



Northland Health Consumer Council

5.00pm to 7.00pm | Thursday 23 February 2017

Tohora House, Waipoua Meeting Room

Northland Health
Consumer Council
nhcc@northlanddhb.org.nz

Minutes

Present/Apologies

Attendance	24 Nov	26 Jan	23 Feb	30 Mar	27 Apr	25 May	29 Jun	27 Jul	31 Aug	28 Sept	26 Oct	23 Nov
Kevin Salmon	✓	✓	✓									
Chelsea Edmonds	✓	✓	x									
Debbie Walker	✓	✓	✓									
Kathy Diamond	✓	✓	✓									
Kathryn Sadgrove	✓	x	✓									
Brian Vickers	✓	✓	✓									
May Seager	x	✓	x									
Julie Hepi	✓	✓	✓									
Leanee Sayers	x	✓	✓									
Visitor	24 Nov	26 Jan	23 Feb	30 Mar	27 Apr	25 May	29 Jun	27 Jul	31 Aug	28 Sept	26 Oct	23 Nov
In Attendance	24 Nov	26 Jan	23 Feb	30 Mar	27 Apr	25 May	29 Jun	27 Jul	31 Aug	28 Sept	26 Oct	23 Nov
Michael Roberts	✓	x	✓									
Margareth Broodkoorn	x	✓	✓									
Corrina Davis	✓	✓	✓									

✓ = present, x = apologies given, o = no information

In attendance:

1. Previous Minutes 26 January 2017

- 1.1 Minutes of the previous meeting held 26 January 2017 deemed true and correct.

2. Matters Arising

- 2.1 Corrina to send dates to Kathy, Kevin and Julie for the Child Health Governance meeting. DONE Kathryn and Julie attended.
- 2.2 Update group photo. Agreed to hold off until more new members recruited.
- 2.3 Margareth to assist with the facilitation of the Strategic Direction 2017 DONE
- 2.4 Corrina to re-circulate the feedback around the priorities for 2017 survey. DONE
- 2.5 Leanee and Julie to write and send bios, Corrina to send examples. Will do by next month.
- 2.6 Corrina to organise a card for Marilyn. DONE Also there was a card for Tania.
- 2.7 Margareth checked with nurse manager about the use of the butterfly room who said the room will be available for women who have had a medical termination and that it is more than appropriate to be used in this manner. There needs to be a process on how you get the family over from surgical. DONE

3. Conflict of Interest

- 3.1 Nothing new to add.

4. Overview Patient Experience Week – Keri Linklater

- 4.1 Keri gave an update on what will be happening for the patient experience week. The week has been aligned with the international patient experience week which has conflicted with our Anzac weekend. They have finished reviewing the patient experience survey questions and wards are receiving data back through a poster. In general the bulk of the comments were very positive. Currently reviewing the survey for the children's wards and hope this will be done in time for patient experience week. Keri invited NHCC to be involved in patient experience for the first year house officers training programme on 11 April 2017 there is a spot 12.15 to 1.00pm. Potentially Kathryn & Greg, and Julie would be interested. Looking for 2- 3 people who could come and tell their stories.
- 4.2 The Disability Support Governance Group will be looking at the annual plan and aligns to the site master plan. They will be looking at issues with access and there is capacity to join or feed into that group. Brian would be interested in joining this group. Group not formed at the moment but Keri will send a request through once dates are set.
- 4.3 Starting Medication Information project, HQSC research coming to review the discharge process with staff and how medication information is given, this is happening in 2 weeks. National survey has shown a poor response to the question relating to medication information.

5. Strategic Direction for 2017 – Margareth Broodkoorn

5.1 Review the Terms of Reference:

- Developed in November 2014 to cover the chair role and functions of the members of the group.
- Under functions the clause 'For the avoidance of confusion, the NHCC will not be involved in the Northland DHB contracting processes'. Debbie and Kathy are on the Food and Cleaning Tender process meetings, but have no level of decision or influence, purely there as consumer experience.
- Everyone happy with the Level of Influence.
- Membership needs elements added around gender, geographical spread, etc.
- Chair– 'initially' needs to be removed from the second paragraph. 'Subsequent' appointments change to current. Need register of when members started in their roles and when they are due for re-elected. Start from two years. **Action Point:** Kevin to check when term for chair is up and discuss with Nick if he is happy for chair to continue and re-appoint. Should the members have more input into the process for Chair. The Deputy Chair should have the same term as the Chair.
- Honorarium clause ok.
- The ToR does not identify any recruiting process and the profiling of those individuals. To add "Membership will be sort through a process of advertising". May identify profile required and recruit to that effect. Can be put through newspaper.
- ToR review will have to be passed to Nick.
- Co-operative Agreements and Arrangements – Patient Safety and Quality have a database of other consumers. NHCC are sitting at another level. There needs to be a structure in place to enable communication, it is great that the hospital has become more co-design friendly.
- Current Register to be maintained. If the request fits within the strategic direction and a role for this group to pick up or we endorse the request and work with the Patient Safety and Quality directorate to bring in a consumer to be part of that process who has experience with this service.
- Meeting – To be noted that the meetings are held monthly.
- Reporting - Council report to ELT via monthly meeting minutes including any recommendations. At the end of each meeting there should be 2-3 agreed keys messages that NHCC want the organisation to hear. The chair meets at least twice a year with the CEO.

5.2 **Job Description of Chair**

- About the NHCC – ‘the Northland District Health Board (DHB) Executive Leadership Team’ Board and Executive Leadership Team to be removed. Chief Executive to be inserted in place.
- Job Description to be amended to show a period of appointment for two years as reflected in the Terms of Reference.

5.3 **What are the 3 top priorities 2017 –**

- Discharge Planning – how people leave hospital safely, what does that mean, how does this team get involved around this? Do we want to get involved in their process or get involved in our own?
- Raise Profile – patient experience week, raise within staff.
- Patient Choice and Information – enhancing how options are presented.
- Future Proof Council – put processes, recruitment, succession, profile new members, orientation, training plan.
- Improving relationship with CGB –
- NHCC Sharing with Doctors – what makes a good consultation, patient literacy.
- Site master plan – we have good representation already

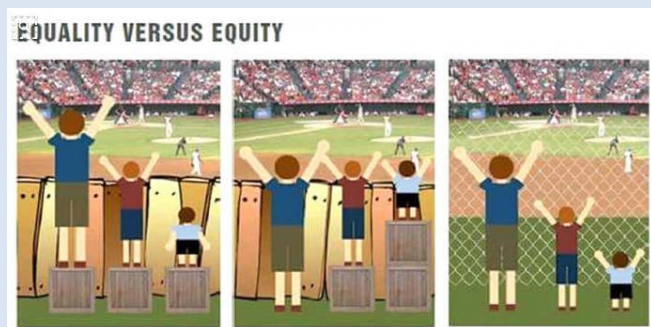
5.4 Strategic Direction to be added to the next agenda for further discussion.

6. Topic of the Day – Open Forum (if time allows)

6.1 Mike gave an update on what he has been working on. If patients given an understanding of their options they can decide the treatment they want and make a decision that is right for them. Has a sabbatical coming up this year. Mike will be looking at what aids can be used to help people understand, and how choices are communicated to the patients. Happy to talk about this later in the year as this pans out.

7. Other Agenda Items

Training, thanked members for their input. This was a really good diagram from training, remove the barriers so everyone get access. The systemic barrier has been removed.



8. Meeting Closed: 7.07pm

Actions

Next Meeting: 5.00pm, Thursday 30 March 2017

Venue: Waipoua Meeting Room, Tohora House