# Notes of the 67<sup>th</sup> meeting of the Health Quality & Safety Commission Board held on 19 July 2018 in Wellington

Members:	Professor Alan Merry (Chair), Shelley Frost, Bob Henderson, Dr Gloria Johnson, Dr Bev O'Keefe, Dame Alison Paterson, Gwen Tepania-Palmer.
Staff:	Dr Janice Wilson, Karen Orsborn, Bevan Sloan, Dr Iwona Stolarek, Kiri Rikihana, Dr Chris Walsh, Deon York, Catherine Gerard, Diane de Rochester (EA), Shelley Hanifan (minutes).
Apologies:	Dr Dale Bramley; Richard Hamblin
Guests:	Anthony Hill (Health & Disability Commissioner); Rowena Lewis (Chair, CAG), Muriel Tunoho (CAG Member); Martine Abel-Williamson (CAG Member), Ria Earp (RE) Te Rōpū Chair.

Key points and decisions are summarised below.

- The minutes of the previous meeting were **approved**.
- The actions of the previous meeting were **updated** and **noted**.
- The interests register, and special register of interests were **updated**.
- Members Board related activities were **noted**
- The financial report and risk register **noted**
- The CE Report was **noted**
- A patient story was provided by way of a video

#### **Key decisions** – the Board:

- 1. **agreed** to the approach planned by the intelligence hub and partners in care programme to develop a QSM to monitor and measure consumer engagement and consider wider measures.
- **2. agreed** to enter into a Memorandum of Understanding with the Ministry of Education for the purpose of mortality review
- **3. agreed** to appoint as mortality review committee deputy chairs from 20 July 2018:
  - a) Dr Arran Culver as the deputy chair of the Child & Youth Mortality Review Committee (CYMRC)
  - b) Stephanie Thomson as the deputy chair of the Perioperative Mortality Review Committee (POMRC)
  - c) Dr Rose Elder as the deputy chair of the Perinatal & Maternal Mortality Review Committee (PMMRC)
- 4. agreed to begin the process for appointing one new member to the CYMRC
- 5. accepted the scorecard report and congratulated Commission staff on their work.

## Official meeting opening (11:55am)

#### Rowena Lewis, Muriel Tunoho and Martine Abel-Williamson joined the meeting.

The Chair opened the meeting with a brief mihi whakatau, which was followed by a waiata.

In order to set the scene for the meeting, the Chair referred to a graphic representing the Swiss Cheese Model, that the Commission's logo is based on. He talked about systems having a range of measures to safeguard or prevent against errors.

#### Patient video

Dr Christine Walsh introduced the patient story video, which focussed on Māori cultural practices in health. Māori worldviews consider health differently to the usual medical approach, seeing the body and spirit, much more, as a whole. The importance of karakia, waiata and traditional kai were emphasised.

The video noted the importance of karakia and cultural connection at various times - and that in times of crisis, such as ill health, such connections are even more important for Māori.

## Meeting with Consumer Advisory Group

The Chair officially welcomed Rowena Lewis, Muriel Tunoho and Martine Abel-Williamson to the meeting and started with a round of introductions.

Dr Walsh introduced the paper 'QSM – Consumer Engagement'. She noted that the impetus for this paper came from a discussion with the Board three years ago, where she was asked what is consumer engagement and how do we know we are doing it well? Partners in Care (PIC) and Health Quality Intelligence (HQI) have been working together to try to answer this question in a very clear way. While patent experience surveys are seen as a good outcome marker, more work is required to decide the best process markers. PIC and HQI discussed the idea of a QSM with CMOs and they were supportive. The current plan is to trial the QSM approach in three pilot sites.

The Board discussed the need for improvement in transitions of care for consumers. It was noted that the Commission could consider system levers and what we can do, and also at what we can ask others to do in the transition and discharge areas, to improve consumer experience. A 'whole of system' approach will be required.

# The Board:

**agreed** to approve the approach planned by the intelligence hub and partners in care programme to develop a QSM to monitor and measure consumer engagement and consider wider measures.

# Mihi Whakatau for Ria Earp (Chair Te Ropū)

Ria Earp joined the meeting.

The Chair warmly welcomed Ria Earp to the Commission and thanked her for taking the role of Chair of Te Rōpū Māori.

## **Cancer Equity Paper**

The paper was introduced by Catherine Gerard on behalf of the author, Dr Maria Poynter, and the Director, Health Quality Intelligence, Richard Hamblin.

The great work done by Dr Poynter to date was noted, and it was emphasised that the paper was being brought to the Board to shape further development.

There was a discussion around the expectations of the Minister, in terms of the advice he had requested. The Commission has been asked by the Minister to provide a view, and the paper could do this more succinctly and clearly. In particular, there is a need to directly address the 'one size fits all' approach that is occurring with cancer, as it is not working. It was noted that people with disabilities were not included in the data or the report. It was also noted that the use of the term "institutional racism" within the report was appropriate, although challenging. The Treaty should be mentioned, and the obligation of the crown in terms of equity for Māori.

# Evaluation of Commission's QIA & QIF

*Dr Gloria Johnson declared a conflict of interest and left the meeting, at the start of this item.* Dr Iwona Stolarek introduced the paper, providing an overview of the process used for the evaluation.

The Board found the low response rate disappointing and recommended making completing evaluation a requirement of supporting participation. Information on cost was requested, to try to better understand potential cost benefits. The investment was broadly discussed. However, the spend is seen as vital to ensure the success of current programmes that are relying on the capability of the cohorts being trained (i.e. Mental Health and Addictions QI Programme). It was also noted that informal feedback is that the courses are highly valued by DHBs. The matter of a further evaluation and timing was felt to be an operational matter.

# The Board:

Noted content of this report.

# MoU with Ministry of Education

Kiri Rikihana introduced the paper, highlighting that the MoU is designed to establish a positive working relationship with the Ministry of Education and to facilitate processes of information sharing with the Mortality Review Committees. Although the committees have a legislative mandate to require information, the relationship and processes of providing are outlined in the MoU

The Board thanked the Mortality Review Team for this work.

# The Board:

**Agreed** to enter into a Memorandum of Understanding with the Ministry of Education for the purpose of mortality review

## MRC deputy chair appointments

Kiri Rikihana introduced the paper, which was provided to facilitate the appointment of deputy chairs and initiate the process of replacing a resigned committee member.

#### The Board:

agreed to appoint as mortality review committee deputy chairs from 20 July 2018:

- 1. Dr Arran Culver as the deputy chair of the Child & Youth Mortality Review Committee (CYMRC)
- 2. Stephanie Thomson as the deputy chair of the Perioperative Mortality Review Committee (POMRC)
- 3. Dr Rose Elder as the deputy chair of the Perinatal & Maternal Mortality Review Committee (PMMRC)

agreed to begin the process for appointing one new member to the CYMRC.