



Minutes of the Te Kāhui Mahi Ngātahi | Consumer Advisory Group (CAG) to the Te Tāhū Hauora Board

Co-chairs	Angie Smith & Russ Aiton
Members in attendance	Jodie Bennett, Boyd Broughton, Delphina Soti, Lisa Lawrence
He Hoa Tiaki in attendance	Deon York, DJ Adams, Dez McCormack (minutes), Allison Anderson, Anne Buckley
Apologies	Mary Schnackenberg, Maine Johnson

The hui was held via zoom on 31 May 2024.

The hui began at 10.00am

1. Welcome and karakia.

Russ welcomed everyone to the hui and Angie opened with karakia.

2. General business

- 2.1. The minutes from 9 February were confirmed as true and correct. Moved by Jodie and seconded by Angie.
- 2.2. Action items were completed. Nothing ongoing.
- 2.3. Interests register is up to date.

3. De-brief on board hui 19 April 2024

Angie gave the update.

Mention made that moving forward, due to fiscal pressures, the CAG co-chairs attendance at Te Tāhū Hauora board hui will be via zoom, starting at the boards 14 June hui.

Matters covered off in the board hui as follows:

CE report covered off the change process being undertaken. The finance report was noted and that required cost changes are on track.

An updated Statement of Intent was tabled, as was the draft Window on quality and main messages that will come from this in the coming year.

Mention made that IMPBs have funding to assist in the set-up of boards, and there is more to be negotiated in terms of their role in planning and delivery of health care in their communities.

The clinical governance framework continues to progress.

The National Mortality review committee work programme was tabled.

A HDC update was provided by Morag McDowell.

The nurse shortage and need for cultural competencies by any overseas personnel employed was covered off by Jenny Parr.

4. Feedback on Ō Mātou Reo | Our Voices forum

Delphina started feedback and had heard very positive comments from attendees. Mentioned it was easier than the Christchurch forum for face-to face discussions and that the venue was great.

Deon then gave his reflections and gave comparisons to last year's forum. On balance, the content was improved on last time and it was evident that we had listened to what last year's participants had suggested, particularly in terms of content.

DJ then gave thanks for the referral from Boyd for manu whenua Ngāti Pāoa and the relationship now built with them.

Angie spoke about how much she enjoyed it and all the mahi from staff to make it successful. Thought the MC Brian Sagala was very good.

Russ agreed with previous comments and noted the professionalism of staff however was disappointed in some aspects of the workshops, not being as consumer focused as they could be.

Jodie although unable to attend did receive positive feedback from many with lived experience in the mental health and addictions community who attended.

5. Members environmental scans

Following is a brief outline of members comments.

Angie – spoke of the EOI for the new regional consumer councils. There are four regions – Northern, Te Manawa Taki, Central and Te Waipounamu. Angie also spoke of issues with the local pharmacy that have seen huge delays in prescription orders. From consumers and whānau the issues were tabled at the Tihei Wairoa clinical governance group (TWCGC); and raised in a previous scan to CAG. There will be continuing discussions to improve the service, with the pharmacy and TWCGG.

Jodie – the MHA sector is trying to seek clarification from the minister of mental health as to what powers, budget, and level of influence in health he has.

Also see Jodie's written input at Appendix 1.

Boyd – Apologies for not being able to attend the forum.

Workforce progress in the North – still issues with access to GPs. and getting culturally appropriate clinicians.

IMPB funding established to get a board. Many discussions around strategic commissioning.

More recognition is happening around the role of support services for those with lived experience in health conditions.

Also see Boyd's written input at Appendix 1.

Delphina – spoke of her current health journey and her lived experience of the health system. Was provided with a copy of the code of rights and offered a Pacific advocate to assist her in navigating her care. Although she didn't choose to make use of this service, felt it was a good service improvement. Identified pressures in district nursing services. There

are on-going competing pressures in the social services sector. Food continues to be a priority, and unfortunately unfunded.

Lisa Lawrence – Apologies for absence from Forum.

In capacity as chair of the NZ board of Psychology, spoke of overseas psychologists coming to NZ and the need to require cultural competencies.

A paper is at the consultation stage, with a view to making cultural competency training compulsory as part of regulation and registration for overseas-trained practitioners.

Also looking at how consumer complaints are being managed according to both law & natural justice. Board looking at consumer voice on all committees or consumer focus groups. This is new for regulatory bodies of this nature and even though not required under the Pae Ora Act, they are taking this on board voluntarily from the new consumer code of expectations.

Russ – Spoke mainly about the new regional structure of consumer councils, which is covered below.

The contents of the board paper for their next board hui, taken from these comments, is attached as Appendix 2.

6. Regional consumer council structure under Te Whatu Ora

Russ spoke about the new structure which will be broken down into four regional consumer councils.

Russ shared a diagram showing how everything has come about including timelines. Contact was made with CEO of Te Whatu Ora re concerns of the outcome of a rapid review held.

Approx. 8 local consumer councils are continuing on their own, with different names and with support from local Te Whatu ora staff. Some funding has been guaranteed for the first year.

It's expected these 8 established local groups that wish to continue will feed into the regional councils. Mechanisms for this are still to be established.

Further conversations of clarification on process and consumer involvement as per the code are anticipated.

7. He Hoa Tiaki Partners PIC report update. Change proposal.

A brief verbal update on the PIC report was given by Deon. Our deliverables will be met. QSM will be uploaded to the platform shortly.

Re change proposal, both a team and individual submissions were made. Deon thanked the team for their professionalism and integrity during this time.

8. Prep for joint hui with Te Kāhui Piringa on 25 July

Request was made for any suggestions or comments for agenda be sent to Dez.

9. Wrap of day, other business and noting paper

There was no other business. Contents of the "Sepsis thematic analysis (final) and Qualitative analysis of maternity events" has been noted.

10. Karakia and close

Angie closed with karakia.

Actions list

Date	Action	Responsibility
5 June 2024	Provide any agenda suggestions for the joint hui to Dez by 28 June	All CAG.

Next hui – 25 July 2024 – Joint hui with Te Kāhui Piringa at Rydges Wellington Airport.

Appendix 1

Update to last environmental scans.

Jodie Bennett, (Tāmaki Makaurau) Changing Minds (Mental Health and Addiction Sector – Northland & Auckland)

Lived Experience – Formal Qualifications

The Level 7 bachelor's degree in Lived Experience is on track. We understand it is currently going through an 'approval process' through AUT and should be up and running for either the second half of 2024 or the first semester of 2025. This is the first qualification of its kind in Aotearoa and lends additional credibility to the voices of Lived Experience who want to contribute meaningfully and equally in partnership with the health system.

Pae Ora (Healthy Futures) (Improving Mental Health Outcomes) Amendments Bill - Submission

In May Jodie prepared a verbal submission, supporting the written submission from Changing Minds made to the Health Committee regarding the Pae Ora Amendment Bill.

This is important because the Amendment specifies the development of a national Mental Health and Wellbeing Strategy but contains:

- No indication that the voice of the consumer and whānau are to contribute to the drafting, and did not specify the upholding or enacting of the Code of Expectations
- No reference to the Minister of Mental Health, referring only to the Minister of Health
- No provision for the approach for equitable outcomes for Māori, as it specifically refers to Te Aka Whai Ora as a partner, which has now been disestablished.

Amongst many other points Changing Minds wished to reinforce the many questions our community have on the proposed strategy, specifically asking:

1. How will tāngata mātau a-wheako and whānau and other communities be part of the solution to direct the final Mental Health and Wellbeing Strategy?
2. When can we expect to see clarification of the Minister of Mental Health's role, remit, and budget to implement a Mental Health and Wellbeing Strategy?
3. Is the intention for this budget to have parity with investment into physical health?
4. What powers will be utilised or required in order to empower the Mental Health and Wellbeing Strategy into action?

The full written submission can be viewed here:

<https://www.changingminds.org.nz/submissions/pae-ora-healthy-futures-improving-mental-health-outcomes-amendments-bill>

The verbal submissions can all be viewed here: <https://vimeo.com/showcase/10758257>

Open Letter to Minister of Mental Health, Matt Doocey

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) has written an open letter to Minister for Mental Health Matt Doocey, encouraging the new Government to prioritise investment in mental health in the upcoming budget.

In March, the Coalition Government released its [budget policy statement](#) and mental health was not on the list, despite growing calls from New Zealanders to give it the attention and funding it needs.

With Changing Minds' and other NGO support for the letter, urged policymakers to do better and put mental health front and centre in their budget agenda.

In a supporting media release Jodie was quoted as saying: "We were very disappointed in the omission of mental health as a priority area in the latest budget policy statement. This is an oversight our Lived Experience community expects answers on as a matter of priority."

A follow up interview for Jodie with Radio New Zealand reinforced our community disappointment, and emphasised our expectation that the new Government will prioritise not only the budget but clarify the actual remit and empowerment of the new Minister in his role, with urgency.

Boyd Broughton (Te Hā Oranga, Tāmaki Makaurau and Te Tai Tokerau)

Environmental scan/real time monitoring

- IMPB positioning and growth into strategic commissioning despite financial and other challenges.
- Upcoming budget and census analysis for our region and communities.
- Regional approach widely utilised by Te Aka Whai Ora has been adopted by other organisations and groups i.e., Consumer Community Groups, Oranga Tamariki, and others, which has raised some concerns in Tāmaki with a fear that the resource and investment may shift which is problematic given the complex needs in Tāmaki.
- Hauora Māori Advisory Committee and IMPB finally met with each other after two years of existence since July 2022. Looking forward to working together to provide local whānau voice to their advice to the Minister.

Services

Local workforce development progress in the northern region:

- As wait times grow, whānau preference for quick access to clinical care over cultural capability of the provider increases.
- There are still concerns regarding importing a workforce – concerns about cultural capability and long-term solutions.
- Challenges to workforce role-expansion suffers from protectionism from some groups.
- Local Consumer Group disestablished. Regional consumer council EOI email was distributed to networks. Pros and cons of the proposed new regional approach, so far, the establishment process seems fraught.

Positive stories and exemplars

- Some of the earlier localities are continuing to work as intended to elevate whānau voice and seek local solutions to meet unmet needs – one of those localities is a prototype and has funding, the other is not. Good collective action for the benefit of whānau.
- The continued progress of the Bachelor of Nursing Māori in Te Tai Tokerau is set to start in February 2025 and hoping for a strong first cohort of up to 40 people in the 'earn-as-you-learn' approach. The curriculum has been developed by mātauranga Māori experts and will feature local history, stories, tikanga, and local reo Māori. Strong regional support from iwi, Te Whatu Ora, and providers.

Recommendations

- Continued prioritisation from all crown entities in health to recognise community reach, cultural expertise, lived experience, and other unofficial pathways to expertise.

General Comments:

Challenging times with severe cuts to public services in the days, weeks, months, and years ahead. Those disengaged, disenfranchised, under served, and under serviced communities and populations will need lots of support.

Appendix 2

Contents of the paper for the 14 June Board hui

Summary

1. CAG noted that workforce issues continue to be of concern. The most pressing concern discussed was of the number of practitioners available to provide clinical care, especially in general practice settings. Several emerging programmes to address nursing and other shortages were highlighted. These include a planned Bachelor of Nursing focusing on Māori in Te Tai Tokerau due to start in February 2025 and a first year of nursing training programme in Wairoa. It was noted that progress in workforce role expansion to address workforce shortages is slow and requires support from professional organisations. The growing recognition of 'prior learning' and lived experience in developing support roles for services was also noted, as well as planning at AUT for a new bachelor's degree qualification in Lived Experience.
2. The Pae Ora Healthy Futures (Improving Mental Health Outcomes) Amendment Bill was drawn to members' attention. It specifies the development of a national Mental Health and Wellbeing Strategy. The absence of reference to upholding or enacting the Code of Expectations for health entities' engagement with consumers and whānau was expressed as a concern, along with the absence of reference to the participation of consumers and whānau in the drafting of the Bill, or to equity outcomes for Māori.
3. An update was provided to members on Te Whatu Ora planning and progress towards regional consumer councils. These are to replace the 19 consumer councils of 19 former District Health Board consumer councils. Concern was expressed about the lack of consumer involvement in the processes of establishing these regional councils, including the recruitment process for members. Russ Aiton spoke to his concerns in his capacity as chair of a consumer council chair's group. The process of establishing a regional consumer council for Te Tai Tokerau and Tāmaki Makaurau was noted as challenging.
4. Iwi Māori Partnership Boards (IMPBs) leads met recently for the first time with the Hauora Māori Advisory Board and plan to work together to provide local whānau voice advice to the Minister of Health.

Concern was expressed that a regional approach to service planning by organisations such as Oranga Tamariki may disadvantage Te Tai Tokerau given the resource needs of Tāmaki Makaurau.

5. CAG's discussion at the 31 May meeting also highlighted the success of the recent Te Tāhū Hauora Our Voices event held in Auckland on 15 May and the professionalism of the He Hoa Tiaki staff in delivering this event at this time of change. The Ngāti Pāoa contribution to the event was noted, along with He Hoa Tiaki's work in engaging with mana whenua utilising CAG's connections. Positive feedback about the event was also reported through to some members from their consumer networks.