

Agenda Health Consumer Council

Date: 10 November 2021, 10:30am to 1:00pm

Venue: Kawakawa Room, Education Centre, Tauranga Hospital
or Via Zoom

Chair	Lisa Murphy - Tauranga	Minutes	Maria Moller	
Members	Grant Ngatai, Deputy Chair - Tauranga	Florence Trout – Tauranga		
	Adrienne von Tunzelmann, Deputy Chair	Rosalie Liddle C	Crawford – Mount	
	- Tauranga	Maunganui		
	Sue Horne – Tauranga	Tessa Mackenz	ie – Tauranga	
	John Powell – Mount Maunganui	Theresa Ngamo	oki – Whakatāne	
In attendance				

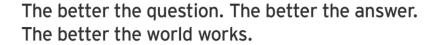
Item No.	Item	Lead	Page
1	Karakia timatanga/Welcome	Grant	
2	Presentations: 10:30-10:50 – Richard Li, Chief Information Officer – Consumer Involvement in Data Digital Governance Group.	Chair	
	10.50-11.10 – Jasmine Sanson & Alex Stuteley, Ernest Young Analytics – Clinical Services Plan (see attached).	Chair	3
3	Health Sector Update 11.10–11.40 - Debbie Brown, Senior Advisor Governance and Quality	Chair	
4	Presentation: 11.45–12.00pm – Monique Gray, Communjity Engagement, Zest Consulting – Waiariki Disability Action Plan.		11
5	Apologies Moved: Seconded:	Chair	13
6	Interests Register	Chair	
7	Minutes of Meeting 13 October 2021 to be confirmed. Moved: Seconded:	Chair	14
8	Matters Arising See attached – to be updated.	Chair	19
9	Reports of participation in other groups - Community Feedback	Chair	
10	 Matters for Discussion/Decision 10.1 Chair's Report – attached. 10.2 DHB HCC/CAG Presentation - Envisaging Consumer Engagement For The Future. 10.3 Consumer Health Forum Aotearoa 	Chair	24
11	General Business 11.1 Election of Chairperson/Deputy Chairperson – Nominations.	Chair	

Item No.	Item	Lead	Page
12.	Council Only Time 12.30pm		
13	Next Meeting 8 December 2021		
14	Next Board Meeting Wednesday 24 November 2021 Agendas available here just before each meeting: Bay of Plenty District Health Board (BOPDHB) Bay of Plenty District Health Board Hauora a Toi BOPDHB		
15	Karakia Whakamutunga	Grant	

Clinical Services Plan

Consumer Council







Who are we and what are we doing?

- We are Ernst and Young, a consulting company with many years of experience working with the New Zealand health system
 - Luke Williams is an Associate Director at EY and within the health practice and has worked with most DHBs in New Zealand as well as the Ministry of Health
 - Alex Stuteley is a Manager at EY and is experienced at analysing health data and modelling hospital capacity needs in New Zealand.
- We have been contracted by the Bay of Plenty District Health Board to:
 - support development of a Clinical Services Plan focused on the future of clinical service priorities for the Bay out to 2040 that will explore options for how and where clinical services are delivered, and;
 - support development of a Indicative Business Case to central government for redevelopment of the Tauranga Hospital.



Why does Tauranga Hospital need redevelopment?

In 2019, the Bay of Plenty DHB completed the Bay of Plenty Long Term Investment Plan (LTIP). This signalled the need for significant investment to address demographic and service challenges across a range of areas. One of those areas was a seismic risk remediation programme.



Since then, it has become evident that the seismic risk is greater than initially anticipated.

It appears that remediation of these buildings is not a viable option, and therefore a new build option is being pursued that will require redevelopment of Tauranga Hospital.



Why are you here?

- We are keen to engage with you to understand what is most important to consumers when considering current and future access to healthcare
- We are focused on a number of key areas and we are keen to discuss the early thinking about two of these areas with you
- In summary the areas two key areas of focus are:
 - Care in the home and digital solutions that support this
 - Community hub facilities.

Any questions?



Healthcare across the continuum

I can access all my health information from home including certified selfcare resources

I can access peer support groups online and in my community

Consumer's home

Remote patient monitoring and wraparound support makes me feel safe living at home with a disability or significant long-term condition(s)

I can find the information I need to seek the right care at the right time

> I can access real-time advice from health professionals 24/7 by phone, email or video

When my needs are complex, my care journey is smooth and easy to understand

I can get holistic support from a range of carers

I have a trusted care provider who understands me and my whānau

Community care including hubs

I can get a same-day appointment when my needs are urgent

I have access to services in culturally safe settings

(e.g. marae)

I can get specialised assessment, procedures and care close to home

I know I can get timely leading practice care that is

customer focused

am supported to travel to and from them

I can access tertiary

care at some sites and I

I can get rapid access to specialist care when I really need it

> I can quickly return home or to my local hospital through improved communication and support

I have a choice of where I receive my care, most appropriate for me



Major facility



Care in the home and digital solutions

We are exploring sensible initiatives that can enable clinical care to be delivered into consumers' homes

- Telehealth consultations with clinical care providers, reducing the need to travel
 - For example: you have a long term condition that you are managing with the support of a specialist that requires a regular check-in to discuss results and medications, but not a physical examination
- Remote monitoring of health status
 - For example: wearable devices that can track your heart, temperature, breathing, meaning that you are able to be monitored from home or monitor your own symptoms and be notified, or empowered to know when it's time to see the GP, or access care

What opportunities do you see with using new technologies to support care into people's homes?

What, if any, concerns do you have?

Have you had experience with any of these examples?



Community Hubs

We are exploring how community facilities, new or existing, could support bringing clinical services closer to home. These hubs won't all look the same, rather they will be designed to respond to the needs of the population, and will provide a range of services, in close working with primary and community care

- Possible services include depending on need and size of the hub:
 - Specialist outpatient appointments visiting specialists
 - Allied health services e.g. Physio, Dietitian, Psychologist
 - Delivery of medication that might otherwise require a hospital visit
 - Renal dialysis which may otherwise require a visit to a hospital facility
 - Diagnostics:
 - X-ray and ultrasound, bigger centres might have more advanced radiology services
 - Blood testing and lab sample collection
 - Endoscopy
 - Minor surgery

What opportunities do you see for using a community hub approach to delivery of clinical care?

What, if any, concerns do you have?



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From: <u>Lisa Murphy</u>
To: <u>Maria Moller</u>

Subject: Fw: Waiariki Disability Action plan included in Agenda

 Date:
 Thursday, 4 November 2021 11:27:17 am

 Attachments:
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Importance: High

Please include in Agenda supporting documents. Many thanks.

Lisa

From: Monique Gray

Sent: Friday, 22 October 2021 2:40 PM

To: Lisa Murphy

Subject: Waiariki Disability Action plan

Kia Ora Lisa,

We are currently working with the DHB on the disability action plan for the Waiariki region, Thee have asked that we touch base with your Consumer committee and let you know about the project and if you would like to learn more or be a part of it.

Jennifer Pearson and I have been working in the area of community engagement for the last few years and are both also parents of a child or adult with disabilities, so this mahi is personal to us.

Momenta with Zest Consulting have been asked by the Lakes and BOP DHBs to develop in partnership with the disability community, a Waiariki Disability Action Plan by February 2022. This is an exciting opportunity for those in the disability sector to play a significant role in the codesign of a plan with a focus on:

- equity and practical actions for the DHBs to improve access to quality health services,
- actions to remove barriers and to improve the health outcomes of people with disabilities in the Waiariki region. (These are expected to be in alignment with already existing national disability strategies Whāia Te Ao Mārama and Disability Action Plan 2019-2023).
- accessibility to health services for Māori and Pacifica people with disability and other migrant communities.

Our task is to make sure this Disability Action Plan lives up to its name and is full of measurable actions that will make a difference. We need your help to make this a reality. We are setting up a Focus/Advisory Group and a Reference of Champions Group to be part of the plan development and to ensure this plan is fit for purpose.

The role of the focus group will be:

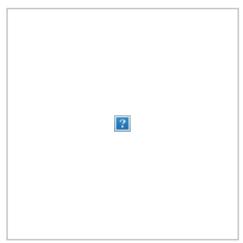
- to provide feedback on proactive outcomes to go into the Disability Action Plan, via discussions and feedback on engagement gathered
- to act as a voice for a variety of sectors within the disability community
- assist the project team to reach whanau and others who have traditionally been

'missed' from previous engagement and survey

The intention is that we reach a wide range of relevant people from Tūrangi in the south to Te Araroa in the East, to identify their needs and how these can be met through actions in the Waiariki Disability Action Plan. So it is important that we have representation from a wide geographical spread and coverage in the Waiariki region throughout the plan development.

We are intending in the first instance to use video, social media and other methods, rather than kanohi ki te kanohi, as we wait to see how the Covid Alert Levels change in the next 6 weeks. We understand that we will also need to link with local people on the ground to reach remote communities with limited access to online services.

DRAFT GOAL: People with disabilities live their best life, knowing DHBs support them as their needs and goals change.



The meaning behind this whakatauki is key and embodies what we are trying to achieve. Yo u need the right resources to succeed. Giving the project this mauri, allows the project team and all involved to to proceed with the mahi and kaupapa for the people.

Hope to hear from you soon,

Ngā mihi

Monique Gray

Community Engagement

Zest Consulting	
?	

HEALTH CONSUMER COUNCIL MEMBER ATTENDANCE

2021/22

Member	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Terehia Biddle (Resigned	-	-	•	-	-							
26/7/21)												
Rosalie Liddle Crawford	•	•	•	•	Α	•	•					
Sue Horne	•	•	•	•	Α	•	•					
Theresa Ngamoki	Α	Α	•	Α	•	Α	•					
Grant Ngatai	•	Α	•	•	•	•	•					
Tessa Mackenzie	•	•	Α	•	•		•					
Lisa Murphy	•	•	•	•	•	•	•					
John Powell	•	•	•	•	•	•	•					
Florence Trout	•	•	•	•	•	•	•					
Adrienne von Tunzelmann	•	•	•	•	•	•	А					

- Attended.
- A Apology received.
- Absent, no apology received.



Minutes Health Consumer Council

Date: 13 October 2021, 10:30am to 1:00pm
Venue: Kawakawa Room, Education Centre, Tauranga Hospital
or Via Zoom

Chair	Lisa Murphy - Tauranga	Minutes Maria Moller		
Members	Grant Ngatai, Deputy Chair - Tauranga Adrienne von Tunzelmann, Deputy Chair	Florence Trout – Tauranga Rosalie Liddle Crawford – Mount		
	- Tauranga	Maunganui		
	Sue Horne – Tauranga	Tessa Mackenzie – Tauranga		
	John Powell – Mount Maunganui	Theresa Ngamoki – Whakatāne		
In attendance				

Item No.	Item	Lead	Who
1	Karakia timatanga/Welcome	Grant	
2	Presentation: 10:30 Richard Li, Chief Information Officer (CIO) – Digital and Data Group. Deferred to Nov Meeting.		
3	Health Sector Update Council's proposal went to Exec Committee. Richard Li, CIO and Mike Agnew, Acting General Manager - Planning & Funding / Population Health want to engage with Committee. Critical as part of transformation. Pete Chandler, CEO has it on his agenda. Will feedback further. Start thinking about strategy going forward. Te Pare o Toi also wants to have a group that feeds back to the Clinical Governance Committee. Trying business as usual (BAU) but Covid keeps taking over. Strategy to make Covid new BAU. The Board Chair will be good link for us. What is the Board's involvement in the vaccination launch on Saturday? Fully endorsed by Board. Please spread the word. Health and Local Government - vaccinations. Pete links with Local Government. Scott Campbell has been employed for Covid role, not just for hospitals but community also. Strongly encouraging people to have it. Could have Trevor Richardson, Covid-19 Incident Controller or Scott Campbell to come and talk to group about progress and plans. 15 minutes slots. Averil working for Toi te Ora on Covid Welfare, putting plan together. Thank you to Sue for all her work on the Council.	Debbie	Maria

4	Apologies Adrienne	Chair	
7	Moved: Sue	Oriali	
	Seconded: Florence		
5	Interests Register – Theresa attends part of theBOPDHB IOC hui held daily where topics discussed include hospital readiness for Covid. Also Te Pare o Toi workforce with vaccinations in the EBOP.	Chair	
6	Minutes of Meeting 8 September 2021 to be confirmed.	Chair	
,	Moved: Florence Seconded: Sue	O Tidii	
7	Matters Arising	Chair	
	7.1 Recruitment. See 9.		
	7.2 Chairs Report – generic email. Microsoft Teams – Council could use this forum. Being rolled out to those groups who need it.		
8	Reports of participation in other groups - Community Feedback	Chair	/
	8.1 Clinical Governance Committee will not meet this month.		
	8.2 HQSC Meeting – sent a copy of the consumer engagement proposal to HQSC and Consumer Health Council Chairs – good feedback. Waiting on feedback from Board (endorsement). Workshop in preparation for Claire Braatvedt 27 Oct. Today SWOT module (strengths, weaknesses, opportunities and threats). The information will be collated and sent through, similar proposal to our Council		
	proposal.		
	8.3 Tauranga Community Health Liaison Group – Sue and John have been attending. Great forum for members to go to, great learnings. Attended a meeting where Nick White, Registered Nurse and current team leader for the BOP Addiction Service spoke about addiction. Statistics for older people and alcohol were eye opening. Also the use of opiates. Older age group quite vulnerable. Bringing forward older age health issues. Older people relying more on family and friends to help support them in their retirement years as they cannot afford this themselves.		
	8.4 Tessa attended zoom for Katikati Network Meeting – a lot more collaboration happening which is feeding into Community led development funded by Department of Internal Affairs. Great stuff happening with environmental, Mana Whenua, food sustainability, and community inclusion for people with disabilities. Each project looks at how to become self-sustaining. Many are volunteers but leaders are paid. Partnerships encouraged with private sector and local government.		
	8.5 Grant – There are currently 2,500 members receiving vaccines from the Te Arawa Covid response team and Poutiri Trust in Te Puke. Our vaccination percentage for our kaumatua and kuia has reached 100% however those under 60 of age and below remain around 60%. A range of strategies have been employed to target those who have reservations about receiving the COVID vaccination by promoting on mainstream platforms i.e. Facebook and Instagram.		

9	Matters for Discussion/Decision		
	9.1 Chair's Report – attached.	Chair	
	9.2 Meeting Schedule - Final meeting of year will be in Dec to cover all council business. Hope to align with DHB lunch.		
	9.3 Recruitment – People would apply against a set of criteria. Pete and Debbie and Chair would meet with candidates. Te Pare o Toi may have consumer representatives. HQSC consumer forum – how will these work together. Council needs to have input. Perhaps a subcommittee of council members could be involved in recruitment.		
	Definition of equity? Equal access to and through the health system. Can depend on where you live, the language. Unfair and unjust for certain groups. Decision making is made at a governance level.		
10	Correspondence Outwards: Letter of congratulations to DHB Board Chair. Inwards: Acknowledgement from DHB Board Chair. Letter of Resignation from Sue Horne.	Chair	
11	General Business	Chair	
	11.1 Introducing Asa Hobson, the Quality System Manager (QSM). She has taken over from Averil. Has been working for DHB for some time, in Quality Patient Safety. Originally from Sweden but been in NZ for 20 years.		
	11.2 HQSM for consumer engagement report. Share this document? Debbie will send out to committee to discuss. Will feedback to Asa asap, please comment. Timeframe. Asa feels that last scores were a little harsh. Chair says that we faired similarly to other DHBs. Asa can attend meeting to keep members update. Send out Asa's email address.		Debbie Maria
	address.		Maria
	11.3 Combined meetings? Where are these at? When might these resume? Good forum for members to engage with Execs.		
	11.4 DHB perspective on vaccination uptake. Difficult workspace. Te Kaha able to have free rein to lead how was best for them. Used relationships and knowledge of community. Started Marae by marae. Not sure why this isn't possible in other areas. Access to services in East for vulnerable is difficult. GP closures during lockdowns confuse vulnerable and elderly.		
	Lockdown levels cause a number of barriers for Maori. Theresa is on Palliative Care clinical network and finds it very difficult.		
	11.5 Rosalie emailed report that she is writing regarding Covid.		
	Staffing and training in response to Covid. Top ICU Doctor Paul Young says we will risk losing patients because of understaffing.		
	Tauranga - 6 ICU Beds 4 HDU Beds. Whakatane – 2 Acute Care Beds.		
	North of Tauranga comes under BOPDHB. Thames has no ICU beds. Coromandel is in Waikato DHB region.		
	North of Tauranga comes under BOPDHB. Thames has no ICU		

	ICI I conscitu in helevy notional systems 4:22,000 means		
	ICU capacity is below national average. 1:33,000 people.		
	DHB is upgrading a ward for Covid patients. Will take up to 6 weeks to complete.		
	Getting reports that staff are still undergoing training for Covid. Staff are already stretched, stressed, undervalued.		
	ICU beds won't be useful if they aren't staffed. Staff exhausted before covid came about. Whakaari – huge influx of people. Could send people to other DHBs. Won't be able to do this with Covid. How will they prioritise who is the sickest?		
	Cancer patients have to go to Waikato which makes this difficult when they are in Level 3.		
	Lisa asked about getting PET and allergy testing done here in Bay of Plenty. Not likely as Tauranga is a secondary hospital. Can cross borders with a letter of authority.		Maria
	Send link to Official Information Act responses on DHB website.		Iviaiia
	Early interventions for Covid. Education on how to protect yourself e.g. Healthy lifestyles. Huge mental issues, not being able to access healthcare services and education. We don't seem to be covering any of this. There is a need to keep looking after people while they are at home – needs to be a priority.		
	11.6 HQSC consumer forum – feedback (learn more) wouldn't open.		
	11.7 Sue thanked everyone in group for involvement. Executive should be giving direction. Feedback to HQSC may be the path which we are supposed to be heading.		
12	Council Only time. Matters discussed:		
	Closed Council only sessions in future meetings;		
	Social health feedback;		
	New health system plans;		
	Health Consumer Council budget and resources;		
	Correspondence.		
	Meeting closed at 1.10pm.		
13	Next Meeting 10 November 2021		
14	Next Board Meeting Wednesday 27 October 2021		
	Agendas available here just before each meeting: Bay of Plenty District		
	Health Board (BOPDHB) Bay of Plenty District Health Board Hauora a		
	Toi BOPDHB		
15	Karakia Whakamutunga	Grant	



HEALTH CONSUMER COUNCIL Meeting – 13 October 2021

The newly appointed Quality System Manager introduced herself and gave some background of her previous roles.

The Senior Advisor Governance and Quality provided a Heath Sector and DHB updates.

The new Executive Director, Health Quality and Safety has now been appointed and started with the DHB a few weeks ago. Whanau & Consumer-centred Healthcare Council meeting schedule is still to be revisited once the new Person Centred Experience Lead has been appointed.

A letter of resignation was received form one of the Health Consumer Council members, her final meeting will be in December. A letter of acceptance and appreciation was sent from the Chair. Gaps in membership have been identified – consideration needs to be given to diversity, skills matrix, interests, and geographic representation.

Members again expressed an interest in the Covid 19 response and provided community feedback. The Senior Advisor Governance and Quality will look at inviting an executive from the response team to meet with HCC members to discuss progress and plans.



Health Consumer Council Monthly Meeting Matters Arising 2021

Meeting Date	Action required	Who	Action Taken	Completed / in progress
13.10.21	When will meetings including Execs resume?	Debbie	05.11.21 Debbie met with Jonathan. Will meet with Asa and Jonathan on 10.11.21.	
09.06.21	Chair to ask CE, Ops GM and Debbie Brown to meet with HCC future. Examples: Papamoa health needs excluded HCC involvement after the HCC raised the issue with management initially; EBOP EVERY discussions about future health care does not appear to include consumer voice.	Lisa		
14.10.20	Update groups you attend on Connex.	All	Members to check Connex, working area "HCC Community Connections" and add details.	Ongoing
09.09.20	Housing Shortage - Accessible Housing took over from Housing New Zealand. How is that going?	AV		Ongoing.

Meeting Date	Action required	Who	Action Taken	Completed / in progress
09.09.20	TOR: a) Recruiting Maori consumer members. Contact Marama for guidance. b) Source flowchart to be annexed.	TA TA		
13.10.21	HQSM for Consumer Engagement Report to be sent to members for feedback to Asa.	Debbie	05.11.21 Sent out to members for feedback.	
13.10.21	Send link to OIA page on DHB website.	Maria	Emailed link to members	Completed 13 October 2021.
08.09.21	Ask IT who has access to DHB Health Consumer Council emails.	Maria	Emailed IT. IT advised that Maria is the only one that has access.	Completed 09.09.21
14.07.21	Invitation to Grand Round – held on Tuesdays. Send out invitation to members.	Maria	Will email info out for next Grand Round. Not occuring on a regular basis at present due to strikes and hospital alert level and Covid Lockdown Levels.	Ongoing
11.08.21	Health & Disability Sector Review Information including timeline.	Maria	Maria sent link to Transition site updates. A copy of the proposal document also sent to members.	Completed 02.09.21

Meeting Date	Action required	Who	Action Taken	Completed / in progress
14.07.21	Wordsmith covering letter to Board Chair. Finalise proposal. Send out.	Florence Lisa Adrienne	Done and passed to Lisa.	Completed
14.07.21	Send a copy of CEO Newsletter out to members.	Maria	Will email a copy the next time it is published.	Completed.
14.07.21	Add upcoming board meeting dates to bottom of minutes and agendas.	Maria	Will add these as they arise. Board agendas are on the BOPDHB website just before the meetings Bay of Plenty District Health Board (BOPDHB) Bay of Plenty District Health Board Hauora a Toi BOPDHB.	Completed.
09.12.20	Health & Disability System Review – members to read and feedback to DHB about where the consumer council should be involved.	All	Not sure if completed but closed.	Completed.
09.12.20	National Trauma Network correspondence – circulate to members.	Sue	Not sure if this was completed but closed.	Completed.
09.12.20	Webinar link for sharing with members.	Sue/Tim	Unable to be completed.	Completed.
09.06.21	Tim to draft the invitation letter attaching discussion paper, to reflect our proposed future consumer voice. Chair to review, circulate and send by early July. Suggested meeting	Tim	Provided to members.	Complete

Meeting Date	Action required	Who	Action Taken	Completed / in progress
	to align with the August HCC meeting.			
09.06.21	Send letter/press release of congratulations to Janet Peters for her Queen's Birthday Honour.	Adrienn e, Rosalie, Lisa	Sent out to various news publications throughout NZ.	Completed
14.07.21	Send out last three CEO Newsletters to members.	Maria	Emailed 15.07.21	Completed
09.12.20	Meeting Summaries – find out if HCC has it's own email address and who monitors it?	Maria	Emailed address, no response. IT advised that Pritika, Averil and Tim have access to this email address. Not sure if anyone is monitoring it. The email address is Consumer.Council@bopdhb.govt.nz . Relevant emails seem to be forwarded to the Chair. Will enquire again if this is happening. Maria now managing this email address, she is forwarding on relevant emails to Lisa.	Completed
14.10.20	Arrange for a member of the Tauranga Community Liaison Group to attend December meeting.	JP	JP & SH to extend invitation	Completed.
14.10.20	Perspectives sought on Consumer Engagement Quality and Safety marker and Whānau – centred co- design draft paper. Tim to send out zoom	All	On-going - led by Tim.	Completed. Paper circulated to Council.

Meeting Date	Action required	Who	Action Taken	Completed / in progress
	meeting invite and slides to discuss further with members.			

Health Consumer Council - Chairs Report October 2021

Key Topics:

- Consumer Engagement with DHB
- DHB Update
- Whanau & Consumer-centred Healthcare Council
- HCC Member resignation and recruitment
- Covid 19 Response
- Closed 'Council only' session
- Reporting of meetings attended

CIO Digital and Data Group visit deferred to November meeting to discuss consumer engagement in upcoming projects. It was decided this discussion was better held in person Covid Lockdown levels dependant.

The DHB CEO was unable to attend this months meeting with feedback from the board regarding request for endorsement of the proposal document 'Creating a system of Consumer voice'. This proposal clearly demonstrates the strategy for HCC to fulfil its functions outlined in HCC Terms of Reference, in particular to 'promote meaningful consumer participation and maintain an overview of and advise on consumer engagement activity across the BOPDHB'.

The Senior Advisor Governance and Quality provided Heath Sector and DHB updates.

Whanau & Consumer-centred Healthcare Council meeting schedule is still to be revisited once the new Person Centred Experience Lead has been appointed.

Letter of resignation from HCC member received with final meeting to be attended in December. Letter of acceptance of resignation and appreciation sent from the HCC Chair. Gaps in membership have been identified considering diversity, skills matrix, interests, and geographic representation. HCC will seek further clarification on changes of organisational structure and where the HCC is situated for a strategic approach to recruiting and adequately prepare new members for their role.

Members again expressed an interest in the Covid 19 response and provided community feedback. The Senior Advisor Governance and Quality will look at inviting an executive from the response team to meet with HCC members to discuss progress and plans.

Members agreed to include a closed Council members only session in all future HCC monthly meetings. For purposes of transparency, a list of topics covered will be disclosed in the Minutes.

Chairperson attended the National HCC Chairs meetings to discuss strategy for consumer engagement and Consumer Council role in this transitionary phase of new health reforms. The National HCC Chairs met with HQSC firstly in a workshop format to formulate a submission to the NZ Transition Unit. DHB CCs/CAGs engaged in a SWOT analysis focussing on consumer engagement, identifying both areas for improvement and opportunities for shaping the consumer voice within the new national health system. The second meeting to also meet with NZ Transition Unit representative to present the collaborate work 'DHB Consumer Councils and Consumer Advisory Groups — Envisaging Consumer Engagement For The Future'. Clinical Governance Committee meeting was cancelled for October and will reconvene in November.

Lisa Murphy BOP HCC Chairperson