

Minutes

Te Aho o Te Kahu Advisory Council

Date:	22 November 2022		
Time:	1:00pm to 4:00pm		
Location:	Room: GS.2 or		
Chair/s:	Richard Sullivan		
Attendees:	Deborah Woodley (attending from 3:30pm), Nina Scott, John Whaanga, Nicola Hill, Christopher Jackson, Johnathon Koea, Dawn Wilson		
Presenters:	Nicholas Glubb, Cushla Lucas, Nisha Nair, Jason Gurney, Fletcher Beazley		
	Jordan Jansen		
Secretariat:	Jordan Jansen		
Secretariat: Apologies:	Jordan Jansen Shelley Campbell, Diana Sarfati, Henare Kani, John Whaanga		
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Apologies:	 Shelley Campbell, Diana Sarfati, Henare Kani, John Whaanga Describe and discuss the current and emerging environment relating to the health and disability sector reforms. Consider the role of the Council in navigating the current environment, identify the necessary skill set for Council (given current environment), identify any skill 		

Item	Purpose
Chairs welcome and (Te Aho o Te Kahu)	
Meeting opened at 1:05pm by RS with karakia.	
RS welcomed council members, and acknowledged:	
Resignation of Keriana Brooking.	
Membership of Deborah Woodley to pause until new health	
sector role is defined.	
 Approval of meeting minutes on 10 June meeting and the Chief 	
Executive's substantive update on 28 September.	
Chief Executive (CE) update	For information
NH updated the council at 1:15pm on the progress of key activities	
underway in the Agency from the past two months. NH Highlighted:	
 Support provided by council members to NH whilst Acting CE. 	

- There has been strong senior level engagement across new entities within health reforms, noting the Agency's work programme was designed to negotiate any disruption.
- A Health Leadership Forum (HLF) has been formed by the Director-General of Health to assist with collaboration, tackle big cross-system issues and provide peer support. The Agency is a member.
- Separate from HLF, NH has established regular meetings with Te Whatu Ora (TWO) and Te Aka Whai Ora (TAWO) CEs.
- The Agency is occasionally made aware of operational issues through its well-connected regional hubs. NH is escalating these as appropriate.
- TAWO has released funding for Māori cancer care coordination and has asked th Agency for advise on commissioning.
 Discussions for best approach are in early stages.
- Engagement with Te Pae Tata (NZ Health Plan), discussed later in agenda.
- The Agency was a finalist for a Public Service Award; Māori Crown Relations, supported by Hei Ahuru Mōwai.
- The Agency has developed several Whainga Amorangi (internal Māori capability development) plans, which are used as exemplars across government by Te Arawhiti.
- The Agency's CanShare work programme has continued, with TWO gifting infrastructure to support the data programme. Minister Little is engaged and supportive of this project.
- Ministers are active in the cancer sector and are helping to progress the Agency's work programmes.
- At the Agency's recently held Leadership Group retreat the key takeaway was a desire to shift the Agency's focus from treatment and hospital to primary care and prevention communities. NH intends to engage the council on these topics in future meetings.
- Staff movement is expected following health sector reforms, and general sector churn. NH will concentrate on supporting staff and attracting talent.
- Engaging with Public Health Agency on upcoming prevention activities, smokefree, alcohol, food.

Report back

- He Ara Tangata
 - Fletcher Beazley advised the Consumer Reference Group is happy with the Agency's engagement.
 - There are lead consumers across each Cancer Services Planning (CSP) workstream.
 - Tumour stream working groups also have consumer members.
 - Membership refresh is underway with expression of interest out.
- Clinical Assembly
 - CJ spoke about recent Assembly meetings including discussions on:

For information

 CSP, end of life care, workforce, the quality performance indicator programme and teletrials. Members feeling like an engagement vehicle rather than advisory committee, e.g. monitoring work should have reference members. The Agency should consider whether the Assembly is still fit for purpose. Hei Āhuru Mōwai NS updated the council on what the Māori Cancer Leadership group is collaborating on: Hosting the World Indigenous Cancer Congress in NZ 2023/24. Whānau voice interviews. Expect interviews to occur annually. Te Pae Tata. TAWO implementation activity. Submitting an HRC application to adjust bowel 	
screening age limit.	
Annual report summary Nicholas Glubb provided a summary of the Agency's 2022 annual report. Refer to presentation.	For information
 Draft monitoring framework Jason Gurney presented the Agency's approach to monitoring cancer sector performance. Refer to presentation and paper. Consultation process is underway, clarifying the intended audience (Select Committee) will manage risks around perception. There is potential for quality performance indicators and tumour streams to be added in the future. This report will be a baseline for government to review, and suspect bigger interest in the second iteration (to be able to observe change / improvement). Discussion: Messaging around the report needs to cover why selected indicators are important in the monitoring environment. Actions: Future agenda item on contributing to operational monitoring within TWO & TAWO, part of cancer control and engage with Clinical Assembly as well. 	For discussion
 Cancer Services Planning update Cushla Lucas provided an overview of the project's progress to the Council. Refer to paper & presentation. DW then spoke to workforce through CSP and in general. Refer to presentation. Discussion: There are shared concerns regarding waiting lists because of workforce shortages. The Agency is unable to commission change, therefore council members and DW will keep collaborating with TWO. Actions: 	For advice

a. Council members to respond to questions from CSP	
presentation to Jordan.	
b. NS, CJ & RS to discuss workforce further with DW.	
Te Pae Tata & inter-agency relationships	For discussion
Deborah Woodley joined at 3:55pm, RS thanked Deborah for her role	
in the Council, Deborah will be working on palliative care and national	
travel assistance projects for MoH.	
The Council ran out of time for this item and it will be pushed to the	
first meeting in 2023.	
Actions:	
a. Review the Council membership early 2023.	
Close	
RS closed the meeting with a karakia at 4:01pm.	

Actions:

#	Action	Responsible
1	Provide Council members with talking points to support	Agency
	communications and engagement opportunities.	Communications
2	Circulate iHNZ and iMHA briefings.	Diana Sarfati
3	Incorporate trust and confidence into strategy on a page (or within purpose statement).	Diana Sarfati
4	Work through list of suggested names for new members and consider appointing by 2023.	Diana Sarfati
5	Offer ex-officio membership to new health entities.	Diana Sarfati
6	Provide CSP talking points to Council members.	Agency
		Communications
7	Circulate Conflict of Interest register.	Jordan Jansen
8	Share Canadian contact and documents on primary care with Fletcher Beazley.	Shelley Campbell
9	Discuss workforce with JK further.	Dawn Wilson
10	Future agenda item on contributing to operational monitoring within TWO & TAWO, part of cancer control and engage with Clinical Assembly as well.	Jordan Jansen
11	Respond to questions from CSP presentation on 22/11/22 to Jordan	Council Members
12	Have a workforce discussion with DW	Nina Scott, Chris Jackson, Richard Sullivan
13	Review membership early 2023	Nicola Hill, Richard Sullivan