



Northland Health Consumer Council

5.00 pm to 7.00 pm | Thursday 22 February 2018

Tohora House, Waipoua Meeting Room



Minutes of Meeting

Present/Apologies

Attendance	22 Feb										
Kevin Salmon	✓										
Debbie Walker	☒										
Kathy Diamond	☒										
Kathryn Sadgrove	☒										
Brian Vickers	☒										
May Seager	☒										
Julie Hepi	☒										
Leanee Sayers	✓										
Lisa Young	✓										
Susan Burdett	✓										
Robyn OLeary	✓										
Visitor	22 Feb										
Mike Cummins	✓										
In Attendance	22 Feb										
Michael Roberts	x										
Margareth Broodkoorn	x										
Keri Linklater	✓										

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

Minutes: Vita Badran

Next Meeting: 5.00pm to 7.00pm, 29 March 2018

1. Previous Minutes

2. Presentation by Mike Cummings – Update on the hospital rebuilt.

- Mike is the Director of Strategic Projects
- In May 2017, the Capital Investment Committee last year confirmed that NDHB can proceed to developing a programme business case for major redevelopment and a business case for an interim works package. A decision by the Capital Investment Committee is expected by mid-year 2018.
- A business case process is a process that's been put in place by the Treasury for major government organisations. It is a four step process for getting approval for large projects. The biggest projects (such as hospital rebuild) have to be approved by the Cabinet and the ministers of health and finance.
- Location options for a new hospital: reconfigure the existing building, partial greenfields on the current site or a full greenfields facility on a new site. Price – between 600 to 800 million dollars. Timeframe: 5-8 years.
- How can we address issues with capacity in the next 5-8 years? Capacity of theatres, ED beds, outpatients and parking:
 - Planning to add additional theatres as an extension to the existing building.
 - Reconfiguring ward 16 to include an assessment unit to take patients from ED for up to 36 hours to observe and monitor before making a decision whether to admit to the hospital.
 - In order to help relieve pressure in the theatres, a separate endoscopy suite is planned in the old delivery/maternity area.
 - Regional initiative to have a cardiac catheter lab in Whangarei. It is a specialty service that is growing in New Zealand. This would also contribute to reducing the number of helicopter trips.
 - Looking to relocate all community mental health facilities from Maunu house and Kamo to a single location in the CBD.
- Indicative business case captures the big picture (what we want to build and where), the detailed business case goes into detail (right up to what joinery we need, where the plugs area), and the implementation business case specifies things such as contractors.
- Feasibility design for the future facilities needs to reflect the model of care. There are design principles that had been endorsed by the council. We need to allow for flexibility for further expansion of the new hospital if demand continues to grow. Because of this some wards may have collocated facilities that can be easily shifted.
- Way finding – how to make it easy for patients to get into and around the hospital.
- Additional 49 patient carparks have been added in 2017. Some of the interim work may take up some of the carpark space.
- Telehealth and improved day surgery are some of the trends that are helping reduce demand on hospital beds.

3. Feedback request

- A poster submitted by Martina Ackermann for feedback
- Relates to a campaign to get people to enrol with a GP
- Needs to be clearer in terms of communicating the 'why' and 'how' and it should emphasise the benefits to people ie, it costs you less if you are enrolled, children's visits are free. Repeated headings are not necessary and make it look too wordy.
- Keri will feedback the groups comments to Martina.

4. Volunteer recruitment update

- The Terms of Reference for the Northland Health Consumer Council set membership at 10 to 15 consumer representatives with diverse backgrounds. Currently we have 10 members and NHCC can have up to 15 members.
- We have advertised for volunteers through the Northland DHB Facebook page and recently through Volunteering Northland.
- Volunteering Northland is part of a New Zealand wide non-profit organisation providing a recruitment and referral service for volunteers. They placed the ad for NHCC on their website, as well as in the Northern Advocate and in Northland Age weekly.
- So far we received two referrals through Volunteering Northland, and looking to organise interviews in March.

- Keri to follow up regarding the Consumer Council membership with a consumer who attended the co-design workshop with Kathryn.
- The Maori Health directorate has recommended some potential new volunteers, Vita to follow up.
- Vita to follow up with the two young volunteer candidates from last year.
- Leanee and Kevin will be on the interview panel.

5. Discharge summary / Transfer of care document co-design workshop

- Workshop held with staff and consumers to discuss possible modifications to the transfer of care document as a means of improving and reinforcing communication about medications side effects and managing your condition after you leave hospital
- Software limitations to implementing a fully updated designer summary, although new design got great feedback from consumers.
- The ASH project also showed that issues with readability/comprehension of discharge summaries are among the top reasons for paediatric patients returning to the hospital. Some patients found there was too much information on the discharge, not very clear what to do with the medications.
- Concerns have been expressed with the fact that the discharge letter is addressed the GP, not to the patient, hence all the jargon. Patient gets a copy.

6. Reporting on project meetings attended by Consumer Council members to become a new standing agenda item

- Consumer council members who go to meetings will report back on those meetings. This will become a standing agenda item.
- Kevin to report on Site Master Plan and Whanau Tahi
- Susan and/or Brian to report on Clinical Governance Board meetings
- Someone needed to go to the maternity meetings and report back
- Lisa to report on ASH
- If you are unable to attend a monthly Consumer Council meeting please email a brief report on the relevant service meetings you attended to Kevin or Vita.

4. Signage

- Kevin met with Brett Attwood regarding the doors that lock after 6pm. Agreed to get a buzzer for the door, which has now been installed.

9. Round Robin

- Susan Burdett reported on the CGB meeting. Considering getting professional advice regarding way finding at the hospital. Highlighted that signage should be regulated and all signs must look professional. Intermediate Level Care Unit will open soon. Looked at the report from the HDC regarding complaints for all of New Zealand July-December 2017.
- Kawakawa hospital has been completed. Suggested for members who live in the Bay of Island to visit the new hospital.
- Issues with the Needs Assessment and Service Coordination (NASC). A person who had a surgical procedure and was moving a different address temporarily needed extra help. But when asked for short-term extra care was denied because they already were getting hours under a disability NASC. However, it is important to remember that any allocated NASC hours are for a particular condition (for example, arthritis etc), and in case of a surgery this would warrant additional hours.

Summary of action points:

Who	What
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Vita	Arrange new member interviews in March	