

MEMO

To: Board Members

From: Judith Holmes, Consumer Council Chair

Date: 20 June 2018

Subject: Consumer Council Chair's Report

Status

This report contains:

- ☐ For decision
- ☐ Update
- ✓ Regular report
- ✓ For information

The Consumer Council met in Nelson on Monday 18 June 2018.

The Clinical Lead for eObservations (Patient Track) gave an overview of the new software and its expected benefits. The Council were pleased to hear that a key benefit will be a freeing up of more time at the bedside for medical staff. The Council discussed how to best communicate the coming transition from paper chart filing at the work station to electronic observation recordings at the bedside to consumers. The Council emphasised the importance of direct person to person communication with patients (ie telling them about the iPad/tablet entries to their patient record at the bedside as the recording of vitals is being done). The Council advocates patient discussion of, and access to, recorded information (ie allowing patients and their whanau to access e-observations as they wish so that they can be active participants in their own health management). Patient access to short videos is likely to be helpful as new models of care are introduced. This led the Council to discuss the use of the Nelson and Blenheim apps on smart phones. The Council looked at the NMDHB sections of these apps. The Council are in favour of the use of these apps and considered there are great opportunities to use these to share information with consumers.

The Consumer Council member involved in the End of Life workstream of the Models of Care programme gave an update on progress. She explained that there had been consistency in the issues and desired outcomes raised across the three workshops. She believed that the workstream was now in a position to move forward and anticipated the Programme Charter would detail the next steps.

The Council were asked to input into the Patient Flow project data collection. Communication, privacy and duplication were raised as important issues to consider in any changes to flow within the hospital. Good clear person to person communication often defines the difference been a good or unfavourable experience in the medical journey. Examples raised by the Council included keeping patients informed of waiting times in the emergency department and clear directions as to where appointments would be held in appointment letters. Allowing patient privacy was also considered important not only to maintain dignity, but also for safety. Having to verbally provide address, symptoms and treatment history and other details in areas where they can be overheard is considered to be unsavoury and a serious compromise to patient confidentiality. Having to complete forms that provide the same information multiple times was discussed as a frustration for consumers.

The Council discussed public sentiment and concern about the potential nursing strike and associated staffing shortages. The Council considers it important to reassure the public of contingency planning and actions being taken to resolve these issues.

Judith Holmes

Consumer Council Chair

RECOMMENDATION:

THAT THE BOARD RECEIVES THE CONSUMER COUNCIL REPORT.