

FINAL MEETING OF THE LOCAL CONSUMER COUNCIL (CC)

Date: 24/06/2024

Time: 12:00 -1445hrs.

Location: Learning Hub Room 1, Level 4 Gardens Block, Timaru Hospital

Present: Dominique Enright, Gareth Ford, Andrew Humphrey (Acting Chair), Julie Patterson, Interim Director of Nursing & Midwifery, Quality and Risk (Q & R) Nurse Coordinator, Engagement Facilitator Mental Health & Addiction Services representatives (EFMHAS), Katrina Waite (Zoom call). Guest speaker Cassi Malkiewicz CNM ICU and Bronwyn Miller Patient At Risk (PAR) Nurse

Apologies: Ajith Joy (AJ), Jill Merritt and Lata Kumar

Karakia/Welcome: Dominique Enright opened the meeting with a Karakia

Conflict of Interest declarations: No new conflicts

Minutes of previous meeting: Confirmed as true and correct.

Katrina still working on the letter to the "Who Goes Where Group" regarding spaces such as prayer room, whānau room and quiet rooms.

Matters arising - Nothing to report.

Correspondence - In/Out -

Engagement Facilitator Mental Health & Addiction Services representatives (EFMHAS) applied to be a representative for the newly formed Regional Consumer Engagement and Whānau Voice Council (RCEWV) for Te Waipounamu. This was declined on the grounds they are employed by Health NZ. This will be contested, as this had not been clear on application.

Gareth and Dominque also applied to be part of the regional consumer council, both had final interviews, however were unfortunately unsuccessful. Therefore until the final decision is confirmed by RCEWV we are unsure if South Canterbury has any representation.

Guest speaker: Cassi CNM ICU and Bronwyn Miller PAR Nurse

Cassi and Bronwyn introduced themselves to the group. Cassi explained that following the Covid epidemic, alongside the identified need for an increase number of ICU beds, extra funding has been allocated to support critical care. The critical care expansion project has created a government initiative to introduce a PAR nursing service in the hospital. The PAR service is a dedicated multi-disciplinary team, consisting of seven Registrars assigned to Timaru ICU, alongside dedicated Senior Medical Officers (SMO's) who are on call 24hrs, seven days a week. The biggest asset that ICU are gaining from the expansion project is a multi-disciplinary team including a dedicated occupational therapist, pharmacist, physiotherapist, social worker, and dietitian and speech language therapist.

From 1st July, 2024, Bronwyn and the team will be marketing the PAR nursing project, increasing awareness for all departments of the hospital. Initially the service will run at nights and weekends, once fully staffed it will run 24hrs, seven days a week, with a goal of being fully functioning by August 2024. There will be a senior specialised nurse on every shift to support the whole hospital, recognising deteriorating patients and supporting decision making.

Bronwyn presented a PowerPoint presentation explaining PAR, who they are and what they do. She went through each phase of the "flower" diagram and explained in further detail.

A new "shared goals of care" document is to come out nationally which will replace the current resuscitation form for all inpatients. The new document will be several pages with more choice for patients, for example questions asked will be; is the patient choosing to be resuscitated? If no, do they want their care to be escalated up to ICU, do they have an advanced care plan, an EPOA, considering family and whānau needs and what their values are. It will be launched in ICU on July 15, then Assessment Treatment and Rehabilitation (AT&R) on July 22. Once established it will rollout throughout the hospital.

Questions Raised:

- Is there going to be a way for the new shared goals of care document to follow the patient if they go into private hospital care/palliative care?
- Answer--It will only be uploaded onto our systems, but it can be photocopied and sent to other health care providers.

- If somebody has on their record they are engaged with mental health services, how far do you go into seeing what tools could help them emotionally?
- Answer--We would work closely with their case worker.

Verbal Reports from Health NZ/ Te Whatu Ora personnel:

Director of Nursing & Midwifery:

Director of Nursing & Midwifery asked the group to identify what the risks are now the local consumer council is being disestablished. These risks will be put forward to be discussed at the regional risk group (to potentially be put on the risk register). This gets reviewed monthly by the district leadership group and reported nationally. The risks identified are:

- Input into policy's that impact on patient risk for example discharge from hospital.
- Reduced local community voice
- Practical things like parking, lighting, visitor policy, complaints to HDC, security, timely access to risk regarding HDC cases, direct feedback, local connections, implements on training (RMOs), auditing feedback, alongside closeness with the consumer for decision making.

Limited funds have become available for critical care to expand their capacity within our ICU and extend + establish the Patient at Risk Service (PAR). A question was raised to the group for any thoughts on how we could spend the money to benefit our ICU. The ideas were,

- Pulldown beds from the wall for family to stay with their loved ones.
- Better tea and coffee facilities in the visitor lounge
- Phone chargers
- Access to support workers
- More places to charge devices / new plugs with USB inputs.

Katrina fed back that since the consumer council have been "let off very casually", there should be a letter written from the minister to say thanks to all involved as an appreciation for all they have done individually, Anna was going to relay this information back.

Anna acknowledged all the work everyone has done, their ongoing dedication and their contribution to the group. She showed her thanks and appreciation by awarding each member a certificate.

Quality & Risk & Nurse Coordinator:

Quality & Risk & Nurse Coordinator again undertook a round of thanks/appreciations to the group for their contribution throughout the years and addressed her sadness for potentially not having South Canterbury representation at the regional council. A question was asked to the group about what your proudest achievement as a group has been? It was hard to pinpoint a specific achievement as a group as over the years there have been many, however it was all agreed the pedestrian crossing was a great achievement for all who visit the hospital.

General Business:

To end, the group shared what they are planning to do with their spare time now that the consumer council has completed at the local level.

Quality & Risk & Nurse Coordinator closed with a Karakia.

Action Register

| Date | Action | Who | Due | Status |
|---------|---------------------------------------|-----------------------|---------|-----------------|
| 25/3/24 | Staff Uniforms & role identifiers | Interim Director of | WIP | 27/05/2024 |
| | | Nursing & Midwifery | | National team |
| | | | | have rolled |
| | | | | over the |
| | | | | current for |
| | | | | another |
| | | | | annual period. |
| 25/3/24 | One to two CC representatives to | Requested per Interim | Next | Representative |
| | assist with development of PAR | Director of Nursing & | meeting | still to be |
| | resources | Midwifery | | arranged |
| | | | | 22/04/24 |
| May | New PAR Nurse Lead to contact CC | | | 27/05/2024 |
| 2024 | Chair to be available to speak at | TBA | | Associate |
| | one of our meetings in 2024. | | | charge nurse |
| | | | | manager, |
| | | | | present at next |
| | | | | meeting |
| 23/4/24 | CC Chair to invite the Health, Safety | J Merritt | 30/4/24 | Catherine |
| | & Wellbeing Manager to be Guest | | | Wilson |
| | Speaker for May meeting. | | | presented |

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|----------|---------------------------------------|------------------------|---------|----------------|
| 22/04/24 | Talk to CNMs about staff who are | Interim Director of | Next | Ward CNM |
| | speakers of other languages, to | Nursing & Midwifery | meeting | were putting |
| | support relaying all information to | | | on their |
| | patients | | | agendas at |
| | | | | next staff |
| | | | | meeting to |
| | | | | support |
| 22/04/24 | Discuss with CNMs on care of | Interim Director of | Next | Ward CNM |
| | patients with hearing aids (how to | Nursing & Midwifery | Meeting | were putting |
| | use them, batteries and cleaning) | | | on their |
| | | | | agendas at |
| | | | | next staff |
| | | | | meeting to |
| | | | | support |
| 22/04/24 | Write a letter to Who Goes Where | K Waite | Next | 27/05/2024 a |
| | Group in regards to ensure we have | | Meeting | draft has been |
| | spaces available such as prayer | | _ | started |
| | rooms | | | |
| 27/05/24 | Proposal to be put forward for more | Quality & Risk & Nurse | Next | 27/5/24- |
| | disability parks out the front of the | Coordinator | Meeting | discussed with |
| | hospital and staff parking around | | | Director of |
| | gardens block | | | Nursing and |
| | | | | Midwifery. |