered a report discussing their planned online forum occurring monthly, to focus on a specific health topic per session. Forum will provide support, share ideas and discuss public health plans.</li><li>• Draft resource displayed 'Primary Health Calendar', M Foster to send draft to be distributed with minutes.</li><li>• Wheatbelt suicide prevention project organised by Jo Drayton mentioned</li><li>• M. Foster to send link and to be distributed with minutes</li><li>• Wheatbelt Suicide Prevention Project (and grant opportunity for LGAS and community groups) link: <a href="https://phexchange.wapha.org.au/wheatbelt-suicide-prevention-project">https://phexchange.wapha.org.au/wheatbelt-suicide-prevention-project</a></li><li>• Group decided to allocate WAPHA report as a standing item</li></ul>				
8.0	<b>Next Meeting</b>				
8.1	June 2022 Merredin Health Service Meeting Rooms				

# WHEATBELT



# CALENDAR

**Thankyou for downloading this resource and being an important link amongst the wider network of systems change!**

## **Overview & aim**

Optimal health is everyone's business which, evidence shows, is best achieved when all levels of government, providers and communities work in partnership with each other. This calendar aims to promote a region-wide systems approach to help build local capacity, health literacy, and share information that may support improved community health outcomes emphasising the importance of connection with GP's and primary health care.

## **How does this project relate to the Wheatbelt needs and rural health?**

People living in rural and remote areas of Australia often face many challenges and generally experience poorer health outcomes compared to those living in major cities. This resource is tailored specifically to Wheatbelt health needs and has been developed collaboratively by people who live and work locally, and are passionate about helping to improving these outcomes together.

## **What is Primary Health Care is and why is it important?**

There are many factors and social determinants that contribute to our state of health. Primary Health Care has an important role to play in shaping our wellbeing so we can enjoy the best possible quality of life in the places where we live, and may even prevent avoidable conditions or hospital admissions. It starts with our environments and initial care we enjoy in the community. Engagement with General Practice and health providers are key although many businesses, local organisations and individuals provide vital support also.

## **Who is this resource for and how can it be used?**

The links and campaigns in this calendar can be shared and displayed by Local Governments, Community Resource Centres, organisations and community groups as well as by Pharmacies and health providers as part of a wider common agenda. The purpose is to support the coordinated promotion of information to help address identified, data-informed local health priority areas, with a preventative focus and a primary health care approach.

This resource aligns to existing, ongoing public health activities and campaigns. It is intended to supplement a more comprehensive calendar for clinical use, being co-designed together with relevant regional stakeholders, service providers and clinicians. When combined, it is hoped that utilisation of these resources will have a wide reaching cumulative effect supported by a whole of community effort for positive change.



# 2022 WHEATBELT SHARED PRIMARY HEALTH CARE CALENDAR



## January Primary Health

### NEED:

- Primary Health Care is integral to maintaining optimal wellbeing in the community, throughout life. Health literacy is a key aspect to better health outcomes.

### AIM:

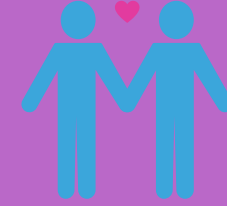
- To increase understanding of what Primary Health Care is, why it is important and promote people linking in with General Practice.

### CAMPAIGNS & PROMOTION:

- [WHO Primary Health Care Communication Material](#)
- [Australia's health landscape](#)

### INFO & RESOURCES:

- [ACSQHC - Tips for Safer Health Care](#)
- [ACSQHC - Question Builder](#)
- [Wellmob Website](#)



## February Sexual Health

### NEED:

- Currently, there is a state-wide public health response to infectious syphilis in WA prompting a need for community awareness and action.

### AIM:

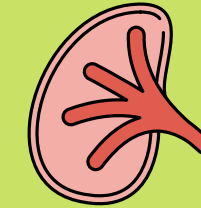
- To promote safe sex, awareness of sexually transmitted infections and destigmatization/normalisation of seeking testing and support.

### CAMPAIGNS & PROMOTION:

- [National Condom Day 14th Feb](#)
- [WA Sexual Health Week 14th - 21st Feb](#)
- ['Healthysexual' sexual health awareness](#)
- [Young Deadly Free](#)

### INFO & RESOURCES:

- [Sexual Health Quarters \(SHQ\)](#)
- [WA Syphilis outbreak response](#)



## March Kidney Health

### NEED:

- The Wheatbelt population has a higher prevalence of risk factors related to Chronic Kidney Disease. Up to 90% of kidney function can be lost without symptoms and is often preventable if detected early.

### AIM:

- To improve kidney health through awareness of risk factors, increased screening, early detection and referral to regional support services.

### CAMPAIGNS & PROMOTION:

- [National Kidney Week 7th - 13th March](#)

### INFO & RESOURCES:

- [Kidney Health Australia](#)
- [Aboriginal and Torres Strait Islander people resource library](#)



## April Find Cancer Early

### NEED:

- Cancer is the highest burden of disease in WA. Data shows people living in regional areas are diagnosed later and have poorer outcomes.

### AIM:

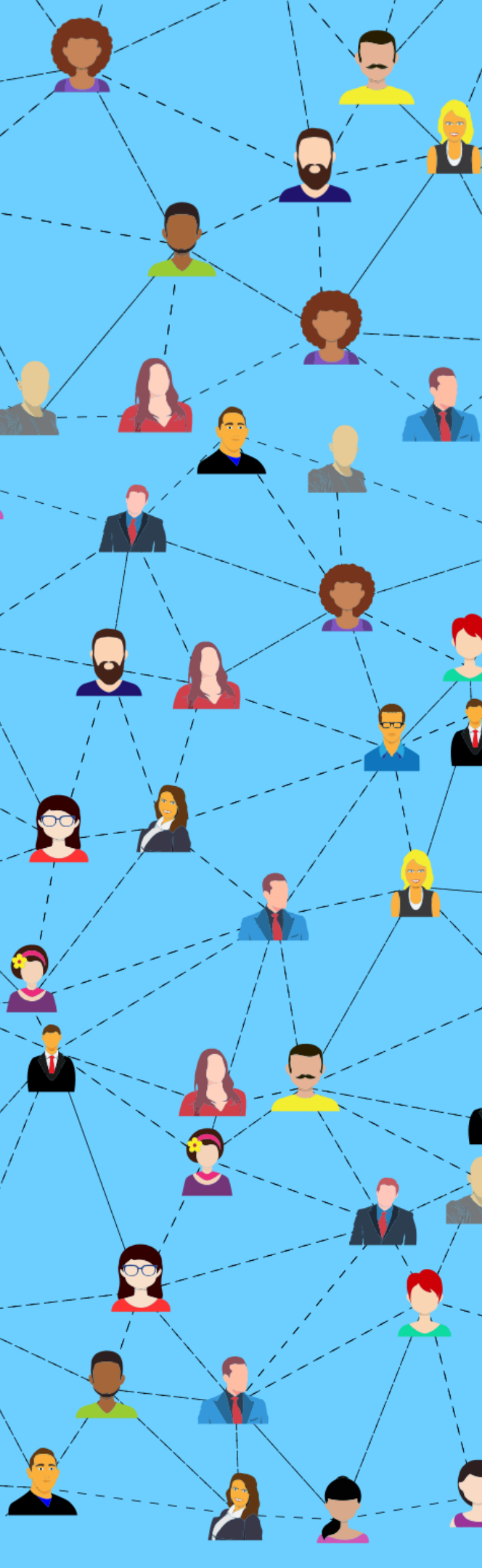
- To improve cancer outcomes for regional Western Australians by increasing cancer symptom awareness and encouraging people to visit their doctor, clinic nurse or Aboriginal health worker earlier.

### CAMPAIGNS & PROMOTION:

- [Find Cancer Early Campaign](#)

### INFO & RESOURCES:

- [Cancer Council WA](#)
- [W/B Regional Education & Support](#)



## Further suggestions and ideas for using this resource and the information contained in the links.

### Share to social media

Many of the campaign links will have informative infographics, social media tiles and email banners ready for sharing with your networks. Often this is the simplest and cheapest way to raise awareness and facilitate community education with a wide reaching impact.

### Put up a poster

Whether its at a workplace, in the lunch room, a public noticeboard or on the back of the loo door, putting up a poster or A4 printable wherever it may be seen is an easy and effective way to promote health messages.

### Create an enticing visual display

Information in an effective visual format can often be processed better and attract attention of your target audience in a range of fun and creative ways. Some examples include creating a feature wall or a window display in a frequented/public facing area with printed resources and eye catching props.

### Apply for a grant

There are several grant opportunities available depending on the type of organisation, eligibility criteria and activity planned. You can check with your local Community Resource Centre about assistance with applications or visit the [Healthway funding page](#) or [Healthy Communities Program](#).

### Host an event or wear a colour in support.

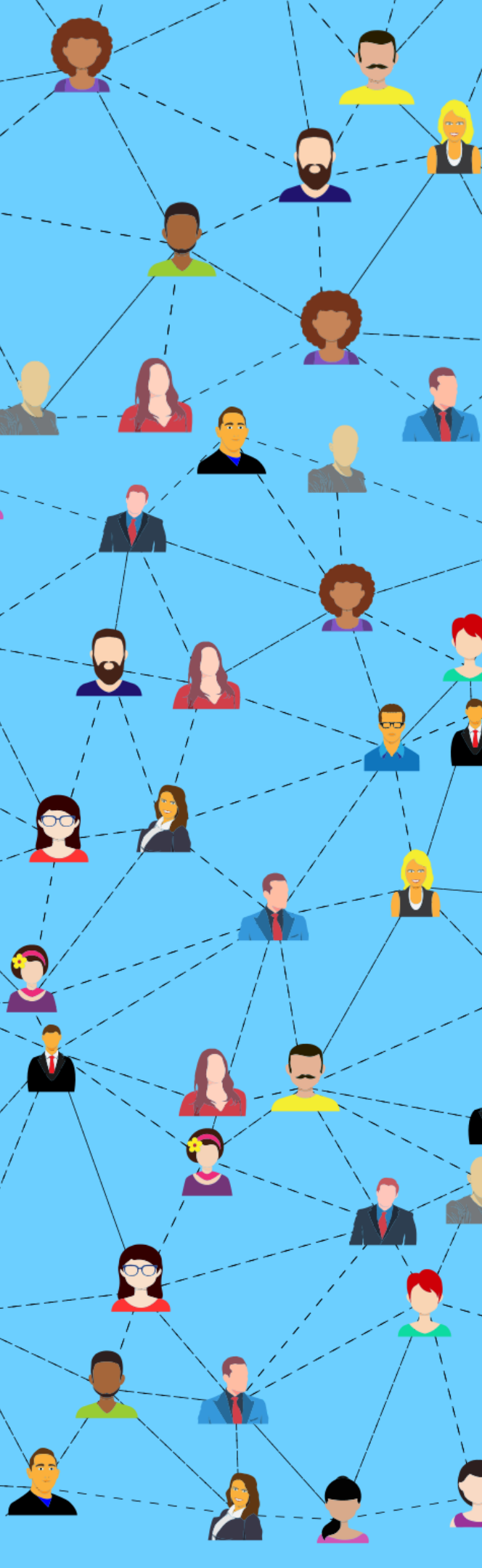
Events can be a fun and engaging way to connect and raise awareness either amongst friends or in the community. Some campaigns provide event guides with ideas and inspiration, or you can create your own. Even something as simple as wearing a colour or accessory to draw attention to the health topic can be a way to arouse curiosity or start a valuable discussion.

### Engage local health champions or community groups

Community groups and volunteers are a vital part of community support networks. They also form important links with local organisations, businesses and services. Many may have lived experience or act as community champions whose partnership and advocacy are valuable to further promotion and positive health outcomes.

### Align to your local government public health plan

Under part 5 of the WA Public Health Act Public, all local Governments are required to engage in the public health planning process. This process strengthens a whole of government and community partnership, empowering people to live healthy lives. Local health plans are encouraged to take a preventative focus to population health needs of the community and at a granular level. This resource is based on identified regional priority areas and designed to make it easy to assimilate with LGA activities in this space.



**For more information on respective topics, please see the regional contacts below**

**Primary Health Care - Melissa Spark**

Regional Manager - Wheatbelt, WA Primary Health Alliance

[Melissa.Spark@wapha.org.au](mailto:Melissa.Spark@wapha.org.au)

1300 855 702

**Primary Health Care - Marie Forster**

Regional Coordinator - Wheatbelt, WA Primary Health Alliance

[Marie.Forster@wapha.org.au](mailto:Marie.Forster@wapha.org.au)

0429 160 959

**Sexual Health - Di Rifici**

Clinical Nurse Manager – Communicable Disease, Wheatbelt

WA Country Health Service

[Dianne.Rifici@health.wa.gov.au](mailto:Dianne.Rifici@health.wa.gov.au)

08 9690 1300

**Kidney Health - Leisl Pampling**

Acting Clinical Nurse Consultant - Regional Renal Service, Wheatbelt

WA Country Health Service

[Leisl.Pampling@health.wa.gov.au](mailto:Leisl.Pampling@health.wa.gov.au)

08 9690 1300

**Find Cancer Early - Kaylor Andrews**

Regional Education Officer - Wheatbelt, Cancer Council WA

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0408 926 259