

Agenda

Health Consumer Council

Venue: Kawakawa Room, Education Centre,
889 Cameron Road, Tauranga or [Zoom](#)
Date: 14 July 2021, 10:30am to 1:00pm

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

Item No.	Item	Lead	Page
1.	Karakia timatanga/Welcome	Grant	
2.	Presentation: None.		
3.	Apologies: Theresa Ngamoki Moved: Seconded:	Chair	
4.	Interests Register:	Chair	
5.	Minutes of Meeting: 9 June 2021 to be confirmed. Moved: Seconded:	Chair	
6.	Matters Arising: See attached – to be updated.	Chair	
7.	Matters for Discussion/Decision		
a.	Chair's Report – attached.	Chair	
b.	Workshop Conclusion– Community Engagement Vision Workshop - 'Creating a system of consumer voice' <ul style="list-style-type: none"> Do we want to focus on “local”, as in the “consumer/community voice within the local health system”, or the wider context of consumer engagement in health (or, both). Do we mean our proposal for an independent consumer leadership group to be a replacement for the current HCC (transforming its status and giving it greater autonomy through control over its own budget and resources); or in addition to HCC? 		
c.	PRESS RELEASE Queen's Honours awards recognition update	Chair	
d.	New mental health facility at Whakatāne Hospital. See the following link: https://www.newsroom.co.nz/dispute-over-four-beds-threatens-new-mental-health-unit-build?utm_source=Friends+of+the+Newsroom&utm_campaign=d4b7f750eb-Daily+Briefing+29.06.2021&utm_medium=email&utm_term=0_71de5c4b35-d4b7f750eb-97879663 Dispute over four beds threatens new mental health unit build?	Adrienne	
e.	Consumer Engagement QSM Report.	Chair	

Item No.	Item	Lead	Page
8.	Correspondence:	Chair	
9.	Health Sector Update:		
10.	Reports of participation in other groups:	Chair	
11.	General Business:	Chair	
12.	Next Meeting: 11 August 2021	Chair	
13.	Karakia Whakamutunga		

HEALTH CONSUMER COUNCIL MEMBER ATTENDANCE

2021/22

Member	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
Terehia Biddle	-	-	●									
Rosalie Liddle Crawford	●	●	●									
Sue Horne	●	●	●									
Theresa Ngamoki	A	A	●									
Grant Ngatai	●	A	●									
Tessa Mackenzie	●	●	A									
Lisa Murphy	●	●	●									
John Powell	●	●	●									
Florence Trout	●	●	●									
Adrienne von Tunzelmann	●	●	●									

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

Minutes

Health Consumer Council

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Date: 9 June 2021, 10:30am to 1:00pm

Chair	Lisa Murphy	Minutes	Florence Trout
Members	Grant Ngatai, Deputy Chair Adrienne von Tunzelmann, Deputy Chair Sue Horne – Tauranga John Powell – Mount Maunganui	Florence Trout – Tauranga Rosalie Liddle Crawford – Mount Maunganui Terehia Biddle – Whakatāne Tessa Mackenzie – Katikati Theresa Ngamoki – Whakatāne	
In attendance	Tim Antric (Consultant), Adrienne von Tunzelmann, Florence Trout, Grant Ngatai, Theresa Ngamoki, Sue Horne, John Powell, Rosalie Liddle Crawford, Lisa Murphy (Zoom), Terehia Biddle (Zoom).		

Item No.	Item	Lead	Action
1.	Karakia timatanga/Welcome	Grant	
2.	Presentation: None.		
3.	Apologies: Tessa Mackenzie, Debbie Brown, Maria Moller Moved: Adrienne Seconded: Sue	Chair	
4.	Interests Register: None	Chair	
5.	Minutes of Meeting: 12 May 2021 to be confirmed. Moved: Sue Seconded: Adrienne	Chair	
6.	Matters Arising: See attached – to be updated.	Chair	
7.	Matters for Discussion/Decision (a) Discuss sending congratulations to Janet Peters and thanks for her work in mental health in our region. She has been awarded a New Zealand Order of Merit in the Queen's Birthday Honours for services to mental health. https://sunlive.co.nz/news/270088-taurangas-queens-birthday-honours-recipients.html (b) Chair's Report. (c) Workshop – Session 2 Community Engagement Vision Workshop - 'Creating a system of consumer voice' <ul style="list-style-type: none"> Consumers/community/whānau involved at all levels – board, policy, executive, provider arm, funding, cluster, service delivery and care. Processes for supporting community involvement and diverse representation. Resourcing for community involvement. 	Rosalie Chair	Adrienne / Rosalie / Lisa

Item No.	Item	Lead	Action
	<ul style="list-style-type: none"> • Established and diverse systems to gather and respond to consumer voice. • System evolved to respond to community needs (website, campuses, information centre, letters and leaflets, scheduling). <p>Department of Prime Minister and Cabinet's The new health system page https://dpmc.govt.nz/our-business-units/transition-unit/responsehealth-and-disability-system-review/information</p> <p>Voice of communities and consumers 'factsheet' https://dpmc.govt.nz/sites/default/files/2021-04/htu-factsheet-voiceof-communities-and-consumers-en-apr21.pdf</p>		
8.	Correspondence: None	Chair	
9.	Health Sector Update: Refer workshop.	Tim	
10.	Reports of participation in other groups: Deferred to future meeting.	Chair	
11.	General Business: Deferred to future meeting.	Chair	
12.	Next Meeting: 14 July 2021	Chair	
13.	Karakia Whakamutunga		

Health Consumer Council Monthly Meeting Matters Arising June 2021

Meeting Date	Action required	Who	Action Taken	Completed / in progress
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		
09.06.21	Send letter of congratulations to Janet Peters for her Queen's Birthday Honour.	Adrienne, Rosalie, Lisa		
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 to	Tim, Lisa		

Meeting Date	Action required	Who	Action Taken	Completed / in progress
	align with the August HCC meeting.			
09.12.20	Health & Disability System Review – members to read and feedback to DHB about where the consumer council should be involved.	All		
09.12.20	National Trauma Network correspondence – circulate to members.	Sue		
09.12.20	Webinar link for sharing with members.	Sue/Tim		
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 are forwarded to the chair. Will enquire again if this is happening.	Maria now has access to this email address. What emails are required to be forwarded to Chair.
14.10.20	Update groups you attend on Connex.	All	<i>Members to check Connex, working area "HCC Community Connections" and add details.</i>	
09.09.20	Housing Shortage - Accessible Housing took over from Housing New Zealand. How is that going?	AV		<i>Ongoing.</i>

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		
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 meeting invite and slides to discuss further with members.	All	On-going - led by Tim.	Completed. Paper circulated to Council.

Health Consumer Council - Chairs Report

June 2021

Key Topics:

- DHB future planning – Strategies to partner in co design initiatives;
- ‘Creating a system of consumer voice’ – two workshops held;
- Press Release Queen’s Honours awards recognition;
- Whanau & Consumer-centred Healthcare Council;
- Reporting of meetings attended;
- Consumer Engagement Quality and Safety Marker and current projects.

The HCC has been working with the outgoing Kaewhakahaere Takawaenga a Hāpori (Person Centred Experience Lead) to explore “creating a system of consumer voice” with a focus on the future for consumer/community voice within the local health system as represented by the BOPDHB, and in anticipation of Health NZ. The BOPHCC is seldom approached by DHB management for input into any project, decision, or plan. Going forward there needs a conjoint relationship with DHB management to be effective and perform the council’s functions set out in the Health Consumer Council Terms of Reference 2020 approved by the DHB.

HCC is preparing a press release to recognise recipients of awards in the 2021 New Year’s and Queen’s Birthday Honours who have made significant contributions to health in the Bay of Plenty. This will be sent to various news publications once agreed with Communications staff.

Scheduling of meetings of the Whanau & Consumer-centred Healthcare Council was discussed.

Chairperson attended the Clinical Governance Committee and relayed HCC members thanks and appreciation for the development and ongoing production of the Clinical Governance Committee (CGC): Summary of Meeting Report.

The Consumer Engagement Quality and Safety Marker updates were presented during the workshop.

Lisa Murphy
BOPDHBHCC Chairperson

Sharon Shea
Chair
Hauora a Toi Bay of Plenty District Health Board

Kei te rangatira, tēnā koe

CONSUMER ENGAGEMENT IN THE BAY OF PLENTY

As you're aware, consumer and community voice is critical to the development of an effective and equitable health care system. The development of the Health Consumer Council was an important step towards improving outcomes for our communities. However, further work is needed.

The DHB submitted a report to the Health Quality & Safety Commission in March this year. This report identified that significant improvement is needed to improve consumer engagement across the DHB. Work is needed to improve consumer engagement, responsiveness and experience.

The loss of key consumer engagement support positions, including the clinical director for quality and patient safety, further weakens engagement with health consumers. The Health Consumer Council has spent time exploring the current situation, its strengths and weaknesses, and developing recommendations to improve engagement.

We invite you and the Chief Executive to attend our August meeting to discuss these recommendations. The meeting will be held at the BOPDHB Clinical School on 11 August at 11am. Attached is a report based on two workshops held by the Health Consumer Council. This report will form the basis for our discussion.

Ngā mihi nui

Lisa Murphy
Chair
Bay of Plenty Health Consumer Council

CREATING A SYSTEM OF CONSUMER VOICE

BAY OF PLENTY HEALTH CONSUMER COUNCIL

BACKGROUND

The recently announced changes to the health system will impact on the Bay of Plenty Health Consumer Council (the Council) and other consumer bodies within the Bay of Plenty. Considering this, the Council held two workshops to explore the future for consumer/community voice within the local health system.

The Health Quality & Safety Commission has identified that patient and consumer voice should be understood and valued by health providers. They recommend that consumers are represented in all work programmes.

There are currently several mechanisms in place to bring a consumer voice to the system, these include Te Amorangi Kāhui Kaumatua, the Health Consumer Council, Tauranga Health Liaison Group and the mental health consumer group.

The consumer representatives currently engaged with BOPDHB have direct experience of DHB services. However, they also bring:

- confidence in engaging with health decision makers and public forums
- perspectives and ideas that are informed by research and evidence
- broader perspectives developed via extensive community involvement
- a focus on solutions and working with the sector to shape health services.

While consumer and community engagement is a key part of the Bay of Plenty health system, there remains significant room for improvement. Existing mechanisms often fail to be effective. There are numerous instances of the Council and other groups being excluded from engagement processes – and further examples of DHB employees failing to close the loop once engagement/consultation moves to action.

Other mechanisms for consumer feedback include complaints and direct feedback to staff, although it is not clear how these feed into strategic change.

THE PURPOSE OF CONSUMER ENGAGEMENT

Consumers want to have an active role in their own healthcare and the services available to them. The existing system often fails to value consumer knowledge and the insights provided through lived experience. While equity, diversity and inclusion are frequently used terms within BOPDHB, the reality of people's experience does not match with this. Appropriate tikanga has not been embedded within the system.

Our community wants to see a system that offers everyone a fair deal, that connects with people in their community/locality and empowers consumers.

The Council identified five key purposes for consumer and community engagement: (1) Identifying Gaps, (2) Empowering communities, (3) Providing advocacy, (4) Sharing power, and (5) Ensuring transparency.



Figure 1: The Purpose of Consumer & Community Engagement in the Bay of Plenty

Effective community-led healthcare starts in the community. It values the lived experience of consumers in all their diversity. There is a need to effectively map services, gaps, and introduce systems to ensure the right spokespeople/consumer representatives are engaged.

The consumer voice should be able to disrupt the system – to challenge the status quo. There are currently issues of integration, particularly of different models and modalities of healthcare.

The reforms to the health system are of concern to the Council. Issues already identified include enabling whānau to travel and provide support for patients (there are already issues with this and a single national system is likely to create further issues) and the lack of services in key localities (e.g, Pāpāmoa, Ōpōtiki).

WHAT NEEDS TO BE IN PLACE FOR THE FUTURE?

Consumer and community engagement needs to be valued and supported at all levels of the system locally – from planning to operations. The goal of the system should be to reduce dependency and preventative measures need to be supported. This can only be achieved through supporting and empowering consumers to be part of developing and evolving the health system.

The Council believe this can be achieved through moving to a relationship model of consumer and community engagement (see Figure 2).

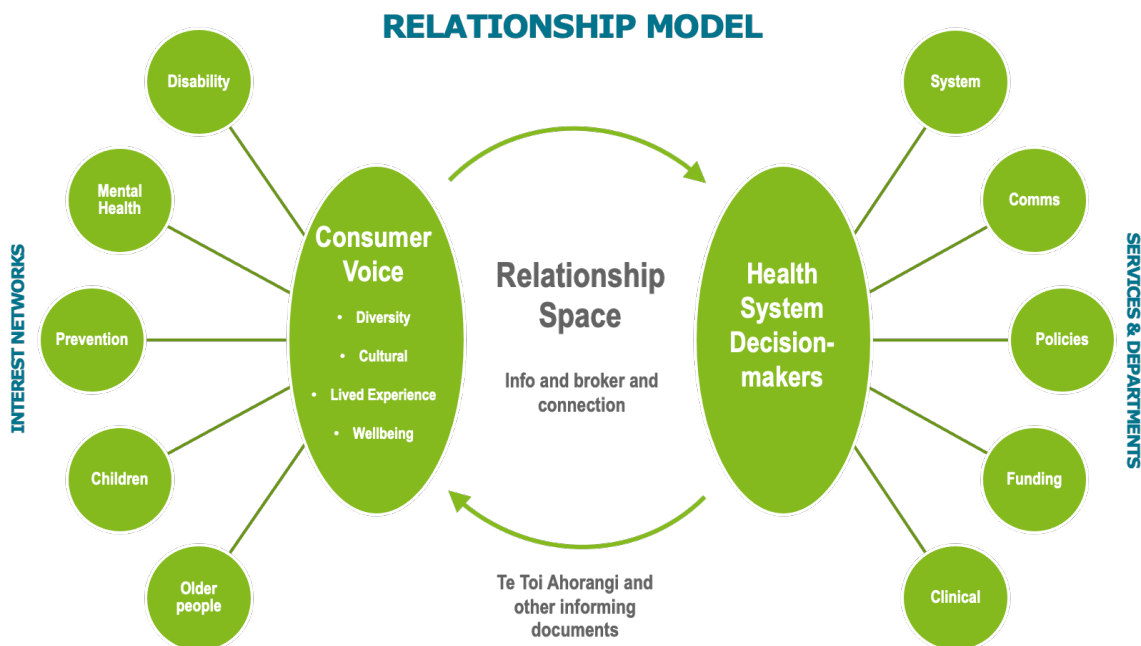


Figure 2 Consumer & System Relationship Model

This Relationship Model creates opportunities to embed active and engaged community voice within the health system. This requires:

- » A local leadership body for consumer engagement and involvement. This group should be valued and empowered to be part of the decision-making structures. The group needs to be a mandated part of the system, current arrangements appear to be tokenistic.
- » The local health system to establish useful and productive relationships with consumer organisations – it is not sufficient to expect consumer representatives to hold those relationships.
- » All consumer engagement to be connected and supported. Consumer representatives need to be provided with the opportunity to develop the skills needed to provide strategic and useful input. There needs to be support for contributions from consumer organisations as well as population level input.
- » Departments to establish relationships with the community and their consumers. These should be long-term and strategic, informing future service planning and delivery.
- » Diverse consumer voices, particularly by locality, it is likely that separate forums in the Eastern and Western Bay would enable greater diversity and address the variation in experience.

The Council recommend that an independent consumer leadership group be established – with control over its own budget and resources. This group would provide guidance to the health system on how to engage with consumers. It would employ people with lived experience of the health system to provide advocacy, support service design and contribute to research projects.

<i>Functions</i>					
<i>Contributors</i>	Identify gaps	Empower communities	Provide advocacy	Share power	Ensure transparency
Consumer leadership body	x	x	x	x	x
Consumer organisations	x	x	x		x
Department consumer reps	x	x		x	x
Locality consumer groups	x	x		x	x
Public meetings	x	x			x

Figure 3: Functions and Contributors

WHAT WILL THIS ACHIEVE?

Developing an integrated and resourced relationship approach to consumer engagement will:

- » Provide a visible space for the community to engage
- » Increase community trust in the health system
- » Ensure that consumer voices are visible in policy, strategy, and funding decisions
- » Embed a consumer-centric view within the health system
- » Create multiple avenues for feedback
- » Ensure greater transparency and accountability
- » Provide for information and data to be shared with the community
- » Demonstrate the health systems commitment to consumer voice.

It is further anticipated that consumer voices can be brought together to influence service delivery across government agencies.