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# MEMO

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**To:** CG Committee Members  
**From:** Angelea Stanton, Consumer Council Chair  
**Date:** 12<sup>th</sup> April 2022  
**Subject:** **Consumer Council Report**

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<p style="text-align: center;"><i>Status</i></p> <p><b>This report contains:</b></p> <p><input type="checkbox"/> For decision</p> <p><input type="checkbox"/> Update</p> <p><input checked="" type="checkbox"/> Regular report</p> <p><input checked="" type="checkbox"/> For information</p>
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The Council met on Monday 11<sup>th</sup> April 2022.

We started our meeting with our usual Cultural Conversation. This month, our consumer representing the refugee community presented giving us increased knowledge about this group. She shared a key barriers document which highlighted the areas that are vital to get right to forge connections. This has been a particularly insightful series for members and we look forward to continuing this for those who have yet to share.

As Lexie had joined our meetings for the foreseeable future we took the opportunity to raise the CW 4Q's as consumers are still frustrated that this has stalled. It was proposed that a digital approach may be the way forward, with a page on the NMH website. A sentence with a link to the website for patient letters may be easier to incorporate rather than a whole paragraph. Plus this link could also be used in the text message service to patients, when they are reminded of appointments. This request been forwarded to Jess Ettema for progress.

This month members have been engaging with the following:

1. A consumer now present at the Head of Department meetings for clinical staff. This was a big achievement and an adjustment for many, optimistic to start some valuable consultation and engagement in this area.
2. Attendance at Allied Health Interviews and shortly team meetings.
3. Consumer Health Forum Aotearoa. Led by the HQSC this forum was an opportunity to hear directly from approximately 100 consumers as to how the engagement could work and what areas needed focus. Data collection and lived experiences are still paramount as is the need for patient records to follow them throughout the country. However, improved labour conditions for health workers and the need for patients to see a reflection of themselves (with cultural and gender backgrounds) in health positions was key, funding models that see a 3 year cycle instead of the usual annual cycle, plus the need to consider 'the big picture' and points of connections for displaced communities, those that don't fit into social or cultural networks.

Consumers were informed of the Project Whakatupuranga progress and are eager to hear of the results from the funding announcement and the potential for future collaboration in this space.

At our next meeting the consumer co-leads from both health entities have been invited to join us. They will initially give an overview of their work programme then will run a questions and answer session as they want to know what is happening with consumer engagement in the Nelson Marlborough region.

Finally, the reforms are looking for us to forge connections with our PHO counterparts. We recognise that they are managing COVID in the community at this time, so are suggesting that a connection around consumer training and/or a forum may start building networks and be a real driver for the future. We would ask that the Clinical Governance Committee with their links throughout the community assist us with this.

Angelea Stanton  
**Consumer Council Chair**

## RECOMMENDATION

**THAT THE CLINICAL GOVERNANCE COMMITTEE RECEIVES THE CHAIR'S REPORT.**