**Community Health Council**

**Highlights of meeting 5th December 2024**

**Chair Lyneta Russell**

**1. Southland Hospital update- Simon Donlevy- Marie Wales**

It was a pleasure to once again welcome Simon to a meeting as work commitments had kept him away for a few months. Simon provided some information on two issues that had arisen in previous meetings- the transition of those in the paediatric services to adult services, and Friday discharges into the community with no weekend support available. Simon undertook to come back with further information on both these issues. He also talked about current pressures on Southland Hospital, work underway to improve access to planned care and the impact on Southland if the Dunedin Hospital Build does not go ahead.

**2. Mortality Review Committee-Hywel Lloyd and Michelle Derrett**

Hywel and Michelle provided a great overview into the work of the Mortality Review Committee, one of the main subcommittees of the Clinical Council. All directorates have patients that die but the role of the Committee is to oversee patient deaths, both anticipated deaths and those that are unexpected, to ensure that mortality rates are not too high, to look into preventable deaths, and any lessons that can be learned from the deaths, and any emerging themes This is one Committee that does not have a consumer representative, it not being appropriate as it is covered as a Protected Quality Assurance Activity to protect clinicians from liability.

**3. Bereavement messages- Hywel Lloyd**

Hywel introduced the idea of sending bereavement messages to families of patients that had died when an inpatient or in the outpatient environment. The idea arose in response to a complaint following a death in Dunedin Hospital. It is not routinely done currently, except for the Intensive Care Unit. Hywel was keen to get feedback from the Council on the idea. The Council thought that this might open “a can of worms” and thought that what is done after a death is more important than a follow-up letter, that dignified and empathetic support and care of the family at the time of death was more important.

 **5. Roundtable- issues brought to the Council by Members**

A departing long standing member of Council would like to see more buy-in from departments to consumer engagement and that as consumer representatives we often find not invited in, or we find ourselves in a space where consumer input is not always valued. A another departing member agreed that the Community Health Council is a resource that could be used more widely.

**6. 2024 Reflections and 2025 Priorities**

The Council spent some time reflecting on the past year and initial brainstorming of priorities for 2025. These include

* Council membership and diversity
* Marketing the role and increasing the visibility of the CHC both internally and externally
* Updating the Consumer advisor Welcome Packs

**7. Andrew Swanson-Dodds**

A recent meeting with Martin Hefford, Director Living Well Health NZ, who has again made it clear that current change processes underway are focused on hospitals not PHO’s. Currently they are waiting for hospital colleagues to have more certainty on their roles and budgets to be able to move forward collaboratively.

The WellSouth Board recently decided that their position at the New Dunedin Hospital was more focused on models of care and services delivered to the community, and concerns about the size and suitability of hospitals in Invercargill and Central Otago.

**8. Member resignations**

 It was with much sadness that we farewelled two Council members at this meeting. Kelly Takurua joined the Council in 2017 and has been an active member of the Council as well as the Adverse Events Assurance Committee. Her contribution as a member with a long history with the Council will be missed. And Kathryn Wright, who represented and advocated strongly for rural communities, also stepped down to allow her more time for her PhD. Kathryn has been a member since December 2022.

**7. Next Meeting** 30th January 2025

 17th December 2024