

Number 87

July/August 2017



Grey Power Wanganui Inc Newsletter

Affiliated to Grey Power New Zealand (Inc)
www.greypower.co.nz

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July/August 2017

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Committee	Portfolio
Gloria Barr	Positive Aging 027 253 1148
Graham Adams	Local Issues 345 4559
Caryl Blomkvist	Health 345 8694
Anne Taylor	Public Meetings 344 6197
Vern Hill	Local Issues 343 8135
Marie Gorinski	Legal Issues 343 1958

Leadership Changes at Grey Power Wanganui AGM

President Don Burney and Treasurer/Newsletter editor Graham Adams stepped down from their positions at the AGM on June 8th. Don was thanked for his service to the organisation by incoming President Sharron Callaghan. Graham will be taking a well deserved rest from his tireless work for Grey Power over the past ten years. He has been “Mr Grey Power” in Wanganui and has seen the branch grow to one of the strongest in the country. Thanks for all your efforts on our behalf Graham and thankfully we will still have your expertise on the committee.

There are several new officers and committee members. Each committee member has a portfolio: an area of interest where they will keep informed on new developments and matters of concern to members. They will report back to the committee and members.

In the Newsletter

- Your new Wanganui Grey Power Committee
- Message from the President
- WDHB CEO Julie Patterson talks to Grey Power
- Hear from Whanganui Political Candidates
- Grey Power Tips and Deals
- We need your email address

Next Public Meeting

Thursday 7th September

Open to All

Bring your Questions for the Political Candidates

(see notice on page 7)

www.greypowerwanganui.co.nz

From the President

We live in a real world that slows down for nobody, and when working full time some years ago I often thought how wonderful it would be to have all the time in the world to do anything. The fact is I am busier now than when I worked, and this is also true for your committee as we have hit the ground running after the AGM. Your committee is a wonderful group of people who are passionate about keeping the aims and objectives of Grey Power but also adding in the local issues that affect all mature citizens living in our lovely city.

Unfortunately along with a successful organisation, problems arise that take time and money to iron out. With the growth of our membership to over 2000 and still growing we are in a strong position nationally, however the printing and sending out of our newsletters is major concern of our committee, due to the amount of time and money this is taking. Over the next 12 months we will gradually change over to email and this will depend on getting all the correct email addresses. So I ask you all check the section at the bottom of the page to make sure we have the correct email address. There is sure to be some hiccups along the way so we ask for your patience in changing over. The members that do not have a computer or access to the internet will still have the newsletter sent by post.

In this newsletter we also have most of the answers we received from Julie Patterson CEO of the Wanganui District Health Board, in a long committee meeting she attended after we raised concerns regarding some areas of the hospital. The following week we had a meeting with the Chairman of the Wanganui District Disability and Community Advisory Board Stuart Hylton. Grey Power was astounded to find out that other groups and cultures were represented on the board but there is no one representing the older person in Wanganui when we have a large proportion of the population over the age of 65 years. We have written but are yet to hear back on this from either the Chairman of the Board or the Chairperson of the WDHB, so watch this space.

We now have new Wanganui Grey Power brochures with the membership form inside them. If you know anyone who would like to join, or require one of the committee to come and discuss Grey Power at a group setting please let us know and do take a brochure.

We are excited to hold "Meet the Candidates" at the next Public Meeting and we look forward to you joining us at 1.30pm on the 7th September at the Baptist Church.

Stay Well & Take Care

Sharron Callaghan
President.

For better communication with members we need accurate email addresses.

- If we have your address you will have received an email from Grey Power recently: no further action required
- If you have email and did not receive one from Grey power Please send an email to newsletter editor jimcall@xtra.co.nz with your name in the email. We will pick up your address from the header.
- If you don't have email, you will continue to receive communications by post.



Advertising rates for the GP Newsletter

The Newsletter reaches over 2000 members of Gray Power Wanganui

Small (70mm x 90 mm)	Single issue: \$60	Four issues \$120	Other sizes, contact
Quarter page	Single issue: \$75	Four issues \$150	the Editor
Half page	Single issue: \$150	Four issues \$300	

Wanganui Grey Power Committee 2017 -2018



President : Sharron Callaghan

Retired in 2011 Sharron has been a member and on the committee of Grey Power a number of years. She has been on the NZ board for Neighbourhood support and on the committees and boards of numerous organisations here.

She joined Grey Power as the aims and objectives are ones that she truly believes in and are for the good of all people 50 and over.



Vice President: Caryl Blomkvist

Carol and her husband have lived Whanganui for the last 17 years, before that in various places including overseas. She has worked as a registered nurse, a lawyer and for herself as an employment advocate. Carol joined the Grey Power committee to work with others and to promote and advocate for senior citizens.



Treasurer : Jack Ager

Jack has held offices of Treasurer and Vice President in the past. Worked as registered plumber & drainlayer in Taranaki, Tauranga, Queenstown and Cromwell. He retired to Wanganui in 2003 and has been a Grey Power member ever since.



Membership Secretary: Cynthia Adams

Cynthia has held this position and the full secretary position for the past seven years. She is a long time resident and well known sportswoman in the city. With husband Graham they have been the mainstay of Wanganui Grey Power for many years.



Newsletter Editor : Jim Callaghan

Jim was born in Wanganui and went to 'Tech'. Left in 1956 and returned after a career in high school teaching, to retire here in 2002. He has been a member of Grey Power for 20 years. He was Chairman of the Board of Age Concern for several years and more recently, President of Wanganui Rotary.

More Committee Profiles in the next newsletter

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Chief Executive of WDHB meets GP Committee

Julie Patterson kindly agreed to our invitation to speak to Wanganui Grey Power committee about matters of concern to our members. It was the first meeting of your new committee and a very interesting meeting it was.

Ms Patterson began by giving an outline of the environment under which the DHB operates.



Funding:

The total budget for the hospital part of the health system is decided by Government. This is then divided up among all NZ DHBs

In the first instance the division is based on the population each DHB services.

These figures are then modified according to any special conditions faced by individual DHB'S, particularly in relation to the population demographics of each region. These are

- (i) Age: If a region has more elderly people there is more funding
- (ii) Ethnicity: Maori/ Pacifica/Refugees have higher health needs (irrespective of socioeconomic status), so there is more funding.
- (iii) Smaller adjustments are made relating to rural numbers, level of wealth and gender.

Wanganui benefits from most of these.

The DHB does not have a lot of choice on how its budget is divided up. National standards of service have to be provided and targets met. If DHBs believe there should be more funding in a particular area they can only achieve that by lobbying Government for a change to the rules.

Provision of Specialist Services

To provide a specialist service such as urology, Women's health, orthopaedics, paediatrics etc, the service must be available 24/7. To achieve this there must be at least 4 sets of staff. Doctors can only be scheduled to be available 1 night in 4 and 1 weekend in 4. They need a life like the rest of us. If the DHB area's population does not provide enough patients to fully employ 4 specialists in any given area then there are problems providing that service. It is not just about the cost, it is also about keeping the specialists fully employed. They need to be working at their specialist area to keep "skill levels" at a high standard. Hence the need to use the big city hospitals for areas such as cardiac surgery, cancer and specialist

children's services. Wanganui DHB pays these hospitals for the service. On the other hand, some of the big city hospitals have more than enough patients for some services such as orthopaedic. Wanganui DHB can then cater for some of these patients and receive payments. These payments are significant as the charge is for the whole service and much of the cost such as nurses, equipment etc are part of normal running costs anyway. Only the mental health service is outside this problem. The budgeting for mental health is "ringfenced" and defined by national policy

Are Whanganui patients missing out ?

The DHB is very careful that local patients are not disadvantaged. There is a national assessment procedure for such things as knee and hip replacement. The DHB must meet nationally set targets in dealing with these cases. Ms Patterson assured us that meeting these targets is the first priority and then accepting cases from other areas is done if there is sufficient further capacity.

For knee and hip replacement the target is to complete surgery within 4 months of the assessment and currently the DHB is meeting this target.

The Booking System

The national assessment procedure used by all DHB's is comprehensive and is carried out by a relevant specialist. The procedure takes in to account both "need" and "ability to benefit". Need meaning the seriousness of the disability and its potential for getting worse over time, and "ability to benefit" meaning will the operation provide a significant improvement for quality of life? If a case is accepted the wait should not be more than four months. It is **not** true that if the surgery is not completed in four months for some reason then there is another four month wait. For example surgery can be delayed if some other condition such as dental treatment or some infection develops which makes surgery unwise. On the other hand if the surgery is postponed because the patient decides to go on holiday then there could well be another waiting time.

Complaints:

There is a comprehensive complaints service at the hospital. Complaints may be made by phone (Just ask for “complaints”), by letter or by visiting the complaints officer at the hospital (get directions in the foyer). Ms Patterson assured us that complaints are taken very seriously and that she personally signs off every complaint received. She was adamant that the ‘truth will be told’. There is a code of ‘patient rights’ and copies are posted in most waiting areas in the hospital.

Should the complaint not be resolved to the patient’s satisfaction and that it is felt the code has not been complied with, there is further recourse to the Health and Disability Commissioner or to an independent advocate

There is also further protection. A group called Te Pukea (“Voice of the people”) has been set up in the last eighteen months to consider all aspects of patients interaction with the hospital from design of patient areas to interaction with staff. The group has people of expertise including GP’s who are available to represent those who feel they have not had a satisfactory experience with the hospital. The complaints officer can put you in contact with this group

Discharge times

There has been some comment recently about patients being discharged from hospital at a time when they might have little care at home. This should not happen. Patients will not be discharged after 5 pm. Confusion often arises when the discharge is from the Emergency Department. This service is to treat emergency cases and to make a decision whether the patient should be admitted. If they are not to be admitted, they go home, and this may be at an inconvenient hour. It is expected that ED staff will enquire if there will be any problem.

Emergency Services

When a patient arrives at the Emergency Department, a decision is made whether the patient requires ED treatment or the sort of treatment usually carried out by a GP, including straightforward fractures. If a “GP” service is required they are referred to WAM: Wanganui Accident and Medical services. This is a private service and not part of the DHB system, although it is on Hospital premises. Complaints need to be referred to them.

Dialysis

Renal service is one of those services that are not offered at WDHB. Instead patients are sent to Mid Central in Palmerston North. It is accepted that for those requiring dialysis there are regular trips to P.Nth for treatment. At present there is a review under way, undertaken by both Whanganui and Palmerston North, to work out the most appropriate manner of handling renal services including new models of treatment. The report is expected shortly.

Travel

Travel costs to other Hospitals for specialist treatment are covered. However there is a minimum distance requirement of 80 km which is slightly more than the distance to Palmerston North Hospital so leaving Wanganui people without the support. The government is loathe to decrease this distance as then many people in the large cities would qualify, just for attending their local hospital.

The hospital is simply not funded for the costs for travelling to P Nth although cases of hardship involving frequent travel will receive consideration.

There is another issue here: Too much pressure on Government over this issue could result in them evaluating whether it might be more economic to treat everyone in Palmerston North leaving Wanganui without a hospital in the way that Napier hospital was closed in favour of Hastings. The Whanganui DHB are always aware of that possibility and they strive to ensure our hospital always gives excellent service and meets target sets for treatment.

Your committee were very appreciative of Julie Patterson’s willingness to attend the meeting and not shirk the hard questions. We were impressed by her frankness and her undoubted passion for making the hospital as good as it could possibly be.



Grey Power Tips and Deals

Accidental Death Insurance

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Discounts in Wanganui

It is some years since we published our discount book but those discounts are still available. You can check out which businesses offer discounts on our web site

<http://www.greypowerwanganui.co.nz/benefits>

Your committee are looking into publishing the book again. As always time and money are the bugbear.

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All the information is on the Internet

On reading this page it seems like it. If you don't have internet it can be difficult. Just for you here is some info about

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It's too late for this year as applications closed on 30 June. If you missed out get prepared for next year.

Income limit is \$24,470 but if you have dependants or your rates are high it could be higher. Dependants income must be less than \$500 pa for each dependant

You must be the legal ratepayer and in some circumstances that includes a lessee. Application forms are on the internet (www.dia.govt.nz) and are available at the District Council.

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MEET THE CANDIDATES MEETING

THURSDAY 7TH SEPTEMBER COMMENCING AT 1.30 PM

CENTRAL BAPTIST CHURCH

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Candidates standing for election as MP for Whanganui will be the guest speakers at our Public Meeting in September

At the time of printing other candidates had not been announced. If they are, invitations will be given.

As usual cans of tinned food for the FOODBANK will be much appreciated



Steph Lewis Labour

"Steph was born in Whanganui and grew up between Kaitoke Prison village, where her Dad worked as a Prison Officer, and her family's farm in Waverley.

Steph finished as Dux of Whanganui City College and attended Victoria University where she completed a Bachelor of Arts and Law Degree.

Steph's first job after finishing university was as an employment advocate at Community Legal Advice Whanganui. In her current role Steph investigates and resolves disputes between large organisations and individuals. Her work has given her crucial skills in advocacy and mediation - she knows how to offer practical, pragmatic solutions and get them implemented."



Nicola Patrick: Greens

With a diverse career in environmental management and community engagement, I'm keen to grow the party vote for the Greens.

My background is a science degree and journalism diploma, plus 10 years at DOC including operational management at Ruapehu. I worked for engineering company AECOM in Australia and NZ, and social enterprise foundation Ākina. I am now an environmental advisor at Ngaa Rauru Kiiitahi, a Horizons regional councillor and write a regular column in the Chronicle.

My priorities are healthy rivers, growing local jobs and addressing inequality. I'm 44 years old, a mum of two boys, and love Whanganui.



Harete Hipango: National

I'm a lawyer, born and raised in Whanganui, also with connections to South Taranaki. I graduated from the University of Auckland with an LLB in 1991, and have worked extensively in public and private practice including family, mental health, youth justice, child welfare and criminal law. Since 2013, I have served on the Whanganui District Health Board.

Together with my husband Dean, we have raised our three children in Whanganui. Above all, I'm a proud mum and I understand the challenges and opportunities families and communities face.

I'm committed to our Whanganui electorate and I'll be working hard over the next few months to ensure the region retains a strong voice in Wellington.



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