

# Te Whatu Ora

Health New Zealand

Hauora a Toi Bay of Plenty

## HEALTH CONSUMER COUNCIL ANNUAL GENERAL MEETING

### Agenda

Date: Thursday 7<sup>th</sup> December 2023, 10:30am to  
1:00pm Venue: **Kawakawa Meeting Room, Education  
Centre**

<b>Chair</b>	Lisa Murphy - Tauranga	<b>Minutes</b>	Maria Moller
<b>Members</b>	Adrienne von Tunzelmann, Deputy Chair - Tauranga John Powell – Papamoa Rosalie Liddle Crawford – Mount Maunganui	Florence Trout – Tauranga Hayley Chapman – Tauranga Shelly McLauchlan - Opotiki	

Item No.	Item	Lead	Page
1	<b>Karakia timatanga/Welcome</b>		
2	<b>Apologies</b> Adrienne  Moved: Seconded:	Chair	3
3	<b>Interests Register</b>	Chair	
4	<b>Presentation</b> No presentation this month.	Chair	
5	<b>Health Sector Update</b>	Debbie	
6	<b>Minutes of Meeting</b> 8 November 2023 to be confirmed.  Moved: Seconded:	Chair	4
7	<b>Matters Arising</b> See attached and advise Maria of any updates.	Chair	8
8	<b>Matters for Discussion/Decision</b> 8.1 Chair's Report 8.1.1 Consumer Engagement QSM – Update. 8.1.2 Path Lab Services - Update. Otumoetai service resumed 4 <sup>th</sup> December 2023. 8.1.3 Covid 19 Vaccinations. 8.1.4 National Chairs' Meeting 8.1.5 Consumer Council – Role, functions, remuneration and recruitment. 8.1.6 Invite Tim Slow to next meeting.  8.2 Hauora a Toi Bay of Plenty Health Consumer Council Review of 2023 Year. 8.3 <b>Health Service Provision</b>  8.3.1 HCC Strategic Planning – Areas of focus: Improvements and possible actions (paper attached). For discussion. 8.3.2 Path Lab Services – General discussion. <a href="https://www.pathlab.co.nz/locations">https://www.pathlab.co.nz/locations</a>	Chair          Chair  Adrienne	12           22
9	<b>Correspondence</b> Inwards and Outwards: Consumer/Whanau Engagement QSM.	Chair	12

Item No.	Item	Lead	Page
10	<p><b>General Business</b></p> <p>10.1 BOPHCC web page <a href="#">Bay of Plenty Health Consumer Council (BOPHCC)   Te Whatu Ora   Health New Zealand   Hauora a Toi Bay of Plenty (bopdhb.health.nz)</a></p> <p>10.2 Christmas Staff Lunch – Old CEO Carpark, Thursday 7 December 2023 11:00am to 2:00pm. Don't forget your ID.</p>	Chair	
11	<b>Round Table</b> 12:00pm	Chair	
12	<b>Council Only time</b> 12:30pm	Chair	
13	<b>Next Meeting</b> Wednesday 14 February 2023	Chair	
14	<b>Karakia Whakamutunga/Closing</b>		

# Te Whatu Ora

Health New Zealand

Hauora a Toi Bay of Plenty

## HEALTH CONSUMER COUNCIL MEMBER ATTENDANCE

2023/24

Member	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Feb	Mar
Hayley Chapman	•	•	•	•	•	•	•	•			
Rosalie Liddle Crawford	•	•	•	•	•	•	•	•			
Shelly McLauchlan			•	•	A	•	A	•			
Lisa Murphy	•	•	•	•	•	•	•	•			
John Powell	•	•	•	•	•	•	•	•			
Florence Trout	•	•	•	•	•	•	•				
Adrienne von Tunzelmann	•	•	•	•	•	•	•	•			
Kelly Hohapata <i>Resigned 18.04.23</i>	-										
Theresa Ngamoki <i>Resigned 09.07.23</i>	•	•	A								

- Attended.
- A Apology received.
- Absent, no apology received.



Item No.	Item	Lead	Page
	<ul style="list-style-type: none"> <li>• Sarah Davey has resigned and taking up a new role as CEO of the Hepatitis Foundation.</li> <li>• <i>Is there anything happening in the urology space? We are not considered to be an outlier in this area.</i></li> <li>• <i>Is there any risk to frontline delivery due to the new government? No, not yet. Will wait to hear once the government has formed.</i></li> <li>• <i>Adrienne attended a meeting where the speaker indicated that Shane Reti could be appointed Health Minister and may have a keen interest in primary care.</i></li> <li>• Debbie will send an update for the December meeting.</li> </ul>		Debbie
6	<b>Minutes of Meeting</b> 11 October 2023 to be confirmed. Moved: Lisa Seconded: John	Chair	
7	<b>Matters Arising</b> See attached, advise Maria of any updates. <ol style="list-style-type: none"> <li>8. Information that Sarah Marshall from ACC was to present on is now included in agenda. Can be closed.</li> <li>12. Website Profiles - Updated Hayley and Adrienne's. Have sent Shelly's also. Lisa will send through an amendment.</li> <li>16. Leave invite of member of Community Health Liaison Group till next year.</li> <li>17. Pritika will follow up and report when she starts her new role in early December.</li> <li>20. Will see whether Pathlab issue is raised at CGC meeting.</li> </ol>	Chair	Lisa 2024 2024 Lisa
8	<b>Matters for Discussion/Decision</b> <ol style="list-style-type: none"> <li>8.1 Chair's Report <ol style="list-style-type: none"> <li>8.1.1 National Chairs' Meeting <ul style="list-style-type: none"> <li>• National Chairs' meeting – Guest Speaker, Alexis Cameron who is the Model of Care Lead for the Integrated Cancer Services Programme. Presented on Model of Care work being undertaken.</li> <li>• No update on Rapid Review.</li> <li>• Russ Aiton leaving the National Chair's Group. He will mentor new chair and handover. Hector's directorate may help with the future direction of the National Chairs' Group.</li> <li>• 17<sup>th</sup> November is Patient Safety Day – What is being done on that day to heighten the consumer engagement? Is something being published in-house and does HCC feature in that?</li> </ul> </li> <li>8.1.2 Microsoft Teams Folder: Collaborative work and document sharing.</li> <li>8.1.3 Consumer Engagement QSM – Will revisit once Pritika has started in new role.</li> <li>8.1.4 ACC Maternal Birth Injuries – See link for information.  <a href="https://www.acc.co.nz/im-injured/what-we-cover/cover-for-maternal-birth-injuries/#what-we-cover">https://www.acc.co.nz/im-injured/what-we-cover/cover-for-maternal-birth-injuries/#what-we-cover</a></li> <li>8.1.5 Health Consumer Council – Role, functions, remuneration and recruitment. Discussed in Council Only time.</li> </ol> </li> </ol>	Chair	Maria 2024

Item No.	Item	Lead	Page
	<p><b>8.2 Health Service Provision</b></p> <p>8.2.1 Path Lab Services – General discussion.  <a href="https://www.pathlab.co.nz/locations">https://www.pathlab.co.nz/locations</a> Otumoetai has still not re-opened, and it has now been two years that consumers in this area have had to find alternative locations. Request update.</p> <p>8.2.2 Home-based aged care in WBOP – research proposal update.</p> <p>8.2.3 HCC Strategic Planning – Areas of focus: possible actions (paper attached), discussed.</p>	<p>Adrienne</p> <p>Adrienne</p>	<p>Maria</p>
9	<p><b>Correspondence</b></p> <p>Inwards: NA</p> <p>Outwards: NA</p>	<p>Chair</p>	
10	<p><b>General Business</b></p> <p>10.1 BOPHCC web page <a href="#">Bay of Plenty Health Consumer Council (BOPHCC)   Te Whatu Ora   Health New Zealand   Hauora a Toi Bay of Plenty (bopdhb.health.nz)</a></p>	<p>Chair</p>	
11	<p><b>Round Table</b> 12:00pm</p> <p><u>Rosalie</u>  International Pathology Day today. 80M tests carried out per year in NZ. International shortage of pathologists. Not always a visible health sector role.</p> <p>Papamoa – emergency consult from Hamilton are searching for staff for a 24 hour healthcare service. Should be opening in 2024, will find out when. Will be run by nurses with telehealth appointments with doctors.</p> <p>No updates from Trinity Koha. Will set up services here for summer.</p> <p><i>Is Newspaper is doing anything for Patient Safety day?</i></p> <p><u>Shelly</u>  Te Whare Maiangiangi – there was a complaint made about front doors not being open. They have now been opened. Whakatane mental health facility is to be upgraded but will take 5 years. Doing some upgrades to existing facility in meantime.</p> <p><u>Adrienne</u>  Attended a meeting with Te Puna Ora. A programme for advanced nurse training in Whakatane is being developed with Te Whare Wānanga o Awanuiārangi. The aim is advanced training (beyond Bachelor degree level).</p> <p><u>Hayley</u>  Will enquire further about Huria Marae providing blood taking service.</p>	<p>Chair</p>	<p>Rosalie</p> <p>Hayley</p>
12	<p><b>Council Only time</b> 12:30pm</p> <p>Agreed that BOPHCC defer the December election for Chair and Deputy, current holders to continue in office until further consideration by the Council.</p>	<p>Chair</p>	
13	<p><b>Next Meeting Thursday 7 December 2023 (Xmas Lunch is being held from 11am – 2pm in the old CEO carpark on this day). Meeting will be held in Kawakawa Meeting Room, Education Centre. Note Whakatane lunch is 6 December 2023.</b></p>	<p>Chair</p>	

Item No.	Item	Lead	Page
14	Karakia Whakamutunga/Closing		

UNCONFIRMED

## Health Consumer Council Monthly Meeting Matters Arising 2022/23

# (Meeting Month/Year)	Meeting Date	Action required	Who	Action Taken	Completed / in progress
12	10.05.23	New member profile to go up on website.  Updated profiles to be sent to Maria.	Maria  All	20.11.23 Shelly's profile and photo uploaded, Hayley's and Adrienne's update.	
16	14.06.23	Invite deputy chair of Community Health Liaison Group to next meeting.	Adrienne	11.10.23 Leave until Feb 2024 meeting.	
17	14.06.23	Consumer Engagement Quality Safety Marker – due back in September. HCC to be consulted before it is submitted. Raised at CGC meeting.	Maria/Debbie	Contacted Asa who advised that she believes there is a new format, it has not been submitted for a while. Pritika will look into this once she starts her new role in Dec.	
20	12.07.23	Pathlab issues. Raised at CGC meeting.	Lisa	13.09.23 Update - In 2 <sup>nd</sup> week of training. Will follow up at next CGC meeting. Kate suggested CGC escalate to Tim Slow. 20.11.23 Email sent to Dianne McQueen requesting an update.	
22	12.07.23	Hauora a Toi Bay of Plenty website – feedback on content and ease of use.	All		
23	13.09.23	Website – Advanced Care Plan – hard to find. Asa will follow up and report to next CGC.	Lisa	20.11.23 Type “Advance Care Plan” into search bar and option comes up. Unfortunately search engine is not intuitive, waiting for National update regarding websites.	



# (Meeting Month/Year)	Meeting Date	Action required	Who	Action Taken	Completed / in progress
24	11.10.23	Hospital visit for November meeting. What is it you would like to see? Email Debbie.	All	Members sent in areas they would like to visit. Debbie advised that this will have to take place next year.	
25	11.10.23	HCC Strategic Planning – Areas of Focus. Table prepared. Fill in right hand column.	All		
26	08.11.23	Lab testing at Huria Marae. Will scan and send brochure received in mail to everyone. Can anyone attend? Further information.	Hayley		
27	08.11.23	New Papamoa 24-hour healthcare centre. When is it opening?	Rosalie	January 2024	
2	12.04.23	Are Covid vaccinations still mandatory?	Debbie	Not for non-clinical staff, so therefore not required for members.	Close
5	10.05.23	Notes from last month's review.	Adrienne Hayley	To be discussed at June meeting.	Close
1	08.03.23	Recruitment 1. Position description to be added to website once finalised. 2. Where can we advertise – OnePlace?	Lisa/All  Debbie	Lisa supplied Northland's position description, Debbie/Maria amended, sent to Rosalie for review. Loaded onto website.  Facebook page, HSQC.	Complete  Complete
4	12.04.23	Mental Health and Addiction Services Transformation – Email speaker.	Lisa	12.06.23 Email sent and received.	Complete

# (Meeting Month/Year)	Meeting Date	Action required	Who	Action Taken	Completed / in progress
3	12.04.23	Cyclone Gabrielle – How is this affecting delivery of healthcare?	Debbie	Where other Districts have capacity, they are assisting.	Close
6	10.05.23	Options for appointments – look into what is currently being sent to patients.	Debbie	GP could specify restrictions when sending through referral.	Close
7	10.05.23	Locality planning – link.	Adrienne	Sent through on 10 May and again on 16 June. Also on Te Whatu Ora website.	Close
11	10.05.23	Kawerau Issue	Debbie	Issues are similar everywhere. Te Whatu Ora has an extensive recruitment programme running.	Close
9	10.05.23	Childhood Dental Clinics – update from Marty.	Rosalie	Working with social services and iwi to find out where the most need is. Liaising with government to provide free dental services for free on a wider scale. Link provided <a href="https://www.youtube.com/watch?v=WZnUu_qt3ng">https://www.youtube.com/watch?v=WZnUu_qt3ng</a>	Close
10	10.05.23	New member to go to Community Health Liaison Meeting each month.	All	Adrienne will now attend as a representative of HCC.	Close
13	14.06.23	Pathlab – Otumoetai still to open. When is this likely?	Maria	Email sent out on 6 July to members with advice from Dianne McQueen, Pathlab that this collection centre will open in 3-4 months time, once staff training is complete.	Close
18	12.07.23	National Health Charter – Found a mistake in link sent out. Send to Lisa for passing on.	Florence	Sent information to Lisa.	Close

# (Meeting Month/Year)	Meeting Date	Action required	Who	Action Taken	Completed / in progress
19	12.07.23	HCC Strategic Planning – Send evaluation discussion notes to everyone.	Adrienne/ Hayley	Done	Close
21	12.07.23	BOP GP Healthcare Services and waiting times – feedback.	All	13.09.23 To be closed.	Close
14	14.06.23	Reporting portal. Make an appointment with Debbie to go over.	John	18.07.23 Maria emailed John with time suggestions. 18.09.23 Maria emailed further date suggestions to Adrienne and John. 25.10.23 Time now booked.	Close
15	14.06.23	Locality planning – outcome of workshop in Opotiki. Send through any questions to Shelly.	Shelly  All	12.07.23 Will contact Theresa as Jody is now on maternity leave. <a href="http://toitutairawhitilocalities.co.nz">Toitu Tairawhiti – Rangatiratanga   Mana Motuhake   Whanau (toitutairawhitilocalities.co.nz)</a>	Close
8	10.05.23	Invite Sarah Marshall of ACC to a meeting.	Lisa	Has made contact, but currently on leave. 12.07.23 Haven't heard back. Ask for information on pregnancy issues if she cannot attend a meeting. 11.10.23 Still no response from Sarah. 08.11.23 Information on this topic included in agenda for Nov meeting.	Close

Consumer and whānau engagement quality and safety marker | SURE (Supporting, Understanding, Responding and Evaluating) framework- **as of 21 November 2023**

Domain		1 – Minimal Te itinga iho	2 – Consultation Te akoako	3 – Involvement Te whai wāhi	4 – Partnership and shared leadership Te mahi tahi me te kaiārahitanga ngātahi	Te Whatu Ora Hauora a Toi Bay of Plenty- Score rating
<p><b>Engagement Te tūhononga</b></p> <p>The environment created to support consumer and whānau engagement.</p> <p>Ko te taiao kua hangaia hei tautoko i te tūhononga hapori.</p>		<p>There is no involvement and engagement in any area of the organisation.</p> <p>There is no representation of the population or communities experiencing poorer health outcomes.</p> <p><i>Score 1</i></p>	<p>There is involvement and engagement in a few areas of the organisation.</p> <p>There is little representation of the population or communities experiencing poorer health outcomes.</p> <p><b>Score 2</b></p>	<p>There is involvement and engagement in some areas of the organisation.</p> <p>There is some representation of the population or communities experiencing poorer health outcomes.</p> <p><i>Score 3</i></p>	<p>There is involvement and engagement of consumers and whānau in all areas of the organisation, representing both the population served and over-representing communities who experience poorer health outcomes.</p> <p><i>Score 4</i></p> <p>(Specifically relates to code of expectations sections <a href="#">1.4</a> and <a href="#">1.5</a>)</p> <p><a href="#">See more</a></p>	<p>Hauora a Toi Bay of Plenty rates itself as a 2 for Consumer involvement. Whilst we have scored low, we do have actions planned to boost the involvement of in-house education of our staff and a particular focus on linking with consumer groups.</p>
		<p>The centrality and importance of whānau in te ao Māori is not recognised. Māori are not provided opportunities to exercise decision-making authority.</p> <p><i>Score 1</i></p>	<p>The centrality and importance of whānau in te ao Māori is seldom recognised. Māori are provided few opportunities to exercise decision-making authority.</p> <p><i>Score 2</i></p>	<p>The centrality and importance of whānau in te ao Māori is sometimes recognised. Māori are provided some opportunities to exercise decision-making authority.</p> <p><b>Score 3</b></p>	<p>The centrality and importance of whānau in te ao Māori is valued and recognised. Māori are always provided opportunities to exercise decision-making authority. <i>Score 4</i></p> <p>(Specifically relates to code of expectations section <a href="#">1.2</a>)</p> <p><a href="#">See more</a></p>	<p>Noting Te Pare o Toi might be rated as a 3 through its partnership with Māori in all activities to ensure that the organisation meets Te Tiriti o Waitangi obligations and responsibilities</p>
		<p>Partnerships are not yet established and resourced.</p> <p><i>Score 1</i></p>	<p>Partnerships are newly established and somewhat resourced.</p> <p><i>Score 2</i></p>	<p>Some partnerships are established and resourced.</p> <p><b>Score 3</b></p>	<p>There is evidence that partnership with consumers and whānau is well established, resourced and highly valued.</p> <p><i>Score 4</i></p> <p>(Specifically relates to code of expectations sections <a href="#">1.1</a> and <a href="#">2.5</a>)</p> <p><a href="#">See more</a></p>	<p>Hauora a Toi Bay of Plenty rates itself 3. There are some established partnerships and currently this “work in progress” to strengthen this partnership.</p>
		<p>There is difficulty in recruitment of consumer and whānau groups and/or such groups are very newly established.</p> <p>There is a lack of resources, systems, and processes.</p> <p>Consumers and whānau report they have minimal support and</p>	<p>Consumer and whānau groups are newly established and/or minimally resourced.</p> <p>Feedback-gathering and/or evaluation has not yet occurred.</p> <p>Consumers and whānau have some support and guidance, and sometimes they do not</p>	<p>Consumer and whānau groups are established and resourced.</p> <p>Some feedback-gathering and/or evaluation has occurred within the last two years.</p> <p>Consumers and whānau report feeling supported and guided and are not the sole</p>	<p>Consumer and whānau groups are well established and resourced.</p> <p>When a group is established or members recruited to a group, the needs of the population served are reflected. <i>Score 4</i></p>	<p>Hauora a Toi Bay of Plenty rates itself as a 2 in recruitment of consumer and whānau groups. The recruitment of additional Consumer Council members has been on hold until the clear directive of Te Whatu ora.</p>

	guidance, and they are the 'sole voice'. <i>Score 1</i>	solely represent their community. <i>Score 2</i>	representative/s for their community. <i>Score 3</i>	(Specifically relates to code of expectations sections <a href="#">1.4</a> and <a href="#">2.5</a> ) <a href="#">See more</a>	
	There is little or no evidence of opportunities for consumers and whānau to actively engage. <i>Score 1</i>	There are limited options for consumer and whānau engagement, based on limited discussion with consumers and whānau. <i>Score 2</i>	There are some options for consumer and whānau engagement, some of which have been decided by consumers and whānau. <i>Score 3</i>	Options are made available for consumers and whānau to participate and engage. <i>Score 4</i> (Specifically relates to code of expectations sections <a href="#">1.1</a> and <a href="#">1.6</a> ) <a href="#">See more</a>	Hauora a Toi Bay of Plenty rates itself as a 3 for engagement as there as options available for our consumers and whānau for to participate in engagement and staff encourage this at all levels.
	Co-design is not understood or used in the organisation. <i>Score 1</i>	Co-design is understood by only a few in some parts of the organisation and is not regularly used or applied. <i>Score 2</i>	Co-design is understood by and applied in most parts of the organisation. Some improvement actions have occurred. <i>Score 3</i>	Co-design or a similar method is regularly used by and applied in all parts of the organisation. <i>Score 4</i> (Specifically relates to code of expectations section <a href="#">2.1</a> ) <a href="#">See more</a>	Hauora a Toi Bay of Plenty rates itself as a 2 for Co-Design use. There are pockets of activity labeled co-design however only a few understood how this is used or applied.
	Cross-sector collaboration is lacking, and not established or demonstrated. <i>Score 1</i>	Cross-sector collaboration is limited. <i>Score 2</i>	Some cross-sector collaboration is established. <i>Score 3</i>	Cross-sector collaboration is strong, well established and well demonstrated. <i>Score 4</i> (Specifically relates to code of expectations section <a href="#">2.3</a> ) <a href="#">See more</a>	Hauora a Toi Bay of Plenty rates itself as a 2 – there is limited collaboration in place within cross sectors.
	Pursuing equity for the population served is little known or discussed in the organisation. <i>Score 1</i>	Pursuing equity for the population served is understood in some parts of the organisation. Some intend to improve equity for the population served. <i>Score 2</i>	Equity principles are well understood throughout most of the organisation. There are several examples of people intending to improve equity for the population served. <i>Score 3</i>	Pursuing equity for the population served is a strategic focus in the organisation. Ōritetanga (equity) and whakamaru (active protection) are well understood principles throughout the organisation. <i>Score 4</i> (Specifically relates to code of expectations sections <a href="#">1.1</a> ) <a href="#">See more</a>	Hauora a Toi Bay of Plenty Rates itself as a 3, as it strongly encourages staff to attend the online workshop (Cultural Intelligence) which can be booked throughout the year via the organisation training calendar. Te Pare o Toi and HQSS have worked alongside each other to work on an appropriate resolution process for Maori. This work has been named Hohou te Rongopai and has been in conjunction and supported by the Health Quality & Safety Commission

		There are neither equitable processes nor recruitment strategies in place to encourage a diverse workforce. <i>Score 1</i>	There are some recruitment processes in place and a newly developed strategy to encourage a diverse workforce. Consumers and whānau are rarely involved in recruitment. <i>Score 2</i>	There is a well-established recruitment policy and a strategy to encourage a diverse, population-representative workforce. Consumers and whānau are sometimes included in the recruitment process. <i>Score 3</i>	The organisation's recruitment strategy encourages a diverse workforce, driven by the pursuit of equity. Policies exist stating that consumers and whānau are regularly involved in recruitment. <i>Score 4</i> (Specifically relates to code of expectations sections <a href="#">1.3</a> and <a href="#">1.4</a> ) <a href="#">See more</a>	Hauora a Toi Bay of Plenty rates itself 2, the organisation encourages the active support and involvement of Te Pare o Toi staff with recruitment panels to reinforce our approach to equity and when attracting new talent.
		Training and development are lacking. <i>Score 1</i>	Limited training and development are available. <i>Score 2</i>	Some training and development are available. <i>Score 3</i>	Training and development are available for and offered to staff, consumers and whānau about how staff, consumers and whānau can be engaged. <i>Score 4</i> (Specifically relates to code of expectations sections <a href="#">2.1</a> and <a href="#">2.4</a> ) <a href="#">See more</a>	Hauora a Toi Bay of Plenty rates itself 3, there are some training and development available for staff, consumers and whānau about engagement, there is another area of 'work in progress' for the organisation.
<b>Domain</b>		<b>1 – Minimal Te itinga iho</b>	<b>2 – Consultation Te akoako</b>	<b>3 – Involvement Te whai wāhi</b>	<b>4 – Partnership and shared leadership Te mahi tahi me te kaiārahitanga ngātahi</b>	<b>Te Whatu Ora Hauora a Toi Bay of Plenty- Score rating</b>
<b>Responsiveness Te noho urupare</b>  Responding to and acting on what consumers and whānau are saying and having the right information at the right time for consumers and whānau accessing services.  Ko te urupare, ko te mahi i ngā kōrero a ngā kiritaki mō te ratonga me te		Pursuing equity for the population served is not a clear strategic focus and does not result in demonstrable actions. <i>Score 1</i>	Pursuing equity for the population served is referenced but is not a strategic focus and results in few demonstrable actions. <i>Score 2</i>	Pursuing equity for the population served is a priority but not a strategic focus and results in some demonstrable actions. <i>Score 3.5</i>	Pursuing equity for the population served is a strategic focus and this results in demonstrable improvements. <i>Score 4</i> (Specifically relates to code of expectations sections <a href="#">1.1</a> and <a href="#">1.6</a> ). <input type="checkbox"/> <a href="#">See more</a>	Hauora a Toi Bay of Plenty rates itself 3.5, Equity for the population is served as strategic focus and there is improvement in progress within this area/this is also a "work in progress".
		Systems are lacking and there is minimal consumer and whānau representation and feedback. <i>Score 1</i>	Systems are emerging and there is limited consumer and whānau representation and feedback. <i>Score 2</i>	Systems are established and while there is some broad consumer and whānau representation and feedback, there is limited evidence of actions taken. <i>Score 3+</i>	Systems are established and robust. They involve: <ul style="list-style-type: none"> <li>gathering, understanding and responding to the experiences and views of consumers and whānau relative to the respective organisation</li> <li>sharing the results and themes with participants and the wider organisation</li> <li>involving consumers and whānau as partners in any</li> </ul>	Hauora a To Bay of Plenty rates itself a 3.5 for feedback systems, there are a considerable way for collection of feedback and the origination of the Adverse Event Committee (AEC) has strengthen the commitment of involving and sharing information with our patients and whānau.

whai i te mōhiohio tika i te wā e tika ana mō ngā kiritaki e uru ana ki ngā ratonga.					<p>resulting improvement activities.</p> <p><b>Score 4</b> (Specifically relates to code of expectations sections <a href="#">1.5</a> and <a href="#">2.2</a>) <a href="#">See more</a></p>	
		<p>There is neither a formal mechanism for senior leaders to hear feedback nor limited opportunity for any action.</p> <p><b>Score 1</b></p>	<p>There are some organised opportunities for leaders to hear feedback and some evidence that action has been taken.</p> <p><b>Score 2</b></p>	<p>There are regular, organised opportunities for leaders to hear the voices of consumers and whānau, and evidence that feedback is usually acted upon.</p> <p><b>Score 3</b></p>	<p>The voices of diverse communities are regularly sought and reported to senior leaders within the organisation and demonstrably acted upon. 'Closing the loop'</p> <p><b>Score 4</b> (Specifically relates to code of expectations sections <a href="#">2.1</a> and <a href="#">2.2</a>) <a href="#">See more</a></p>	<p>Hauora a Toi rates itself a 3 for sharing information from our whānau and consumers with the leaders.</p> <p>(Asa – you can add the meeting you share this information with )</p>
		<p>Information, resources and engagement opportunities are lacking.</p> <p><b>Score 1</b></p>	<p>There are limited information, resources and engagement opportunities, with limited variety and accessibility.</p> <p><b>Score 2</b></p>	<p>There are some information, resources and engagement opportunities, and some variety and accessibility. Barriers are identified.</p> <p><b>Score 3</b></p>	<p>Information, resources and engagement opportunities provided by the organisation are varied and accessible to all consumers and whānau. Barriers to any of the above are actively addressed and remedied.</p> <p><b>Score 4</b> (Specifically relates to code of expectations section <a href="#">2.4</a>) <a href="#">See more</a></p>	<p>Hauora a Toi rates itself a 2 for information resources and engagement opportunities – there is limited variety and accessibility and required further work to eliminate barriers.</p>
		<p>Māori have little to no power and influence with regard to decision-making.</p> <p><b>Score 1</b></p>	<p>Māori have limited involvement, no ability to veto or change decisions made.</p> <p><b>Score 2</b></p>	<p>There is some involvement by Māori, but ultimately no decision-making opportunities.</p> <p><b>Score 3</b></p>	<p>Māori report experiencing tino rangatiratanga (effective power, decision-making and leadership opportunities). A wide range of resources, determined by Māori, is available to support Māori participation.</p> <p><b>Score 4</b> (Specifically relates to code of expectations section <a href="#">1.2</a>) <a href="#">See more</a></p>	<p>Hauora a Toi rates itself a 4 for Māori report experiencing tino rangatiratanga (effective power, decision-making and leadership opportunities).</p>
		<p>Co-design is not apparent in the policies, processes and actions of the organisation relating to the development of health resources and information.</p> <p><b>Score 1</b></p>	<p>Co-design is identified by the organisation as being desirable, however, there is still limited evidence of health resources and information being co-designed.</p> <p><b>Score 2</b></p>	<p>There are policies and processes in place to co-design health resources and information. Some examples illustrate resources are co-designed.</p> <p><b>Score 3</b></p>	<p>There is evidence that there are policies and processes in place to support the co-design of health resources and information.</p> <p><b>Score 4</b> (Specifically relates to code of expectations section <a href="#">2.5</a>)</p>	<p>Hauora a Toi rates itself a 1, for Co-design in policies, processes, and actions of the organisation relative to the development of health resources and information. There is little evidence of power</p>

					<a href="#">See more</a>	sharing in co-design and the practice is often contracted out.
		<p>The organisation has undertaken no planned evaluation of health resources and information with consumers and whānau to show that information is accessible. Informal feedback from consumers and whānau is not routinely considered for action.</p> <p>Score 1</p>	<p>The organisation has undertaken very little if any planned evaluation of information with consumers and whānau to show that information is accessible. Some changes have been made following general feedback from consumers and whānau.</p> <p>Score 2</p>	<p>The organisation has evaluated information with consumers and whānau to demonstrate that information is accessible, and involved them in making changes. No further follow-up or evaluation has taken place.</p> <p>Score 3</p>	<p>There is evidence that information is accessible for all groups (eg, websites are up to date, signage is clear). Health resources and information meet the needs of different communities and are regularly evaluated by consumers and whānau to ensure they are easy to follow and help build understanding between patients, whānau, and staff.</p> <p>Score 4 (Specifically relates to code of expectations section <a href="#">2.4</a>)</p> <p><a href="#">See more</a></p>	<p>Hauora a Toi rates itself a 3- there are signage displayed and in Te Reo as well. We are continually following up on the additional changes need to enable our communities and consumers/ whānau are able to access this easily.</p>
		<p>There is no evidence of use of the <a href="#">Accessibility Charter</a>.</p> <p>Score 1</p>	<p>There is limited use of the <a href="#">Accessibility Charter</a> in relation to some aspects of communication with consumers and whānau.</p> <p>Score 2</p>	<p>There is evidence that the <a href="#">Accessibility Charter</a> has informed most aspects of communication with consumers and whānau by the organisation.</p> <p>Score 3</p>	<p>The <a href="#">Accessibility Charter</a> informs all aspects of communication with consumers and whānau in the organisation.</p> <p>Score 4 (Specifically relates to code of expectations section <a href="#">2.4</a>)</p> <p><a href="#">See more</a></p>	<p>Hauora a Toi rates itself a 2, this is an area which has some limitation of interaction of communication with consumer and whānau.</p>
		<p>No data focused on equity is used to understand inequities.</p> <p>Score 1</p>	<p>Equity data is available and reviewed. Some changes have been made as a result but these were not informed or reviewed by consumers and whānau.</p> <p>Score 2</p>	<p>Equity data is available, reviewed and sometimes used to inform improvements. Some consumers and whānau have been involved.</p> <p>Score 3</p>	<p>Data is actively used to inform improvements in health services and the pursuit of equity particularly for Māori, Pacific peoples and disabled people.</p> <p>Score 4 (Specifically relates to code of expectations section <a href="#">2.2</a>).</p> <p><a href="#">See more</a></p>	<p>Hauora a Toi rates itself a 3, Equity Data is available and reviewed and used for improvements. There are some areas that have more consumer and whānau involvement than others.</p>



Domain	1 – Minimal Te itinga iho	2 – Consultation Te akoako	3 – Involvement Te whai wāhi	4 – Partnership and shared leadership Te mahi tahi me te kaiārahitanga ngātahi	Te Whatu Ora Hauora a Toi Bay of Plenty- Score rating
<b>Experience Wheako</b>  The systems in place to gather consumer and whānau experience, and act upon the results.  Ko ngā pūnaha kua whakaritea hei mau i te wheako kiritaki me te whakatinana i ngā mahi i runga i ngā hua.	There are no metrics or systems to gather experience in place. Nothing is reviewed. There are no actions or changes. <b>Score 1</b>	Few metrics and systems are in place. Review seldom happens and actionable changes are rarely made. <b>Score 2</b>	Some metrics and systems are in place and review happens occasionally. Some actionable changes have been made. <b>Score 3</b>	Metrics and systems are in place, well established and regularly reviewed. As a result of monitoring these metrics, actionable changes are made with the guidance of consumers, whānau and staff. <b>Score 4</b> (Specifically relates to code of expectations section <a href="#">2.2</a> ) <a href="#">See more</a>	Hauora a Toi rates itself a 3- there are metrics and systems in place and regularly reviewed to suit the requirements of the organisation.
	Metrics are not shared with relevant stakeholder groups and are not accessible. <b>Score 1</b>	Metrics are rarely shared and are seldom accessible. <b>Score 2</b>	Some metrics are shared and are sometimes accessible. <b>Score 3</b>	Metrics are regularly shared with relevant stakeholder groups in an accessible way. <b>Score 4</b> (Specifically relates to code of expectations sections <a href="#">1.4</a> , <a href="#">2.2</a> and <a href="#">2.4</a> ) <a href="#">See more</a>	Hauora a Toi rates itself a 2, metrics are rarely shared and accessible by stakeholder groups.
	No accessible feedback options are available to consumers and whānau. <b>Score 1</b>	Few accessible feedback options are available to consumers and whānau. When feedback is received, it is not acknowledged or responded to. <b>Score 2</b>	Some accessible feedback options are available to consumers and whānau. Some acknowledgements of and responses to feedback are provided. Relevant data is sometimes used to underpin health, quality and safety, including consumer experience data. <b>Score 3</b>	There is evidence of a range of accessible options for consumers and whānau to provide feedback. As a means of 'closing the loop', all feedback is acknowledged and responded to. Feedback given leads to demonstrable change as appropriate. <b>Score 4</b> (Specifically relates to code of expectations sections <a href="#">2.2</a> and <a href="#">2.4</a> ) <a href="#">See more</a>	Hauora a Toi rates itself a 4 for accessible options for consumers and whānau to provide feedback. There a good process of acknowledgment and response follow up process. HQSS plays a vital role in this process and demonstrates equitable and ethical approach to investigation and resolution process.

#### Engagement- Te Tūhononga ko te taiao kua hangaia hei tautoko i te tūhononga hapori

**Score 2.5** The average score for Engagement is 2.5: Hauora a Toi Bay of Plenty has committed to create an environment to support community engagement, although we have the Health Consumer Council (HCC) we are still awaiting to get some direction from the national level as how the transitional process will affect the HCC.

Whilst we have scored ourself low in this area, we do have actions planned to boost the involvement of in-house education of our staff and a particular focus to link with consumer groups to have a representation of the population & communities experiencing poorer health

#### Responsiveness- Te Noho Urupareko te urupare, ko te mahi i ngā kōrero a ngā kiritaki mō te ratonga me te whai i te mōhiohio tika i te wā e tika ana mō ngā kiritaki e uru ana ki ngā ratonga.

**Score 3** The average score for Responsiveness is 3: Hauora a To Bay of Plenty has a considerable way for collection of feedback and the origination of the Adverse Event Committee (AEC) has strengthen the commitment of involving and sharing information with our patients and whānau and staffs for learning and improvement. accessible options for consumers and whānau to provide feedback. There a good process of acknowledgment and response follow up process. HQSS plays a vital role in this process and demonstrates equitable and ethical approach to investigation and resolution process.

**Experience – Wheako ko ngā pūnaha kua whakaritea hei mau i te wheako kiritaki me te whakatinana i ngā mahi i runga i ngā hua.**

**Score 3** The average score for Experience is 3, we have metrics and systems in place (ie reporting dashboards have been developed for Service leaders) to capture and monitor of consumer experience and the sharing of the reports to leadership and service level teams. The national inpatient survey currently has limitations in terms of the ability to drill down into responses i.e., by site, ward etc. The introduction of the adult outpatient experience survey will further boost the capturing of experience domain and enable us to view data for Inpatient and Outpatients collectively.

## HCC ANNUAL 2022 YEARLY REVIEW:

Discussion points from whiteboard July 2022	Possible actions	Tracked actions
<ul style="list-style-type: none"> <li>• What we will do if there is a national approach to consumer engagement</li> <li>• How will we contribute and provide input into a National Group</li> <li>• Recognising work we doing               <ul style="list-style-type: none"> <li>• Updated Online Directory e.g. Mental Health</li> </ul> </li> <li>• Potential for independent entity in the future with funding for community health service navigation</li> <li>• Acknowledging time involved and information that is shared from groups Lisa is involved in</li> <li>• Demands of being asked to read &amp; respond to information faster</li> <li>• Don't get all controlled documents sooner</li> <li>• Not Majoring on minors, eg. Moving on from issues dealt with by HCC eg. Pathlab</li> <li>• Sleep not featuring as a cornerstone of Good Health in guidelines and documentation</li> <li>• Pushing hard for rights of members and the community</li> <li>• Linking Staff with HCC Role. Staff not aware of HCC and knowing how and where to engage with consumers. As a voice for consumers there is potential for crossover in roles. Groups eg. Renal already have their own group interacting with patients as part of quality and safety measures</li> </ul>	<b><i>A national approach:</i></b>	
	<ul style="list-style-type: none"> <li>• Maintain active watch on updates/advice from Te Tāhū Hauora HQSC via Chair and members' networks.</li> <li>• Put forward ideas &amp; seek to influence national outcome, via Chair.</li> </ul>	<ul style="list-style-type: none"> <li>• Te Whatu Ora staff consumer engagement survey and Consumer Council overview (from National Chairs) documents tabled/discussed at HCC meeting 11/10/23.</li> </ul>
	<ul style="list-style-type: none"> <li>• Make sure we are well-placed for change: continue ongoing work under existing TOR; continue to build our knowledge and relationships.</li> </ul>	<ul style="list-style-type: none"> <li>• Agreed to continue work within TOR until/unless advised otherwise, given ongoing need for consumer voice in health system.</li> </ul>
	<ul style="list-style-type: none"> <li>• Document past and current work as a record for future reference. What we have done, and with what outcomes.</li> </ul>	<ul style="list-style-type: none"> <li>• Adopt this table format, keep updated.</li> </ul>
	<b><i>Improving how we function:</i></b>	
	<ul style="list-style-type: none"> <li>• Set priorities for our work; prioritise new issues/opportunities.</li> </ul>	<ul style="list-style-type: none"> <li>• To do?</li> </ul>

<ul style="list-style-type: none"> <li>• Functioning as a group – sharing knowledge – where do we put it? <ul style="list-style-type: none"> <li>• Collate networks, contacts, sources and interests</li> <li>• Informal contacts and lived experience</li> <li>• Used to be on a shared platform</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Methodically follow through on issues raised by members.</li> </ul>	<ul style="list-style-type: none"> <li>• Pathlab issues being pursued.</li> <li>• Monthly updates on home-based aged care project.</li> </ul>
<ul style="list-style-type: none"> <li>• Health Consumer Council Promotion</li> </ul>	<p>Track and ‘sign off’ completed work items/initiatives.</p>	<ul style="list-style-type: none"> <li>• Matters arising register kept up to date.</li> </ul>
	<ul style="list-style-type: none"> <li>• Raising awareness of HCC with hospital staff (and wider community?).</li> </ul>	<ul style="list-style-type: none"> <li>• Regular invitations to staff to meet with HCC.</li> </ul>
	<ul style="list-style-type: none"> <li>• Compile a list of other health-related consumer groups; seek to coordinate efforts.</li> </ul>	<ul style="list-style-type: none"> <li>• To do?</li> </ul>
	<ul style="list-style-type: none"> <li>• Collate members’ networks, contacts (including informal), sources, interests and lived experience (revive format on Connex)</li> </ul>	<ul style="list-style-type: none"> <li>• To do?</li> </ul>