

MEETING OF THE CONSUMER COUNCIL (CC)

Date: 28/05/2024

Time: 12:00 –1500hrs.

Location: Board Room, Level 6 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 (per Zoom call). Guest speaker Catherine Wilson, Safety Advisor

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

Karakia/Welcome: Andrew Humphrey opened the meeting with a Karakia

Conflict of Interest declarations: No new conflicts

Minutes of previous meeting:

Katrina has written a draft letter for the 'who goes where' group regarding spaces such as prayer room, whānau room and quiet rooms.

Matters arising:

- There has been a recent issue with an elderly, frail health consumer who was transferred to Christchurch Hospital from Timaru hospital for treatment. They were discharged from Christchurch Hospital, and had to find their own way home with no family able to pick them up. Christchurch were working on finding the health consumer a ride home, however after waiting 2-3hrs and no evidence of transport, the health consumer reached out to a friend to pick them up and transport them home.
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- Nurse Coordinator Q & R respond with the following discussion. Sometimes there is an option if an ambulance goes up to Christchurch to take a patient and is coming back empty, the discharged patient can get a ride, however this is not always guaranteed as there's not always ambulances going and empty ambulances coming home. The current South Canterbury Hospital policy

proposes health professionals in Timaru should be pre negotiated with any patients before going up that if they organise their own transport back to Timaru on discharge from Christchurch Hospital.

- A solution offered by the Consumer Council to this issue, was suggested that with consideration of age and circumstances, the health consumer be transferred back to Timaru Hospital, and stay overnight until a ride can be organised.
- A copy of the complaint was given on paper to the Interim Director of Nursing & Midwifery Services, for the issue to be discussed at the DLG meeting for a solution.
- ATR has just been completed and the ward is moving in within the next week.
- The disability parking out the front of the hospital is very limited with only have five designated spots. The Consumer Council suggests that instead of having five emergency staff parking out the front that they should instead be five more disability parks (10 in total), alongside the parking around the side of the gardens block should be used for staff only, potentially with a gate to close it off to public and have swipe card access. It was discussed about who should monitor compliance with designated parks, with a suggestion it could be undertaken by a contractor. However. There was some concern from Katrina that a contractor may view this as financial gain, as opposed to allowing people to park in disabled car parks if they are in a rush, or forgotten their badge. Presently the car parks are not monitored in any way. Nurse Coordinator Q & R risk will put this proposal to the DLG for discussion

Correspondence – In/Out – Nothing to report.

Guest speaker: Catherine Wilson, Safety Advisor

Catherine was introduced to the group by Nurse Coordinator Q & R. Catherine gave the group a quick rundown of her role and how they embed the workforce safety as a priority. They use safety first as a means of reporting, the leadership team also engage in their own training processes to support that if there is an issue they bring it to a DLG meeting and then they roll it out across the floor. An example of a significant safety risk that is continuously reviewed is the heliport. Recently the exclusion zone has been extended 10m, and a new fence has been put around it that cannot be entered onto or parked on. Another previous safety issue with the heliport is when the duty nurse manager (DNM) is meeting with the helicopter, there was no way of answering the phone if there was another urgent call. This was resolved by purchasing a pair of headphones with Bluetooth and phone/radio capability. This has proved to be efficient and effective, and removes any element of risk, as the DNM can talk to the pilot and also take a call if need be.

Questions Raised:

- Is there someone who checks the heliport for hazards? DNMs performs the initial walk around/crowd control when the helicopter is due to land, they also look for other hazards such as loose loads that could be picked up. There are monthly reports done to make sure the heliport is safe and lights are working etc. An annual review of training for DNM's to review safety around the heliport landings is also done.
- How much liaison does safety have with the flight crew? Safety do not have much liaison with them as they don't require that. DNM Manager is expert for facilitating heliport landings and the Facilities Service Manager talks to aviation regularly, ongoing communications are happening there.
- What happened to security guards? There is still night security from 8pm-6:30am 7 days a week undertaking rounds of the building and carparks.

Verbal Reports from Te Whatu Ora personnel:

Director of Nursing & Midwifery:

- Regionalisation of speciality pathways is being concentrated on. This means that services we don't offer here are being offered by the tertiary services. For example specialist spine or burns unit. All specialities are working on having a navigator locally such as a nurse for patients to be linked in with the specialist services in Christchurch or Dunedin. They will help the health consumer by undertaking on the spot assessments to feedback to the doctor/surgeons via zoom with. There is also a big focus on making sure that no one sits on a waiting list for longer because of the region they are in.
- Industrial action occurring across Te Whatu Ora with our junior doctors (RMO) participating in a strike, we have been lucky locally to be able to sustain the roster safely.
- New Zealand Blood Service strike coming up. Te Whatu Ora are currently working their way through this, and making sure things are safe. Whenever there are strikes there is a system called LPS (life preserving services) which is mandatory provision for the hospital. For example if someone needed blood, that will always be sustained.
- Key priority that continues to be a focus and a risk is Midwifery Services. There is a National shortage of midwives, South Canterbury included. Presently we are supplementing the service with locums and nurses that have obstetric skills and knowledge. Prioritising that the antenatal clinics are supported so that all mothers and babies are well looked after. A question was raised "do they feel appreciated?" and "what are we doing to make sure they feel appreciated?", there are quarterly system meetings to talk about how they can get together and social/celebrate the extra mile everyone is going.

- It was encouraged for South Canterbury representation to be part of the new Te Waipounamu regionalisation Consumer Council. Expression of Interest (EOI) forms were handed out.
- Staff uniforms have been added onto the district leadership group meeting agenda for it to be discussed about at least getting clear name badges with roles.

Quality & Risk & Nurse Coordinator:

- A Nurse Coordinator from Q & R was the guest speaker last month. They spoke to the group about how complaints are processed. There is a monthly report undertaken which includes how many complaints are received, these are broken down looking from an ethnicity perspective, they look at how many compliments they have and suggestions. Complaints are rising, previously 130 per annum, currently trending around 15-20 per month, mainly around communication, surgery cancellations and wait times in ED.
- An ongoing survey gets sent out quarterly to health consumers, and their feedback is collected and analysed by an external contractor. This information is going to be disseminated into the clinical areas. An annual report is undertaken every July.

Engagement Facilitator Mental Health & Addiction Services (EFMHAS)

- Mental health was left some money by a consumer that has passed and some of it is going towards education, and some is going towards an upgrade to the inpatient and outpatient garden space. Outdoor games, tables and courts will be included.
- Peer support specialist is coming along, feedback sessions have just started around how people have found peer support, including the peer support specialists themselves, the clients they work with and the staff they have been working alongside.
- The lived experience lead for the Ministry of Health is setting up a knowledge exchange which is where consumer leads can click in, share ideas, and prompt change in a best practice site. EFMHAS is currently in the process of setting up a consumer advisor and per manager network in the South Island, first meeting is next week.
- Still working on whānau engagement KPI which is around how quickly mental health services engage with whānau.
- Nigel Latter is coming to South Canterbury on Wednesday to speak to staff who are working with families who have people with challenging presentations.

General Business:

Discussions regarding the following:

Regionalisation of Consumer Council. The group went through the draft copy of the terms of reference, sent out by the Regional Consumer Council Engagement and Whānau Voice Manager. Expressions of interest for council membership are in sight from 13 May – 3 June 2024. Members will be announced by 21 June 2024 with the new council in place and starting by 1st July 2024. There is some help and budget for those who may need help in getting IT equipment to support being a member of the new regionalisation Consumer Council.

Action Register

Date	Action	Who	Due	Status
25/3/24	Staff Uniforms & role identifiers	Interim Director of Nursing & Midwifery	WIP	27/05/2024 National team have rolled over the current for another annual period.
25/3/24	One to two CC representatives to assist with development of PAR resources	Requested per Interim Director of Nursing & Midwifery	Next meeting	Representative still to be arranged 22/04/24
May 2024	New PAR Nurse Lead to contact CC Chair to be available to speak at one of our meetings in 2024.	TBA		27/05/2024 Associate charge nurse manager, present at next meeting
23/4/24	CC Chair to invite the Health, Safety & Wellbeing Manager to be Guest Speaker for May meeting.	J Merritt	30/4/24	Catherine Wilson presented
22/04/24	Talk to CNMs about staff who are speakers of other languages, to support relaying all information to patients	Interim Director of Nursing & Midwifery	Next meeting	Ward CNM were putting on their agendas at next staff meeting to support
22/04/24	Discuss with CNMs on care of patients with hearing aids (how to use them, batteries and cleaning)	Interim Director of Nursing & Midwifery	Next Meeting	Ward CNM were putting on their agendas at next staff meeting to support

22/04/24	Write a letter to Who Goes Where Group in regards to ensure we have spaces available such as prayer rooms	K Waite	Next Meeting	27/05/2024 a draft has been started
27/05/24	Proposal to be put forward for more disability parks out the front of the hospital and staff parking around gardens block	Quality & Risk & Nurse Coordinator	Next Meeting	

Katrina Waite closed the meeting with a Karakia

Next meeting: 24th June 2024. 12-2pm. Board Room Level 6 Gardens Block.