The formation of a consumer council: The Northland District Health Board story

Introduction
In 2014, Northland District Health Board (DHB) conducted a patient safety and quality review. A number of recommendations for improvement were made under the pillar of patient- and family-centered care. At the same time, the Northland Health Services Plan, a five-year strategic plan for the Northland health sector, aims to improve the patient experience. Taking account of the patient safety and quality review and the aims of the Northland Health Services Plan, the patient- and whānau-centred care project was established. A key piece of work of the project was to establish a consumer council. The project, led by the chief medical officer, director of nursing and a clinical director, is strongly supported by the chief executive, executive leadership team and primary care alliance partners.

The strong leadership was critical to the successful implementation of the consumer council. The project team consulted with Hawke’s Bay, Canterbury and West Coast DHBs in the development of a process for establishing the consumer council.

Documentation
The team developed terms of reference for the consumer council and a role description for members, along with nomination forms and selection criteria. A chair role description is currently being developed by the consumer council.

Identification and nominations
Consumer organisations and non-government organisations (NGOs) with a consumer advocacy role were identified through the family services directory and through local knowledge networks. Each organisation was sent a letter of introduction with a call for expressions of interest from suitable consumers. The letter included a copy of the terms of reference, role description, nomination form and a reply-paid envelope. The letter also outlined the consumer shortlisting, interview and selection process. Where more than one branch of an organisation was in the region, one branch was chosen with the assumption the branch would pass the letter on to its other branches. The timeframe to respond was short – just two weeks. The benefit of this was continuing to drive the formation of the consumer council with strong momentum.

Reflections: Timeframe should allow for consumer organisations to discuss nominations at their board meetings. Some NGOs and consumer organisations operate branches independently and so the assumption that information would be passed between branches was incorrect. In future Northland DHB would send information to all branches.

Expressions of interest
Nominees were asked to specify a preferred interview date from a list of options. The interview team were all members of the patient- and whānau-centred care project team, so pre-selecting dates was important for time efficiency. The expression of interest form also contained a checkbox, asking whether, if the candidate were not successful, they would like to be involved in future opportunities for consumer involvement in Northland DHB business. The timeframe was short, and several expressions of interest were received after the closing date. Given the short timeframe, it was decided all expressions of interest received after the closing date should be considered for interview as well.

The expressions of interest were reviewed by the project team against previously agreed criteria. A shortlist was chosen and the successful candidates were phoned and invited to an interview. Transport assistance was offered to candidates.
Reflections: Timeframe should allow sufficient time for candidates to submit expressions of interest. Need to bear in mind consumers have varying access to computers, printers, internet and email, and the challenges of transport.

Interviews
The interviews were held in groups with a single member of the project team facilitating discussion. This was done to allay fears and lessen anxiety for the candidates. The candidates were warmly greeted by a host and time was allowed in an informal atmosphere so candidates (who had not met before) could chat with each other and have a refreshment before the interview commenced.

Prior to the interview, all candidates were given the existing Northland DHB visitor policy to read and reflect upon, and to comment on in the interview. At the interview, a group discussion was held about the visitor policy.

This process had several benefits:
- demonstrated respect and hospitality – manaakitanga
- all candidates able to express their views in a meaningful way
- reduced anxiety by being in a group
- allowed interviewer to see group behaviour by the candidates – listening, discussing, collaborating.

Consumer council members chosen
The candidates were selected by the project team using the criteria it had earlier decided. There was no consumer representative as part of this team at the time. In the future, membership of the consumer council will be appointed by the council. Candidates were informed of the outcome of the interview by phone call. This was important to candidates and provided a further opportunity for feedback about the interview process and willingness to be involved in future consumer representative activities.

Reflections: Feedback from consumers indicated the group interview process and the hospitality was a highlight and was greatly appreciated.

Inaugural consumer council meeting
A powhiri for the council was held, which the chief executive of the DHB and representatives from the Health Quality & Safety Commission attended. This was followed by the inaugural meeting at Whangarei Hospital in December 2014.

Ongoing support needs
Some members of the consumer council face transport, child-care and computer access issues. Solutions have been tailored to individual needs. For example, one member who lives rurally will video-link into the consumer council meetings via the local community trust primary care provider. Another council member does not have computer access, and this was negotiated through a local primary school.

Reflections: Flexibility and adaptability is appreciated by the consumer council members, and demonstrates respect.
Consumer Council Formation

1. Identify consumer organisations from a broad representation of services, localities and cultural groups.
2. Invite organisations to nominate a consumer.
3. Consumer applicants submit an expression of interest.
4. Group interviews with shortlisted nominees. Group interviews facilitated by a member of patient and whānau centred care project board.
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6. Accept/decline interviewees. Declined interviewees offered opportunity for future participation as consumer.
7. Powhiri for newly formed consumer council and inaugural meeting.
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Northland Health Consumer Council