



# Northland Health Consumer Council

5.00 pm to 7.00 pm Thursday 27 September 2018

Tohorā House, Waipoua Meeting Room

## Minutes of Meeting



### Present/Apologies

Attendance	22 Feb	29 Mar	26 Apr	31 May	28 June	26 July	30 Aug	27 Sep			
Kevin Salmon (Chair)	✓	⊗	✓	✓	✓	⊗	✓	✓			
Kathy Diamond	⊗	✓	⊗	✓	✓	o	✓	✓			
Kathryn Sadgrove	⊗	✓	✓	✓	✓	✓	✓	✓			
Brian Vickers	⊗	✓	⊗	⊗	✓	✓	✓	✓			
May Seager	⊗	✓	✓	✓	✓	✓	⊗	⊗			
Julie Hepi	⊗	✓	⊗	⊗	⊗	⊗	⊗	⊗			
Leanee Sayers	✓	✓	o	✓	✓	✓	✓	✓			
Lisa Young	✓	✓	✓	✓	⊗	✓	✓	✓			
Susan Burdett	✓	⊗	✓	✓	✓	✓	✓	✓			
Robyn OLeary	✓	✓	⊗	✓	✓	⊗	o	o			
Kristina Duran	---	---	✓	✓	✓	✓	✓	✓			
Penny Franklyn	---	---	✓	✓	✓	✓	✓	✓			
Lynne Tucker	---	---	✓	✓	✓	⊗	✓	✓			
Leanne Thompson	---	---	✓	⊗	⊗	o	o	---	---	---	---

  

Visitor			26 Apr	31 May	28 June	26 July	30 Aug	27 Sep			
Alan Davis			✓								
Helle Nielsen-McConnochie			✓								
Harold Wereta					✓						
Ian MacKenzie						✓					
Lisa Crossland							✓				
Sophie Cornell								✓			

  

In Attendance	22 Feb	29 Mar	26 Apr	31 May	28 June	26 July	30 Aug	27 Sep			
Michael Roberts	⊗	⊗	⊗	⊗	⊗	⊗	⊗	✓			
Margareth Broodkoorn	⊗	✓		✓	⊗	✓	⊗	⊗			
Ayshea Green	⊗	✓		✓	✓	--	✓	--			

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

Minutes: Kim Doble

Chair: Kevin Salmon

**Next Meeting: 5.00pm to 7.00pm, 25 October 2018**

### 1. Admin

- 1.1 Apologies – Margareth Broodkoorn, May Seagar
- 1.2 Introductions
- 1.3 Conflict of Interest – none
- 1.4 Previous Minutes - agreed

## 2. Presentation by Sophie Cornell – Patient Information and Consumer Input

- Sophie is the new Document Control person in the Patient Safety & Quality Improvement Directorate team. Her role helps to review and approve documents and some of those documents include patient information. We are trying to make sure that patient information has had really good consultation before it's available to staff and distributed to patients. This is a brief presentation today to talk about some of the issues we have been having and to explain the new document control process and the involvement of the consumer council
- Recently the hospital has had a much stronger focus on improving patient information. Some of the issues we have faced are there are lots of expired documents which needs updating, there hasn't been an enforced process to ensure quality which means that staff have been able to make documents without proper consultation, large variations in style and formats, documents are not always on approved templates, inconsistencies with font and format, a lack of consumer input and content not always suitable for the intended audience
- Patient information is an important way to communicate with our patients. Poor quality information means we don't communicate effectively. The information also reinforces messages that are given verbally
- We have developed a new process for developing patient information over the last few months. Step 1 is the document developer, if you are a staff member and you want to develop patient information you may do so. Step 2 is when it gets submitted for review and we have set up a document control committee who will check the document in the first instance for things like grammar. Step 3 is document approval which in most cases will be the Consumer Council, staff can get their own consumer engagement and if that is comprehensive it doesn't have to come to the Consumer Council. However we have found that a lot of people are grateful that the Consumer Council exists and want to use you. The next stage is how a document is accessed so when it has been approved we make it available via a link to staff online. The document will now have a two year review date
- The new process recognises the importance of consumer input. We do have a heavy reliance on this group now. We really want contribution from the entire group and the expectation is that the review is comprehensive and without it we can't be confident that the feedback is representative of our patient population
- We want to make sure the process is working effectively. We need to discuss the best way forward for the group to review documentation. We have previously sent information by email and want to know if this is working for you. One suggestion is that an hour is set aside in the meeting to deal with this which Kim will lead. We have had problems with getting responses via email, only two to three have been responding. The group discussed the best way forward, the group did not want to set aside time in the meeting as time is already limited. It was agreed that Kim would provide packs at the meetings containing the patient information for review, the members will take this away and bring the feedback to the next meeting. If there is an urgent document for review we could still do this via email. The group also would like to see the end results of some documents. We will review progress at the next meeting

## 3. Updates from regular meetings

### 3.1 Clinical Governance Board

Brian Vickers, Sue Burdett, Lynne Tucker & Mike Roberts

- There was a presentation on the replacement of CKC which is where all documents are stored centrally and are accessible to staff
- There are eighteen ECG machines in the hospital and staff are now able to write on them, the patients name and date can now be directly entered onto the machine and the information can be transferred. This means the information is now available immediately rather than having to print it out and write on it. It can also be transferred to other DHB's

- Occupational Health and Infection control are going to be included in discussions about the new hospital build. The Minister is coming to the opening of the Bay of Islands hospital tomorrow and will make an announcement about the funding of the new build
- There is a new electronic referral system RMS lite which means much better communication between GP's and the hospital. Mental Health are not using this as they have their own system

### 3.2 Child Health Clinical Governance Group

Kathryn Sadgrove

The next meeting is in October. There have been problems with getting meeting details in the past, there is now a new admin person who has provided the meeting dates so there shouldn't be a problem attending. Kathryn will feedback at the next meeting. Kristina will attend meetings when she can.

3.3 Maternal Health Clinical Governance Group – these are now bi-monthly and the next meeting is in October.

### 3.4 ASH

Lisa Young

This project is coming to an end. Lisa was unable to attend the last meeting as she is doing a course. Martina is trying to change the meeting day to enable Lisa to attend.

### 3.5 Site Master Planning

Kevin Salmon & Mike Roberts

There will be an announcement by the Minister tomorrow on funding so we will ask Mike to come back and give an update at a later stage. The options have now been released to staff and there has been a lot of clinical consultation about the new build. It will also be important to have Consumer input once things are under way. The last new hospital that was built in New Zealand was Wellington hospital which was opened in 2008. There is a possibility of a standardised ward and the architects have stated this will keep costs down in future as all the planning will have been done already.

3.6 Infection Control – no updates as May attends this meeting.

## 4. Appointment of new Consumer Council members

Kevin Salmon

We have had a resignation from Leanne Thompson. We can have up to fifteen members. Martina Ackermann from Child Health services has found a potential council member and there were two other applications through the website when we recruited last time. We need to get the interview process going again, we need to make sure we have the right cross section of people as we do need more Maori representatives. The interviews take about an hour and we would do three in a day. Penny and Kathryn are happy to attend and also Ayshea would be attendance with Kevin. Kim will look into this.

## 5. Any other business

- Lynne and Kim have applied for the Consumer training which is being provided by HQSC, this will take place in May 2019 in Auckland. HSQC provide a lot of information about Consumer Councils so it is worth having a look at their website
- Sue will be attending the opening of the new hospital in Kawakawa tomorrow
- Kathy has been working in Wellington for the last eight weeks so she hasn't been able to contribute as much as she normally would
- Lisa has been overwhelmed by the influx of emails and printing required for the review of patient information so hasn't been able to provide any feedback, hopefully the new system will make things easier for the group. She has been asked to be involved in a project called family options in December. This is about respite care for people with children that qualify for it. Children currently can go to Kind Hands for respite but this only covers 0-6 years old, there is nothing available in

## Whangarei for over 6

- Brian wanted to highlight to the group about the decision on the Northland rescue helicopter service. The Northland helicopter service is exemplary and it is a concern if it will now be controlled by Auckland. It is a concern for people living in remote areas as this service is vital
- Kathryn attended the Serious Illness Conversation workshop which was run by HQSC. They reviewed the serious illness conversation guide which was developed by a team of palliative care experts in America and was being adapted to use in New Zealand. They discovered that there was a need for more cultural awareness during these conversations. There has been an announcement about a change in funding for family funded care. This is funding for parents who can look after adults and be paid, they are currently paid minimum wage
- Leanee – Spectrum Care are coming to Northland, they are a service provider in Auckland that provides support for high needs clients. They have bought a house and are looking for it to be up and running in February

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### Summary of action points:

Who	What
Kim	Arrange recruitment process for new council members

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