

Te Whatu Ora

Health New Zealand

Hauora a Toi Bay of Plenty

Agenda

Health Consumer Council

Date: Wednesday 12 April 2023, 10:30am to 1:00pm

Venue: Kawakawa Meeting Room, Education Centre

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

Item No.	Item	Lead	Page
1	Karakia timatanga/Welcome	Theresa	
2	Presentation: No presentations.		
3	Apologies	Chair	3
	Moved: Seconded:		
4	Interests Register	Chair	
5	Health Sector Update	Debbie	
6	Minutes of Meeting 8 March 2023	Chair	4
	Moved: Seconded:		
7	Matters Arising See attached, advise Maria of updates.	Chair	7
8	Matters for Discussion/Decision	Chair	11
	8.1 Chair's Report		
	8.2 Health Service Provision		
	8.2.1 Review of 2022 Year – attached.		
	<ul style="list-style-type: none">• Recurring themes;• Priority areas of focus;• Strategies for achieving identified areas of focus.• Are there any HCC system improvements we haven't addressed?		
	8.2.2 Mental Health and Additional Services Transformation.		
	8.2.3 Recruitment and succession progress.		
	<ul style="list-style-type: none">• Responsibilities;• Progressing known candidates;• Advertising;• Resources.		
	8.2.4 Path Lab Services update.		
	8.2.5 Home-based care in WBOP – Update.	Adrienne	

9	Correspondence Outwards: Nil Inwards: Nil	Chair	
10	General Business	Chair	
11	Round Table	Chair	
12	Council Only time	Chair	
13	Next Meeting Wednesday 10 May 2023	Chair	
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
Hayley Chapman							●	●	●	●	●
Rosalie Liddle Crawford	A	●	●	●	A	●	●	●	●	●	●
Kelly Hohapata			●	A	●	●	A	●	-	A	-
Theresa Ngamoki	●	●	●	●	●	●	●	●	A	●	●
Lisa Murphy	●	●	●	●	●	●	●	●	●	●	●
John Powell	●	●	●	●	●	●	●	●	●	●	●
Florence Trout	●	●	●	●	●	●	●	●	●	●	●
Adrienne von Tunzelmann	●	●	●	●	●	●	●	●	●	●	●
Tessa Mackenzie (Resigned 12.04.22)	●	-									
Grant Ngatai (Resigned 11.04.22)	A	-									

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

Te Whatu Ora

Health New Zealand

Hauora a Toi Bay of Plenty

Minutes

Health Consumer Council

Date: Wednesday 8 March 2023, 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 – Papamoa Rosalie Liddle Crawford – Mount Maunganui	Florence Trout – Tauranga Theresa Ngamoki – Whakatāne Kelly Hohapata – Whakatane Hayley Chapman - Tauranga	

Item No.	Item	Lead	Person
1	Karakia timatanga/Welcome	Adrienne	
2	Presentation: No presentations.		
3	<p>Health Sector Update</p> <ul style="list-style-type: none"> Operating models launch has been deferred because of change of Chair and Health Minister. Focus on planned care. Whakatane 106% yesterday. Today - Tauranga 92% Whakatane 107%. Talking to others in the Te Manawa Taki region to share ideas to make the system flow better. Patient flow programme is looking to see what else can be done in the community instead of coming into hospital. <i>What is in place for accommodation support for out of town families?</i> Travel coordinator in each district will help with costs of travel and/or accommodation through the National Travel Assistance Scheme. Te Whatu Ora website contains all this information. Consumer Councils Nationally. <i>Lisa attended National Chairs meeting last night. Hector Matthews, Consumer Engagement and Whanau Voice spoke</i> – Chairs asked what was happening? Still quite a new to position. He said he would share any confirmed information. Has been invited back to a meeting in 2 or 3 months. Chair - Operating model for consumer engagement is still being developed. Will then go out to consultation. This will go out to staff. Will make sure members are involved in the consultation. Transitional document has created by advisors at Te Whatu Ora in consultation with regions. Te Whatu Ora will consult with HQSC and are working closely together. Mike Agnew has been seconded Nationally, Tim Slow will be acting. Sarah Davey has been appointed Interim Regional Innovation and Improvement Lead. Adrienne - Mike Agnew provided an organisational structure chart showing where the positions sits, but no names. <i>What is Guy Hobson's role?</i> – he has been brought to focus on identifying and monitoring risk, also doing some work nationally. <i>Will Jonathan Wallace's role remain?</i> He is strongly linked into clinical governance. Would like to change order of meeting – <i>Can you do your update later.</i> Debbie suggested putting in time indicators. 	Debbie	

Item No.	Item	Lead	Person
	First step – to become fully informed. Who is responsible for what? Met with Don Sorenson of SupportNet and Mike Agnew about contracts with providers. 9 providers in BOP. Telling them that we have ideas, how do we deliver them?	Adrienne	
9	Correspondence Outwards: 01.03.2023 Ltr to Mike Agnew re: Path Lab. Inwards: 06.03.2023 Email from Mike Agnew.	Chair	
10	General Business	Chair	
11	Round Table Florence – continued interest in Pathlab issue. This is an issue that members should be involved in. Lisa – attended awards night at Waikato University, Tauranga Campus. Scholarships were awarded by organisations such as TECT and Acorn, who get funds from bequests.	Chair	
12	Council Only time	Chair	
13	Next Meeting Wednesday 12 April 2023	Chair	
14	Karakia Whakamutunga		

Health Consumer Council Monthly Meeting Matters Arising 2022/23

Meeting Date	Action required	Who	Action Taken	Completed / in progress
09.03.22	Remuneration for Clinical Governance meeting attendances and other meetings.	Lisa to liaise with Jonathan Wallace	10.06.22 Maria emailed Jonathan to ask about remuneration for member attendances to the Clinical Governance meetings. 13.12.22 Maria sent email provided by Lisa to Jonathan for his information. The chair of a group that a member attends is responsible for paying the member for their attendance. Members should ensure they establish the reimbursement terms <u>before</u> attending meetings.	<i>In progress.</i>
14.09.22 12.10.22	Laboratory Closures – Closures need to be publicised more. Write a letter to General Manager, Planning and Funding re: impact and more advertising.	Debbie Lisa	Matter raised with Mike. Have agreed to take a more proactive approach to communicating closures as per following article. https://www.nzherald.co.nz/bay-of-plenty-times/news/mount-maunganui-and-greerton-pathlab-clinics-temporarily-closed/SA4TWPZJALZ6PBCDMY3M7PCILE/	<i>Ongoing</i> Mike passed onto Dianne McQueen for a response. Will follow up before last meeting.
08.03.23	<u>Recruitment</u> 1. Position description to be added to website.		Lisa	

Meeting Date	Action required	Who	Action Taken	Completed / in progress
	2. Where can we advertise – OnePlace?		Debbie	
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.	Close
08.06.22	Aged Residential Care – Staffing issue.	Vanessa Russell	Vanessa presented at the 10 Aug meeting.	Close
09.02.22	Create information pack for prospective new members.	Maria	Refer prospective members to website for profiles, TOR and past meeting info.	Close
13.10.21	When will meetings including Execs resume?	Jonathan	10.06.22 Maria has emailed Jonathan. Wait to see what transition brings.	Close
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.
14.09.22	Send letter to Mental Health and Addiction Services in response to	Maria Lisa	20.09.22 Draft sent to Lisa. 29.09.22 Final sent to MHAS.	Close

Meeting Date	Action required	Who	Action Taken	Completed / in progress
	their letter.			
13.07.22	Security risk with members having DHB information on personal devices.	Debbie	The issue is not with the security of the device rather how the recipient of the data manages it. Simple rules to keep information safe: <ul style="list-style-type: none"> • Have a password on your device. • Only keep information for as long as you need it. • Delete once no longer required. • Empty recycle bin regularly. 	Close
10.08.22	Representative from PHO to attend a meeting.	Debbie	Lindsey Webber, CEO, WBOPPHO has been invited to the Nov meeting.	Close
13.07.22	Training Courses and Health & Safety Training	Maria	Will keep sending through courses for members to attend.	Close
14.09.22	Who is Riki's counterpart?	Lisa		Close
13.07.22	Hospital capacity and progress data for sharing with members.	Debbie	Trying to source some info to share. Provided in emailed Health Sector Update report 13.12.22.	Complete
09.11.22	TOR – Needs to be rolled over. Currently states "Under Review"	Debbie	This is fine until further information is determined from transition.	Close
09.11.22	Annual review – send out document with headings.	Maria	12.12.22 Sent out in email to all members.	Close
09.11.22	Send out link to national positions.	Maria	Who we are – Te Whatu Ora - Health New Zealand	Complete

Meeting Date	Action required	Who	Action Taken	Completed / in progress ¹⁰
14.09.22	Articles regarding medical imaging. Find out what this is about. John sent you an email with the link to this article.	Debbie	Mike Agnew, Planning and Funding was emailed regarding this question, but a response was not received.	Close
10.08.22	<ol style="list-style-type: none"> 1. How is this information retained? 2. Ask Comms if they can copy Northland's EOI and put the fillable pdf on our website. 	Maria	<ol style="list-style-type: none"> 1. EOI form now added to webpage. 2. Once completed, the online form is sent to the Health Consumer Council email address. 3. Consider information on Northland's page Northland Health Consumer Council Northland DHB 	Complete
12.10.22	<p>Circulate notes from Community Health Liaison Group – will seek permission from Chair.</p> <p>e.g. there was a good report from Dorothy Stewart on aged care.</p>	John	<p>Has been given permission to share notes. Will share notes after every meeting.</p> <p>Adrienne will share the report.</p>	Complete
09.11.22	Hospital & Specialist Operating Model – Send feedback to Maria for combining.	All	Received feedback from Florence only.	Close
09.11.22	<p>8.1.1 Sunlive Article SunLive - Leaked letter claims BOP patients choosing to die - The Bay's News First Did hospital publish a response?</p>	Debbie		Close

TE WHATU ORA
Hauora a Toi Bay of Plenty Health Consumer Council
Review of 2022 Year
December 2022

The purpose of this review was to evaluate the Health Consumer Councils' own performance during the year. This will be used to determine where change in processes can be made, and how best to meet challenges strategically with a health consumer lens, for improved outcomes. Content has been provided by members based on a template adopted by the Health Consumer Council. This is the third self-managed annual review and the most extensive to date. Discussion of the review is scheduled for the council's April 2023 monthly meeting.

Strategy

- A year of uncertainty for HCC with the health and disability reforms affecting our ability to look and plan ahead. Much of our focus has been on tracking developments as and when they have emerged - and are still unfolding. We have been proactive in seeking up-to-date information, aided by the Chair's role in the National and Regional Chairs Forums.
- While there hasn't been a response to the work we did in 2021 to develop a strategy to give direction to our work and meaning to our role as a consumer voice, the framework set out in our proposal has stood us in good stead, anchoring our discussions and giving us a clear sense of what questions to pursue about consumer engagement in the new system.
- The approach we took in the proposal continues to align well with the direction of the health reforms and with HQSC's work on consumer engagement and should see us well positioned to have an ongoing role, very dependent however on what comes down from the centre.
- We have not had the opportunity to take part in the locality planning pilot for the Eastern Bay. This is a key part of health strategy but remains an 'unknown' for us.
- Pandemic plans and health system change strategy dominated this year and health priorities only emerged in November, resulting in uncertainty about 2020-2027. While seeking relevance and whether HCC continues or where HCC will sit in the changing model from DHB to the new system has impacted on strategy and meeting discussion.
- Elevate major health concerns for the people of the Eastern Bay of Plenty at HCC.
- Support opportunities for health service delivery in rural BOP.
- Promote the influence and benefits of belonging to HCC to wider EBOP and Māori Health Provider network.
- Recruit additional EBOP and tangata whenua to HCC.
- Support Chair and HCC members with te reo Māori and karakia guidance.
- Critically review policy and health service provision for positive change.
- National health reforms strongly influencing strategic planning.

Achievements

- HCC have taken some important initiatives despite the uncertain environment, identifying and following through on issues in our region's health services that critically needed to be addressed: notably palliative care, Path Lab services and aged care.
- Have sought to be well-informed on a range of other issues, with expert briefings from DHB staff.
- Members continue to commit time, energy and expertise to 'getting the mahi done'.
- HCC members have actively contributed to new health initiatives and health related events including Te Whatu Ora Feedback and Complaints System, Telehealth, National Health forums, and innovative LifeCurve App.

- Opportunity taken up by members to attend the weekly Grand Rounds, providing an excellent source of information and education on significant health topics. Especially relevant are the presentations on new clinical and systems initiatives being developed and implemented by the DHB (Hauora a Toi) with potential consumer benefit.
- Have successfully recruited new members to fill vacancies and improve our diversity.
- Members continue to contribute time, energy and expertise to 'getting the mahi done'.
- Maintained positive working relationships within council and management.
- Chairperson maintained focus of all meetings very well.
- All 11 monthly Health Consumer Council meetings and 1 extraordinary meeting, all held with a quorum with full agendas, despite Covid restrictions. Zoom option used appropriately for many meetings during year.
- Generous information sharing experienced.
- Te reo Māori, karakia and cultural guidance provided within the council.
- Successful recruitment of new members.
- Chair attended all scheduled National Chairs meetings and events including:
 - Parliamentary Launch of the Code of Expectations in Wellington. 'The code sets out how health entities must work with consumers, whānau and communities in the planning, design, delivery and evaluation of health services.'
 - [resources/HQSC Code-of-expectations English Final.pdf](#)
 - Inaugural two-day Hui of the Chairs for Consumer Councils held in Wellington hosted by the HQSC Partners in Care Team. BOPHCC Chair was part of the steering group set up to convene, establish and facilitate the framework, and compile information learned and the next steps. In attendance were HQSC Partners In Care team, Programme Manager interim HNZ, Consumer & Whānau Voice Programme Co-lead and Interim HNZ, Strategic Advisor Localities Interim HNZ.
- The HCC provided a conduit and endorsement to address the Palliative Care crisis initiative in the EBOP.
 - Palliative Care support investment - clinical FTE, evaluation and review, relationship restoration process ongoing.
 - Recognition of geographically difficult terrain, challenging roading conditions and rurality of population and impact on access to appropriate care.
- Highlighted social services, mental health, youth health, cancer services and domestic violence (family health) services to community.
- HCC heightened awareness of YWAM Ships Aotearoa, Trinity Koha Dental units work in the WBOP and Eastern BOP, reaching more people in need. This scheme was initially brought to the councils attention by one members previous involvement and contacts, resulting in another leading an iwi and primary care provider collaboration with Trinity Koha Dental (YWAM) to deliver a 2 day clinic for people in Te Kaha area, tribally Te Whanau a Apanui and Te Ehutu. Member volunteered for both days to support patient attendance, flow through, follow up, medical liaison with Te Kaha clinic, Māori Health Provider and Trinity Dentists. Trinity Koha Dental service held November 2022.
 - 44 patients and \$27000 worth of treatment.
 - Performed 64 extractions and 4 surgical extractions
 - 31 fillings and 1 composite bridge restoration.
 - 10 cleanings.
 - Health and wellbeing – example: Significant, widespread tooth decay had caused a woman to stop eating most solid foods for years. She did not disclose this to anyone because of shame and whakamaa. Her malnourished state was obvious, but the reason was not disclosed until the dentist saw her and performed a bridge restoration. She can now eat foods that were once "off the menu". Her emotional and spiritual restoration is immeasurable. Note: this woman

has worked two labour intensive jobs for years. For all of her hard work dental care is outside her reach.

- Two representatives continuing to provide a consumer voice at Clinical Governance Committee meetings and reviewing all Control Documents with a community consumer lens. All meetings attended.
- Implemented with Pete Chandler (utilising Rise Up Tauranga network) and ran successful community 'Fresh Baking for Tauranga and Whakatane Hospitals' for 7 week period up to Easter 2022 during the rapid peak period of Covid, involving hundreds of individuals, organisations and businesses across Western and Eastern Bay of Plenty.
- Representative attended hui at 3 Māori Health Providers, introducing HCC into wider discussions on equity and rural EBOP communities.
- Further developed strong business relationships with HQSC Partners in Care, National Chairs and executives teams at all levels

Purpose

- Provide a Consumer voice ref TOR and on Hauora a Toi's website, and Consumer Engagement Proposal
<https://www.bopdhb.health.nz/media/laqbbtqu/bophcc-terms-of-reference-14-10-20.pdf>
- Opportunity now to align with the community-led aim of the new health system where prevention comes to the fore.
- Focus on consumer experiences of health care throughout the Bay of Plenty.
- Broad advocacy for decision making to enhance consumer voice in health care.
- These will need redefining as HCC's place locally, regionally and nationally is developed within the new health model

Goals

- Looking ahead, and depending on how consumer engagement evolves in the new health structures, goals to include:
- having an ongoing role within in the new health structures, ensuring we are seen as a valuable and valued 'fit'
- partnering in locality planning
- Further recruitment to strengthen the diversity of our membership for population and representation, lived experience, knowledge/skills, and community networks. This increase in membership to include EBOP, Katikati, Pasifika, Māori representation on HCC by end of 2023.
- Develop strategies to increase our presence in the wider communities of the district. Participating in networks and liaising with other consumer groups, where possible to advocate for the best consumer experience.
- Build opportunities for working relationship between BOPHCC and Iwi Māori Partnership Board members in 1st quarter – July 2023.
- Further connect with other Consumer bodies – Mental Health, Disability, and ACC.
- Work strategically on meaningful projects and to achieve greater consumer engagement for improved, equitable, quality healthcare experiences, and delivery of health equity in the Bay of Plenty.
- Reviewing and advising on reports, policy development and initiatives relating to the provision of health services.
- Provide feedback to the DHB on its responses to HQSC's Consumer Engagement Quality Safety markers.

Objectives

- To play our part in the aim of the new health system “that all New Zealanders achieve pae ora (healthy futures)”, consistent with our TOR. Identifying shortfalls in essential and making recommendations on how these can be addressed.
- Maintaining and building the relationships necessary to fulfil our objectives, including identifying and working with other consumer groups.
- Develop profile with changed management and be informed of realities.
- Recruitment of new members for greater representation, including marginalised and vulnerable groups of the community

Strengths

- Highly committed members contributing time, energy and expertise. Creating a strong effective team from different backgrounds, lived experience, and a diverse skill set, who work well together in their respective roles.
- Individual member relationships with colleagues, perspectives and ideas informed by experience and extensive community networks, such as youth services, disability services, mental health, dental and oral health, domestic violence services, ethnic and multicultural communities and cancer support. As an example, one member provided hundreds of hours of service navigation personally and via social media, to link community with the range of community health and social services available.
- Well organised meeting schedules and agendas.
- Executive management and other senior staff responsive to our requests for briefings, presentations, and feedback.
- Excellent Chair leadership, and representation at national and regional forums.
- Dedicated Deputy Chair, CGC representative, and member support provided to the Chair
- Our essential and unstinting admin support by the councils Secretariate
- Active participation in CGC and the Liaison group maintained. Combined years of experience in paying dividends developing institutional memory.
- Increased awareness by management for the need for consumer advocacy.
- Occasional participation in pharmacy consumer information updates from Christchurch team when requested.
- Recruitment of 2 new members.
- Strong effective team from different backgrounds, lived experience, and a diverse skill set, who work well together in their respective roles.

Weaknesses

- Insufficient capacity to fully align with the emphasis now placed on achieving equity in health services for persistently under-served people including Māori, Pasifika, deprived and rural, and disabled communities.
- There is still room to deepen and widen our reach into our communities, using the full potential of members’ networks.
- Variable opportunities for members participation in the conversations on consumer engagement and to represent HCC in Hauora a Toi initiatives.
- Management sometimes overlook involvement of consumers in projects, not involving them in consultation planning.
- Covid has impacted on individual HCC member workload, as businesses and organisations stretch to cover more work with less staff. This can make connecting with the wider community a time challenge. Most of the HCC work is voluntary and can absorb hundreds of hours. Compassion fatigue during 2022 has also had an impact.
- The Health Consumer Council is largely unknown as an entity to the BOP community.

- Inability to effectively plan, including recruitment.

Barriers

- No clear pathway yet for influencing health service planning, development and re-design and offering or consumer perspective on these in the BOP district.
- Continuing lack of clarity as regards our scope for proactive interaction with our communities, maximising the value of our community connections.
- Not knowing quite how to integrate Te Tiriti into our mahi.
- Under-resourcing, except for much appreciated admin support, limiting our ability to progress actions/issues we have identified.
- Te Whatu Ora staff are themselves living with uncertainty and are not able to provide definitive answers on health system changes. Staff turnover has at times hindered momentum.
- Mental health has its own consumer activity that is not well linked to HCC. Correspondence had been forwarded regarding their concern about the current HCC membership. HCC Chair responded appropriately.
- Maternity care has their own clinical governance activity, also not linked to HCC.
- It seems that the original purpose of HCC is shifting as management changes to national and regionalisation.
- The HCC voice to consumer, and vice versa, can be hindered by bureaucracy.
- Inconsistent consultation on QSM Consumer Engagement reports.
- No involvement of the Health Consumer Council in the development of the District Pilot plan.
- Remuneration policy does not adequately reflect the expertise and hours members have been contributing for a considerable time. Examples of this:
 - The role demands far greater commitment than when the Health Consumer Council was first established, particularly this year with new health reforms.
 - Chair and Deputy Chair roles demand an even greater commitment, in the Bay of Plenty. This significant increase in workload is also seen nationally, resulting in numerous Health Consumer Council Chairs and Deputy Chairs resigning from their positions.
 - Clinical Governance Committee representation equates to more than 4 hours every week, per member. All Control Documents and supporting documents for meetings, are reviewed. There has been no remuneration over the 4 years of representation. This creates a barrier to retaining existing membership and fulfilling equitable representation in accordance with the councils Terms of Reference. The knock-on effect is putting more pressure on members, when they already have increasing demands of work, health, finances, and family/whanau.
- Uncertainty regarding the future of Health Consumer Councils and what that will look like in the consumer engagement space, in 2023

Lisa Murphy

Bay of Plenty Health Consumer Council Chair