



Health
South Eastern Sydney
Local Health District

TRIM: T18/xxxxxx

Meeting: POWH/SSEH Community Advisory Committee
Date: Wednesday 24 October 2018

Chair: Mr George Constantin
Minutes: Ildiko Greener

Presentations: Mr Tobi Wilson & Ms Danni Birchall, outlined the Facility's Business Plan and key priorities for the next twelve months.

Key Initiatives:

1. Delivery of an additional Interventional suite which would further assist with ECR which relates to clot retrieval for select patients who develop a stroke. Noted this was a State service.
2. Billington Unit – Anaesthetic services will now be providing appropriate sedations within the unit.
3. People Matters survey 2018– Working group created to work on a number of the recommendations as suggested by staff.
4. Better Value care – Waste Collection project Community how to be more sustainable and work better.
5. Community wellbeing and health equity, Patient Opinion to be rolled and welcome the member's involvement with this process.
6. Extended care paramedics is a team that responds to geriatric care in nursing homes they respond in a very short time frames. Working closely with the ambulance service Advanced Care directives.
7. Cardiology Innovation test beds project profiled at the last business forums. Patients are monitored when they are home via an APP.
8. Venturing into Robotic Surgery with POWP, cost prohibitive for a public hospital.

SSEH:

1. Reviewing pre-admission process for surgery
2. Access to different to how hand surgery is conducted in theatre, trials have begun
3. Work, life balance work being done with staff across both sites
4. Revenue around Patient fees providing sustainable billing process for better value.
5. Telehealth working on providing a catchment service how they screen patients prior to going into hospital.
6. Integrated model services for skin cancers.

1. Attendance/Apologies

NAME	AREA	status	NAME	AREA	status
Tobi Wilson	DO POWH	Present	Tanya Kant	Consumer	Present
Heather Walker	DON POWH	Present	Susan Nicholson	consumer	Present
Jennie Barry	DON SEEH	Present	Ben Steele	Consumer	Present
Carolyn Smith	SSEH	Apology	Ericka Van Aalst	Consumer	Present
Sheemol Barrett	A/NM POWH	Present	Jan Titterton	Consumer	Present
George Constantin	Consumer/Chair	Present	Andros Eleftheriou	Consumer	Present
Nava Turner	Consumer/Dep Chair	Present	Sue Suchy	Consumer	Apology Present
Kathleen Sutherland	Consumer	Present	Harris Mihailidis	Consumer	Present
Ajay Varshney	Consumer	Apology			
Keren Hong	Consumer	Present			

2. Minutes

2.1	Confirmation of minutes	The minutes from 22 August 2018 were confirmed as a true and accurate record. <i>Names of persons moving to accept and seconded</i>			
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3. Conflict of Interest

3.1	Conflict of Interest	N/A
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4. Actions/ Plans arising from previous minutes

Issue	Discussion	Action Required	Who	Due
4.1	Mixed Gender Report	Noted improvement	NM Nursing	October meeting
4.2	Disabled toilets - NELUNE	Review November meeting.	NM Nursing	Review October meeting
4.3	CAC Training HCNSW	Committee members advised they found the training very useful. Report to be provided to Executive. Action plan to be discussed once the report is received.	Consumer feedback	October meeting

4.4	Patient Real Time Experience Survey	To be reported in November.	from the facilitator		
4.5	POWH/SSEH draft charter for review and ratification	<p>Members discussed PD briefly, SN raised concerns around the expectation of activities outlined in the document for members, in particular crouching, squatting, running action movements. Activities should also cover suitable activities for disabled people who may be members.</p> <p>HW advised the PD was developed at the District level and was sufficiently generic to cover the varying roles of the volunteer/consumer. Charter</p> <p>Chair – GC confirmed appointment is now three years with the option to reappoint for a further two years.</p> <p>Members seeking reappointment will be required to write a letter to the GM.</p> <p>EV – Questioning on behalf of SS what is the basis for reappointment? TW advised the Charter can be adjusted to be more transparent and state that the member at the end of their term can write a letter to the GM requesting a further two years. Members will be then undergo an interview process with other interested parties.</p> <p>KH requested clarity as to when does the three year term commence? TW happy to extend the tenure of consumers who have been on the committee for more than three years. However TW would arrange a meeting with individual members to work through the reappointment process to ensure there is not a number of members exiting the committee at once, depending on the agenda.</p> <p>EV Where does the member abide by the POWH Code of Conduct in the Charter?</p> <p>HW referred query to the section in the Charter.</p> <p>GC - Called to ratify charter.</p> <p>Charter ratified at this committee meeting.</p>	Keep on agenda	NM Nursing	Review October meeting
4.6	REACH UPDATE	<p>HW advised committee that the facility recognised that there is further opportunity to increase the education/information to patients and their families on the principles of REACH. This was being progressed at the QCPC and then rolled out across the facility.</p> <p>Nominations requested recently to join the DCCC. Harris Mihailidis was appointed to the committee.</p>			
4.7	DCCC Membership			CHAIR	

5. Standing Items

Issue	Discussion	Action Required	Who	Due
<p>5.1 POWH/SSEH update by hospital Executive</p>	<p>Prince of Wales Hospital:</p> <ul style="list-style-type: none"> • TW – Accreditation covered both hospitals including other facilities in the Northern sectors. Positive feedback received about our Consumer engagement, impressed with the work and redevelopment. • Both hospitals passed accreditation with a few opportunities for improvement – REACH being one to improve. The other improvement requested was around Pressure Injury management, how we monitor and review our data. Accreditors advised positive feedback and experience at both locations, appreciate the culture of both hospitals. Draft Report only received • BS asked if there were any gaps in Standard 2. TW advised positive feedback received and impressed with the work being conducted. • Redevelopment hospital now has control of the whole site, demolition has commenced, work officially commencing in the New Year. The new Emergency has been commissioned and tested. TW suggested project rooms nearing completion, good opportunity for members to visit. <p>Sydney/Sydney Eye Hospital:</p> <ul style="list-style-type: none"> • JW advises they will commence working on the recommendations from accreditation shortly. • Currently looking forward to Foundation Day Celebrations. Celebrating staff achievements. Focus this year is Patient Safety. 			
<p>5.2 Community Advisory Committee members questions</p>	<ul style="list-style-type: none"> • HM - Lift in High St, TW advised funds have been received, tender is out awaiting response to commence repairs. • HM commented on the location of the Barker St, Tech desk. Information desk hidden and not visible to visitors. TW advised it is a pop up trial desk at the moment, so staff can speak to someone face to face to improve services. • KH would like clarification on payment for the CAC training held in September. SB advised the policy outlines that there is no payment for the training conducted. Members to review policy. 			

5.3	Updates from Committee Membership	<ul style="list-style-type: none"> • BS – Advised the Consumer Forum, to be held on the 12&13 November. February 2019 Patient Symposium forum for members to attend. Ben to send information. • KS – DCCC found it interesting in particular programs from District re: End of Life Plan and Junior Doctors improving Procedurals. DCCC interested in accreditation, standard 2 & 5 in particular. Strongly looking at measurement of the effectiveness of CAC Committees and consumer participation. DCCC would like to be completely transparent and will post all information – minutes online. • SB to send list of committee member’s attendance list for other committees. • KT – Infectious Prevention Committee- no outbreaks / Standard Three Governance System, process for review and ratification, mostly updated will be available shortly. 9 Needle stick injuries reported – on track. • JT – Integrated Care Steering Committee, data being reviewed to see number of follow ups after procedures within two weeks. Looking at predictors for frequent ED visitation. St George have a new diabetes record system hoping to treat initial diagnosis, good responses. • HM – Several incidents regarding certain medication issue being transition from slow to fast release, update E-MEDS to create an alert. • Review conducting patients using their own medication whilst in hospital, looking at methods to prevent this from happening. • SN – Patient Safety Improvement Committees, issue raised between paper reports and online reports. • Presentation from the Transfusion committee on how they manage patient with critical issues including wrong infusions. • GC – Food Committee, no quorum reached. Reconstitute the meeting. GC to advise in future 			
5.4	Consumer Engagement for Redevelopment working party	<ul style="list-style-type: none"> • N/A 			

6. General Business

Issue	Discussion	Action Required	Who	Due
6.1	Draft – Position Description	Discuss at next meeting		

6.2	Action Planning 2019	Discuss at next meeting			
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7. New Business without notice


Issue		Discussion		Action Required	Who	Due
7.1	NIL					

The next meeting will be held on Wednesday 28 November 2018 at POWH

There being no further business the meeting closed at 6.00pm

Accepted as a true record:

Signature Chair



Chair:

Peter Rice

CONSTRUCTION Date:

27/02/19

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	COMMITTEE/MEETING TITLE	CHAIR OF MEETING	
DATE/TIME OF MEETING		LOCATION	
<p>KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS</p>	<p>SUSAN NICHOLS/SON POUR Patient Safety and Improvement</p> <p>27. 08.18 1300 - 1500hrs</p> <p>0 Presentation - Jacqueline Stephenson - Pour Diversity Program Mencari. Web site. Services can have a home page which is forward on template then check presentation is in plain English before placement on website. Barrier rule to manage this website is in process</p> <p>2) Presentation - Lybri Health Records: Present a large risk to patient safety. Not only paper and electronic but between electronic ERRE. Digitalization of paper forms not quite halfway & needing the prototype of forms 3) Antimicrobial Stewardship presentation Jacqueline Mann (pharmacist) and Dr Purnendu Financial report - major cost saving in anti fungal due to generic brand change and formula commission. Current projects vancomycin audit. Surgeon prophylaxis improvement in partnership with CEC.</p>	<p>Pauline Ruma</p> <p>EUH</p>	

DATE: 29th August 2018

SIGNATURE: *[Signature]*

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	Susan Nicholson		
COMMITTEE/MEETING TITLE	Patient Safety and Improve my care: HEE		
DATE/TIME OF MEETING	08.10.18 13:00-14:30 HRS	CHAIR OF MEETING	Martin Mackertich
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>1) Presentation: Mary Mulohy: The Patient Voice. The various ways of collecting patient stories</p> <p>2) Patient Opinion: Implementation plan. Examples.</p> <p>3) Trans fusion committee. Responsible for all pouch facilities</p> <p>Purchase of ROTEM machine to monitor blood loss when patient has severe bleeding, has learned the need for blood replacement. 3 satellite fridges for storage of red blood cells. Temperature gauges monitoring of fridge fridges is back to base. All instances of wrong blood in tube followed up. New system to trace all sources of donations being implemented</p> <p>All recommendations need to be reported when implemented over kept up to date</p>		

DATE: 09.10.18

SIGNATURE: *J Nicholson*

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	SUSAN MICHAELSON		
COMMITTEE/MEETING TITLE	Nursing Quality and Clinical Practice		
DATE/TIME OF MEETING	21-09-18: 2.30 - 3.30 pm	LOCATION	Yonne Steadward EUA
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>1) Presentation - Christine Cooper. Re reviewing Nursing care plan working party is planning to incorporate this form into ePR to avoid duplication of information. Committee members to contact S. Barrett if any other information should be included in ePR.</p> <p>2) Reach programme - 9 calls since implementation. More patient awareness of reach needed. To be discussed at Grand rounds 3/10 REACH will be added to PACE Education day</p> <p>3) Business Rules. 84% currently up to date. 10% being reviewed</p>		

DATE: 20.09.18

SIGNATURE: *S. Michaelson*

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	Susan Nicholson		
COMMITTEE/MEETING TITLE	Communicating for Patient Safety		
DATE/TIME OF MEETING	02.10.18; 11.30 - 12.30	CHAIR OF MEETING	Louise Short
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>1) Analysis of recent incidents. Several incidents regarding handover incidents between wards and ED to wards. Need for wards to ensure handover to patient discharge more complex.</p> <p>2) Presentation Jackie Stephenson (Manager Diversity Health) Need to increase interpreter involvement in obtaining consent as at present interpreter involved only 38% of times where identified interpreters needed for formal consent. The number of 2 way phone needs to be increased. Discussion of phone interpreters and sensitive information. Although face to face interpreters are the preferred option often difficult to arrange.</p> <p>3) Internal Hospital Transfer Business Role discussed. Carolyn Elliman from law to work on BR for transfer to procedural areas</p>		

DATE: 03 - 10 - 18

SIGNATURE: 

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	TANYA KANT		
COMMITTEE/MEETING TITLE	SESLHD Pw GENERAL REHAB	CHAIR OF MEETING	DR. G. BOUQUIN
DATE/TIME OF MEETING	12. 9. 2018 3PM	LOCATION	SPINA REHAB
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>1 Accreditation went well</p> <p>2 Some awareness work; Positive feedback particularly patient journey</p> <p>3 NDIS ongoing discussion regarding role e.g. who should update patient journey board</p> <p><u>Standing Agenda Items</u></p> <p>3 falls</p> <p>1 blood not labelled</p> <p>1 skin tear</p> <p>1 missed medication</p> <p><u>Compliments</u> from some families regarding phone awareness were successful</p> <p>Equip Nation Standard progress; Successful</p> <p>Mortality & Mortality Reports; Nil</p>		

DATE: 21. 9. 2018

SIGNATURE: *Tanya Kant*

**MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE**

Please submit to CAC secretariat for submission with minutes

NAME	TANYA KAWI		
COMMITTEE/MEETING TITLE	INFECTION PREVENTION AND CONTROL COMMITTEE	CHAIR OF MEETING DR. MULMAN	
DATE/TIME OF MEETING	14. 9. 2018 10.30 AM	LOCATION EDU A	
KEY POINTS and TEMS FOR DISCUSSION WITH CAC MEMBERS	<p><u>STANDARD 3 GOVERNANCE SYSTEM:</u> <u>Policies for review and notification most updated and will be available in a hand book format</u> <u>No post surgical infections</u> <u>Management of Patients with Infections/Colonization</u> <u>No out breaks / NO exposures</u> <u>Operating Suite - management of scope project very successful moved paediatrics to CSSD - 4 year project</u> <u>No more processing machine in theatres -</u> <u>This at long last off the Risk Register</u> <u>Hand hygiene</u> <u>ORS? and hand hygiene</u> <u>Medical students also an assignment on this</u> <u>Junior med staff - at orientation</u> <u>SNR med staff - is there any training for them - are there standards to follow?</u> <u>Needle stick injuries - Total 9 - pretty much on track</u></p>		

DATE: 17. 9. 2018

SIGNATURE: *Tanya Kawi*

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	Andros Eleftheriou		
COMMITTEE/MEETING TITLE	Wayfinding committee		
DATE/TIME OF MEETING		CHAIR OF MEETING	Owen Wilson
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	To make Neurosciences un if more easy to to find patients have been directed to neuro psychology on first floor checking that electronic kiosk times shown to get to locations on campus are accurate. We walked to center on barst and neuro psychology on first floor to see if they are accurate.		

DATE: 24-10-2018

SIGNATURE: Andros Eleftheriou

SESHLI

INTEGRATED CARE STEERING COMMITTEE

18/10/18

11:00 - 12:30

CHAIR: GREG STEWART

PRESENTATIONS - PRIMARY & COMMUNITY HEALTH COHORT
CES - PCHC

45 & UP COHORT DATA & MEDICARE DATE
LOOKING AT OUTCOMES AFTER HOSPITALISATION
IMPACT OF 2WCCIL FOLLOW UP BY GP/
SPECIALIST AFTER DISCHARGE & READMISSIONS

6000 OF COHORT > 75yrs RESEARCH TO FIND
PREDICTORS OF FREQUENT ED PRESENTATIONS
PROJECTS NEED TO BE REFINED & BETTER
TARGETED

PATIENTS CAN ACCESS UP TO 5
ALLIED HEALTH SESSIONS - SO 2X PHYSIO
& 3 PODIATRY (LIMITED & CONFUSING)

RADIUS (SOUTHERLAND)

RAPID ASSESSMENT DIAGNOSIS & INTERVENTION UNIT

COMMUNITY UNIT FOR COMPLEX PATIENTS
WHO ARE NOT CRITICALLY UNWELL

ONE SPECIALTY NOMINATED EACH DAY
TO ACCEPT NON-SPECIFIC OR GENERAL MED.
PATIENTS

OUTPATIENTS AREA ENSURES CONTINUED CARE
REFERRALS FROM G.Ps, ED & SOUTHCOAST OUTREACH

ISSUES

CURRENTLY STEAL PATIENTS FROM ED
AFTER TRIAGE - ACTIVITY NOT RECORDED
NO PAYMENT SO NOT FINANCIALLY VIABLE
NEEDS BUSINESS PLAN.

UNSW

COMPUTER SCIENTIST TO ENGINEER
SYSTEM TO INTERPRET HEALTH DATA.

ST GEORGE - NEW DIABETES PROJECT

DATA GOES TO WHITEBOARD ALL DIABETICS
RED FLAG SO COLLED EARLY &
UNIT ENSURES CORRECT TREATMENT
STILL IN INFANCY - HAUNT REFINED
COHORT - CURRENTLY GOING WELL

* HEALTH PATHWAYS "LIVE" FROM 4/9 -
60 PATHWAYS AVAILABLE
MIGHT BE ALLOWED TO LOOK AT IT
IN DECEMBER-

Salil W
20-10-18

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	HARRIS MIHAILIDIS		
COMMITTEE/MEETING TITLE	Medication Safety Sub Committee	CHAIR OF MEETING	Dr Catherine McVeigh
DATE/TIME OF MEETING	8 th November 2018	LOCATION	Parkes 7 West Meeting Room
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<ul style="list-style-type: none"> • Prescriber order view is unclear if setup by user and not ICT Trainer 2 incidents in IIMS Reporting for this month where there was a mixup in current / home medications. An issue during current Wollongong rollout and referred to ICT for notifying all eMeds users. • Institution of Safe Medication Practises (ISMP) target safety best practises POWH Reviewed and identified Promethazine injection (antihistamine) high risk due to inadvertent intrarterial. Kept on majority of wards being reviewed with NUMs for removal if used for allergy only. • Back to base monitoring for pharmaceutical refrigerators. Tool trialled by POWH and Sutherland. • Review of Return to Patient Own Medication Working Group to be formed. • Education package being develop for nursing staff for medication admission/reconciliation. • Hydromorphone Safe Use Heti module to be highlighted for all JMOs and pharmacists. • Some Incidents reviewed: Oxycodone administered to wrong patient, required naloxone reversal. Currently being investigated. • Oxycontin 10mg cut in have for 5mg dose. Nolonger dispensing 5mg and eMeds to be reviewed on prevent prescribing in eMeds. 		

- Dosing error of MsContin 100mg instead of 10mg. Incident being reviewed,
- Temzolomide given without 2nd check , currently being investigated by eMeds ICT administration.
- Accreditation feedback – formal report not received, Informal Report Standard 4 received a pass, with comment identifying risks need ongoing improvement to meet required standard.
Minor changes required to include year in the date for followup.

DATE:

20/11/18

SIGNATURE:

