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| **Letterhead logoMinutes of the Te Kāhui mahi Ngātahi/ Consumer Advisory Group (CAG)** meeting held on 10 February 2022, via zoom |

Chair**:** Rowena Lewis

Members: Frank Bristol, Mary Schnackenberg, Muriel Tunoho, Russ Aiton, Delphina Soti, Maine Johnson, Jodie Bennett

In attendance: Dr Chris Walsh, Deon York, Dez McCormack, Allison Anderson, DJ Adams, LJ Apaipo, Lauagaia (Cat) Jeffries, Tanaya Shangarpawar, (Partners in Care team)

The meeting commenced at 1.00pm

1. **Welcome & karakia**

Rowena welcomed the group and DJ opened with a karakia.

1. **Whakawhānaungatanga**

We had an introduction from four new members with current members and PIC staff.

**3.1 Previous minutes**

Frank moved the minutes correct and Rowena seconded.

**3.2 Interests register**

Interests have been advised by new members.

**4. Partners in Care (PIC) report, budget, and deliverables**. **Progress on health review contract**

Deon gave a brief on the PIC programme for the new members and updated everyone on where our work is at with the Transition Unit contract.

Other work included the resources nearing completion (Health Literacy & Let’s Plan) and the work being done on the co-design on-line training resource continues to progress well.

The new commission website is now live, and PIC is now headlined as the “Consumer hub”.

The first consumer newsletter has been published and sent to Forum members (who now total 630).

The upgrade to visualisation of the QSM on our website is also progressing well.

Rowena added for the benefit of new members that the PIC team has many established networks built over the years and there is a lot of work that has been achieved. Rowena and Deon also gave some history of the establishment of the CAG and the current work underway.

Muriel asked Chris/Deon re local DHB advisory group not having seen the code. We can follow this up separately, but the code has been sent far and wide. Russ said it had been shared with the DHB consumer council chairs group.

Mention was made of some barriers in accessing the code for those that have IT issues.

Another barrier, due to COVID and inability to travel, is our in-person hui reaching out to other consumers has not happened.

**5. Summary of forum feedback on new consumer code etc.**

Allison did a presentation and discussed a summary of the forum feedback. Many of the suggestions on accessing the code have been implemented.

The final report on the forum feedback has been published and a link sent to the forum members.

<https://www.hqsc.govt.nz/resources/resource-library/summary-of-inaugural-consumer-health-forum-aotearoa-and-participant-feedback/>

Mention also made of “closing the loop” to ensure people’s feedback is acknowledged and appreciated. This is done with reports (as above) and a regular update (newsletter) we have just started sending to forum members to also link them into our work.

**6. Members environmental scan**

**Rowena**

Having zooms with people from Ngāi Tahu who are doing a series of workshops to immortalise the past and memories that are intergeneration. Great presentation starting with the Treaty articles and there is a year’s work in this.

Did personal submission on the Pae Ora (Healthy Futures) Bill, on consumer engagement.

Now out of lockdown in Auckland which is a relief.

New report on breast cancer released which highlights much higher rates of cancer and mortality for Māori and pacific women. Screening needs to change around this.

**Muriel**

As a primary care provider, there are three areas the health team are working on.

1. preparing for the omicron outbreak in communities and working with a patient advisory group on this.
2. reorganising the staff to keep them safe for the role out of vaccination for 5 to 11-year-olds and continue booster shots. Moving more to telehealth consultations.
3. reorganising whole service delivery to keep patients and staff safe.

Also been on the Mortality review committee’s expert advisory group for the review of the committees. Looking at building a consistent national framework to better support committees. Francis Health was contracted for the work. A tight time frame but it’s been a great experience and I’ve been impressed with level of open and frank discussion with the expert advisory group. Good to see the treaty overarching the proposed framework.

**Mary**

Still producing audio and braille documents of all sizes for various groups. One hui with ADHB consumer experiences council which was great.

Some positive personal experiences at Greenlane eye clinic with clinical care although there are still issues around the waiting room queuing system and the protection of people’s private information. (Names and addresses being loudly shared by desk staff)

**Frank**

Group of MHA consumers met with TU and there is a Team’s group set-up to discuss developments of where MHA sits and what key priorities are with the new health reforms. Seeking more information about the detail of the operations side.

Mental health act submissions closed 2 weeks ago and many were received by various organisations.

At the Mental Health & Wellbeing Commission, Guy Baker has been appointed Māori lived experience advisor.

There is a crisis response team being developed with Police and MH clinicians with cultural support.

Still significant wait lists for psychology. Pressure on acute in-patient units has eased slightly. This is seasonal change.

There are low rates of vaccination among some MHA consumers who are up to 50% less likely to be vaccinated and work is being done to address this.

**Russ**

Locally, we are dealing with both the west coast floods and evacuations and with omicron and the upcoming expected surge.

Consumer council is having input into planning to support certain programmes in the COVID environment (Bowel screening, mental health co-design plan, etc.). Input to the council is mainly from PHO level.

Nationally, the consumer council chairs group meet and the hot topic is where things will sit at July 1 when the new health reforms come into effect. Locally each council is just getting on with what they do and making submissions in their localities.

**Delphina**

Auckland Vinnies is not as connected to the DHB as they would like to be when it comes to food supplies for people and identifying need etc.

The food hub has got quite big and there continues to be a critical demand for food parcels. This demand has moved around but food parcel demand is still around the 700 level. It’s not only food but also mental health/domestic violence support being requested and as a small agency it’s a challenge to manage the surge.

We need to connect more people up more with services and support and have a contract to help with this. We have inherited another 7000 households which requires more partnering for us as a small agency.

Still hold-ups for follow-up health needs where for example, a GP visit should result in further tests and consultation, and this is not being followed thru by the DHB. People are being told to present to the emergency department but even then, they are sent home. Auckland seems to have a greater demand overall.

**Jodie**

Changing Minds has also been involved in submissions re changes to the Mental Act and this has taken up a lot of time in consultation with the sector.

We have also made a submission on the Pae Ora (Healthy Futures) Bill and were pleased to get a 15-minute slot to present to the select committee. Discussion was around the need to prioritise Mental Health and addiction in the new health reforms.

Also preparing for Omicron and have had to cancel some co-design sessions with the deaf community. Seems Auckland are taking COVID more seriously than others as there was surprise from some regions for the cancellations.

Like some NGO’s, we have had some of our programmes de-funded – one was providing free on-line well-being sessions around the motu as part of the psycho-social support package during COVID. Disappointed in this as there remains a need for this type of support.

We created a FAQ vaccination booklet specifically for people navigating their journey with mental distress. As mentioned, rates of vaccination for these people are much lower. It has also been translated into Te Reo. There is a bit of fatigue around the whole vaccination issue and language used is sometimes oppressive so hopefully this resource is more of a friendly guide.

**Maine**

Coming from the social sector a lot of advisory groups don’t discuss MoH topics, but I was involved in the adverse events Te Rōpū discussion last week. Getting up to speed with health acronyms. Interesting to see what happens at the governance level.

In Dunedin a lot of Māori families are not vaccinated and there’s quite a push here for this. We are behind the rest of the country in this regard.

There has been a big spike in Family Violence which is concerning. It is tied in with the pressures of COVID.

**7. Feedback on PIC board paper.**

Deon spoke about who had given feedback (Te Rōpū). This was more in the form of questions in general.

The questions to the board in the paper have been changed to:

* 1. How do you think the code will make a difference to the current consumer and whānau engagement work of the Commission?
	2. What do you think the ‘mandate’ should be for this code? How do you see the Commission monitoring this?

The Board had an opportunity to comment on the code initially and these questions are a follow-on from that.

There was a general discussion around the questions. Chris and Deon will be in the board hui to start commentary and answer any questions.

Consumer involvement needs to be at the start - before papers are written, in addition to getting papers to comment on. Are consumers influencing change?

We will need to socialise the outcome of these questions around the commission staff and the various advisory groups.

**8. Other business. Karakia & close**

Dez closed with a Karakia

**Next hui:** 29 March 2022 – zoom. Although this may change to in person so new members can be introduced.

**Actions List:**

There are no action items