

MINUTES

WAHARUA KŌPITO (CONSUMER COUNCIL)

26 September 2023

4.00pm

Rainbow Youth, New Plymouth and Zoom

Present: Jane Parker-Bishop (Co-Chair), Paula King (Co-Chair), Ainsley Luscombe, Shelley O’Sullivan, Angela Kerehoma, Wes Milne, Graham Walker, Dinah King, Dinnie Moeahu, Ngāpai Ngatai, Caroline Tyrrell, Nannette Pirikahu-Smith

In Attendance: Ingrid Chamberlain, Interim Manager – Clinical Governance Support Unit; Tanya Anaha, Tahuu Rangapu Chief Māori Health & Equity Officer; Lisa Varga – PA to Group Director Operations

Karakia and Welcome

- Council only time was held until 4.25pm.

Apologies

- Belinda Tran-Lawrence, Jamie Allen, Raymond Tuuta.
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- Ingrid is leading this project which among other things includes looking at hospital entrances etc. Ingrid also noted that in the Clinical Governance Unit they are working on the consumer feedback forms – online as well as hard copy.
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- Ngāpai would like to be involved in the Council Guidelines and Escalation Process working group. Paula hoped that Ainsley would be willing to consider being part of this group also.
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- Dinnie queried what support staff at an operational level are going to provide knowing all of us are going to be integrated into this working party. What support are we expecting from staff who are running these working parties.

- Paula has thought about this and each of the working groups would have a key manager within Te Whatu Ora – Taranaki; the First Impressions Project is being led by Ingrid. There are also six Clinical Governance Advisors of different directorates that we link into within Te Whatu Ora – Taranaki.
- Ingrid commented that the gap that Jake has left is huge. She has talked to Gillian about how we can get some recruitment on board. Looking at how we have someone who can truly represent the community and how we support administratively as well.
- Paula commented that the Council will move forward with those who have put their names to the working groups. If there are suggestions for other focus groups please forward by email to the Co-Chairs. The next stage is that relevant documentation will be sent to the people on those working groups followed by some email discussion about what the next steps will be.
- Graham commented in relation to staff from the hospital fitting in with the work that the Consumer Council does; when he was doing the Access Radio interviews that he and Raymond set up they let us down and dropped us in it. Thought they would have taken on a lot more. We need to know what to expect. It had been made clear to the Comms Team that Raymond and Graham did not want to facilitate the whole thing.
- Dinnie asked that an email be circulated with the finalised list of names and their associated working groups.

Community Insights

- Dinnie was in Wellington earlier this week at the Ministry of Health, there was talk about localities and how they are going to be rolled out. At a high level there is a lot of confusion, at a central level there is confusion with regards to some of the processes. Talking to 13 organisations that are often in their relative silos when it comes to health outcomes for our community. Seem to be struggling to be succinct. Asked what localities are and 13 organisations have different views. Asked specifically about the Consumer Council and their role moving forward, some of the feedback was hopefully they will be an integral part. Staunch in terms of the governance approach.
- A young health professional involved in Ainsley's care had a heart attack six weeks ago and was helicoptered to Waikato. He required a stress test before going back to work full-time. His appointment for the stress test had been cancelled because of the cardiologist and was scheduled for a month later. Not a satisfactory situation at all.
- Confusion around localities – local, regional and national confusion is excessive. It appears to Graham that the Council should not have too much expectation of the localities planning and what comes out of them having much change for us. Graham has a friend who is the CEO of the South Seas organisation, they are one of the most successful of the 12 localities. When it comes down to it health is peoples' number three concern; the first one is culture and language, housing then health. Don't know how it is going to work but have to be optimistic.
- Wes raised access to PREP for gay men; it helps decrease transmission. The Sexual Health Clinic in New Plymouth doesn't prescribe it. Worried about young peoples' access. Ingrid will pass Wes' concerns on.
- Dinah raised a situation with a young first-time mum. Had to go to Wellington for a CAT scan. Didn't understand why she had to go to Wellington but went anyway. Was not supported. Travel assistance is for those travelling over 350kms however living in Hawera she does not qualify for travel assistance. The specialist came to see her but didn't understand why she was there.

Close of Meeting

- To round things up, Jane thanked everyone for their time and for the mahi you do in your community. Thank you for our robust conversations, there is mahi we need to do inside our own structures.

Jane closed the meeting with karakia.

The meeting closed at 6.15pm

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Jane closed the meeting with karakia.

The meeting closed at 6.15pm

MINUTES

WAHARUA KŌPITO (CONSUMER COUNCIL)

26 September 2023

4.00pm

Rainbow Youth, New Plymouth and Zoom

Present: Jane Parker-Bishop (Co-Chair), Paula King (Co-Chair), Ainsley Luscombe, Shelley O’Sullivan, Angela Kerehoma, Wes Milne, Graham Walker, Dinah King, Dinnie Moeahu, Ngāpai Ngatai, Caroline Tyrrell, Nannette Pirikahu-Smith

In Attendance: Ingrid Chamberlain, Interim Manager – Clinical Governance Support Unit; Tanya Anaha, Tahuu Rangapu Chief Māori Health & Equity Officer; Lisa Varga – PA to Group Director Operations

Karakia and Welcome

- Council only time was held until 4.25pm.

Apologies

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- Ingrid commented that the guide is to have a consumer voice on committees but will not be done in the next six months, needs to be done in a safe way.
- Angela is apprehensive about doing more without the framework being in place, there are some missing links – it is about keeping us safe.
- Ainsley noted that when we have an issue, need to identify the problem; hearing that the problem is Jane and Paula are overwhelmed. Need to acknowledge. Not sure we have not just rushed into a quick fix which is having eight committees, these may not be the most important things we are doing. Is this the only way of solving the problem of being overwhelmed. Worried we are getting quite tense about it and not meeting everybody's needs. Ainsley is not sure that travelling, spending four hours for a normal meeting and then two hours for each committee on top of that is the best way to fix the problem identified as Jane and Paula being overwhelmed. Are these eight groups the best way or do we have fewer groups and engage in those ones.
- Graham is unsure if there is a working group for Aged Care Concern however he would be happy to be a representative on anything to do with aged concern.
- Paula is open to the idea of and the need to direct focus elsewhere. Not saying we need to develop a working party for every single kaupapa internal to the Consumer Council. Need to design/develop a set of guidelines on how we function. Need to develop the Consumer Council Engagement Framework, waiting for the national work to be completed is taking too long. It was decided in July 2023 we would turn our gaze inward and see what was happening within ourselves and Te Whatu Ora – Taranaki rather than wait for decisions to be made nationally for us. This is purely about trying to coordinate a collective path otherwise Paula and Jane will be juggling all the balls and will drop something. Consumer Council members in Taranaki are contracted the same as other Council members i.e. 10 hours per month.
- Caroline noted that the importance of the working group approach is that it drives succession planning. If you have two heads holding the knowledge and one retires and gets replaced you have lost the knowledge. Working groups is a good way of managing it as long as succession planning goes well. We all carry our own loads of the rest of our life, groups/activities we are involved with. Suggesting some people might feel they can give more and some people can give less. Maybe ideal for each person nominating two groups and then working out what is individually possible for everyone and see how it relates. Caroline's interest area is the First Impressions Project, nothing else leaps out as her specialty but she does have capacity to do something and is happy to fit in whatever gap needs to be filled.
- Paula responded that succession planning was part of the rationale in her email. Have advocated all along that this needs to be bigger than individuals and bigger than the people doing the work. Needs to be implemented in a way that is consistent every time. If we are in a position where we can no longer do this what will happen.
- Dinnie queried what support staff at an operational level are going to provide knowing all of us are going to be integrated into this working party. What support are we expecting from staff who are running these working parties.

- Paula has thought about this and each of the working groups would have a key manager within Te Whatu Ora – Taranaki; the First Impressions Project is being led by Ingrid. There are also six Clinical Governance Advisors of different directorates that we link into within Te Whatu Ora – Taranaki.
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Jane closed the meeting with karakia.

The meeting closed at 6.15pm

MINUTES

WAHARUA KŌPITO (CONSUMER COUNCIL)

26 September 2023

4.00pm

Rainbow Youth, New Plymouth and Zoom

Present: Jane Parker-Bishop (Co-Chair), Paula King (Co-Chair), Ainsley Luscombe, Shelley O’Sullivan, Angela Kerehoma, Wes Milne, Graham Walker, Dinah King, Dinnie Moeahu, Ngāpai Ngatai, Caroline Tyrrell, Nannette Pirikahu-Smith

In Attendance: Ingrid Chamberlain, Interim Manager – Clinical Governance Support Unit; Tanya Anaha, Tahuu Rangapu Chief Māori Health & Equity Officer; Lisa Varga – PA to Group Director Operations

Karakia and Welcome

- Council only time was held until 4.25pm.

Apologies

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- Nicola Clarke was absent.

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- Ainsley commented that within the existing contract need to ensure that people are not being paid less than the hourly rate. Jane provided a breakdown of hours per month against the typical remuneration package as per our contracts and it was well above the minimum wage.
- Paula informed the Council that herself and Jane have been across all pieces of work and unfortunately have not got the capacity to carry it all. All they are asking is that Council members step up to two kaupapa each and put in 10 hours per month i.e. three hours per monthly meeting and seven hours document review/emails etc.
- Dinnie is happy to be included in any of the groups where there is a need for a Tangata Tiriti representative; if there are any gaps to fill add him to the list. He did query whether it was relevant to review the Consumer Engagement Framework. Paula advised that this is still to be developed. Jane further noted that the framework is how we operate within the hospital system; do we want the hospital to tell us how we operate or do we want to feed into it.
- Dinnie would like to be included in the group developing the Consumer Engagement Framework.
- Paula, Ainsley and Jamie will be involved in the First Impressions Project. The idea is to ultimately have a lead from each where for this project.
- Shelley volunteered for two roles. She has also put her hand up to be a consumer representative on some committees and projects however has not heard back. She would like to be involved in the Patient Experience Survey and Complaints/Compliments and Feedback working group – best fit for her skills.
- Ingrid commented that when Jake left, the work in relation to the Patient Safety Quality committees came to a halt. Ingrid has talked to Jane and Paula and for transparency advised that members of the Council will be appointed onto those committees and then by February 2024 this will be taken out to the wider community to get the right people on the right committees.
- Ngāpai would like to be involved in the Council Guidelines and Escalation Process working group. Paula hoped that Ainsley would be willing to consider being part of this group also.
- There needs to be a process around Consumer Representatives on Committees. Hoping to develop going forward and would be good to have as a working group.
- Ingrid noted that within the hospital there are not a lot of consumer representatives sitting on committees. This is a work in progress.
- Angela feels there is a push to get Council members into these roles, no disrespect to Jane and Paula trying to get us into the roles. When Angela looks at the makeup of 10 hours a month there is three hours for the meeting, travel of 1.25 hours each way and one-hour pre hui on the meeting pack – this leaves four hours. Can do some of what is being asked but not all of what is being asked.
- Paula advised that this is not a requirement, it is a request for volunteers. It is up to Council members to determine how many hours they can allocate to their group. Collectively frustrated as a Council that we have not been able to make as much movement as we would like to make. If we are expecting change we need to try and share the load and get some traction on each of these as a group. There is no way that Jane and Paula can do all of this.

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26 September 2023

4.00pm

Rainbow Youth, New Plymouth and Zoom

Present: Jane Parker-Bishop (Co-Chair), Paula King (Co-Chair), Ainsley Luscombe, Shelley O’Sullivan, Angela Kerehoma, Wes Milne, Graham Walker, Dinah King, Dinnie Moeahu, Ngāpai Ngatai, Caroline Tyrrell, Nannette Pirikahu-Smith

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Karakia and Welcome

- Council only time was held until 4.25pm.

Apologies

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- Jane offered her congratulations to Gillian on her permanent appointment to the role.

- Tanya's role is still interim. As opposed to transferring to Te Aka Whai Ora, Tanya's focus remains with Te Pā Harakeke. Many staff have transferred over to Te Aka Whai Ora however Tanya's thoughts were to stay in Te Whatu Ora and support them through the transition. Gillian and Tanya are working around a long-term position securing Māori leadership within Te Whatu Ora. Part of Tanya's role is also to maintain a relationship with the Iwi Māori Partnership Board.

Rainbow Community Engagement

IBA / WebPAS Gender Identity Work

- Covered under matters arising.

Working Portfolios

- This was briefly touched on during the last hui and Paula followed this up with an email.
- The thought is to have working groups so the Council are active rather than one or two people constantly picking things up. A list was circulated of things that might be of interest to members or their community, something you have lived experience of that we can feed into.
- Eight working groups have been identified:
 - Consumer Engagement Framework
 - Council Guidelines and Escalation Process
 - Communications (exists already with Raymond and Graham)
 - Patient Experience Survey and Complaints/Compliments and Feedback
 - Quality Safety Markers (exists already with Paula, Ngāpei and Wes)
 - Consumer Representatives on Committees/Projects e.g. Patient Safety Quality Committees
 - First Impressions Project
 - Te Punanga Ora Relationship

Graham joined the meeting at 5pm.

- Need to look at firming up processes so when someone leaves and others come on these things are well set up.
- Paula noted there are 16 members, two working groups assigned to each. Working groups will have busy times and quieter times, members will be called on when the Council has something come to the table and will be the expert. Another reason for the working groups is so that we don't all have to have eyes across everything and it doesn't all come down to the Co-Chairs to work through.
- Ingrid will be able to identify people within the hospital who will make the relationship more direct and provide clarity on things as well getting people working more closely.
- Paula has put Consumer Engagement at the top; this is the biggest piece of work and needs more than two people assigned to it. There will be some overlaps between the working groups. Some work has already started on Consumer Representatives on Committees/Projects with some members putting their hands up for committees they would like to be a part of. There needs to be a linkage from the committees to the Consumer Council around what is happening and ensuring our representatives are safe and know what they are doing. Will overlap with the framework development as well.
- Ainsley understands the work needs to be divided however one of the key drivers needs to be what is in the patients and consumers' best interest. There might be some areas that are more impactful on patients' experience and might need bigger groups.

- Paula was hoping that by the end of this meeting people would be assigned to reflect the structure with there being at least one person from Tangata Whenua and one from Tangata Tiriti, can then second and bring on other Council members.
- Jane noted that people have been questioning the extra hours and the extra workload. Essentially under the Council members' contracts we are contracted 10 hours per month; three hours per meeting and then there is time allocated to out-of-meeting work i.e. emails, extra meetings, document review etc. It will be up to the individual lead Council members on those working groups to ensure we are working within that. Council members signed contracts stating this is what they would commit to.
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Close of Meeting

- To round things up, Jane thanked everyone for their time and for the mahi you do in your community. Thank you for our robust conversations, there is mahi we need to do inside our own structures.

Jane closed the meeting with karakia.

The meeting closed at 6.15pm

MINUTES

WAHARUA KŌPITO (CONSUMER COUNCIL)

26 September 2023

4.00pm

Rainbow Youth, New Plymouth and Zoom

Present: Jane Parker-Bishop (Co-Chair), Paula King (Co-Chair), Ainsley Luscombe, Shelley O’Sullivan, Angela Kerehoma, Wes Milne, Graham Walker, Dinah King, Dinnie Moeahu, Ngāpai Ngatai, Caroline Tyrrell, Nannette Pirikahu-Smith

In Attendance: Ingrid Chamberlain, Interim Manager – Clinical Governance Support Unit; Tanya Anaha, Tahuu Rangapu Chief Māori Health & Equity Officer; Lisa Varga – PA to Group Director Operations

Karakia and Welcome

- Council only time was held until 4.25pm.

Apologies

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- Ingrid is leading this project which among other things includes looking at hospital entrances etc. Ingrid also noted that in the Clinical Governance Unit they are working on the consumer feedback forms – online as well as hard copy.
- Angela noted an imbalance in the two-whare approach.

IBA / WebPAS Gender Identity Work

- Pronouns on the hospital system was discussed during a meeting Jane and Paula had with Gillian, there was a promise of movement.

- Wes noted this is in relation to updating peoples' profiles. The sex assigned at birth is shown however this will also include pronouns. Very dynamic conversations have been had with a selection of people from different parts of the hospital in attendance.
- Jane thanked Wes for leading these conversations.

The Council accepted the minutes of the July 2023 meeting as a true and accurate record.

Co-Chairs' Update

- Nationally Margie Apa, Chief Executive – Health New Zealand has requested a rapid review of Consumer Councils. Initially started as a stocktake of what they look like currently and what they might look like moving forward. The goal posts have moved slightly and are now wanting to know what the mechanisms are for consumer engagement. Taranaki has been included as part of the review committee.
- Jo Moon, Whānau Voice has put out a survey to 19 hospitals – 15 have responded. This is a stocktake asking do you have a functioning Consumer Council, are the members on committees, what are they paid, how many hours do they spend etc.
- Hector Matthews will collate and feed the information back to the national Executive Leadership Team.
- Paula noted that the August 2023 meeting did not go ahead due to a lack of quorum however those present discussed the presentation by Te Punanga Ora at the Aotearoa Marae on 22 August 2023.
 - Paula thought it was wonderful, co-design in action!
 - Those represented at the hui included Māori Health providers, Te Punanga Ora and Te Whatu Ora along with other health services across the sector.
 - The localities were announced with two localities being formalised – Te Taiwhakararo and Te Taiwhakarunga.
 - For the next phase there will be more community hui held so whānau and the general public can be updated around the health reforms.
 - Dinah was surprised at the volume of representation.
 - Jane thought it was like giving the green light to think broadly and to tackle things that are not working, the wheels are turning albeit slowly!
 - Tanya commented that the final localities plan gets signed off by Te Punanga Ora.
- Nan queried that for some services if people live in Waverley and want to go to Whanganui the ambulance will tell them they have to go to Taranaki. Tanya said that this is part of why localities planning is important. In becoming one Te Whatu Ora talking about services that best meet the needs of the community. If Whanganui best meets the need that is where patients will go. If services in Waikato will better meet a patient's needs that is where they will go. The aspiration is to get to wherever best meets the needs of whānau.

Te Whatu Ora Update

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- Wes raised access to PREP for gay men; it helps decrease transmission. The Sexual Health Clinic in New Plymouth doesn't prescribe it. Worried about young peoples' access. Ingrid will pass Wes' concerns on.
- Dinah raised a situation with a young first-time mum. Had to go to Wellington for a CAT scan. Didn't understand why she had to go to Wellington but went anyway. Was not supported. Travel assistance is for those travelling over 350kms however living in Hawera she does not qualify for travel assistance. The specialist came to see her but didn't understand why she was there.

Close of Meeting

- To round things up, Jane thanked everyone for their time and for the mahi you do in your community. Thank you for our robust conversations, there is mahi we need to do inside our own structures.

Jane closed the meeting with karakia.

The meeting closed at 6.15pm

MINUTES

WAHARUA KŌPITO (CONSUMER COUNCIL)

26 September 2023

4.00pm

Rainbow Youth, New Plymouth and Zoom

Present: Jane Parker-Bishop (Co-Chair), Paula King (Co-Chair), Ainsley Luscombe, Shelley O’Sullivan, Angela Kerehoma, Wes Milne, Graham Walker, Dinah King, Dinnie Moeahu, Ngāpai Ngatai, Caroline Tyrrell, Nannette Pirikahu-Smith

In Attendance: Ingrid Chamberlain, Interim Manager – Clinical Governance Support Unit; Tanya Anaha, Tahuu Rangapu Chief Māori Health & Equity Officer; Lisa Varga – PA to Group Director Operations

Karakia and Welcome

- Council only time was held until 4.25pm.

Apologies

- Belinda Tran-Lawrence, Jamie Allen, Raymond Tuuta.
- Nicola Clarke was absent.

Task List / Previous Minutes

Council Budget

- This has been clarified; the Council has a budget of \$10,000 for sundry items and \$2,000 for the communications group for advertising etc.
- The Council would appreciate regular updates on the budget.

Patient Stories

- The Council do not currently have the capacity to deliver this as they are still forming. Jane suggested patient stories be put on hold until the Council have capacity to roll out further.
- Ingrid has been doing some work around patient stories and has approached Mary Bird. Mary to be put in touch with Jane and Paula.

First Impressions Project

- In relation to this project, a call for expressions of interest to join a working group went out. Paula, Caroline, Jamie and Ainsley would like to be involved.
- Ingrid is leading this project which among other things includes looking at hospital entrances etc. Ingrid also noted that in the Clinical Governance Unit they are working on the consumer feedback forms – online as well as hard copy.
- Angela noted an imbalance in the two-whare approach.

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- A young health professional involved in Ainsley's care had a heart attack six weeks ago and was helicoptered to Waikato. He required a stress test before going back to work full-time. His appointment for the stress test had been cancelled because of the cardiologist and was scheduled for a month later. Not a satisfactory situation at all.
- Confusion around localities – local, regional and national confusion is excessive. It appears to Graham that the Council should not have too much expectation of the localities planning and what comes out of them having much change for us. Graham has a friend who is the CEO of the South Seas organisation, they are one of the most successful of the 12 localities. When it comes down to it health is peoples' number three concern; the first one is culture and language, housing then health. Don't know how it is going to work but have to be optimistic.
- Wes raised access to PREP for gay men; it helps decrease transmission. The Sexual Health Clinic in New Plymouth doesn't prescribe it. Worried about young peoples' access. Ingrid will pass Wes' concerns on.
- Dinah raised a situation with a young first-time mum. Had to go to Wellington for a CAT scan. Didn't understand why she had to go to Wellington but went anyway. Was not supported. Travel assistance is for those travelling over 350kms however living in Hawera she does not qualify for travel assistance. The specialist came to see her but didn't understand why she was there.

Close of Meeting

- To round things up, Jane thanked everyone for their time and for the mahi you do in your community. Thank you for our robust conversations, there is mahi we need to do inside our own structures.

Jane closed the meeting with karakia.

The meeting closed at 6.15pm