

Northland Health Consumer Council

5.00 pm to 7.00 pm Thursday 31 January 2019

Tohorā House, Waipoua Meeting Room



Minutes of Meeting

Present/Apologies

Attendance	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
Kevin Salmon (Chair)	x										
Kathy Diamond	х										
Kathryn Sadgrove	✓										
Brian Vickers	0										
May Seager	✓										
Julie Hepi	x										
Leanee Sayers	х										
Susan Burdett	✓										
Robyn OLeary	x										
Kristina Duran	✓										
Penny Franklyn	✓										
Lynne Tucker	✓										
Visitor	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
Trudi Dahlkamp & Laura	✓										
Cook											
In Attendance	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov
Michael Roberts	0										

^{✓ =} present, x = apologies given, o = no information

Minutes: Kim Doble

Acting Chair: Lynne Tucker

Next Meeting: 5.00pm to 7.00pm, 28 February 2019

1. Admin

- 1.1 Apologies Kevin Salmon, Leanee Sayers, Robyn O'Leary, Kathy Diamond. Kevin has asked that Lynne step in as acting chair for the foreseeable future due to health issues, Lynne confirmed she is happy to do so.
- 1.2 Introductions
- 1.3 Previous Minutes were agreed
- 1.4 Conflict of Interest none
- 1.5 Matters arising -
 - Kevin used to have a spreadsheet that had all the requests for feedback on it. Corrina used to send this out to the group with updates on any requests received. May will send this to Kim and Kim will start this document again and we can put this on the agenda for all meetings

- Lynne stated that since she has been a member she hasn't been able to learn about the members areas of interests and backgrounds. The bios on the intranet are all out of date and the photos are now out of date. Kim stated that the page will be updated once we have recruited the new members as there are going to be further changes it seems sensible to wait. Lynne suggested we could have one member a month where we spend five minutes getting to know about them, the members thought this was a great idea. The members also need to think about ways of getting more involved in projects throughout the hospital
- Kathy asked about car parking tickets when members go to meetings. Kim will have these available at every meeting
- The members agreed that it would be a good idea to devote the next meeting to forming a strategic plan for 2019

2. Presentation: improving discharge letters

Trudi Dahlkamp & Laura Cook

- Trudi Dahlkamp has taken over Keri's role as Patient Experience Manager. Laura Cook is based in Tohora House and she deals with the back end of Concerto, the patient management system
- Trudi and Laura are here to talk about a project they are doing that is around discharge summaries or as we now call it a transfer of care document. Trudi handed out a copy of a real discharge summary for the members to review to give consumer input
- They are looking at a redesign of the summary. There are real limitations around what they can do because the software is old and unsupported. Laura has to do a lot of work behind the scenes to make any changes. There are promises of a new system but this won't happen in the near future. In the meantime we need to look at the current system and how we can make it better
- This project has come about because at the moment there are a few versions of the discharge summary across the organisation. For Whangarei Hospital and the district hospitals there is one standard template and the idea now is to spilt this into two, this has come from the Health Records Leadership Group. They now want to have a separate discharge summary for Medical and Surgical so this is an opportunity to review it. Trudi would like to have feedback on the Medical side. There isn't a lot we can change but she would like input from a consumer point of view. We are not looking at the whole discharge process, just the actual summary document at this stage
- The members reviewed the discharge summary and gave the following feedback:
 - Kathy stated that she and Leanee and a friend had previously attended a meeting some time ago and this related to discharge summaries. Di and Alan Davies were also present. This related to the transfer of care summary and the information gathered from there. As this has already been discussed Kathy is wondering whether this information was ever passed on as a lot of work was already done on this project. Kathy suggested Trudi makes contact with Di and Alan as there was a lot of useful information out of that meeting. We talked about it being good to have the shared care record included on the summary but there were technical restraints around this
 - Lynne stated that this was also talked about the Clinical Governance meeting. It was discussed about this sort of information going online directly to the patients as soon as it is written so it would be ready for patients when they get home. Everyone was in agreement as this would fit in with the current hospital system. Penny stated there was also talk about online services at the December meeting where we had a talk by Alan and Di Davies about promoting everyone to have a patient portal
 - The members thought there was too much information on the current form that a lot of people would find overwhelming and confusing. If this is aimed at a consumer the information needs to be simple and easy to understand

- May stated that back in 2015 the Council looked at the electronic transfer of care summary. The Council has been asked to review the discharge process a number of times in the past and she is concerned this could be duplication
- One of the problems with sending letters is that they can be very slow in going out.
 Patients sometimes receive a copy directly from the doctor but this depends on time restraints. GP's are sent a copy through Medtec but for that to happen the doctors have to press a button to say finalise and often they don't do this
- O In summary the members think there is too much information on the document, it needs to be sent quickly to the patient and ideally emailed to them, the first page looks like it is for the consumer and the second page is more clinical information which is good that it has been separated out. It would be a good idea to get feedback from actual patients who have received the letters. The headings in the summary should be in a bigger font so they stand out more for the patients. Trudi suggested the advice to patient heading could be changed to something like What I need to know. The members thought this was a good idea as it would be more patient centred
- May stated that in June 2015 the Clinical Governance Board came to a Consumer Council
 meeting and asked for their opinion on the discharge process. The process is something
 that has been reviewed a number of times by the Council and looking at this document it
 looks like some of the suggestions have already been taken on board and changes have
 been made
- Kathy stated that she thought it was a good idea to have two separate letters for medical and surgical as they are quite different departments
- Penny stated that she thought it would be a good idea to also include details of any patient information handouts given to patients
- The members thought the medication reconciliation page was really clear with the symbols like traffic lights

${\bf 3.} \ \ {\bf Review\ of\ patient\ information\ documentation:}$

Kim Doble

Is the information useful? Is it clear/easy to understand?

- 3.1 The council reviewed the following documents and comments were noted on the forms:
 - Hip Abduction Brace
 - Preparing for Emergencies
 - Northland Pharmacies
 - Grab Rails
 - Satellite Haemodialysis
 - Cancer Support Psychology & Social Work Service

4. Review of documents: Draft consent form appendicitis & list of potential interview questions

Vita Badran has asked for feedback from the Consumer Council on these documents which are part
of a research project around outcomes pf paediatric appendicitis patients who live rurally. The
members reviewed the documents and comments were noted on the forms

5. Updates from regular meetings

5.1 Clinical Governance Board

Sue Burdett & Lynne Tucker

At the December Consumer Council meeting, Kevin had asked Lynne and Sue to raise the two
concerns we had about the discharge process and transferring patients to regional hospitals at the
next Clinical Governance Board (CGB) meeting. We decided to put it on the agenda for the next
CBG meeting

- The items were considered and were very well received. Lynne spoke about the discharge summary. At the December meeting Alan and Di Davies asked for consumer input regarding the promotion of patient portals for all patients and to work in partnership with the Consumer Council to improve transfer of care. Alan addressed the CGB meeting and explained that IT is the answer to good health management. He discussed the benefits of getting the transfer of care document to patients quicker by sending it electronically and this would fit in with the current system Concerto
- Sue addressed the meeting about the transfer of non- acute patients to regional hospitals. The reasons this often happens is for those patients in need of further multi-disciplinary input, those waiting for a place in rest homes which can be up to six weeks and non-weight bearing orthopaedic patients. Whangarei Hospital is for level 2 care which is for acute patients and the regional facilities offer level 1 care. Most of these patients would go to Dargaville Hospital as it is closer to Whangarei. The regional nurses said that we have to be careful that we are not filling all the beds in the regions. There was a serious discussion around transport costs. There is a bus service from Dargaville but it only goes once a day. The manager of Dargaville hospital said that staff have put up relatives of patients in the past (Mike Roberts said the aim is quality care and patients should not incur any financial loss from this system). We also discussed about when patients refuse to go home and the reasons around this. The new Chief Operational Officer Paul was asked to create a planned pathway regarding the transfer of patients to avoid any knee jerk reactions
- There is going to be a new electronic sign off policy for lab results. All lab results have to be signed off by a doctor or clinician and this is now going onto an online system, it is going live in March in Kaitaia and live in June in Whangarei. Someone will have to report on this at every CGB meeting

5.2 Child Health Clinical Governance Group

Kathy Sadgrove

Kathy did not attend the last meeting so will provide an update at the next meeting. There wasn't
an agenda or minutes sent out this time as a reminder

5.3 Maternal Health Clinical Governance Group

Kathy Sadgrove

The next meeting is next week but Kathy might not be able to attend

5.4 Whanau Tahi Kathy Sadgrove

- Kathy recently did a presentation for the PHO on the Whanau Tahi or shared care record as it is also referred to. Everyone has a record and this can be accessed through the patient portal
- Anthony Pouto has been to one of our meetings before and he asked Kathy to present. It was
 around a consumers and caregivers perspective and how we see this working. The feedback for the
 presentation was very good
- Kathy has now been asked to present in Kaitaia and Kerikeri in February. Kathy has put together a power point presentation and she will present this to the members at some stage
- In the Whanau Tahi you have your care team so this would be your GP, Physician, Pharmacist, Caregiver and other care team members. You then have a care plan and this is about a person taking that ownership. As a caregiver you can have access to the records but not change them
- It has more than manage my health but it needs to be promoted as not many people know about it
- After the three workshops they will be collating the feedback and this will be distributed

5.5 ASH Lisa Young

• The members agreed that this could now be taken off the agenda as the project has finished

5.6 Site Master Planning

Kevin Salmon

Kevin will update when he next attends

5.7 Hand Hygiene

May Seager

May did not attend the last meeting

6. Any other business

6.1 May Seagar

On Saturday 23 February there will be the Pasifika Fusion Festival on the waterfront from 10am – 3pm. It is a free event with food and entertainment. There are also lots of different organisations at the event. The theme this year is It is ok to ask for help. Each year there is a different pacific nation that hosts the event and this year it is Samoa. They chose the theme which has come about because there have been some suicides in the Pacific community in recent years.

Summary of action points:

Who	What			
Kim	To restart the request for feedback spreadsheet and distribute to the members			
Kim	Take ASH off the Agenda			