

Consumer Council

Wednesday

3 May 2023

2:00pm – 4:00pm

**Harakeke Room, Ground Level, Whenua Pupuke Building
North Shore Hospital Campus**

In person attendance with Zoom option available

CONSUMER COUNCIL

3 May 2023

Venue: Harakeke Room, Ground Level, Whenua Pupuke Building North Shore Hospital Campus
Time: 2:00pm – 4:00pm

<u>Consumer Council Members</u> Lorelle George (Chair) Ngozi Penson (Deputy Chair) Neli Alo Samuel Cho Boyd Broughton (Te Rūnanga o Ngāti Whātua) Dan McCool (Te Whānau o Waipareira) Janet Fitzgerald Insik Kim Ian Ramos Ravi Reddy Kaeti Rigarlsford Vivien Verheijen	<u>Ex-officio - Waitematā DHB staff members</u> Samantha Dalwood – Disability Advisor Brad Healey – Interim Lead – Hospital and Specialist Services Waitematā <u>Other Te Whatu Ora Health New Zealand Waitematā Staff members</u> Ravina Patel – Manager, Patient Experience
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APOLOGIES:

Samantha Dalwood

AGENDA

Disclosure of Interests (see guidance)

- Does any member have an interest they have not previously disclosed?
- Does any member have an interest that might give rise to a conflict of interest with a matter on the agenda?

WELCOME

KARAKIA

1. AGENDA ORDER AND TIMING	
2. Welcome / Karakia / Introduction	
3. CONFIRMATION OF MINUTES	
2.05pm	3.1 Confirmation of the Minutes of Meeting (22/03/23) 3.2 Actions Arising from Previous Meeting
4. DISCUSSIONS	
2.15pm	4.1 Patient Experience Report – Ravina Patel
2.30pm	4.2 Māori Patient and Whānau Experience - Verbal Report – Hinerau Ruakere
5. INFORMATION ITEMS	
2.45pm	5.1 Update on IMPB role – Verbal Report - Boyd Broughton
3.00pm	--- Break ---
3.10pm	5.2 Update on Te Whatu Ora and Te Aka Whai Ora – Verbal Report - Brad Healey
3.20pm	5.3 Chair’s Update - Lorelle George, Chair
6. ANY OTHER BUSINESS	
3:45pm	6.1 Community Concerns
3.50pm	6.2 Area of interest for future meeting
3.55pm	6.3 Meeting evaluation

**Te Whatu Ora Health New Zealand - Waitematā
Consumer Council
Member Attendance Schedule 2023**

NAME	Feb 2023	March 2023	May 2023	June 2023	July 2023	Sep 2023	Oct 2023	Nov 2023
Lorelle George (Chair)	✓	✓						
Ngozi Penson (Deputy Chair)	✓	✓						
Neli Alo	x	✓						
Samuel Cho	✓	x						
Boyd Broughton (Te Rūnanga o Ngāti Whātua)	✓	✓						
Representative of Te Whānau o Waipareira	✓	✓						
Insik Kim	✓	✓						
Ian Ramos	✓	✓						
Ravi Reddy	✓	✓						
Kaeti Rigarlsford	✓	✓						
Vivien Verheijen	✓	✓						
Brad Healey	✓	x						
+Samantha Dalwood	✓	x						
Student representative								

- ✓ *attended*
- x *apologies*
- * *attended part of the meeting only*
- ^ *leave of absence*
- + *ex-officio member*

**TE WHATU ORA HEALTH NEW ZEALAND - WAITEMATĀ
CONSUMER COUNCIL**

REGISTER OF INTERESTS

Committee Member	Involvements with other organisations	Last Updated
Lorelle George (Chair)	Consumer Advocate – Harbour Hospice, Clinical Governance Committee	03/02/23
Ngozi Penson (Deputy Chair)	Member, Metro Auckland Clinical Governance Forum Member, Ethnic Advisory Group (EAG), English Language Partners Northern Region Laboratory Network Point of Care Testing (POCT) Network Group, Co-Founder - Middle Eastern, Latin American, African (MELAA) Advisory group (MAG) Member, Centre for Asian and Ethnic Minority Health Research and Evaluation (CAHRE) University of Auckland	13/03/23
Neli Alo	Team Leader, Youthline Manukau	08/02/23
Samuel Cho	Committee Member, Waitakere Health Link Member, Metro Auckland Asian and MELAA Primary Care Service Improvement Group (Auckland DHB and Waitematā DHB) Member, Asian Health Action and Advisory Group (Counties Manukau Health)	28/07/22
Boyd Broughton	Director of Health, Te Rūnanga o Ngāti Whātua Chief Executive Officer, Te Taumata Hauora Iwi Māori Partnership Board Mahitahi Hauora, Board Trustee	24/02/23
Dan McCool	Te Whānau o Waipareira	
Janet Fitzgerald	nil	14/03/23
Insik Kim	Committee Member, Waitakere Health Link Member, English Language Partners	08/02/23
Ian Ramos	nil	03/08/22
Ravi Reddy	Senior Lecturer, School of Health Science, Massey University Pacific Advisory Board, Eisdell Moore Centre of Healing and Balance Honorary Academic, University of Auckland	08/02/23
Kaeti Rigarlsford	nil	08/02/23
Vivien Verheijen	Member, Consumer Advisory Committee - PHARMAC Board member, Companionship & Morning Activities for Seniors (CMA) Lay member of General Standards Committee, NZ Law Society Director, Board of Comprehensive Care Limited (CCL)	14/03/23
(Student Representative)		

Conflicts of Interest Quick Reference Guide

Any Consumer Council member who has or may have an interest in a transaction or issue under discussion by the Consumer Council must declare the interest in writing to the Interim Director Waitematā. The declaration must include sufficient information that the nature of the interest and the potential for it to conflict with the interests of Te Whatu Ora Health New Zealand is clear.

A Consumer Council member may be interested in a transaction or issue if they are:

- a party to, or will derive a financial benefit from, the transaction; or
- has a financial interest in another party to the transaction; or
- is a director, member, official, partner, or trustee of another party to, or person who will or may derive a financial benefit from, the transaction, not being a party that is (i) the Crown; or (ii) a publicly-owned health and disability organisation; or (iii) a body that is wholly owned by one or more publicly-owned health and disability organisations; or
- is the parent, child, spouse or partner of another party to, or person who will or may derive a financial benefit from, the transaction; or
- is otherwise directly or indirectly interested in the transaction.

If the interest is so remote or insignificant that it cannot reasonably be regarded as likely to influence the Consumer Council member in carrying out their responsibilities, then he or she may not be “interested in the transaction”. The decision as to whether someone is “interested in the transaction” must be made by the Interim Director Waitematā.

A Consumer Council member who makes a disclosure as outlined above must not:

- take part in any deliberation or decision of the Consumer Council relating to the transaction or issue; or
- be included in the quorum required for any such deliberation or decision; or
- sign any document relating to the entry into a transaction or issue or the initiation of the transaction or issue.

The disclosure must be recorded in the minutes of the next meeting and entered into the interest register.

The Consumer Council member can take part in deliberations (but not any decision) of the Consumer Council in relation to the transaction if a majority of other members of the Consumer Council permit the member to do so. If this occurs, the minutes of the meeting must record the permission given and the majority’s reasons for doing so, along with what the member said during any deliberation of the Consumer Council Committee relating to the transaction concerned.

Consumer Council members are expected to avoid using their positions for personal gain, or solicit or accept gifts, rewards or benefits which might be perceived as inducement and which could compromise the Consumer Council Committee’s integrity.

IMPORTANT

Note that the best course, when there is any doubt, is to raise such matters of interest in the first instance with the Chair of the Consumer Council who will determine an appropriate course of action.

Ensure the nature of the interest is disclosed, not just the existence of the interest.

Note: This sheet provides summary information only.

**ACTIONS ARISING FROM THE MINUTES OF THE MEETING OF THE
CONSUMER COUNCIL AS AT 12 APRIL 2023**

Meeting Date/ Minutes ref.	Topic	Action / Status
22/03/22	<ul style="list-style-type: none"> • There was an expression of interest to invite Jonathan Christiansen to provide an update regarding the NZREX Doctors' new training pathway. • There was interest in knowing more about Te Whatau Ora Waitematā initiatives are to promote health and prevent illness through programmes such as smoking cessation and diabetes prevention and management. 	To be added as points for discussion at future meetings.

2. WELCOME AND INTRODUCTION

3. CONFIRMATION OF MINUTES

3.1 Confirmation of the Minutes of Meeting 22/03/23

3.2 Actions Arising from Previous Meeting

3.1 Confirmation of the Minutes of Meeting 22/03/23

Draft Minutes of the meeting of the Consumer Council of Te Whatu Ora Health New Zealand - Waitematā

Wednesday, 22 March 2023

Waitematā Room, Level 1, Whenua Pupuke Building
North Shore Hospital Campus and
by video conference commencing at 2.00pm

CONSUMER COUNCIL MEMBERS PRESENT:

Lorelle George (Chair)
Ngozi Penson (Deputy Chair)
Neli Alo
Boyd Broughton (Te Rūnanga o Ngāti Whātua)
Dan McCool (Te Whānau o Waipareira)
Janet Fitzgerald
Insik Kim
Ian Ramos
Ravi Reddy
Kaeti Rigarlsford
Vivien Verheijen

ALSO PRESENT:

Ravina Patel - Manager, Patient Experience
Janice Kirkpatrick - Operations Manager Dermatology, Diabetes, Endocrinology, Fracture
Liaison, Infectious Diseases, Palliative Care & Respiratory
Lisa Sparks - CNS Diabetes Team Leader, Diabetes Service
Fabiana Sierra - Minutes

APOLOGIES:

Samuel Cho
Samantha Dalwood - Disability Advisor
Brad Healey – Interim Lead – Hospital and Specialist Services Waitematā

KARAKIA

Boyd Broughton led the Karakia.

WELCOME

Lorelle George, Consumer Council Chair welcomed everyone to the meeting, and led a round of introductions welcoming Janet Fitzgerald as a new member.

DISCLOSURE OF INTERESTS

There were no updates or additions to the interest register.

There were no interests declared that might involve a conflict of interest with an item on the agenda.

1 AGENDA ORDER AND TIMING

Agenda items were discussed in a slightly different order to the one listed in the agenda.

3 CONFIRMATION OF MINUTES

3.1 Confirmation of Minutes of the Consumer Council Meeting held on 8 February 2023

The Minutes of the Consumer Council Meeting held on 8 February 2023 were received and approved.

3.2 Actions arising from the previous meeting

There were two actions arising from the previous meeting.

- i. Feedback on the pilot programme for Volunteers to give assistance to patients using hospital wheelchairs.
- ii. Update on Communication

4 DISCUSSIONS

4.1 Patient Experience Report (Agenda pages 19-22)

Ravina Patel (Manager, Patient Experience) joined the meeting in person. The report was taken as read.

Matters covered in the discussion:

Patient Experience National Survey responses:

- The *Family and friends* score has been well above target up to the end of 2022
- The measure *Decision making* showed scores with a downward trend. The team are currently interviewing patients in the wards to gain a greater understanding of any issues related to this measure and how the scores could be improved. However, in December and February the scores picked up considerably across all ethnicities.
- A process has been put into place to improve these measures and it is in the very early stages. The team is utilising the opportunity to interview patients regarding the *decision making* process to also ask patients for feedback on Communication in relation to how they feel on the level of involvement of their care, whether they felt listened to, and if they felt that the information provided to them about their treatment and conditions was explained to them in a way that they understood, and if it was communicated in an accessible language.
- The responses from the survey were shared with the operations manager and the charge nurses for them to start discussions of the scores with their respective teams.

Communication:

- Communication continues to be a recurrent theme. This was seen in January, particularly in relation to patients' pain management and waiting time. It has been

acknowledged that these issues may be directly related to the shortage of staff. However, recruitment is currently underway to fill staff vacancies.

- Upon discussions related to the communication themes that consistently appear across the board it was agreed to focus on projects that will directly address improvement of communication with patients. The team are therefore focusing on increasing the number of training sessions for staff members to improve face to face interaction with patients. The training aims to increase awareness on the impact of several elements of interaction that can influence patients' understanding of their treatment and conditions, such as the way a message is delivered, the content and language accessibility. It has been suggested staff members could use visual aid to help patients understand the important aspects of their condition and treatment.
- It has been acknowledged that awareness and improvements in these areas of communication can also affect patients' recovery and health outcomes.
- The communication training sessions have been incorporated into the programme of the Nursing Development team and will run monthly for the rest of the year. The PE team are also using all the other training sessions to include the Communications module such as the Complaints training session, introduction to new graduate nurses, and the Allied Health teams that include staff members working directly in the community setting.
- The team are also assisting individual services to gather feedback from patients by helping develop survey questionnaires, interviews, etc. The responses received are then used to address issues and change practice.
- The team are currently working on a discharge project designed to support service users with their medication and continued recovery after discharge. The team have designed and created with patients/whānau input an NGO booklet that provides a list of services within the community for service users to access from home after discharge. The booklet contains contact details of community organisations that provide additional resources for service users to access.

Volunteers update:

- Volunteer numbers have slightly gone down due to changes of circumstances for several volunteers. However, the team are currently processing applications for a new volunteers' intake. The team are also planning to carry out a recruitment campaign from May targeting priority areas such as the short stay ward, outpatients and ward 15.
- Westlake students will be resuming their roles and they could be allocated to the priority areas.

Pilot wheelchairs project update:

- The moving and handling team undertook the training for volunteers to participate in the pilot project that was designed to help patients with the new hospital wheelchairs
- The training involved nine volunteers during 3-4 weeks. Volunteers learnt to operate the wheelchairs and to safely mobilise and assist patients in wheelchairs. The training sessions received positive feedback.

- It was suggested to involve people with disabilities in the training sessions for direct feedback in the handling of the wheelchairs while volunteers are assisting the patients.

Kōrero Mai:

- The service has an 0800 phone line that patients can call 24/7 for assistance if their condition is deteriorating.
- Since COVID-19 the number of calls to the 0800 line has been declining. The team investigated why this was the case and they found that there was a lack of awareness amongst service users that this resource was available.
- The team are looking at ways to increase awareness of the service and improve communicating to patients that this service is available. The team has scheduled weekly sessions with the wards to emphasise the need to promote this service.
- Signs in the wards will be reviewed. Patients/whānau have indicated that they would like posters in their room to have easier access to essential information such as this.

Comments and issues raised:

- Query with regards to situations where service users may have been discharged home without any family members having been notified. Ravina will take this discussion outside of this forum to address this question.
- It was asked whether we collect information of service users' disabilities. Currently this information is not captured by the surveys, but it is possible that in the future the organisation may devise a new set of questionnaires to be used by all the regions. Waitematā, Auckland, Counties Manukau and Northland are developing a regional survey which may include specific questions related to short term and long-term disabilities.

5 INFORMATION ITEMS

5.1 QSM Report presented for approval by Consumer Council (Agenda pages 26-29)

Ravina Patel (Manager, Patient Experience) provided a brief update for this item.

Matters covered in the discussion:

QSM (Quality Safety Marker) Submission:

- Our last submission was in 30 November 2022. The next submission is due at the end of March 2023.
- Given the short period between November 2022 and March 2023 the current submission is considerably smaller compared to the ones from previous years. This was the case because the 2022 submission date had been extended from September to November and the subsequent summer holiday break.
- The current submission has been reviewed and approved by the Consumer Council and it will be submitted before the due date at the end of March 2023.
- Need to consider that a new framework will be implemented from September to reflect a greater emphasis on Māori and Pacific engagement with consumers.

The Consumer Council thanked Ravina for her work and for her time.

Dan McCool left the meeting at 2.49pm due to Zoom sound issues.

Boyd Broughton left the meeting at 2.54pm due to Zoom sound issues.

3.00pm to 3.06pm – the meeting adjourned for a short break.

5.2 Update on Diabetes Services (Agenda pages 30-35)

Janice Kirkpatrick (Operations Manager Dermatology, Diabetes, Endocrinology, Fracture Liaison, Infectious Diseases, Palliative Care & Respiratory) and Lisa Sparks (CNS Diabetes Team Leader, Diabetes Service) joined this meeting in person, and they spoke to their report. The report was taken as read.

Matters covered in the discussion:

Highlights of the Diabetes Services

- The service has moved to a practice with a Māori focus since 2013
- The specialty is made up of a very passionate large medical team that includes doctors, clinical nurse specialists, dietitians, podiatrists, health psychologist and Māori social workers.
- The Māori service is based at our primary centre with mostly Māori clinicians offering follow up and walk in services to service users.
- Another key area is the transition clinic for young adults, that provides an important opportunity to make sure they connect with the service to help them manage their diabetes condition so that it is kept under control. Effective management of their condition at a young age helps to prevent long term serious side effects and health deterioration. This service places a huge emphasis on ensuring that young people understand the impact of treatment while they lead busy lives and that they actively take part and stay engaged in their care.
- The service currently has a vacancy for a health psychologist, that is a key resource for the Diabetes service to help service users manage long-term conditions. The team is actively trying to fill this role with recruitment underway. There have been challenges finding suitable applicants to fill this crucial vacancy.
- The service is constantly trying to find ways to come up with innovative practices for wider engagement with service users.
- Since the shift to a more Māori focused service there has been considerable emphasis on recruitment of a Māori interdisciplinary team with two CNSs, dietitians, podiatrists, social workers, and stronger links with Māori Needs' Assessors. This practice benefits all communities as once the model has been established it can then be implemented to include the entire community with all its diversity.
- The next step for the service is to look at what are the comorbidities that the service users have, and how can we improve the service in a way that patients can have access to multiple specialties and treatment to address their comorbidities in a more centralised way.
- The service has started a new clinic to expand its services in the west Auckland area

- There is also a focus in helping staff members to develop the appropriate skills required to provide specialised diabetes services with a knowledge and understanding of Mātauranga Māori. For this purpose the service has created a Clinical Nurse Specialist pathway for Master's degree that will help increase the intake of staff workforce with Māori nurses and specialists.
- The Waitematā district currently provides a competency training for nurses, and this training is available as a regular refresher with content on diabetes that all nurses are required to know. There is also training available for Level 3 & 4 nursing qualifications for nurses that would like to specialise in the diabetes services.
- It was noted that the service provides care to a population of ~35000 people of combined ethnicities across the region. One of the biggest challenges in terms of the service users managing their condition is the lack of awareness of community services that they could have access to. It is important to note that Primary Care provides the main point of contact for education about the diabetes condition and they provide educational resources in all languages.
- The majority of diabetes cases are treated by the GP practices and the service. However our Diabetes service has also been providing support to Primary Care nurses to ensure that they increase their skillset. Referrals to our service come through from primary care, from inpatients, cancer treatment clinics, and from other districts. Additionally, the Māori Health Gain service provides self-referral service.

Comments and issues raised:

- It was queried the amount of DNAs (did not attend) from the service. In relation to this point it was explained that in the past upon the first visit with the doctors patients attended multiple appointments based on multiple referrals for follow ups in different areas, making it difficult for patients to attend several appointments. This process is undergoing changes and patients will now be referred to the specialties needed along the way in their journey to ensure that patients can focus on attending a single appointment at the time. This provides a more customised service of care that meets each patient's individual needs, facilitating a more direct communication between all services across the patient's care journey rather than having multiple services that are not linked.
- There are two systems currently in place that monitor patients' glucose levels: one that patients can use at home (the Glucometer) and the other at the hospital (point of care testing) with tests carried out by the nurses.
- It was noted that there were many different kinds of Diabetes journey phone and desktop applications that could support patients' journey of care.
- In terms of diabetes condition education it was highlighted that self-management education is provided by primary care. This service utilises zoom, and online videos to support patients.
- There was emphasis on the fact that although ample information is readily available, it is important to apply motivational skills into the practice to motivate patients to stay engaged in their care journey. Also key from the service are teaching patients self-efficacy, and support through lifestyle changes that lead to a healthier lifestyle so that they can improve and manage their condition.

- Primary care has a crucial role in cardiovascular risk assessments and providing the right medication on the early stages to reduce their cardiovascular risk. Patient engagement with their GP in the early stages of their condition makes a big difference in the long term as when patients are referred to our service long-lasting and sometimes irreversible damage has already occurred.

The Consumer Council thanked Janice and Lisa for their work and for their time.

Neli Alo joined the meeting at 3.20pm

5.3 Chair's Update (Verbal)

The Chair provided an update on points discussed at the recent National Consumer Council Chairs' meeting she attended on 7 March:

- Attendees were introduced to Hector Mathew who has been appointed as Interim Director Community Engagement and Whānau Voice with a new team under his scope.
- There is no confirmed organisational structure or key positions appointed yet into this area, with consultation on new operational models still underway, aiming to confirm a final structure by the end of May/early June. The process has a strong emphasis on equity.
- Consumer Councils have been advised to continue to operate as BAU until otherwise advised when the new structure has been confirmed and recruitment starts.
- It was again emphasised that Consumer Councils are a critical part of the new system for community engagement and whānau voice. Councils will play a crucial part in hearing the voices from their communities, which will greatly influence improved health outcomes.
- A question was asked regarding the *Code of Expectations* and how it will play a part in the work of the Consumer Council going forward. It was noted this document (as available on the website and as previously circulated), which sets out the values of Te Tiriti o Waitangi, articulates the importance of consumers being part of the design and development of the health system.
- There is an expectation that Consumer Councils will have an important role to play in evaluating the effectiveness and monitoring the application of the *Code of Expectations*.
- It was also suggested that a key role of the National Chairs group will be the evaluation of the engagement process and feedback to consumers, and evaluating the responses and reporting to the Board.
- Once the new operational and structural models have been confirmed Hector Mathew noted his intention to engage in discussions with all Consumer Councils.
- The adoption by Consumer Councils of a regional approach and establishing cooperative ways of working was reiterated.
- There is still uncertainty as to what level of funding will be allocated for the Consumer Councils to continue to operate and increase engagement with community and whānau voice.

Further updates:

- The Chair had communicated with Tamzin Brott (Acting General Manager - Diagnostic & Clinical Support Services, Chief Allied Health Scientific & Technical Professions Officer, and COVID-19 Executive Lead) regarding the current Covid-19 situation, due to the increasing number of community cases reported in the media; and a summary of

points from a paper provided by Tamzin Brott and Graham Zinsli was read. It was noted that “all districts are winding back their focused Covid-19 response as it moves more into our business-as-usual approach. We are no different and are moving towards that too.”

- With regard to the winter flu, Council members were also encouraged to recommend to their community connections and families to get the flu vaccine, as it reduced the risk of catching influenza, and if people do get the flu, the vaccine lessens the severity of symptoms.
- The Chair will email to Council members the key points noted at an additional Chairs’ meeting attended by Ngozi Penson.

6 ANY OTHER BUSINESS

6.1 Community Concerns

No community concerns were raised.

6.2 Area of interest for future meeting

- There was an expression of interest to invite Jonathan Christiansen to provide an update regarding the NZREX Doctors’ new training pathway.
- There was interest in knowing more about Te Whatau Ora Waitematā’s initiatives to promote health and prevent illness through programmes such as smoking cessation and diabetes prevention and management.

6.3 Meeting evaluation

It was noted that the meeting had been a successful meeting with a good selection of topics for discussion.

The Chair thanked the members and attendees for their time.

The meeting closed at 4.10pm.

SIGNED AS A CORRECT RECORD OF THE MEETING OF TE WHATU ORA HEALTH NEW ZEALAND -
WAITEMATĀ – CONSUMER COUNCIL MEETING HELD ON 22 MARCH 2023.

_____CHAIR

**ACTIONS ARISING FROM THE MINUTES OF THE MEETING OF THE
CONSUMER COUNCIL AS AT 12 APRIL 2023**

Meeting Date/ Minutes ref.	Topic	Action / Status
22/03/22	<ul style="list-style-type: none"> • There was an expression of interest to invite Jonathan Christiansen to provide an update regarding the NZREX Doctors' new training pathway. • There was interest in knowing more about Te Whatau Ora Waitematā initiatives to promote health and prevent illness through programmes such as smoking cessation and diabetes prevention and management. 	To be added as points for discussion at future meetings.

4. DISCUSSION ITEMS

4.1 Patient Experience Report – Ravina Patel

4.2 Māori Patient and Whānau Experience - Verbal Report – Hinerau Ruakere

Patient Experience Feedback

1.0 National Inpatient Survey

Results

Participation

- Patients discharged from Waitematā hospitals from 30th January to 12th February 2023 were emailed the survey.
- Waitematā sent out 2808 invitations to complete the survey and achieved 882 responses, a 28.5 % response rate. This is higher than the national response rate of 20.9%.
- Of the 882 responses, 53 responses were from Māori patients and 40 were from Pacific patients.

Performance

Highest-performing results for Waitematā DHB

The table below shows the highest-performing questions for Waitematā DHB in February 2023.

▲ Low sample size

Question Click on a question to see more detail	Overall	C.I.	n
Patient definitely treated with respect by nurses.	Feb 2023	92.3% (90.5%-94.1%)	828
Patient definitely treated with respect by doctors.	Feb 2023	90.7% (88.7%-92.7%)	819
Patient definitely treated with respect by other members of health care team.	Feb 2023	90.7% (88.6%-92.8%)	771
Patient definitely felt cultural needs were met.	Feb 2023	90.3% (87.6%-93.0%)	466
Patient was definitely told what the medicine (or prescription for medicine) they left the hospital with was for.	Feb 2023	89.9% (87.7%-92.1%)	696
Patient definitely treated with kindness and understanding by other members of health care team whilst in hospital.	Feb 2023	88.6% (86.3%-90.9%)	757

Lowest-performing results for Waitematā DHB

The table below shows the lowest-performing questions for Waitematā DHB in February 2023.

▲ Low sample size

Question Click on a question to see more detail	Overall	C.I.	n
Hospital staff definitely talked with the patient about whether they would have the help they needed when they left the hospital.	Feb 2023	63.7% (59.9%-67.5%)	615
Patient was definitely told the possible side effects of the medicine (or prescription for medicine) they left hospital with, in a way they could understand.	Feb 2023	64.8% (60.9%-68.7%)	568
Patient definitely had enough information about how to manage their condition or recovery after they left hospital.	Feb 2023	69.2% (66.0%-72.4%)	806
Patient definitely given enough privacy when talking about treatment or condition.	Feb 2023	73.6% (70.6%-76.6%)	823
Patient always kept informed as much as wanted about treatment and care.	Feb 2023	74.0% (71.1%-76.9%)	868

The lowest performing results are once again around discharge, medication side effects and being informed about their treatment.

Currently, we are doing some in-department surveys in the hospital about these questions as well as in the process of setting up a discharge-working group, to tackle these ongoing issues.

2.0 Friends and Family Test

2.1 Friends & Family Test Overall Results – Adult Survey

In March 2023, the Net Promoter Score (NPS) was 78 with feedback from 879 people. The NPS is down slightly on the previous month (79) however, the number of responses is up significantly from 546 last month to 879 this month. The overall NPS continues to score above the target of 70.

2.2 Friends & Family Test Overall Results

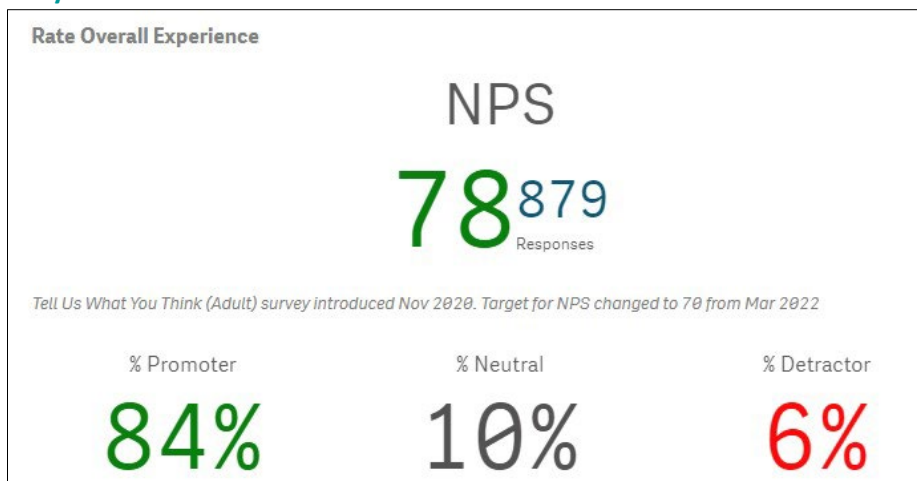


Figure 1: Waitematā overall NPS

PROMOTER - Positively rate the organisation and/or service and would promote to others

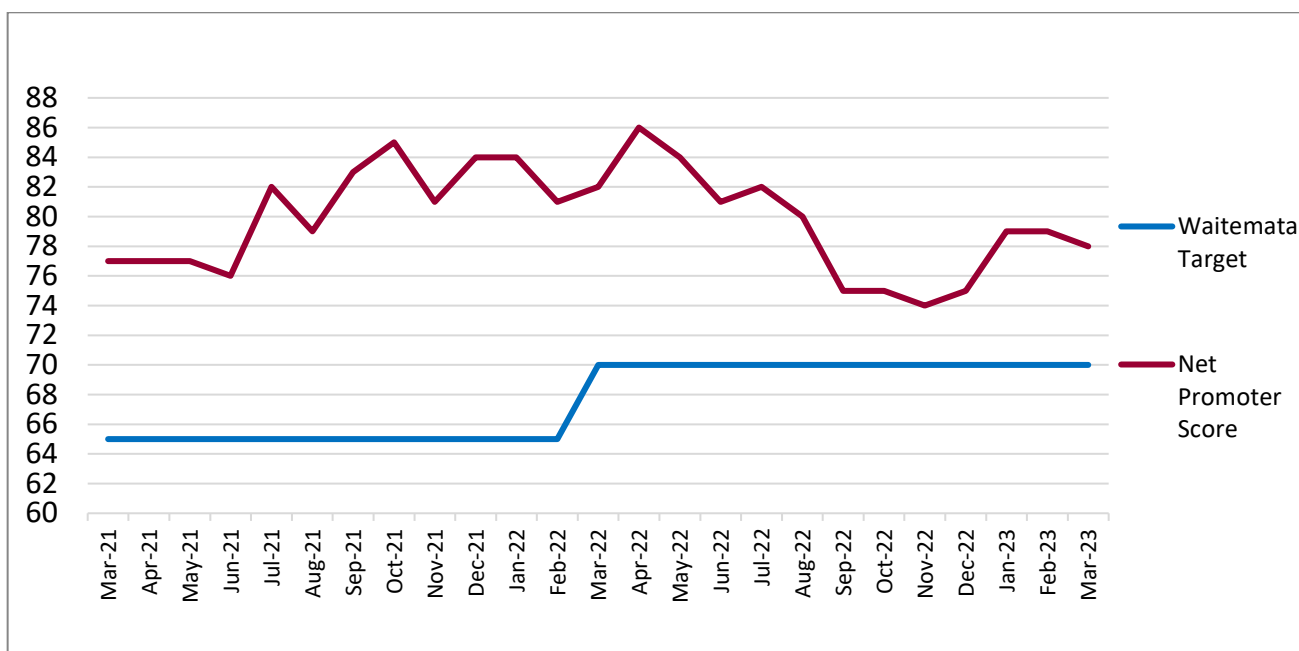
NEUTRAL – Satisfied with the organisation/service but may use another provider if available

DETRACTOR – Negatively rate the organisation/service and would not promote to others

NPS is calculated by taking the detractor score away from the promoter score

Pt Experience by Service (Adult and Maternity)								
Month & Year	Surveys	Rate Overall Experience	Welcoming and Friendly	Listened To	Treated with Compassion	Involved in Decision Making	Explained in a Way I Understood	
Totals	879	78	86	83	86	73	85	
Mar-2023	879	78	86	83	86	73	85	

Table 1: Waitematā overall FFT results



Graph 1: Waitematā Net Promoter Score over time

Patient Experience Report (March 2023)

2.3 Total Responses and NPS to Friends and Family Test by ethnicity

March 2023	NZ European	Māori	Asian	Pacific	Other/ European
Responses	414	61	92	74	238
NPS	78	54	88	93	77

*Low base size, interpret with care

Table 2: NPS by ethnicity

In March, almost all of our ethnicities scored above the Waitematā NPS target of 70, with the exception of Māori who score below target at 54. Pacific once again scored highly with an NPS of 93.

March 2023	NZ European	Māori	Asian	Pacific	Other/ European
Staff were welcoming and friendly	87	66	90	93	87
I was listened to	85	63	86	91	83
I was treated with compassion	87	67	88	92	86
I was involved in decision making	70	68	82	84	74
My condition/treatment was explained in a way that I understood	84	71	90	90	85

Table 3: NPS for all questions by ethnicity

This month, all ethnicities achieve a score at or above the Waitematā target, with the exception of Māori who achieve below target for four of the five measures. The reasons for the low scores from Māori include:

- SCBU at North Shore Hospital: overcrowding which results in a lack of space and privacy, and safety concerns if a baby needs urgent attention
- staff: unhelpful and not compassionate
- environment: cold and noisy (overnight visitors)
- Covid care @ home: food support not provided
- ARDS: lack of information, warmth and compassion for the children

2.4 Patient Experience Updates

➤ **Regional Patient Experience Survey**

The regional Patient Experience Team has agreed on the terms of reference and the aim of the group. Next stage is to agree on a survey that better reflects the feedback from patients.

➤ **Discharge Project**

Conversations with patients and whānau will help us to get their perspective on how the current discharge process has been for them. The Poutama Equity Team have also offered the assistance of the Oranga Co-ordinators with this project. This team sees patients regularly while they are in hospital and follow up with them in their homes post discharge. Their input will be valuable. We are also in the process of creating a working group, including pharmacists, Clinical Directors, Charge Nurses, Complaint Manager and nurses.

➤ **Patient Feedback**

Patient feedback in March has once again been mostly positive with patients reporting great service and outstanding care as the main reasons for providing a high score.

“Every single doctor and nurse was exceptional. My son is quite shy but felt safe and very happy to be here. What an amazing team!” (Rangatira Ward, WTH)

“Because everyone was very nice to me during my stay and were constantly trying there hardest to help me.” (Ward 2, NSH)

Patient Experience Report (March 2023)

“The CT scan people were very good with mum who has dementia. They treated her with respect and were very patient with her. So wonderful to have such caring people. Thank you.” (HKW Oranga Coordinators)

Areas for improvement:

- Hospital – improve staffing levels, improve wait times (discharge and doctor review), staff behaviours (more helpful and compassionate), and communication, particularly listening to patients.
- Auckland Regional Dental Service – more experience interacting with children, more appointments and improved communication about treatment options.

3.0 Māori Patient and Whānau Experience

Patient and Whānau Feedback - “Tell Us What You Think” Survey

The Māori Equity Team is assisting to gathering data from Māori patients in both hospitals. Working together, we will look at how we can improve patient feedback particularly for ‘involved in decision-making’ and ‘explained in a way I understood’. Data indicates that there is a communication breakdown or misunderstanding between the staff, patients and whānau. In response, the Māori Patient and Whānau Experience Lead and the Equity Team, are developing a training package for doctors on ‘how to connect with Māori’.

Discharge Project

Developing a cultural pathway with the Equity Team, that will sit alongside the discharge planning process currently used in the hospitals.

Cultural Training for staff

Māori Patient and Whānau Experience Lead was invited to speak to the Speech Language and Therapy Team (SLT) at the end of March. Topics for discussion included what my role is, to Cultural Competency vs Cultural Safety, tikanga best practice, and how do we reflect our cultural practice.

Future cultural training:

- New doctors - how to connect with Māori
- Patient Experience Team - equity for Māori
- Discharge planning cultural pathway - for CNM’s, doctors and nurses and the cultural team

Dialysis Unit Survey

Gathering data from patients in the Renal Team about how they are doing from the patient’s perspective. Feedback has been mostly positive with some concerns expressed about the time waiting to see the dialysis doctor and some patients were concerned that they are not being considered for a kidney transplant. These concerns will be themed and collated to be presented to the renal unit.

4.0 Volunteers

4.1 Volunteer Recruitment Statistics

Volunteer numbers are down by five from the previous month with some students choosing not to continue.

Green Coats Volunteers (Front of House) (A)	Other allocated Volunteers (B)	Volunteers on boarded awaiting allocation (C)	Total volunteers available (D) (A) + (B) + (C) =(D)
42	108	1	151

Table 4: Volunteers Recruitment

The Patient Experience team continues to process new applications and for the month of March, three from our partner organisations such as ‘Canine Friends’ were processed. In addition, three new volunteers were successfully allocated roles at North Shore Hospital. The Patient Experience team is also exploring different ways to expand its

networking to improve recruitment. One idea is to advertise the volunteer programme through retirement village channels like The Poynton.

4.2 Volunteer Highlights

➤ Waitakere Shop

The Waitakere Hospital Shop has maintained a steady flow of sales, demonstrating its vital role in serving the community. The overwhelming positive response from the community has reaffirmed the on-going need for the shop's offerings, which provide comfort and convenience to patients and their loved ones during their hospital stay.

➤ Hospital Auxiliary

For the month of March, Hospital Auxiliary donated over 1000 items to both hospitals (354 to Waitakere and 650 to North Shore). They are working tirelessly to provide much-needed items to Special Care Baby Unit, Ward 14 and Maternity.

➤ Screening Processes

The Patient Experience team has been working closely with our Occupational Health & Safety team to ensure that volunteers recruited by our partner organisations like St John, follow the same screening processes followed by our own volunteers. The discussions and consultations are progressing well. Once again, Waitematā's value of "better, best and brilliant" was on display when Tania, St John Community Care Manager asked to share our flowchart with two other regions to align processes at their end.

5.0 Consumer Council Update

The Consumer Council met on 22 March 2023. They discussed the following agenda items at their most recent meeting:

- **Patient Experience Report** – Ravina Patel presented the Patient Experience report for January 2023. She also provided an update on the wheelchair pilot and next steps, which include training all other volunteers to use the new wheelchairs and transport patients.
- **QSM Report** – Ravina presented the latest QSM report to the Consumer Council members. The previous report was submitted on 30 November 2022 and the March 2023 report has little supporting evidence, reflecting the amount of time between submissions. The next submission at the end of September 2023, will reflect the new framework that is being developed by HQSC. The Council approved the QSM report and it was submitted before the 30 March 2023 deadline.
- **Diabetes Service Update** – Janice Kirkpatrick and Lisa Sparks updated the Council by providing an overview of the service, numbers and demographics, children and young adults, information on the diabetes app and consumer feedback.
- **Chair update** – Lorelle George, Chair, gave an update on the future of the Consumer Councils. Guidance from Te Whatu Ora is that the Councils will continue as they are for the immediate future, likely for at least another year. There will be national guidelines developed, that will give clear expectations of the districts regarding consumer engagements, while respecting the individual differences of each district.

5. INFORMATION ITEMS

- 5.1 Update on IMPB role – Verbal Report - Boyd Broughton
- 5.2 Update on Te Whatu Ora and Te Aka Whai Ora – Verbal Report - Brad Healey
- 5.3 Chair’s Update - Lorelle George, Chair

6. OTHER BUSINESS

6.1 Community Concerns

6.2 Area of interest for future meeting

6.3 Meeting evaluation