
Chair (Acting): Frank Bristol (via zoom)
Members: Mary Schnackenberg (via zoom), Russ Aiton, Maine Mareko, Delphina Soti,
Angie Smith
In attendance: Deon York, DJ Adams, Allison Anderson, Dez McCormack (Partners in Care
team)
Apology; Muriel Tunoho, Jodie Bennett, Dr Chris Walsh

The meeting commenced at 1:20pm

1. Welcome & karakia

Frank welcomed the group and especially Angie Smith as the newest CAG member. DJ opened with a karakia.

2. Continued discussion following this morning's joint session with Te Rōpū

The group continued discussions on the morning hui with Te Rōpū where there was suggestion from the morning that 1) CAG & Te Rōpū meet more frequently e.g., quarterly and 2) that two members be on both groups.

It was discussed that this might be a lot for members to manage considering usual CAG hui and members availability with their normal work commitments. Dez to look at possibility of one more joint hui this year, and next year see if three joint hui were possible. It was raised that if separate hui followed the joint hui, then CAG would be down two members as they would be at the Te Rōpū hui. This would not be ideal. Further discussion is required on this.

Discussion also around de-coupling – e.g., having separate consumer & whānau approaches.

3.1 Previous minutes

The minutes were moved as correct and accepted. Russ moved. Maine seconded.

3.2 Interests register

Mary's previously advised updates were noted and Frank to provide updates to Dez. (actioned)

3.3 Action items

The action regarding investigating a translated recording in Pacific languages of the "Lets plan" resources for those with reading difficulty was further discussed. Where/how could they access such a recording if difficulty reading? Under the accessibility charter, this is not a requirement. However, as an equity issue, we could investigate a QR code linked to a translated recording, but then where would this be advertised? The best way maybe to do more targeted radio advertising in pacific languages. (Access radio).

The actions for a promotional package for CHFA encouraging members to promote our resources to their networks, and promotion of the 0800 number are on-going. Prompts can be made in the regular CHFA newsletter. The 0800 number has been advertised via Niche media on 28 iwi radio stations and Indian and Chinese radio. We will look to re-run these. We also advertised in the Grey Power magazine and received a subsequent uptake for CHFA membership. We plan to do more advertising in print.

The action for interviewing the CAG members who are part of the HNZ pilot sites (Russ and Frank) is being worked on and these interviews should be set-up to take place in July.

4. Partners in Care (PIC) report

Deon gave the update. The main points were as follows:

- The draft code of expectations has been completed and is now with the Minister for sign-off. There is a proposed Parliament launch event on 25 August.
- The contract with the transition unit finishes up on 30 June and we are embedding the work we have done as business as usual. We need to accelerate our role in consumer and whānau voice work.
- The Centre of Excellence name has been finalised and a working title: Ngā Pae Hiranga is pending internal approval.
- 14 June, Strategic planning on Ngā Pae Hiranga took place on 14 June with an external innovation facilitation group. The team were able to discuss ideas and formulate immediate, mid-term and long-term goals to further develop the centre.
- 16 June, DHB Consumer council chairs met this month with iHNZ and iMHA. This was hosted by PIC
- 21 June, a planning day was held between HQSC (Partners in Care and Ahuahu Kaunuku), iHNZ and iMHA to discuss established and upcoming consumer and whānau voice work.
- 22 June, Team planning day with Creative HQ on further developing Consumer Health forum.
- Co-Design in Health: an introduction is in final editing stage. It should become widely available by mid-July.
- 28 June, Deon presented to CAG slides on the progress of PIC's programme plan as well as where feedback from both CAG and Consumer network have been implemented into the plan. Deon spoke to goals for the 22/23 year.

5. Members environmental scan

These were provided in writing for the minutes as the Board noting paper with these scans was required the following day, to meet deadline for board papers.

It is intended that these environmental scans will go to the board for noting, for future hui.

These member scans appear as Appendix 1 following these minutes.

6. Board paper feedback

Commission Strategy paper feed back to the authors is:

CAG was complimentary about the strategy paper and just noted a few things:

- Great content, just the order – 'building trust' should come first.
- Feedback loop is missing. How will the Commission respond?
- Linear nature of arrows etc – does it go both ways?
- 'More prospective and forward facing' – how do we message this in a simpler way?
- Be assertive, clear and present in our voice – really support this.
- Do less, do it better, have more impact. Support this a lot more.
- The document could have a paragraph about existing work programmes (e.g., MRC, ACP etc)
- Framing of risks: or should these be framed in the positive as opportunities?

7. Other business. Karakia & close

No further business. Angie closed with a Karakia.

Next hui: 16 August 2022 – via zoom

Actions List:

Date	Action	Responsibility
28 June 2022	Get a story in the commission newsletter from Russ/Frank re consumer involvement in the pilot sites.	B/F: DJ/Tanaya working on these interviews – now planned for July.

Appendix A

Mary Schnackenberg (Auckland)

COVID-19 comments

- The rapid antigen test is inaccessible to blind and low vision individuals unable to put drops on a test strip or see the colour change. For those who live alone or with another blind or low vision person it can be a mission to find someone appropriate to administer the set and provide the results as quickly as practical. It might be helpful if individuals who choose to do so could record this challenge in their electronic health record.
- Government is making available audio and braille accessible formats of COVID-19 information on their website. Marketing the availability of this information to those who are offline is haphazard at best.

Services

- When all else fails, complaints about aspects of health services can go to the Office of the Ombudsman, the Health and Disability Commissioner or the Human Rights Commission. I have been surprised to discover a lack of understanding even about the existence of one or more of these entities/channels. Even when a formal complaint is justified, we all know how much courage and energy is required to write a complaint and direct it to the right place. When the Commission is preparing its guides, it might consider a general guide about which entity to complain to about what aspect of health services.

Positive stories

- There are two totally blind people who live in our household. We have had to undertake RATs. Our pharmacist, 150 metres easy walk from our front gate, agreed to supervise these tests for us. The COVID-19 reporting templates are accessible.

Russ Aiton (West Coast and Chair of National Consumer Council Chairs Group)

- The West Coast is one of the Locality Pilot Schemes by Health NZ/ Māori Health Authority.
- The challenge is to ensure that the consumer voice is at the centre of any initiative in delivering health to the communities here.
- A further challenge for the Localities team is putting together a meaningful three-year plan and how it will be communicated operationally to staff and socially to community and NGO groups.
- The new mental facility gets underway here on the coast, driven primarily by West Coast DHB Mental Health staff and operational managers. We have the opportunity to engage the teams working on the internal design and community delivery of mental health services across the age range. Plans are soon to be available, and we need to ensure transparency of information and manage expectations of stakeholders. The media has an interest in this facility.
- The National Consumer Council Chair Groups continues to develop its terms of reference and engagement profile with the new health entities.
- We have enjoyed a hui hosted by the Commission in Wellington and discussed consumer engagement post 1 July.
- There is a willingness of the national group to determine how the regions will engage Consumer Councils.

Angie Smith (Wairoa)

- Wairoa service providers (social & health) are using many forms of communications to reach whānau. Being a small community, Wairoa know their people and how important it is in this pandemic and influenza environment to use various communication methods to keep whānau informed:
 - SMS messaging to phones
 - Followed by direct phone calls
 - Facebook posts
 - Brochures of upcoming events delivered to all businesses
 - Local newspaper adverts and articles.
- Comms are extremely important at this time. The following health messages appeared in the local Wairoa Star newspaper:

14 June

- Kahungunu Executive (health & social services provider) and Queen Street Practice (only GP practice in Wairoa) have both been consistently providing free flu vax, COVID-19 first, second & booster vax and MMR (measles, mumps & rubella) vax.
- 'Winter wellness' campaign launched by Hawkes' Bay DHB on Friday 10 June, encouraging people to prioritise their health, to get their flu jab to avoid becoming unwell and potentially needing hospital level care this winter – already 33 people in Hawkes Bay Hospital with influenza, up from 10 last Monday.
- One-pager Ministry of Health advertisement "Protect them for life – Immunise"

21 June

- Margie Apa explaining the transition to the new health system 1 July and what this will mean to our community "Change aims for better quality of life".

25 June (this article appeared in the Hawke's Bay Today newspaper):

- A review of Hawke's Bay DHB alleges a Māori man died after he was refused Emergency Department care for swearing.
 - There is a backstory to this event of course, and I include this article because our Wairoa whānau often travel or are transported to the Hawke's Bay Fallen Soldiers' Memorial Hospital, a two-hour trip by road. It only takes one adverse event to undo all the great communications that go out to our community.

Maine Mareko (Dunedin)

- There is a resurgence in the number of COVID-19 cases.
- The flu has impacted the community hugely. Due to workers being ill, there are details across the board for the health, social and justice sectors.
- Lack in wellness of the workforce in the social sector is of concern. There is a high degree of burnout.
- There have been a lot more tangi than usual in the Pacific community.

Delphina Soti (Auckland - General Manager Vinnies)

- Colder months are always concerning for more vulnerable communities i.e., elderly, solo parents, and low-income families. Heating is a real issue, there is a high demand for warm blankets, clothing, thermal curtains and heaters.
- There a big push by MSD through its local MSD Regional Commissioner and all its NGO and PHO funded community connectors to get people connected to the right providers more efficiently .ie: medical, mental health, WINZ entitlements, case managers for employment, housing or licensing etc. This is done through a weekly recurring zoom.
- The flu on top of COVID has impacted many families, local schools and workplaces. Increase of absenteeism, local employers reporting high levels of employees having to take extended leave for either COVID or the flu. Average leave 2-4 weeks. Also Reports

of flu symptoms being worse than COVID. Employers also reporting that long COVID having an impact on workers performance.

- Reports of having to wait 2-3 days to see a community doctor in some parts of Auckland due to backlog because of COVID and flu, also doctors and medical staff isolating. Phone and zoom consultation are available for some practices.
- Still a backlog for to see mental health practitioners for therapy/counselling, some practices bringing in group work as a way to engage more people.

COVID-19 comments

- Numerous local Vaccination drives by local PHO, this is visible in the Pacifica spaces
- Also, notable increase in initiatives in the Pacifica Mental health spaces for suicide, anti-bullying and domestic violence
- Seeing more post-covid resilience/well-being programmes funded and facilitated for Māori and Pasifika youth across Auckland especially in South Auckland
- A slight surge in COVID cases in Auckland. Although this is high, this does not translate into everyone reporting their positive cases. We are still coming across quite a few people who need to be informed on what to do when testing positive including how to register their test and get the needed support.
- The demand for food from foodbanks continues to be higher than in previous years, contributing factors other than COVID is the sickness, job loss, high petrol and food prices. 63% of those requiring this support are Pasifika. MSD has had to commit more funding till August to cover this extra demand.
- The tail end of COVID will be thick and long.

Positive stories

- Awesome to see more collaboration and networking between NGO's, PHOs with the Ministry of Health and MSD. There's lots of wonderful grassroots initiatives being undertaken to grow the resilience and ensure whanau are more connected and prepared during this COVID climate. I refer to the digital literacy programmes targeting Pacifica Matua to have internet connectivity, a multimedia device Chromebook/phone and also learn how to use these devices to connect to the medical and social services they need during lockdowns and generally on a day-to-day basis.

Frank Bristol (Whanganui – Balance Aotearoa)

All of health

- The Whanganui the Consumer Council via the Chairs have been involved with planning and decision making around the Whanganui rohe winter ills response and the decision of whether to keep the Mauri Ora Clinic opened. The Mauri Ora clinic was a joint Iwi, DHB, Primary Care COVID clinic to take people during COVID and alleviate the pressure off ED. The Mauri Ora clinic has remained open.
- Last weekend Whanganui had significant admissions (a record for a weekend) for respiratory illness admissions (including influenza A & B).
- COVID is now in the DHB Acute Mental Health Inpatient unit after having been mostly free of COVID thus far. Staff shortages across the health system with RNs in particular running vacancies as well as staff shortages due to sick leave.
- Communication gaps exist with health reforms information.
- Collaborative design work action plan is starting for the Whanganui Prototype Locality. However only the Iwi Health organisations and PHO CEOs are writing the first part of the action plan. No pull from them for consumer and whanau involvement thus far.

Mental Health and addiction scan

- Balance Aotearoa Peer Support staff are meeting and greeting people at DHB Community Mental Health & Addiction and providing a transport service for keyworkers for their clients.
- Whanganui Mental Health Services Collaborative design project underway led out of the Iwi organisation Te Oraganui “Healthy Families” design hub. This is supported by a project manager.
- RN vacancies running at 20% in Whanganui DHB Community Mental Health & addiction. Admission to acute services remain high.
- The mental health & addiction COVID immunisation support by Peer support services funded by the MoH is getting underway with Mind & Body being the National Support. Balance Aotearoa providing Central Region and local COVID support. Not aware of the other providers. MoH approved funding back in early March 2022, so this has taken a while to get underway.
- The Mental Health & Wellbeing Commission is publishing the “He Ara Awhina – Outcomes Framework” soon after consultation. A mental health and addiction data framework will follow next.
- The Mental Health & Addiction System and Service Framework 2022-2032 had its consultation period extended and is now in further development after significant submissions were received.
- The Mental Health Act Repeal & Replacement Expert Advisory Group has been appointed and started its work. The work of this group is expected to be completed in September 2022.
- The Royal Commission on Abuse in Care has been running groups with current and past mental health tangata whaiora to gather current and past experiences and discover ways to develop solutions to prevent further abuse.
- The Lake Alice abuse is featuring in the news regularly this period with the UN making recommendations and putting the pressure on New Zealand state parties for redress.