

Purpose & Brief

Purpose

The Waitematā District Health Board (DHB) Consumer Council works collaboratively with the Waitematā DHB Chief Executive, and Board to develop effective partnerships in the design, planning and delivery of high quality, safe and accessible health care services for the Waitematā community.

The focus of the Consumer Council is:

- informing decision making about safety and quality;
- informing the design and redesign of health services;
- review organisational safety and quality performance;
- ensuring the patient/community voice is heard by the DHB;
- review patient, whānau and family feedback data;
- improving patient, whānau and family experience;
- recommending quality activities that relate to patient and community feedback.

The People Powered theme in the NZ Health Strategy reflects the Government's priority of delivering 'better public services' and the opportunity to achieve this through taking more people-centred approaches to providing health services. Through meaningful partnerships, the Waitematā DHB Consumer Council provides a strong and viable voice for the community and consumers on healthcare planning, quality improvement and delivery of services that meets the needs of the people. The Waitematā DHB Consumer Council will enhance consumer engagement and experience across all services. The establishment of a Consumer Council is part of our ongoing commitment to be a patient and whānau-centred organisation that works in partnership with its community.

The Waitematā DHB Consumer Council will develop an effective process to communicate their activity and meeting outcomes to the community. The Consumer Council also has a quality improvement role to advise and encourage better, best, brilliant practice and innovation.

Scope

All Waitematā DHB services and divisions.

Brief / Responsibilities

To represent the interests of consumers by objectively communicating their views, by raising issues for discussion and recommending action to the Chief Executive. Areas of DHB work would include:

Patient experience

- Overview and monitoring of patient experience strategy (ensure accountability for Patient Experience team meeting strategy objectives)

- Report, identify, highlight patient experience/community feedback – identify priority areas for Patient Experience activity
- Understand and critically review feedback themes from Patient Experience surveys and improvement activities

Quality

- Understand and critically review complaint and adverse event themes and recommendations that impact on patient experience
- Advice and ongoing input into the direction and implementation of the Quality Strategy

Governance

- Advice and support through regular reports to the Board to ensure Waitemata DHB is engaging with consumers at all levels of governance.

Associated functions

- Recruitment and management of consumer council members ensuring far-reaching community representation
- Training and mentoring of all committee members
- General advice to teams/services who present their work to the Council, seeking advice about direction and/or engagement

Exclusions

The council will not:

- Have access to personal identifiable information
- Provide clinical evaluation of health services
- Be involved with individual complaints
- Be involved with WDHB contracting processes.

Accountability

The Waitematā DHB Consumer Council is accountable to the Waitemata DHB Chief Executive with operational support from the Director of Patient Experience. The Council would also work closely with the Quality and Risk Team.

Structure

The Consumer Council should be lay people and should live within or have strong connections to the Waitematā area recognising the discrete areas of Waitakere, North Shore and Rodney and reflect our MOU partnership with both Te Rūnanga o Ngāti Whātua and Te Whānau o Waipareira.

There are up to 13 consumer members and 2 ex-officio staff on the Consumer Council. Members will have diverse backgrounds, contacts, knowledge and skills, and must be passionate about consumers being able to access the best possible services and care.

The following minimum representation will be sought to establish the foundation Council

- Māori – two members with strong connections to the local Māori community
- Pacific – one member with strong connections to the local Pacific community
- Asian – one member with strong connections to the local Asian community
- Health Link – two Health Link Board members
- Disability – one member with strong connections to the local disability community
- Youth – one member with strong connections to local youth
- Mental health and Addiction – two members with lived experience and/or strong connections to the local community of mental health and addiction service users.

Remaining members will be appointed to reflect the following areas of interest:

- Child health
- Women’s health
- Older persons health
- Chronic conditions
- Rural health
- Primary health
- High deprivation populations

When making appointments, consideration must be given to maintaining a demographic balance that generally reflects that of the population, to provide a good cross-section of age groups, health experience and geographical locations of the local community and representation from the Lesbian Gay Bisexual Transgender Transsexual Intersex (LGBTTI) community would be welcome. Although appointed to reflect the consumer voice in a particular area of interest, they will not be regarded as representatives of any specific organisation or community.

Waitematā DHB staff involvement would include the Chief Executive, the Director of Patient Experience, and representatives from the Quality and Risk team.

Appointment & Term of Office

After the initial two years, each year a third of the consumer members terms would end and a selection or election process will take place with the potential to be re-elected. Details of the election and re-election process would be determined by the Consumer Council once established.

Meetings

Chair	Consumer member who is elected by the Council every 12 months
Quorum	50% of consumer members
Frequency	Six weekly meetings (at least seven meetings per annum) – two hours in length No meetings to be held in January or during school holidays. Meeting venue to alternate between North Shore & Waitakere Hospital sites.
Minutes &	Agenda to be circulated within one week of schedule meeting

Agenda	Minutes to be sent out within one week post meeting and made available on the Waitematā DHB Consumer Council webpage for public access once endorsed by Council members.
Reporting	Consumer Council reports and minutes to be presented by the Consumer Council Chair at appropriate Waitematā DHB committee meetings.
Meeting Fees	Consumer payment for attending meetings will be set at Waitematā DHB rate for consumer representatives.

MEMBER REQUIREMENTS

Members are to attend all meetings and are responsible for sending apologies to the Waitematā DHB Consumer Council Chair. It is expected that the agenda and all papers are read prior to the meeting.

The Chief Executive and Director of Patient Experience are to organise a Senior Management Team member replacement if unable to attend. Quality representatives are to be in attendance at their scheduled quarterly updates. Other DHB staff members attend meetings to listen to the discussions, provide updates from the organisation and answer questions as required. In addition, their experience of attending the meetings will enable active promotion of the Consumer Council function.

DECISION MAKING / ESCALATION

The Council has the authority to give advice and make recommendations to the Waitemata DHB Chief Executive, as well as other services or divisions who seek the Council's advice and guidance.

The Consumer Council does not have executive powers or authority to implement actions and does not have delegated financial responsibility.