

Te Whatu Ora

Health New Zealand

Hauora a Toi Bay of Plenty

Agenda

Health Consumer Council

Date: 14 September 2022, 10:30am to 1:00pm

Venue: Via [Zoom](#) only

Chair	Lisa Murphy - Tauranga	Minutes	Maria Moller
Members	Adrienne von Tunzelmann, Deputy Chair - Tauranga John Powell – Mount Maunganui Rosalie Liddle Crawford – Mount Maunganui	Florence Trout – Tauranga Theresa Ngamoki – Whakatāne Kelly Hohapata - Whakatane	

Item No.	Item	Lead	Page
1	Karakia timatanga/Welcome 15 minutes for introductions.	Theresa	
2	Apologies Moved: Seconded:	Chair	3
3	Interests Register	Chair	
4	Minutes of Meeting 10 August 2022 to be confirmed. Moved: Seconded:	Chair	4
5	Presentation: 5.1 <u>On Line Outpatient Appointment Booking</u> – Philippa Edwards, Project Manager Digital Enablement and Leanne Elder, Digital Enablement Programme Manager 10:35am – 11:30am 5.2 Hayley Chapman – Prospective new member.		
6	Health Sector Update	Debbie	
7	Matters Arising See attached and advise Maria of any updates.	Chair	8
8	Matters for Discussion/Decision 8.1 Chair's Report and Parliamentary Launch of the Code of Expectations. 30 minutes.	Chair	
9	Correspondence Inwards: Consumer Participation Coordinator – Mental Health & Addiction Services Outwards: None.	Chair	10
10	General Business	Chair	
11	Reports of participation in other groups - Community Feedback 15 minutes.	Chair	
12	Meeting moved into Council Only time. 30 minutes.		
13	Next Meeting Wednesday 12 October 2022		

Item No.	Item	Lead	Page
14	Karakia Whakamutunga	Theresa	

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HEALTH CONSUMER COUNCIL MEMBER ATTENDANCE

2022/23

Member	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Feb	Mar
Rosalie Liddle Crawford	A	●	●	●	●						
Theresa Ngamoki	●	●	●	●	●						
Lisa Murphy	●	●	●	●	●						
John Powell	●	●	●	●	●						
Florence Trout	●	●	●	●	●						
Adrienne von Tunzelmann	●	●	●	●	●						
Kelly Hohapata			●	A	●						
Tessa Mackenzie (Resigned 12.04.22)	●	-									
Grant Ngatai (Resigned 11.04.22)	A	-									

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

Minutes

Health Consumer Council

Date: 10 August 2022, 10:30am to 1:00pm
Venue: Via [Zoom](#) only

Chair	Lisa Murphy - Tauranga	Minutes	
Members	Adrienne von Tunzelmann, Deputy Chair - Tauranga John Powell – Mount Maunganui Rosalie Liddle Crawford – Mount Maunganui	Florence Trout – Tauranga Theresa Ngamoki – Whakatāne Kelly Hohapata - Whakatane	

Item No.	Item	Lead	Action
1	Karakia timatanga/Welcome	Theresa	
2	Apologies Rosalie Moved: John Seconded: Florence	Chair	
3	Interests Register None.	Chair	
4	Minutes of Meeting 13 July 2022 to be confirmed. HQSS needs to be changed to HQSC and full name needs used in first instance. Moved: Florence Seconded: Adrienne	Chair	
5	Presentation: <u>Aged Related Residential Care Services in BOP Region</u> 10.35–11.30am Vanessa Russell, Acting Healthy Ageing Portfolio Manager. Had 20 years' experience with services to older people. Will discuss each point of email from Karen Browne. ARC capacity and demand: 2150 residential care beds in 34 facilities are available for older people and a few who are funded by ACC or MOH DSS. Vacancies can vary and may be as many 70-100, although some will be license to occupy rooms with high additional charges. There is a shortage of registered nurses ("RN's"), not enough cover 24-hour shifts. Hopefully with the borders opening this will ease the shortage. 50% of RN's in aged care are internationally trained. Disparity in pay rates between hospital and community based registered nurses is increasing and for last 5 years or so seen significant shift of RNs from aged care facilities into hospital services. There are very few standard rooms available i.e. those without ensuites. The National contract specifically outlines when a provider cannot charge a premium rate and taxpayer funding is not to be used to pay for additional space or services above the contract for care. Have trouble finding beds. Covid has caused an issue in that older people are living longer and therefore occupying beds for longer.		

Item No.	Item	Lead	Action
	<p>Sometimes a bed can be offered in another area. But Tauranga doesn't accept many out of area admissions as we have a lack of beds ourselves. Lost 57 beds when Aspen closed. Hope to get back some of these when a new facility opens in Papamoa, but this will be a premium facility.</p> <p>BOP needs more capacity, but land values and costs of building do not make residential care facilities financially viable unless attached to retirement villages which can subsidise some of the costs. About 50% of BOP facilities do not have large retirement villages attached. Population growth of over 85-year-olds (age group that uses ARC services most) is increasing with baby boomer effect and BOP will quickly have insufficient capacity for demand.</p> <p><i>What is one thing that could make the biggest difference.</i> More capacity and helping people to stay in their homes longer. Sector – being able to retain staff and expertise. Pay equity will also assist. At the moment there is also a shortage of support workers, so we are supporting home services.</p> <p><i>New health system is supposed to provide consistency around the country.</i></p> <p>Important drivers for enabling the elderly to remain in their own homes: mobility, strength and balance and social connections. Access to home programmes.</p> <p><i>Workforce training. Are we pushing to train our own nurses?</i> Yes nursing as an occupation is promoted but we still need more than NZ can produce.</p> <p><i>People moving from retirement villages to rest homes.</i> If you own over \$250K you need to pay for care yourself.</p> <p><i>Are there any publicly owned rest homes?</i> Not that Vanessa is aware of. Most were sold off and put in the private sector.</p> <p>40% people getting rest home care are paying privately.</p> <p>Residential care is standard up and down the country. Negotiated every year. Areas have a slight variation. Every facility in Tauranga will be the same.</p> <p>Standards vary a lot. Should be discussed nationally. When advanced care plan is implemented, it may not be realistic to what is available.</p> <p><i>Intellectually handicapped houses – is there an equivalent for older people.</i> We haven't got any of these yet but might be a good idea.</p> <p><i>Marginal groups – haven't seen aging population included in these groups.</i> 25% of our population are over 65 years. Those needing support are usually around 75 and above.</p>		
6	<p>Health Sector Update 11.30–11.45am</p> <p>Aged care is on our regional radar.</p> <p>Te Whatu Ora and Maori Health Authority are still working out how they want things to run.</p> <p>With no board we are continuing with due diligence and reporting.</p>	Debbie	

Item No.	Item	Lead	Action
	<p>Hospital is still high demand and capacity. Planned care is a priority for Te Whatu Ora. Have recruited a new person to People and Capability team, Debra East. We need a people strategy.</p> <p>Hospital Services – should Council hear from PHO rep. Yes good idea. Could get someone to come to this meeting and share what they are seeing. People can't get in to see a GP as not enough GPs and some GPs not taking new patients. What are we doing about the shortage?</p> <p>Consumer engagement through HQSC. Ask Deon.</p> <p><i>Why don't we have a GP service at ED? At Whakatane they have a GP available at the weekend. Would help free up the system.</i></p> <p>Grand Round – Laboratory requests electronically. Who pays for this?</p> <p>Is Hayley still interested in being a member? Maria will contact her.</p> <p>Maria will create a fillable pdf for the EOI.</p> <p>People are a little confused about the name. But it will take time. Is quite difficult for older people. Needs more promotion. Language has been an obstacle for older maori for years. Overseas they overcome some of these issues with graphics and symbols.</p>		<p>Debbie</p> <p>Maria</p> <p>Maria</p>
7	<p>Presentation: <u>Parliamentary launch of the Code of Expectations</u> 11.45-12.15am HQSC He Hoa Tiaki Partners in Care - Deon York, Director and DJ Adams, Consumer Engagement Advisor, Maori.</p> <p>Progressing the “consumer voice framework”.</p> <p>Code of expectations.</p> <p>Slides were shown to meeting. Deon will send through after meeting.</p> <p>Consumer Health Forum Aotearoa – has about 800 members, there is an opportunity to attend forums.</p> <p>National process for complaints and compliments – Health NZ run.</p> <p>Code of expectation for health entities' engagement with consumers whānau.</p> <p>This is the link to the page Implementing the code. https://www.hqsc.govt.nz/consumer-hub/engaging-consumers-and-whanau/implementing-the-code/ Parliamentary launch 25 August 2022. Will see if it can be live streamed.</p> <p><i>Privately funded health services – what changes will you make to their contracts to ensure that they are on board?</i> New team in Health NZ is looking into this.</p> <p><i>Multilingual information for older people is a barrier. How will you engage those people?</i> Can speak to people on the phone and send things out in the post. English, sign and te reo are official languages of NZ. Code will be translated into approximately 9 languages including braille. English and maori will be alongside each other.</p>		

Item No.	Item	Lead	Action
	Theresa has enrolled in the co-design course. More Execs should take part as well.		
8	Matters Arising See attached and advise Maria of any updates. No new developments.	Chair	
9	Matters for Discussion/Decision 9.1 Chair's Report – no report for July. Russ who chairs National Chairs Meeting has been appointed Chair of Consumer Advisory Committee. He will keep Council informed. His profile is on the HQSC site. He is Chair of Health Consumer Council in Westland. A chair from South Island has handed in their notice. 9.2 New Expression of Interest form for prospective members, attached. 9.3 Aged care – covered in presentation.	Chair	
10	Correspondence Inwards: 29.07.22 Email from Karen Browne, Chair of Community Health Council, Southern DHB and WellSouth. Outwards: 03.08.22 Email to Karen Browne.	Chair	
11	General Business	Chair	
12	Reports of participation in other groups - Community Feedback Health Liaison Group – had a talk from Luke Bradford, GP and Chief Medical Officer. Gave interesting statistics. GP's more multi-disciplinary. Lot more telehealth being used. 70 GPs per 100,000 of population. 10% of GPs are due to retire. People are having preference for telehealth. 50% consultation can be done by phone call or video conferencing. Ros Jackson, Chief Nursing Officer also spoke. A community appointment is being made. City Council – working around housing stress amongst older people. Adrienne is part of the group. Will let us know matters of interest. Clinical Governance Group – still meeting monthly. Has been zooming. Dental Health – made comment about equity. Hospital service provides service for those who can't access community care. Suggestion made that it could be a good opportunity to take throat swabs for rheumatic fever. CGG are interested in Council reps comments. Are selective about what they raise, not clinical, but more equity based. <i>Was there any mention of directive from MOH about fluoridation of Tauranga water?</i> No.	Chair	
13	Meeting moved into Council Only time.		
14	Next Meeting Wednesday 14 September 2022		
15	Karakia Whakamutunga	Theresa	

Health Consumer Council Monthly Meeting Matters Arising 2022/23

Meeting Date	Action required	Who	Action Taken	Completed / in progress
10.08.22	Create a fillable pdf for EOI.	Maria		
10.08.22	Representative from PHO to attend a meeting.	Debbie		
13.07.22	Training Courses and Health & Safety Training	John		
13.07.22	Security risk with members having DHB information on personal devices.	Debbie		
13.07.22	Hospital capacity and progress data for sharing with members.	Debbie		
09.03.22	Remuneration for Clinical Governance meeting attendances.	Jonathan	10.06.22 Maria has emailed Jonathan.	
10.08.22	Contact Hayley to see if she is still interested in becoming a member.	Maria	Emailed Hayley. She is still interested. Sent her updated EOI for completion.	<i>Close</i>
08.06.22	Aged Residential Care – Staffing issue.	Vanessa Russell	Vanessa presented at the 10 Aug meeting.	<i>Close</i>
09.02.22	Create information pack for prospective new members.	Maria	Refer prospective members to website for profiles, TOR and past meeting info.	<i>Close</i>
13.10.21	When will meetings including Execs resume?	Jonathan	10.06.22 Maria has emailed Jonathan. Wait to see what transition brings.	<i>Close</i>

Meeting Date	Action required	Who	Action Taken	Completed / in progress
10.08.22	Create a fillable pdf for EOI.	Maria		
10.08.22	Representative from PHO to attend a meeting.	Debbie		
13.07.22	Training Courses and Health & Safety Training	John		
09.02.22	Send EOI form to suitable people.	All	On hold due to transition. Close for now.	Close
13.04.22	Consumer Health Forum Aotearoa – Copy of summary to be circulated.	Adrienne	13.07.22 Did not receive, therefore close.	Close
13.04.22	Rural Engagement – Interim Health and Maori Health Authority Zoom – slides to be circulated when received.	Lisa	Videos and screenshots did not come through, so close.	Close.
13.04.22	Topics of closed part of March meeting need to be added to March minutes. March minutes will then need to be confirmed at May meeting.	Lisa	Lisa to follow up with Rosalie. 08.06.22 Cannot find information, therefore close. See minutes of 08.06.22 meeting.	Close.

26 August 2022

Te Whatu Ora
 Health New Zealand
 Hauora a Toi Bay of Plenty

Bay of Plenty Health Consumer Council
 c/o Lisa Murphy
 Te Whatu Ora: Health New Zealand
 Hauora a Toi Bay of Plenty
 Tauranga

Kia ora Lisa,

Thank you for your response letter, dated 3 June 2022, to our original letter outlining our concerns with the representation of BOP Health Consumer Council.

We are aware of the health reforms taking place and the transformational change that is currently happening within the health sector. Some of the key points the health system aspires to is people-centred *“a system that brings together the voice of all communities,”* and ensuring there is a focus on equitable outcomes for all people in New Zealand, through honouring Te Tiriti o Waitangi.¹ The New Zealand Health Strategy 2016 states that to achieve equitable health outcomes, people with poorer health and social outcomes, such as people with mental health conditions and people with disabilities, will have services that are targeted and tailored to them.²

In your letter you indicate that members of BOPHCC *“contribute their personal and whānau experiences as Bay of Plenty health service users.”* As consumers ourselves with strong lived experience in mental health and addiction services, who hold similar roles within the health system, we struggle to comprehend how the BOPHCC can state they are *“ensuring patient and community perspectives are a core ingredient of how services are developed,”* and then state that disclosing details about their members personal health experiences would be *“insensitive and professionally inappropriate.”* Being a ‘consumer’ means someone who has personal experiences in the health and disability system.³

We offer some examples of other health consumer councils whose members hold a range of skills and are able to respectfully highlight a snippet of their health journey in their bios, to focus on their experience and areas of interest as a consumer.

- Waikato - has several members that are confident to mention their personal lived experience journey. <https://www.waikatodhb.health.nz/about-us/consumer-council/members/>
- Waitemata – diverse group with lived experience, also includes student members. <https://www.waitematadhb.govt.nz/about-us/consumer-council/>
- Taranaki – uphold Te Tiriti o Waitangi by having tāngata whenua and tāngata Tiriti members. <https://www.tdhd.org.nz/dhb/consumer-council.shtml>
- Canterbury – each member is representing/advocating for a specific area of health, such as mental health and Māori health. <https://www.cdhd.health.nz/about-us/clinical-consumer-input/consumer-council/>

¹ New Zealand Government. (2022, 3 August). *Future of Health: Te Anamata o Te Oranga*. Retrieved from [Home / Kāinga | Future of health](#)

² Minister of Health. (2016). *New Zealand Health Strategy: Future direction*. Wellington: Ministry of Health.

³ Health Quality & Safety Commission. (2015). *Engaging with Consumers: A guide for district health boards*. Wellington: Health Quality & Safety Commission.

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We understand the added pressure the health reforms have put on maintaining membership representation across all health sectors. However, we believe it is not enough to simply invite expressions of interest for membership, the consumer council should be actively seeking out members from people with an equity lens i.e., Māori, mental health, people with disabilities.

In summary, we are asking the BOPHCC to amend members bios on the website to be more in line with being a consumer, and someone that has personal experiences in the health and disability system. We would welcome working more closely with the BOPHCC.

Yours sincerely,



Sherida Davy

On behalf of:

Consumer Consultant Group
Mental Health & Addiction Services
Hauora a Toi Bay of Plenty

[TeWhatuOra.govt.nz](https://www.tewhatuora.govt.nz)

Waea pūkoro: +64 27 4066 635

Te Kāwanatanga o Aotearoa
New Zealand Government

¹ New Zealand Government. (2022, 3 August). *Future of Health: Te Anamata o Te Oranga*. Retrieved from [Home / Kāinga | Future of health](#)

² Minister of Health. (2016). *New Zealand Health Strategy: Future direction*. Wellington: Ministry of Health.

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