

MEETING OF THE CONSUMER COUNCIL

HELD ON 7 October 2021

12PM, BOARDROOM, SCDHB

PRESENT

Bridget Duff (Chair), Joy Sylvia (Deputy Chair), Neil Kiddey, Andrew Humphrey, Katrina van den Broeke (via Zoom), Julie Patterson, Jill Merritt, Gareth Ford, Dominique Enright (via Zoom)

IN ATTENDANCE

Barb Gilchrist, Nurse Coordinator, Quality and Risk, Robbie Moginie, Director Organisational Capability and Safety, Dianne Black, Consumer Advisor, SCDHB Mental Health & Addiction Services

1. KARAKIA & WELCOME

The chair welcomed everyone to the meeting. Joy Sylvia opened the meeting with a karakia.

Welcome to new member Dominique Enright.

2. APOLOGIES

Kylie Douglas

3. INTEREST REGISTER

No new interests were declared

4. CONFIRMATION OF MINUTES OF MEETING HELD 17 JUNE 2021

It was **confirmed** and **agreed** the minutes of the meeting held on 17 June 2021 as a true and correct record with corrections noted below:

Date of 10 February to be corrected to 17 June.

Joy/Gareth

5. MATTERS ARISING FROM THE MINUTES

Under general business

6. CORRESPONDENCE

Various emails from HQSC forwarded to committee members since last meeting.

7. SCDHB REPORT

A verbal report was provided from Robbie Moginie:

- Covid preparedness – heating up again, has to be top priority for our community. Looking again at all our planning, especially around primary and community response and potential impact on planned care. Need to plan and also able to be responsive and be connected to the community through groups like Consumer Council and NGOs. Working hard to get community vaccinated, but the easy bit has been done. Vaccination is accessible, and the community know this. Dianne commented on nationally low numbers of vaccinations in people accessing mental health and addiction services. Consumer

Council may like to look at ways they can help all members of the community understand and access vaccination.

- Building continuing as fast as possible in current circumstances. New ATR build scheduled to start in November. Negative pressure rooms being added to hospital. Managing infectious diseases will be more important in facility development in the future. Ernst and Young assessment shows vulnerabilities and that most care happens away from the hospital. Our growing elderly population is expected to increase greatly and we need to plan to support people with long term health conditions. For Māori, the population of young people is growing and there are unique health needs. We'll be working in closer partnership with the new health model, particularly with iwi. Consumer engagement will be very important - Stacey Scott will lead this project and will work with the Consumer Council.

- Recent tragic event was a profound shock for our staff and wider community and DHB responded well. Provides impetus to prioritise wellbeing of staff with clinical supervision, peer support, recognition of trauma and stress and debriefing. We now have an occupational health nurse who is keen to lead on this and we also have connections with CDHB who have experience in this.

Andrew commented on attitude to contractors and service providers – Robbie confirmed DHB is keeping an eye on this. Not just about vaccination but other things such as contractors working in maternity without whooping cough protection. What is the Covid surveillance plan for patients? Checking at door, and other protocols as directed by MOH. We also have the Technical Advisory Group (TAG) who make decisions based on the latest information.

Asked about input into SAEs, which is deemed not appropriate at the moment. Had been brought up at the clinical board, but response was not what Neil expected, as was concern about privacy. Further discussion undertaken and Robbie happy to look again at consumer input at the sign off process. Neil commented that recommendations coming from SAEs are often overdue, and a consumer rep should be involved in this. Robbie explained the overdue recommendations have come down by a huge degree and are being worked on but they can't be closed out yet. Process is currently being reviewed.

Action: Provide information about the SAE process and support offered to patients and their whānau, and look at offering consumer rep on SAE review team – Barb

8. QSM UPDATE

Report taken as read. QSM shared with council on the screen and navigation explained. Update given on latest upload and the score of 4 given by Joy and Gareth. Encouragement to all council members to be guided by the consumer engagement framework for any involvement in projects.

9. CONSUMER COUNCIL MEMBERS REPORTS

Reports taken as read.

- Barb – taken as read, no comments or questions
- Neil – as above from Clinical Board
- Joy – presented updated Community Health Literacy to the group. Details about implementation given. Gareth will be the lead on this when Joy finishes.

The Consumer Council unanimously endorse the Community Health Literacy Project Plan for presentation to SLT and at the next board meeting.

Action: Draft watermark to be added - Barb

Joy also attending psychosocial group, but once she steps down in November another consumer council member will be required. Joy explained the role, and suggested Kylie as her replacement

however it will depend on her availability. Ideally two people would be involved so meeting is always attended. Zoom is available.

Mental Health and Addiction Consumer Group – Joy is keen to stay on the group after her time on the Consumer Council is finished. Consumer Council members agree this is appropriate.

Parts of the Pasifika community are vaccinated but there is a group of very reluctant people. Joy will talk to the Covid team for ideas

Action: new member(s) from consumer council appointed to Psychosocial Group - Bridget

- Bridget – End of Life meeting update. Timaru will offer service from 7th of November as there are sufficient clinicians to provide the service with local staff and outsourcing will not be required.

Consumer Council chair meetings have been really interesting. We are very lucky compared to many. Discussion about the name of consumer council and potential changes with new health system next year. Feeling among group that consumer is the correct term.

Action: new deputy chair sought, interested CC members to contact Bridget to discuss and express their interest - all

Action: ask for minutes to be uploaded to website on CC page – Bridget

Jill completed all modules for PGY2 and waiting for first session.

Andrew and Julie involved in Shared Goals of Care and have had first meeting, but next meetings were postponed due to Covid. Encouraged to be guided by Consumer Engagement QSM framework.

Dianne Black: update on mental health and addictions services

- Project underway to support children who have a parent who is unwell.
- New role in ED – Maureen as Crisis Capability Coordinator – to help ED staff understand looking after people in crisis. Will be based on consumer experiences.
- New colleague coming soon, along with health improvement practitioner roles, based in GP practice.
- FAMS have new role – youth addiction worker.
- MHAW – “connecting around kōrero”.
- Suicide prevention coordinator has copies of “The Blokes’ Book”.
- Updated competencies from Te Pou. Consumer rep. on SC branch of a national group looking at Zero seclusion.
- Demand for mental health services high over recent long weekend. 14 in-patients for 12 beds. Changes in SI Alliance Mental Health Workplan related to changes next year.

Julie – observation about healthcare awards. Would like CC involvement in future if it carries on.

Next meeting 18 November 2021

Karakia to close by Joy

Meeting closed 2.40 pm