

TATAU POUNAMU

Ki Te Tai o Poutini



MANAWHENUA ADVISORY GROUP

Friday 28 May 2021

@ 10.00 am Te Nikau Hospital – WCDHB IFHC Meeting Room

Agenda and Meeting Papers

**All Information Contained In These Committee Papers Is
Subject To Change**

AGENDA OF THE TATAU POUNAMU MANAWHENUA ADVISORY MEETING



TATAU POUNAMU MANAWHENUA ADVISORY MEETING

Te Nīkau Hospital – IFHC Meeting Room 1

Zoom Link <https://cdhbhealth.zoom.us/j/82041102928>

Meeting ID: 820 4110 2928

Friday 28 May 2021 - 10.00am – 12.00pm

KARAKIA

ADMINISTRATION

Apologies

1. Interest Register

Update Interest Register.

2. Confirmation of Minutes of Previous Meetings

Previous meeting minutes – 09 April 2021 – *Chair*.

10.00am

3. Carried Forward/Action List Items

4. Discussion Items

▪ Covid 19 Update.

10.20am

▪ Pae Ora o Te Tai o Poutini.

10.25am

▪ Pending Vacancy.

10.30am

▪ Working group and committee vacancies.

10.35am

▪ Tumu Whakarae – Gary Coghlan update.

10.40am

REPORTS

5. GM Māori Health Update

Gary Coghlan - *General Manager*

10.45am

6. Chairs Update

Susan Wallace - *Chair*

10.50am

Working Session

7. Wananga Consumer Council

Terms of Reference Attached for discussion 11.00am

▪ Russ Aiton, Christine Robertson.

11.30am

INFORMATION ITEMS and UPDATES

▪ NOTE - Te Tiriti and Māori Health Equity Governance and Leadership Workshop - virtual, Hui Whakaoranga 20 and 21 July 2021.

▪ NOTE - Suicide Prevention moved to next meeting 9th July.

ESTIMATED FINISH TIME 12.00pm

TATAU POUNAMU ADVISORY GROUP MEMBERS INTEREST REGISTER

Susan Wallace - Chair Te Runanga o Makaawhio

- Member, Te Runanga O Makaawhio
- Member, Te Runanga O Ngati Waewae
- Director, Kati Mahaki ki Makaawhio Ltd
- Director, Kohatu Makaawhio Ltd
- Co-Chair, Poutini Waiora Board
- Area Representative – Te Waipounamu Maori Women's Welfare League
- Representative, Te Runanga O Ngai Tahu (Makaawhio)
- Trustee, Te Pihopatanga O Aotearoa Trust

Ned Tauwhare - Ngati Waewae Representative

- West Coast community Response Forum (MSD) Ngai Tahu Rep
- Te Runanga O Ngati Waewae Member
- Te Runanga O Ngati Waewae Advisor – Kawatiri Role
- Te Runanga O Ngati Waewae Advisor – Te Ha O Kawatiri Role
- Te Runanga O Ngati Waewae Advisor – Buller Inter Agency
- Te Runanga O Ngati Waewae Advisor – Reefton Partnership Forum
- West Coast District Health Board Consumer Council – Maori Representative
- Te Whare Akoanga Committee (Grey High School)

Chris Auchinvole – Board Representative

- Director Auchinvole & Associates Ltd
- Justice of the Peace
- Daughter-in-law employed by Otago DHB

Joseph Mason - Ngati Waewae Representative

- Greymouth High School – Te Reo Teacher

MINUTES OF THE TATAU POUNAMU MANAWHENUA ADVISORY MEETING

MINUTES OF THE TATAU POUNAMU MANAWHENUA ADVISORY MEETING

FRIDAY 9 APRIL 2021

Te Nikau Hospital – WCDHB IFHC MEETING ROOM 10AM.

PRESENT: Susan Wallace, Te Runanga o Makaawhio (Zoom)
Chris Auchinvole, WCDHB Board Representative (In person)
Ned Tauwhare, Te Runanga O Ngāti Waewae (In person)
Joseph Mason, Ngati Waewae Representative (In person)
Gary Coghlan, General Manager Maori Health (In person)
Marion Smith, Portfolio Manager, Maori Health (In person)

APOLOGIES: Maree Mahuika-Forsyth, Te Runanga O Makaawhio Representative
Richelle Schaper, Kawatiri Representative
Anne Ginty, Mawhera Community Representative
Kyle Parkin, Portfolio Manager, Maori Health

MINUTE TAKER: Melanie Wilson

Mihi Whakataua/Karakia.

Susan Wallace
Gary Coghlan

AGENDA/APOLOGIES.

1. DISCLOSURES OF INTEREST.

1.1. Updates or amendments discussed.

Action: All members to update their disclosures of interest, email and confirm before the next meeting.

2. MINUTES OF LAST MEETING.

2.1. Minutes of the previous meetings: 1) 9th of October 2020, 2) 18th of December 2020 were agreed as a correct record.

Moved: Chair

Second: All present

2.2. Discussion

- Ensure documents are confirmed before publishing.
- Minutes to clearly state DRAFT to allow for corrections to be made.
- Key messages to be included in the minutes.
- Strategy to be created to ensure documents are uploaded to the WCDHB website and circulated to the wider community, in particularly the Maori community. Send a link to interested parties.
- Meeting minutes to form the Chairs report along with all key messages to highlight key focus areas and messaging from Tatau Pounamu.

Action: Check if previous meeting minutes are on the WCDHB Website.

Action: Create list of interested parties to share the documents/link.

3. ACTION POINTS FROM PREVIOUS MEETINGS.

3.1. Ministry of Health visit.

- Positive feedback received right across the board especially around Hauora Maori involvement.

3.2. Suicide Prevention. – On-going

- a. Gary attended meeting at the Greymouth Police Station.
- b. **Key points from that meeting:**
 - Police are involved in the mahi around this kaupapa.
 - Claire Robertson - excellent Suicide Prevention Coordinator.
 - Additional resource needed for Suicide Prevention due to the seriousness of the issue.
 - Need to discuss strategies to increase Public awareness.
- c. Concerns raised due to the rise of Rangatahi in our community talking about suicide.

Action: Korero at the next Hui to discuss potential Tatau Pounamu involvement in this kaupapa.
Action: Invite Claire Robinson to join the discussion.

3.3. Bowel Screening.

- a. Presentation to be given by Manaia Cunningham WCDHB Program Manager - at the end of this Hui.

4. DISCUSSION ITEMS / AGENDA.

4.1. Strategic Planning Day - 5th of March

- a. Report taken as read.
- b. Members who attended commented it was a very valuable exercise.

Action: Schedule another Strategic Planning Day.

4.2. Te Tiriti and Maori Health Equity Governance and Leadership Workshop

- a. Emphasized the importance of as many Tatau Pounamu members to attend this workshop.
 - GM Gary Coghlan, Tatau Pounamu Board Member Richelle Schaper and Hauora Māori Portfolio Manager Marion Smith will attend in Wellington 15/16 April.
 - Board Members Joe Mason and Maree Forsyth-Mahuika expressed an interest to attend the Dunedin Hui on the 29/30 April.
 - A Zoom Hui will be held in June/July for those unable to attend.

Action: Send link for Dunedin Hui to the Chair.

Action: Investigate options for zoom.

4.3. COVID 19.

- a. Discussed West Coast DHB Covid 19 response, vaccination program.
- b. Hauora Maori team involved as part of the steering group ensuring equity is at the forefront of every decision.
- c. Janice Donaldson led the mahi around the Funding application which has now been approved in principle by the MOH.
- d. Hauora Maori team have approached Maori nurses to see if they are interested in becoming vaccinators. Still awaiting confirmation from list, two have agreed so far.
- e. **Key aspects, objectives and Strategies**
 - Coordination of flu vaccines, COVID 1 and 2, and MMR.
 - Enabling choice for whanau.
 - Encouraging collaboration between providers.
 - Funding availability.
 - Maori nurse vaccinators.
 - The Ministry of Health has notified the vaccine is available to those over 16 years.
 - Communication strategy being released nationally.
 - Mobile team for outreach delivery.

4.3 (COVID 19 Continued).

- f. Source fact sheet / pamphlet around this kaupapa to share with Tatau Pounamu members to help gain some understanding of the process and procedure with the Covid vaccine. To include timing between shots, technical information and what to expect.

Action: Send Source fact sheet/pamphlet to Tatau Pounamu members

Action: Continue to source Maori nurses to become vaccinators.

4.4. Pai Ora O Te Tai O Poutini

- a. Discussed Dr Melissa Cragg's report on Pae Ora.
- b. Hauora Maori team submitted funding application to the MOH.
- c. Next stage will require planning.
- d. **Key points of Pai Ora**
 - Aligns with Rural Generalist.
 - Healthy futures for Māori.
 - Getting out amongst our community instead of making them come to us. Taking our nurses, doctors, social workers to the community.
 - Access to all services with a focus on more than one service at a time eg running health promotions while delivering other services, flu vaccines, blood pressure checks etc.

4.5. WCDHB Staff Hui

- a. Discussed planned timetable for the year. The dates have now been confirmed and sent to all Maori staff and their managers.
- b. The second staff hui was held at St Johns presented by Holly Weir from SIAPO. This was a very successful Hui with positive feedback received. Report will be available at the next meeting.
- c. Look into options of taking staff to an outside venue.
- d. Tatau Pounamu representatives to be advised of the dates.

Action: Feedback from last Hui to be presented at next Hui.

Action: Include Tatau Pounamu Members at the next Hui.

4.6. Working Groups

- a. Haoura Māori staff to collate a list of working groups, committees, alliance work groups that require a Māori representative to enable Tatau Pounamu to prioritise their involvement to ensure Tatau are strategically placed and able to support the voices in those work streams.
- b. Investigate the possibility to introduce a policy regarding the remuneration to members sitting on working groups. Research fee scales, due to the expectations and the time taken to attend.

Action: Formulate list of working groups to be presented at the next hui.

4.7. Vacancies

- a. Resignation has been received from Ann Ginty, Tatau Pounamu Mawhera member.
- b. Vacancy to be advertised and interviews to be conducted as outlined in the policy.
- c. Looking for a representative living in the Mawhera area.

Action: Advertise the vacancy.

5. GM Māori Health Update

- 5.1. Report taken as read.

6. Chairs Update

- 6.1. Verbal update given.
 - a. Previous meeting minutes to form the basis of the Chairs report to the Board.

7. Equity Update

7.1. Consumer Council

- a. Tatau Pounamu motivated to significantly increase Māori representation on the Consumer Council. The consensus is there are currently too few Māori involved. This decision is supported by all present members of Tatau Pounamu.
- b. Discussed Maori representatives put forward. We are looking for Maori who are willing to speak up, be strong advocates and able to give good quality input.
- c. Gary and Ned are to lead this kaupapa with the full support of Tatau Pounamu.

Action: Meeting with Chairman and key members of the council to discuss equity.

8. Bowel Screening Presentation - Manaia Cunningham WCDHB Program Manager

- We have the highest bowel cancer rates in the OECD.
- This is a program to screen and detect bowel cancer or precancerous lesions at an earlier
- Roll out planning for May 2021. Age range 60-74 years, eligible for funded NZ bowel screening.
- 585 Maori, Pacific and Asian whanau eligible 21/22
- Māori uptake still less than non-Māori but not as bad as other screening programmes.
- Mortality rate for Māori will be higher as they present later and often more unwell.
- Rate of kits returning positive is higher for Māori than non-Māori.
- Urgency to recruit and begin work on promotion and community preparedness.
- Working with Hauora Māori to guarantee Māori are priority.
- Leadership and engagement with Māori vital to engagement.

Meeting ended at 12.00pm.

Next meeting is to be held on 28th May 2021.

Venue TBC

TATAU POUNAMU

ACTION LIST ITEMS 09 April 2021

Item No	Meeting Date	Action Item	Action Responsibility	Reporting Status
1.	April 2021	1 DISCLOSURES OF INTEREST - Action: All members to update their disclosures of interest, email and confirm before the next meeting.	All Members (To email to PA – MW)	May Meeting
2.	April 2021	2 MINUTES OF LAST MEETING. - Action: Ensure documents are uploaded to the WCDHB website and circulated to the wider community, in particularly the Maori community. - Action: Create list of interested parties to share Tatau Pounamu documents/link.	PA – MW - Check WCDHB website All Members (To email to PA – MW)	May Meeting
3.	April 2021	3.2 Suicide Prevention. – Ongoing - Action: Korero at the next Hui to discuss potential Tatau Pounamu involvement in this kaupapa. - Action: Invite Claire Robinson to join the discussion.	All Members Gary Coghlan	May Meeting
4.	April 2021	4.1 Strategic Planning Day - Members who attended commented it was a very valuable exercise. - Action: Schedule another Strategic Planning Day.	 Gary Coghlan	May Meeting
5.	April 2021	4.2 Te Tiriti and Maori Health Equity Governance and Leadership Workshop - Action: Send link for Dunedin Hui to the Chair. - Action: Investigate options for zoom.	PA – MW PA – MW	May Meeting
6.	April 2021	4.3 COVID 19 response, vaccination program. - Action: Send Source fact sheet/pamphlet to Tatau Pounamu members - Action: Continue to source Maori nurses to become vaccinators.	PA – MW Gary Coghlan	May Meeting

7.	April 2021	4.5 WCDHB Staff Hui - Action: Feedback from last Hui to be tabled at next Hui. - Action: Include Tatau Pounamu Members Sat the next Hui, forward date and venue.	Marion Smith	May Meeting
8.	April 2021	4.6 Working Groups attendance. - Haoura Māori staff to collate a list of working groups, committees, alliance work groups that require a Māori representative to enable Tatau Pounamu to prioritise their involvement. - Action: Formulate list of working groups to be presented at the next hui.	Gary Coghlan Marion Smith Kylie Parking	May Meeting
9.	April 2021	4.7 Vacancy received. - Vacancy to be advertised and interviews to be conducted as outlined in the policy. Looking for a representative living in the Mawhera area. - Action: Advertise the vacancy.	PA – MW	May Meeting
10.	April 2021	7.1 Consumer Council - Action: Meeting with Chairman and key members of the council to discuss equity.	Gary Coghlan, Ned Tauwhare	May Meeting

Maori Representatives On Committees/Working Groups/Boards 2021

GROUP / COMMITTEE / BOARD	MEMBERSHIP
HQSC Quality Improvement	Kylie Parkin
Mental Health Quality Team	Kylie Parkin
Local Diabetes	Gary Coghlan / Angela Orr
Local Cancer	Kylie Parkin
Child & Youth Workstream – (Davina??)	Kylie Parkin / Tracey Sollitt
Healthy West Coast	Kylie Parkin
Health of Older People	Marion Smith
WCDHB Board	Francois Tumahai
Maternity Quality Safety - MOG	Kylie Parkin, Gemma Rae
ASG	Kylie Parkin
Oral Health - SOG	Kylie Parkin
Tobacco Coalition	Marion Smith
ALLIANCE GROUPS	
- Alliance Northern	Marion Smith + Richelle Schaper
- Alliance Central	Gary Coghlan + VACANT MĀORI REP
- Alliance Southern	Kylie Parkin / Ned Tauwhare
Workforce Development	Marion Smith
CCCN	Marion Smith
South Island Workforce Development Group	Gary Coghlan
Clinical Board Māori Consumer Appointment	Gary Coghlan / Deb Wright / Jenny Bell / Taylor Cadigan
Studentships	Marion Smith
Bowel Screening Steering Group	Kylie Parkin / Marion Smith
Central IFHC Group	Gary Coghlan / Kylie Parkin
Equity Group	
MĀORI REP VACANCY REQUESTS	
Alliance Central Request	Māori Rep Request
Disability Steering Group Request	Māori Rep Request

TO: Tatau Pounamu Advisory Group

SOURCE: Chair

DATE: May 2021

Report Status – For: Decision ☐ Noting ☒ Information ☐

1. ORIGIN OF THE REPORT

This report is provided as an update from the Chair Tatau Pounamu

2. RECOMMENDATION

That Tatau Pounamu notes the following

2.1 Tatau Pounamu Report to West Coast DHB

The following kaupapa were included in our report to the May Board Meeting

- **Suicide Prevention** - Tatau Pounamu recognises the seriousness of this issue for Māori and will discuss further at the next hui what their involvement might be in relation to mate whakamomori. Claire Robinson, Suicide Prevention Co ordinator will be invited to attend the Hui to discuss strategies moving forward.
- **Te Tiriti and Maori Health Equity Governance and Leadership Workshop** - A very important event and Tatau Pounamu and WCDHB Board members are encouraged to attend kanoahi ki te kanoahi hui. The Zoom in June Hui is an option for those unable to travel.
- **Consumer Council (Tirohanga Whānui)** - Tatau Pounamu is aspirational in its view that it would be advisable to significantly increase Māori representation on the Consumer Council. The consensus is that there is currently too few Maori on the Council. There will be further discussion about this with the Consumer Council in the future. It is important to ensure equity is at the forefront of any consumer conversation.
- **Bowel Screening** - Following a presentation by the Bowel Screening Programme Manager the Bowel Screening Kaupapa, Tatau Pounamu acknowledged the work of Mania Cunningham and the team he works with to gain MOH approval for the rollout of the Bowel Screening programme. Tatau Pounamu stressed it was important the Hauora Māori team to actively engage in the communication processes and to support and participate within the Equity Advisory Group. This group is made up of members from Iwi, Clinicians and Hauora Māori.

Recommendation

The Tatau Pounamu Chair report and the Hauora Māori General Manager report be a standalone report within the Board Papers.

2.2 Pae ora o Tē Tai Poutini – Model of care development – Hui 6 May 2021

Fiona Pimm has been contracted by Poutini Waioara to lead the next phase of Pae Ora o Te Tai Poutini, the development of the Model of Care. The first round of what will be many conversations was undertaken on May 6 & 7. I was able to attend the session with the DHB and PHO reps on 6th May.

2.3 COVID Vaccine Rollout – Hui 3 May 2021

Meeting was held with SI DHB GM Maori. Planning is progressing, however, it was clear that a more coordinated and collaborative approach across Te Waipounamu would be more beneficial and GM's Maori were due to meet and pull together more information.

Tōnā koutou katoa e aku rangatira,

I'd like to announce the release of the [COVID-19 Māori Vaccine and Immunisation Plan](#), which builds on the [Updated COVID-19 Māori Health Response Plan](#) implemented in 2020.

This plan outlines key initiatives that will be undertaken to ensure the COVID-19 Vaccine and Immunisation Programme addresses its obligations under Te Tiriti o Waitangi and supports Māori health and equity.

He mahi ngātahi – Working collaboratively

The COVID-19 response has been a collective effort involving hapū, iwi, hapori Māori, the wider health and disability provider network, and the broader health and disability system, workforce and government. The achievements and progress made are the result of collaboration and kotahitanga.

It is essential the Ministry continues to encourage and enable this unified effort as part of the [COVID-19 Elimination Strategy for Aotearoa New Zealand](#). The successful delivery of the Programme will be critical to meeting the objectives of the Elimination Strategy.

Ko Te Tiriti te pātaketanga – Fulfilling our obligations under Te Tiriti

The Ministry is committed to fulfilling its obligations under [Te Tiriti o Waitangi](#) as part of the COVID-19 Māori health response, including through working in partnership with our iwi and Māori health provider network. Initiatives include:

- governance and partnership
- targeted vaccination approach
- Māori health and disability provider support
- workforce development, and
- tailored communications.

The Programme will help to manage the impact of COVID-19 on Māori which will enable us to:

- provide our most at-risk groups with a layer of protection through the vaccine to minimise the potential harm of contracting COVID-19,
- potentially reduce the risk of transmission in the community, and
- support the health and disability system's readiness and resilience if there is an outbreak, both by vaccinating certain health workers early and by vaccinating the groups most at risk of severe illness if they contract COVID-19.

Te Pūtea – Funding for a targeted Māori response

To ensure the Programme is responsive to Māori and delivers on equitable health outcomes, the Ministry has committed \$39 million for a targeted Māori response. Of this funding, \$11 million will support Māori and iwi health providers to prepare for their delivery of the COVID-19 immunisations and \$24.5 million will go towards support services for whānau to improve access to COVID-19 immunisation services.

Hei tīmatanga – First stage of the Programme

Our first focus is to get this \$11 million directly to selected Māori and iwi health providers who have existing vaccinator capabilities. The funding will be allocated through a population-based funding formula and our focus will begin in April with the Counties Manukau DHB region. This funding will support providers to prepare their workforce, operational infrastructure, and systems needed to deliver the COVID-19 vaccine to whānau, hapū, and iwi.

It is intended for this investment to leave a legacy to help build the capability and capacity of the Māori health sector for future programmes.

You can read the plan online [here](#).

If you have any questions, please feel free to contact me or my team at: maorihealth@health.govt.nz

Mā te Atua koutou e manaaki hei ngā rangi e tū mai nei,

Nāhaku me aku mihi aroha,

nā **John Whaanga** Deputy Director-General | Māori Health Directorate **Waea pūkoro:** 021 578 040 |
Īmēra:
John.Whaanga@health.govt.nz

Hauora Māori Update – Board Report

Annual Plan 2021/2022

Hauora Māori received the green light from the Ministry of Health for next year's Annual Plan Actions and Milestones.

Rā whānau Project

A scoping exercise is being undertaken to develop a concept of Māori receiving a free health check in their 50th year. Initial conversations with clinicians will define more clearly the clinical parameters and opportunities for targeted testing and begin the development of an assessment tool. It is imperative strong Māori consumer input is incorporated from the outset and multiple options for engagement by whānau are considered.

Population data shows that there are 210 people between the ages of 45-49 and we can assume based on these numbers that the numbers eligible for the check will be 40-50. If we follow the bowel screening approach, where participants are staggered over two years the number is very manageable at 20-30 per year.

Putea has been approved and the WCDHB Board and Chair and WCDHB Management support the project. This project will require considerable thinking to ensure it is designed and underpinned by Tikanga and Mātauranga Māori.

Pae ora o Tē Tai Poutini

Fiona Pimm has been contracted to implement the next phase of the Pae ora o Tē Tai Poutini initiative. This will include working alongside Poutini Waiora, DHB, PHO and Ngā whānau katoa to develop a service model that meets the needs of whānau for who the current model does not work for. The next phase of this initiative has been supported through the Ministry of Health, Te Ruinga category of Te Ao Auahatanga Hauora Māori: Māori Health Innovation Fund. Fiona has extensive experience working in governance roles in the health sector, government agencies, community NGOs, local iwi and runanga. She has extensive health sector networks across Aotearoa, especially in the Primary Care sector and Māori Health sector.

Covid19 and Flu Vaccination Funding

WCDHB and Poutini Waiora have been successful with an MOH funding application for Māori Influenza (\$148,000) and Covid-19 (\$175,000) Vax rollouts. A project establishment group has been formed with the purpose to plan the outreach influenza immunisation rollout to Kaumatua from May 2021 in line with the general West Coast PHO/DHB immunisation programme. The group will also be involved with the COVID-19 vaccination rollout to Māori in line with the general West Coast Programme.

Consumer Council

A combined Wananga between Tatau Pounamu and the Consumer Council is on the agenda for our May meeting. The aim of the kōrero is how we can have greater Māori involvement in the Consumer Council. This kaupapa a very positive collaboration with positive goodwill and we will continue to report as progress is made.

Regional Workshops Iwi and DHB Partnership Boards

Hauora Māori General Manager, Gary Coghlan, Tatau Pounamu Board Member Richelle Schaper and WCDHB Hauora Māori Portfolio Manager Marion Smith attended a 2-day regional workshop – Te Whanganui-a-tara in Wellington on 15/16 April. The workshops are the first step in a long-term commitment to support DHB and Iwi Partnership Boards build understanding of how best as governors and leaders to give effect to Titiri responsibilities and work together to achieve improved health and wellbeing for future generations.

This workshop related directly to an action in Priority Area 2 Ngā Kaiārahi Māori/Māori leadership in Whakamaau.

One highlight of the workshop was a presentation from John Whaanga – Deputy Directory-General Māori Health Directorate on Te Tiriti and Māori Health Equity. The opportunity to network with our peer group from other DHB's and Māori Health Providers cannot be understated.

Tatau Pounamu members Joe Mason, Marie Mahuika-Forsyth and Chris Auchinvole attended the Hui held in Dunedin on 29th/30th April.

Training Programmes

An annual training program which includes workshops on Tikanga Best Practice and Tiriti o Waitangi has been developed and timetabled with input from Operational Managers.

Hauora Māori have run three Tikanga Best Practice workshops in 2021. A workshop in Greymouth held in March was attended by 10 new graduate nurses, another in Greymouth was run for Allied Health Kaiawhina with 13 kaimahi attending and a workshop held in Westport was attended by 13 staff.

Further training options were discussed for Buller and Reefton and an equity workshop is currently in the planning stages for May.

The following training workshops have been timetabled:

- Four Tikanga Best Practice – Kawatiri and Mawhera
- Three Te Tiriti o Waitangi – Kawatiri and Mawhera
- Takarangi Cultural Competency – Arahura Marae
- Kia ora Hauora Rangatahi Placement – Mawhera
- HEAT Training – Westland, Kawatiri and Mawhera

Maori Staff Hui

The first Maori staff Hui for 2021 was held on the 23rd of March and facilitated by Holly Weir the Project Manager: Māori Workforce Development for the South Island Alliance and supported by Gary Coghlan – Hauora Māori General Manager.

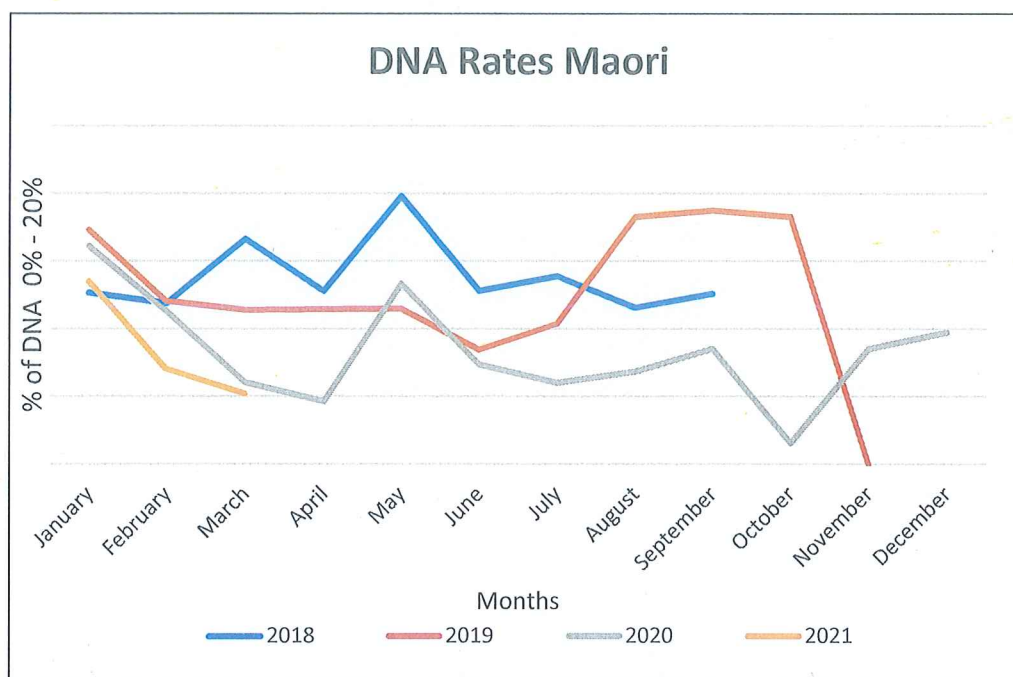
Based on feedback from the November 2020 Hui the programme was designed to inform, educate and stimulate conversation. The Hui was attended by 15 DHB Kaimahi.

DNA Project

Improving DNA (Did not attend) rates for vulnerable populations

A HEAT (Health Equity Assessment Tool) session held in May 2020 with the Central Booking Unit team identified a number of unintended consequences of current CBU booking practices. Hauora Māori began working with the team to monitor the number of Māori Patients who did not attend their outpatient appointments and to implement positive operational changes targeting communication and patient follow up.

The group met regularly to check data and develop strategies to contact Māori patients. Reports received from ISG allowed continual live monitoring of bookings and the CBU team used this information to target potential DNA patient.



The percentages of Māori DNA's (reported to the Ministry of Health) has historically been over 10%, with some months as high as 19%. For the first time since data has been collected and monitored (2014) the percentage of Māori DNA's for 8 of the 9 months of the project June 2020 – February 2021 was below 10%. The exception being January 2021.

Note: Based on previous data January was identified as being potentially problematic.

Going forward the CBU team will be implementing a change in booking practices and make BAU the contact tracing process identified as being successful. Appointment communication has also been updated and CBU are taking full ownership of their service.

The next stage of the project will investigate if there is any correlation between the numbers who DNA by WC Deprivation Index and compare those numbers with the Specialty Clinics.



Consumer Council Terms of Reference

Purpose:

The West Coast District Health Board (DHB) Consumer Council works in partnership with ~~the~~ WCDHB as an advisory body, providing a collective perspective of those who use services, into health services planning, delivery and evaluation at all levels of the organisation.

Membership:

The Consumer Council will consist of ~~8-10~~ up to 15 consumer representatives in total. Each region, (BullerNorthern, GreyCentral and WestlandSouthern will have a locality-based consumer council comprising five members recruited from community representatives and will work with the WCDHB LocalityOperations Manager.

Members will have -who have a- particular interest, understanding and knowledge in one of the following areas: Family Health, Mental Health, Long Term Conditions, Physical, Intellectual and Sensory Disabilities, Older People, Rural Communities, Maori, Pacific Peoples and Primary Health Organisation (PHO) Consumers.

Eligibility for WCDHB Consumer Council membership shall be contingent on a domicile requirement specific to a geographic region an interest has been expressed in.

The Consumer Council may co-opt people from time to time, for a specific purpose.

Shared/proxy membership may be considered where consistent attendance will be difficult, to enable council business to continue.

If members fail to attend three meetings in a row, without an apology, they will be asked by the Chair to step down as a Consumer Council member.

Nomination Process:

Membership will be decided by way of a call for expressions of interest, with membership recommendations made to the Chief ExecutiveQuality & Patient Safety Manager.

Recommendations will be based on what prospective members bring by way of skills, perspective, and ability to enhance the work of the council, along with the collective mix of council attributes.

Nominations will be region specific and representative of local communities.

Term of Appointment:

The term of a Consumer Council member is 2 years. This can be extended for a further two terms of one year.

Quorum:

The quorum for a Consumer Council meeting is 6 members plus the Chair and a member of the Secretariat.

Commented [AB1]: Quorum should be re-looked at with increase in members of quarterly meeting – 50% plus one recommended

Honorarium and Expenses:

Members attending face to face council meetings during their ordinary paid time will not receive payment for meeting attendance if employed in health and attendance is approved by their organisation.

Consumer Council Terms of Reference - DRAFT	Page 1 of 3
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Members attending during unpaid time are entitled to be paid a meeting fee of \$65.00 per meeting. Mileage expenses incurred by individuals may also be reimbursed at a rate of 79 cents per kilometre.

The fees and reimbursing allowance (Mileage) are paid as an honorarium. The Inland Revenue department requires the West Coast District Health Board to deduct withholding tax from an individual who is earning an honorarium.

Chair:

To be selected at first meeting following appointments.

Authority, decision making and reporting line:

Executive Management Team and Clinical Board through Quality and Patient Safety Manager reports. Agreement made at Consumer Council meetings regarding any issues and activities to report.

Meeting location, time and frequency:

Full Consumer Council meetings will be held every calendar quarter where practicable.

~~and on the following dates for 2021 have been scheduled:~~ Bi-monthly with meetings in February, April, June, August, October, December on a Monday at 2pm to 4pm.

The venue location is to be confirmed at previous meeting confirmed when availability of venue is secured. Dates for 2019:

- 18th 4 February 1.30pm – 4pm
- 1 April 13th May 1.30pm – 4pm
- 10 June – Buller Health
- 12th 5 August 1.30pm – 4pm
- 14 October – Offsite due to room availability at Grey Hospital (possibly St John)
- 9 December – Hokitika Health Centre
- 1.30pm – 4pm

The Locality groups will meet on a monthly basis with the Locality WCDHB Operations Manager and these meetings will be arranged separately.

Note: Ad hoc meetings as required will be negotiated between the Chair and the Consumer Council members with Quality and Patient Safety Manager oversight.

Minutes/Communication:

Administrative and minute taking support provided by Administration Support Person of Quality and Patient Safety Manager.

Minutes are generally distributed within 10 working days following Council meetings following an initial consultation period with the Chair.

Agenda items may be registered with the Administration Support Person, with the Agenda being sent at least five working days prior to Consumer Council meetings to ensure that all members are sufficiently prepared for Council meetings.

Key Tasks:

Involvement in activities that:

- enhance the collection and use of feedback from a service user's perspective
- improve the organisation's information sharing responsibilities with service users
- contribute to the design or re-design of services and/or facilities by the DHB

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Commented [AB2]: Need to provide more specific and approved information about claiming for admin time, mileage for multiple meetings on the same day, what type of meetings (ad hoc, not initiated by DHB staff etc.) can be claimed for and define limits if applicable

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- improve the quality of the patient journey
- remove barriers for consumers whilst enhancing safe service provision

Evaluation/Review:

Terms of Reference to be reviewed annually, at the first meeting in the calendar year

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