Minutes of the Consumer Network meeting held on 20 September 2016, at The Health Quality & Safety Commission, Level 9, Pounamu, 17 – 21 Whitmore Street, Wellington.



Present: Chris Walsh (Chair), Kula Alapaki, James Ahipene, Renee Greaves, Te

Rina Ruru, Courtenay Thrupp, Traci Stanbury, Martine Abel, Renee

Greaves, Shreya Rao, Ezekiel Robson, Marj Allan, Vicki Culling, Diane de

Rochester (Minutes) - HQSC

Guests: Laura Ellis, Gary Tonkin, Jennifer Hall, Carmela Petagna, HQSC

Apologies: Shaun McNeil, Mary Campbell, Gillian Bohm – HQSC

The meeting commenced at 9:00am

1. Introductions and welcome

Chris welcomed everyone to the meeting and introduced Laura Ellis, followed by the members of the committee all introducing themselves. The members were asked to send any conflicts of interest to Di.

Renee asked if she could take photos and use her twitter account to tag HQSC, all members agreed.

Action:

Circulate updated contact list (Di)

1.1 Minutes of the meeting held 4 June 2016

The minutes were confirmed with minor changes.

A question was raised around the PIC Champions group and whether the Consumer Network could receive updates and / or have someone from the Network as a member of these meetings. Chris explained the components and aims of this group and asked whether the Network felt there should be a representative on the Champions group.

There was a suggestion that the question of the value of interaction with, or membership of, the Consumer Network be taken to the PIC Champions members.

It was agreed that the minutes / notes from the PIC Champions be circulated to the Network and if there was a need for someone from the Network to speak to a particular topic, they could attend.

<u>Action</u>

 Notice of meetings and minutes/notes of PIC Champions to be sent to the Consumer Network members in case anyone wishes to contribute to a PIC Champions meeting.
 (Di)

1.2 Actions update

The actions list was considered and updated.

2. Commission Partners in Care report

Chris Walsh presented the Commission report to the meeting.

Patient stories continue to be presented at Commission board meetings-please keep in mind anyone who you think would be a good presenter and discuss this with Chris. The next board meeting is Friday 23rd September in Wellington and the final one for the year is 17th & 18th November in Auckland.

The programme evaluation and case studies for the 2015/16 co design programme can be viewed at

http://www.hqsc.govt.nz/our-programmes/partners-in-care/publications-and-resources/publication/2574/

The co-design programme first masterclass for 2016/17 will be taking place in Hutt Valley DHB (12th October) and Taranaki DHB (1st November). Both DHBs are currently putting teams together.

Evaluation of the last 3 years of PIC has been completed by Malatest International. The report has been distributed to all consumer network members and can also be viewed at http://www.hqsc.govt.nz/our-programmes/partners-in-care/publications-and-resources/publication/2549/

The HQSC board discussed the report at its last board meeting on 22nd August 2016. Much of the discussion centred on different ways to get consumer perspectives heard at board level.

Chris Walsh noted the sector believes Partners In Care has made good progress, but both the sector and consumers are asking for more, illustrating the increasing demand for such services, and a broader cultural shift in the sector. Co-design and health literacy work present opportunities for more support to the sector to drive change and quality improvement. A more consistent and structured approach to DHB consumer councils would also be beneficial.

- <u>Action</u>: To improve the Board's responsiveness to consumer interests, the Commission will make recommendations to the Minister of Health for potential consumer appointees to the Board.
- Action: Consider improved education and training for the Board on consumer perspectives and co-design.
- <u>Action</u>: Consider adding a Consumer Implications section to the Board paper template, and how this would work in practice, including having a voice around the Board table.

The report from the scoping work for a quality and safety marker for consumer engagement is completed. Stage two for the implementation plan and pilots is the next step.

The programme for 2016/17 has been scoped and the synopsis is attached.



A new position for a consumer in the deteriorating patient work programme is has been filled by Laura Ellis who worked previously at Hutt Valley DHB as family advisor. The programme manager for the PIC programme has also been filled and Deon York is now well settled into the role. Deon has worked at the Commission in the mortality review and patient safety programmes and brings a wealth of consumer experience both nationally and internationally.

The internal consumer champion's staff group has had its first meeting. The first task was to discuss the name of the group and everyone agreed to it being called 'The Partners in Care Champions'. Its purpose is to strengthen the consumer perspective across all our programmes, work smarter, avoid duplication of effort and gain and maintain oversight of all consumer engagement activities planned/happening across the Commission? At the second meeting the internal policy for consumer engagement was updated and inviting consumers to participate in the quality improvement programme was discussed. The process for getting feedback from consumers engaged in Commission work programmes was agreed to.

The modular training for consumers is being updated with a view to delivering some of it to consumers. This will largely depend on the budget.

The PIC team have been doing presentations and visits including a keynote at the national cervical and breast screening hui in Wellington, Clinical Leads presentation on Choosing Wisely and two presentations to community/consumer groups and staff at Waitemata DHB.

The HQSC is hosting and resourcing the first national consumer council chair meeting on 29th September to be held in Auckland. This is a one day forum.

The Advance Care Planning forum has several consumers presenting and on panels. This forum is in Auckland 28th and 29th November.

The HQSC is scoping out the possibility of doing some improvement programmes in mental health and there are a series of planned meetings to discuss this further over the next few months.

The PIC team is working closely with the medication safety team on a project in response to data in the patient experience surveys.

There was discussion amongst the Consumer Network concerning carefully considering the criteria for a consumer representative on the Commission Board.

It was agreed that the Consumer Representative needed to have a primarily consumer lens with governance experience.

It was suggested that the Board be asked about the type of consumer they feel would fit and this can be brought back to the Consumer Network.

Actions:

Suggestions to be sent for Patient Story presenters at the next Auckland meeting – All

Raise the question with the Board concerning the type of consumer they feel would be a suitable fit – Chris

3. Consumer Network Governance

- 3.1. Terms of Reference
- 3.2. Consumer Network Tenure

There was discussion around the best criteria for new members on the Consumer Network, once the tenures of existing members finish. The following suggestions were made as

- Pacific Island
- Asian
- Youth
- Men's health
- LGBTI

4. Deteriorating Patient

Gary, Jennifer and Laura joined the meeting to give an overview of the Deteriorating Patient Programme.

Gary commenced the discussion, outlining the details of what constitutes a deteriorating patient.

Jennifer discussed the three workstreams.

- 1. Clinical when medical practitioners carry out observations on patients and are scored on abnormality, to enable problems to be picked up early. Endeavouring to make the systems and trigger signs the same throughout the country.
- 2. Affirming that patients and whanau know when things aren't right and feel they can speak up. They can be responsible for escalating care and systems
- 3. Goals of treatment where a patient is deteriorating in the course of their dying and given good end of life care, to have discussions with people on admission, to find out the type of response and treatment they want should they deteriorate.

Laura discussed the consumer lens on Workstream two. The main theme of this workstream is communication.

The programme is also looking at a system, where patients and families recognise that something is wrong and feel they can alert medical staff to this and be listened to. This would mean that the response could be quicker before the patient deteriorates.

Laura will be going to DHBs to find out where their consumer networks are, and who they co-design with.

Laura also circulated a poster she has developed to the Consumer Network to receive feedback, the Consumer Network members made notes on the posters and returned them to Laura.

Consumer Network input to the deteriorating patient programme could be by giving ongoing feedback, patient and family, building networks, suggesting how Māori are involved. Patient stories could be used to raise the issues around quality improvement.. Te Rina suggested the use of a journal for occasions when multiple family members are attending in shifts.

Ezekiel suggested the workgroup go to the NGO forum to gather more information.

Action

Send the link to the NGO Forum to Laura (Ezekiel)

6. Initial Planning for 2017

Chris ran through the synopsis and the Consumer network discussed this.

There was discussion around the Commission promoting and pulling forward the support of people in the community with disabilities onto committees and advisory committees.

At the strategic governance level consumers could be networked to provide consistency.

The priority process for funding small projects is underway and the PIC team are submitting a proposal to get funding around communication which is the lowest scoring area of the patient experience surveys. The MoH NGO is calling for people to be on it. Unfortunately, it has only just reached us and is due tomorrow, but Deon felt everyone should be alerted to it.

There was discussion with the Consumer Network around communication. Following are some ideas:

Ezekiel:

Diversity, accessibility, inclusion, health literacy

James:

Power, who holds it? Language, plain English, Treaty of Waitangi

Vicki:

Expertise – modelling 'how to do communication'. Clear messages, stories, having hard conversations

Courtenay:

Tone and correct language

Martine:

Understanding differently, translation

Te Rina:

Empowering those who have difficulty communicating, cultural literacy

Renee:

Transparency, reflecting population needs, 'what matters to us in a way that matters'

Mari:

Empowering the patient, 'what to do'

Traci:

Individual communication, what to say and how to say it

Shreya:

Time to explain, use of body language

Kula:

Cultural values, language, terminology, empower and encourage

Further ideas were:

- The practice of communication
- Admitting to not knowing
- · Better way of working
- Ownership for the patient
- Using the 'power' that clinicians have

Consumer-driven communication tools

Participants were asked to join a sub-group to work on the long term goals of the Partners in Care programme. People who put their names forward are:

- Renee
- Martine
- Te Rina
- Marj
- Courtenay

Actions:

- Set up a half day workshop with a sub group to work on the long term goals of the Consumer Network. (Chris/Deon/Di)
- Come back to the next meeting with any goals, ideas etc. for the next three years (All)

7. Programme Workstreams

Carmela attended the meeting and presented a slide on Medication Safety, Falls and Pressure Injuries



One comment Carmella made was that fractures in hospitals had fallen significantly in this country. It is believed that this is primarily due to the work of the Commission's programme.

Carmella advised that there was now a Consumer on the ACC Falls governance group - Rowena Mortimer

Opioid use and constipation through medication is an important part of the workplan. There is a patient experience survey on the side effects of medication.

The Consumer Network was asked for ideas on ways to improve medication safety:

- Alternative drugs
- Full information on side effects
- How to take the medication
- Opening hours of pharmacy
- Timing of information
- Information on pharmacy opening hours and location
- Awareness that pharmacists can provide information
- Getting pharmacists involved

8. APAC feedback

Te Rina and Courtenay were funded by the Commission as part of the Maori leadership drive to attend APAC. They provided the following reports on their attendance at the APAC Forum.

Te Rina

The APAC forum was amazing. Courtenay and I attended the same sessions. I was particularly interested in the insight talks as they were brief short and inspiring presentations. They provided a brief overview of the innovation that's going on in healthcare internationally. Prior to attending the conference, I was expecting to learn about how other organisations engage with consumers and to gain an understanding of how the varying health systems overcome hurdles and challenges within their fields.

In the first day I have to admit that I did feel somewhat inferior and less than. This was no fault of anyone's but my own and is perhaps a feeling that a number of consumers would feel at some stage in their advisory roles. However, after attending a number of the sessions such as the indigenous Health – Equity; Storytelling; Transforming Patient Engagement in their own health well-being; Co-design and many more I realised the importance of the consumers' voice in these forums, and how invaluable that knowledge is.

As I spoke to a number of health professionals during small tasks, it seemed evident that the consumer experience is a foreign term. I found this quite interesting as every person is a consumer of the health system at some stage of their life, however it seems as though they tend to become more professional consumers and that everyday voice gets lost.

Besides those initial reflections, I found the forum completely inspiring. Johnathan from Ko Awatea related leadership in healthcare to the climbing of Mt Everest and Janine Shepherd inspired everyone in the room by being evidential proof of what happens when you never give up.

Overall, this was an amazing experience and I am so grateful to have had the opportunity to network and learn from such great minds, as it has provided me with confidence and an understanding of how to be a better consumer representative. Thank you, Health Quality and Safety Commission for granting me this opportunity.

Courtenay

"Day One, Monday September 12 2016

Travelling day. I was feeling quite anxious about flying alone but I soon settled into my journey. A wonderful uneventful flight and once I arrived in Sydney around 9pm, I made my way into the CBD once I had found the trains! The people in the streets were very friendly helping a lost Maori girl navigate my way to the hotel. The receptionist at the Metro was extremely helpful so I quickly settled into my room excited about the next few days.

Day Two, Tuesday September 13 2016

Te Rina and I met up to go grab some breakfast. The streets were well and truly alive even at such an early hour. Do the people here sleep?? The hustle and bustle added to my excitement as I listened to Te Rina fill me in on the Welcome Reception held the day before. We were fortunate enough to be staying on the same street as the Hilton Hotel and the State Theatre was just a few metres around the corner from that. After I registered at the Hilton,

we made our way to the State Theatre for the Opening Ceremony. Barely in the door, we found ourselves standing there with our jaws to the floor. The beauty of the building was breath taking and we quickly started taking photos and exploring.

As we waited in the foyer, we were joined by Kiri Rikihana and together we gushed about the coming days and the amazing building lol

Once seated, the Opening Ceremony formalities began. I was moved by the respect shown to the people of the land and how humbling it was to have them acknowledged in a manner similar to that of my own Maori culture. I would later see this acknowledgement of the land and its people reinforced at the beginning of most sessions.

The first keynote speaker was Jonathon Gray, the director of Ko Awatea. He had a special guest join him, Peter Hillary son of Sir Edmund Hillary. While I didn't connect very well with this speaker, I was impressed with the passion he showed while introducing the new initiative, The Climb Project, a College of Leadership Innovation Management and Beliefs.

Next on the agenda following morning tea was Going for Gold: Co-designing safer, better care with patients, carers and families. Unfortunately for Te Rina and I and a lot of others, the session was oversubscribed and we weren't able to attend so perused through the displays instead.

After lunch we quickly made our way to the Indigenous Health – Equity session and promptly sat in the front row. This session was a definite highlight for me and I found it easy to engage with the speaker Gregory Phillips. The content of his presentation resonated with me immensely and gave me assurance that cultural safety is recognised and acknowledged as a critical success factor. I left this session feeling inspired and grateful.

We then moved on to the Storytelling session with Prof Jonathon Gray and Jasmine Jenkin. We had met Jasmine earlier in the day when she approached Te Rina and I about sharing our stories with her at a later date. I guess I didn't appreciate what this entailed until I saw her presentation. We were blown away with the work she does and the respect she shows for the people sharing their stories as well as the story itself. I came away from this session feeling like anyone can make a difference no matter how small an idea may seem

After afternoon tea we returned to the beautiful State Theatre for the second keynote speaker, Janine Shepherd. Wow. What an engaging woman. The way she delivered her presentation made me feel like it was just her and I having a yarn, not an entire theatre full of people. Her life story is certainly incredible but it was her attitude and determination that was truly inspiring. I came away from this session feeling extremely grateful and appreciative of my own journey.

At the conclusion of day two, Te Rina and I decided to hop in a train to see the Sydney Opera House as I have never been to Sydney before. After a few selfies, we grabbed a light dinner and headed to Darling Harbour. It was so beautiful that we decided to have dinner there the following night as it would be our last night in Sydney.

Day Three, Wednesday September 14 2016

Another early morning, full of excitement following the success of the previous day. After a quick breakfast we headed to the State Theatre for the poster awards. Te Rina had met a

couple of the girls from Auckland that had entered a poster and were in the running for an award so we wanted to support them. They were successful and won their category so we cheered loudly for them.

The third keynote speaker Johnathan M. Lancaster began his presentation at the conclusion of the poster awards. He was very charming and engaged well with his audience.

We all returned to the Hilton Hotel for morning tea and the rest of the sessions. Our first session was Be Kind to a bully? Practical Strategies to Eradicate Bullying and Rudeness, and Improve Patient Safety. I thoroughly enjoyed this session and the exercises we participated in involving how we felt being bullied, being the bully, how to be kind to a bully and being more aware of our own behaviour.

Our next session was called Transforming Patient engagement in their own Health and Wellbeing. This session demonstrated the value of collaboration and peer support networks. I came away feeling excited that collaboration is becoming a norm within health services.

We were happy to go and support our fellow Consumer Networker, Renee Greaves at the session on Co-Design: A future you cannot Imagine or create without Staff and Consumer partnerships, Practical steps and case studies. Renee is an outstanding presenter and I was grateful to hear her story and how far she has come. She is a wonderful asset to Counties Manukau Health specifically to the patients and whanau whom she advocates for and supports.

We returned to the State Theatre at the end of afternoon tea for our final keynote speaker Nicholas Christakis. I found this session a little over my head as he spoke a lot about biosocial science and behaviour genetics and I don't know much about these things. He seemed like a very nice man though.

A sense of sadness came as the Closing ceremony began. The handing over of the Waka Huia to the next hosts for APAC 2017 was lovely and there was a power point of images over the last few days which was pretty cool.

In summary, my experience at APAC 2016 is one that I will never forget. I have met some amazing people, learned a lot, not only about healthcare in all its forms but also, about myself. I am forever grateful for this opportunity and look forward to using some of my learnings from APAC to contribute back to our communities.

He aha te mea nui o te ao

He tangata he tangata he tangata"

Forums will be available to view under APAC Forum website.

9. Brief activity reports from Consumer Network members on Commission work Courtenay Thrupp

Since our last meeting in June, Courtenay has continued most of the roles she mentioned in past reports.

Courtenay has attended architect meetings for the development of the Children's Health hub and support meetings for Altogether Autism and Parent to Parent.

She has also been called on by her Quality and Risk coordinator to attend a family meeting in a consumer advocate role with a whanau that had some grievances with the DHB. She also has a meeting booked with Sharon Kletchko to discuss the details of the consumer advisor role within the DHB as it is still very unclear.

Courtenay has been nominated by Chris to be involved in the Expert Advisory Group for the Deteriorating Patient campaign and has attended one meeting thus far and thoroughly enjoyed it so is really looking forward to contributing to that cause.

Last week Courtenay was in Sydney for APAC 2016 which she found amazing and such a great experience.

Courtenay is also presenting at the Advance Care Planning forum in Auckland in November which she is very nervous and excited about.

Ezekiel Robson

Ezekiel is taking part in a disability community collaboration to organise a strengthening consumer voice workshop. This workshop has two purposes, life experience and identity around their impairment and to learn about their emotional and mental health.

He has also been in discussions regarding being a recipient of disability support services and how to get great support workers working with them. Trying to find ways around how they can be confident to tell people what they want by way of their support. This is getting great support from GPs

The NZ Disability Strategy is being reviewed. The draft has come out and was harshly reviewed, due to the difficulty in getting submissions from the DHBs

Ezekiel has been asked to be involved in the Public Spaces Accessibility Reference Group at Auckland DHB. There is a meeting next week and Ezekiel believes this is a positive sign that things are happening at operational levels.

Ezekiel is carrying out further work on getting disabled people involved in local elections and Mayoral candidates came to speak to the forum.

James Ahipene

James has resigned from What Ever It Takes (WIT). James feels that he has spent the last wonderful years serving the people he has gotten to know as colleagues and friends, and feels this is a good time to leave as he knows that WIT is in good hands and is heading in the right direction.

James is now working with the Hawkes Bay DHB on a project for people who suffer trauma within the health system. This project will be taken around the whole of NZ.

James has also been working on a site around Model of Care to help people through the health system. This is based on mental health but can be used in any area of the healthcare system. He is also still part of the Partnership Advisory Group.

Kula Alapaki

Kula highlighted the health issues of young people in South Auckland and the serious obesity in this area. The group he is working with is looking at finding support for a programme to fight this problem.

Kula also mentioned the severe health issues with lack of housing, particularly in Auckland

Renee has offered to put Kula in touch with a Ko Awatea forum on obesity in youth.

Marjorie Allan

Marj is attending the IPIF Patient experience tomorrow in Wellington on Primary care.

Marj has also been invited by the MoH to look at a variety of strategies they have in place. An issue is that those people who provide feedback on the strategies receive nothing back form the MoH by way of results.

Marj is delivering consumer training next weekend and hopes to have ideas on where the modules need updating and will come back to Deon with any ideas.

Marj highlighted the need to collect the data in Primary Care which relates to consumers.

Martine Abel

Supported Decision Making Tools is now on the website

Martine will be in Orlando attending a conference and will send through information on health related items.

Shreya Rao

Shreya has been working on "Looking Up". An event which seeks to have young people working with clinicians to discuss mental health problems.

She is also working on health expos for low decile schools, including the areas of mental health, sex education and communication,

Shreya is currently working on a project which will be looking at digital strategies in mental health.

Shreya is interested in building up young leaders, particularly with teenagers, and setting up a network for young people amongst Māori and pacific island.

Shreya advised that 'Realtime' feedback, consumer surveys are getting around 30 responses a month.

Traci Stanbury

Traci collected her Consumer award at the ceremony.

She is currently working on a proposal around deceased organ donation and the results will be out in 2016. There is no consumer on the panel.

Traci advised that there is a lot more in the media about organ donation and there is a story in today's paper about her son and organ donation. Her son is also going to be interviewed on television. His patient story has also been in the Immune Deficiency magazine

Vicki Culling

Vicki advised that she has been involved in Choosing Wisely and this will be launching in November. The group is looking for people who are keen to tell stories and are willing to be in the media. They are looking for stories around communicating well with a clinician.

Vicki was fortunate to be awarded a Winston Churchill Memorial Trust Fellowship in October 2015 for travel in 2016. Fellowships are awarded by the Trust each year to enable New Zealanders to travel overseas to undertake research and meet others in their area of expertise. Vicki travelled to the USA and UK to meet with baby loss support organisations and learn about their training of both professionals and volunteers.

In the USA, Vicki met with staff from First Candle and Share, both national organisations providing education and support. She also met with individuals working in the area of baby loss support and information. In the UK, Vicki met with staff from Child Bereavement UK, the Miscarriage Association, Sands UK, Cruse Bereavement, Towards Tomorrow, Lullaby Trust and Antenatal Results and Choices (ARC).

Vicki will write up a report of her trip as part of the Fellowship, and will provide a report to Sands New Zealand, looking particularly at the training of volunteers.



Vicki and Cheryl Titherly, Improving Bereavement Care Manager at Sands UK.

Renee Greaves

Renee presented at the APAC Forum on Co-Design.

She is also currently working on a regional reimbursement policy for Consumers, concerning paying and supporting, plus the expectations. Renee will send a copy of this to the group when it is completed.

Other areas Renee is working on are:

- Northern Electronic Health Record
- Blog: Dear Patient Leader
- HQSC Co-Design programme, working with Lynne Maher as a contact for consumers.

Te Rina Ruru

Te Rina attended two meetings with Te Roopu Māori. They discussed the Te Whai Oranga framework and how it is rolling out within the commission. At the recent meeting they heard a presentation from the Nga Manukura O Apopo who provide a leadership programme for

Māori nurses and midwifes. This is to encourage them to take on leadership roles in their areas.

Te Rina attended the APAC Forum 2016 in Sydney. She felt this was an amazing experience.

Te Rina has been coopted by ACC to provide consumer advice to a Whole Pathways project which involves rehabilitation providers in the Auckland region. This project aims to improve the entire system for people with Traumatic Brain Injury, from acute to community care.

The NZ Brain Injury Support Network is hosting the second Brain Injury Awareness Day at the Hamilton Gardens.

Actions:

- 7th October email Di a paragraph and photo from overseas conferences.
- Send link to the patient story on her son's organ donation to the Consumer Network
- Send information to the rest of the CN on attendance at consumer training

10. Closure of Meeting

The meeting closed at 4:00pm

11. Next Meeting - 22 November 2016

Date	Item	Action	Responsibility
20/09/2016	Activity Reports from Consumer Network members	 7th October email Di a paragraph and photo from overseas conferences. Send link to the patient story on her son's organ donation to the 	Te Rina Traci
		 Consumer Network Send information to the rest of the CN on attendance at consumer training 	Marj
20/09/2016	Initial Planning for 2017	Set up a half day workshop with a sub-group to work on the long- term goals of the Consumer Network	Chris/Deon/Di
		 Come back to the next meeting with any goals, ideas etc for the next three years 	All
20/09/2016	Deteriorating Patient	Send the link to the NGO forum to Laura	Ezekiel - Completed
20/09/2016	Commission Partners in Care report	Suggestions to be sent for Patient Story presenters at the next Auckland meeting.	All

		Raise the question with the Board concerning the type of consumer they feel would be a suitable fit.	Chris
20/09/2016	Minutes of the meeting held 4 June 2016	Notice of meetings and notes of PIC Champions to be sent to the Consumer Network members in case anyone wishes to contribute to a PIC Champions meeting	Di
20/09/2016	Introductions and welcome	Circulate updated contact list	Di - Completed
14/06/2016	Reports from Consumer	Le Va link to be sent to the Network	Di
	Network Members	Supply an update to the communications team to load an interview onto the website. Chris	Completed
		to give Falyn a briefing.	Mary - Completed
		 Follow up on the programme for Post-natal depression. 	Ezekiel & Shaun - Completed
		 Send feedback to Chris around the Patient Opinion concept 	Completed
14/06/2016	Commission Partners in Care Report	 Forward names for Patient Story to the Board. 	Shreya & Martine - Completed
		 Email Di regarding registration for WCIC4. 	All - Completed
14/06/2016	Choosing wisely programme	Any further feedback to be sent to Sue Ineson at sue.ineson@karoconsulting.co.nz	All
14/06/2016	PIC Evaluation	Send feedback to Network	Di - Completed
10/3/2016	Serious Adverse Events	 SAE team to attend the next Consumer Network meeting for further discussion and updates. Feedback provided by the 	Gillian R / Sarah - September meeting
		Consumer Network will be fed back to SAE group.	Sarah
		 Send the SAE policy to Di for uploading onto Loomio for 	Sarah / Di
		feedback on the involvement of Consumers.	Di – Completed
		Consumer Network feedback is to be sent directly to Sarah.	All
10/0/5			Under Action
10/3/2016	Programme Planning	 Load Programme Plan on Loomio for Network feedback 	Chris - Completed