

## ACP Advisory Group Meeting Minutes 21 March 2018

### Present

Marj Allan	Consumer representative
Hector Matthews	Executive Director, Maori and Pacific Health, Canterbury DHB
Sarah Clark	Chief Executive, Social Workers Registration Board
Sara Rishworth	Palliative Care Specialist, Mercy Hospice
Michelle Main	Programme Manager, Palliative Care Programme, Ministry of Health
Jane Large	South Island regional ACP, South Island Alliance Programme Office
Anna Stevenson	Public Health Physician, Canterbury DHB
Chris Walsh	Director, Partners in Care, Commission
Leigh Manson (acting chair)	Senior Programme Manager, Commission
Lizzie Price	Director of Communications, Commission
Clare O'Leary	ACP Promotions Coordinator, Commission

### Apologies

Stephanie Clare	Chief Executive, Age Concern
Sue Cooper	Consumer representative
Helen Mason	Chief Executive, Bay of Plenty DHB
Sue Ineson	Executive Director, Council of Medical Colleges

### 1. Welcome and introductions

Leigh Manson welcomed everyone and group members introduced themselves, and talked about the value and experience they can bring to the work of the group.

### 2. Election of chair

Leigh called for nominations for chair. Sarah Clark was nominated, seconded and elected as chair of the group.

### 3. Terms of reference

There were discussions about the terms of reference for the group and the following comments were made.

- What is the role of public health in ACP? Discussion about how we want to be thinking about the much broader role of ACP across health and other social sectors.
- Are there enough meetings of the advisory group during the year, or do we need more – eg, a second face-to-face or teleconference? **Action: The chair and secretariat will consider this.**
- What are the outputs of this group, and reporting and accountability requirements? **Action: Leigh to put on the agenda for discussion at the face-to-face meeting on 10 April.**

- Is the wording in the terms of reference around 'patient-centric care' appropriate, as it is very hospital-based? This wording will be amended to 'person-centred care, and including family/whānau (while recognising patients and their whānau may have a different view)'.
- We need to ensure the Indian and Asian voice is heard in the work of the group.
- Need to change 'governance' group to 'advisory' group on page 3 of the ToR.
- How are we measuring our success, what are our reporting mechanisms and how do we ensure we have the right information to report on? **Action: Leigh to put on the agenda for discussion at the face-to-face meeting**
- Would be good to have someone from MSD on the group. Alex McKenzie, Principal Analyst, was suggested and will be approached. **Action: Sarah/Lizzie to approach Alex.**
- We need to increase clinical communication skills, but it is also important consumers feel confident to engage in conversations about their care.
- Access to advance care plans also needs to be broadened to non- heterosexual groups.
- There is a need for further Maori members on the group, and for a Pacific member. It was noted that it is not possible for a single Maori or Pacific person to represent Maori or Pacific populations, rather, they bring their individual experience and a cultural perspective to the table. **Action: Secretariat to consider how to bring these perspectives to the group.**

**Action: Lizzie will make amendments to the ToR based on these comments, and send back around the group.**

#### **4. National ACP strategy and road map of actions in the health sector**

Because of time limitations this will be discussed at the face-to-face meeting on 10 April.

#### **5. Risks and issues**

Because of time limitations this will be discussed at the face-to-face meeting on 10 April.

#### **6. Structure agenda for face-to-face to ensure maximisation of our time together**

There was discussion on the items for the face-to-face meeting. The following were suggested:

- Collective or consistent IT systems across New Zealand
- Discussion on three key activities that might give us the biggest bang for bucks? Where do we put our energy for the next three years?
- How will we measure the success of the group?
- What are our reporting priorities?
- Are three meetings enough?