



**Meeting:** POWH/SSEH Community Advisory Committee  
**Date:** Wednesday 28 August 2019

**Chair:** Mr George Constantin  
**Minutes:** Belinda Rabet (NM Nursing)

**Committee Facilitated Session – Nurse Educator Mary Mulcahy  
Ways of working/shaping the Community Advisory Committee**

Mary Mulcahy facilitated a strengths exercise for the members of the committee identifying key strengths of self and the Committee. A What Matters to Me? exercise was facilitated to explore the role of the committee and the behaviours members advocate for the committee. A repeat strengths exercise is planned for the November meeting to look at the strengths of each other.

**1. Attendance/Apologies**

NAME	AREA	status	NAME	AREA	status
Jennie Barry	GM	Apology	Tanya Kant	Consumer	Present
Karen Tugiri	DON POWH	Present	Susan Nicholson	consumer	Apology
Barbara Daly	A/DON SSEH	Apology	Ben Steele	Consumer	Not present
Sheamol Barrett	A/NM POWH	Apology	Ericka Van Aalst	Consumer	Present
George Constantin	Consumer/Chair	Present	Jan Titterton	Consumer	Present
Nava Turner	Consumer	Present	Andros Eleftheriou	Consumer	Not present
Kathleen Sutherland	Consumer	Apology	Sue Suchy	Consumer	Present
Ajay Varshney	Consumer	Present	Harris Mihailidis	Co-Chair	Present
Keren Hong	Consumer	Present	Louise Dunne	NM SSEH	present
Ildiko Greener	EA to DON	Apology	Carolyn Smith	NM SSEH	Apology

**2. Minutes**

2.1	Confirmation of minutes	The minutes from the July 2019 were confirmed as a true and accurate record by Ajay Varshney and Jan Titterton.
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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	Charter – review in November	Members reminded that the POWH/SSEH CAC charter is due for review in November 2019 – this has been circulated for information.	Noting only	KT	November meeting
4.2	Committee reporting process	Members confirmed that they are satisfied with updated template to use to record feedback from meetings they are members of.	Noting only	All members	
4.3	Update for seating area Barker Street	Members advised that the GM is looking for a funding source to replace the seating area at Barker Street – this amounts to approximately \$30,000 – JB/KT will provide feedback when available	Noting only	KT	
4.4	Update potholes – Hospital Road	Feedback provided from Health Infrastructure – Resurfacing of Hospital Road and High Street entrance is scheduled for the coming weeks as part of Redevelopment works.	Noting only	KT	

Issue	Discussion	Action Required	Who	Due	
5.1	POWH/SSEH update by hospital Executive – GM Vision	<p><b>Prince of Wales Hospital:</b> KT provided an update:</p> <ul style="list-style-type: none"> <li>The Redevelopment is undergoing significant moves forward after 3 years of planning – Land Lease have now been awarded with the contract for the build.</li> <li>A video of the build process planned over the next 2 years has been developed by Health Infrastructure (4 minutes) consumers would like an opportunity to view – which was supported.</li> <li>User groups for all specialties moving to the Acute Services Building are now being re-established to focus on the Models of Care and detailed design.</li> <li>The Redevelopment team are looking at the footprint of the whole campus moving forward and the workforce requirements.</li> <li>Reviews of the Healthshare relationships including linen, food and transport will be undertaken along with campus wide services such as Security</li> <li>In relation to the budget for POWH JB is awaiting the new budget letter due the end of August – significant business and efficiency plans have been submitted to the Local Health District.</li> <li>Hand hygiene has been identified as a risk area with a whole of hospital approach designed to improve rates. Current rate is sitting at 70% which is the lowest in 2 years. POWH are looking at compliance with the 5 moments by all disciplines –</li> </ul>	<p>Add to agenda for next meeting</p>	BR	September meeting

		<ul style="list-style-type: none"> <li>• Roving walk rounds within multi-disciplinary units are planned over a 4 day period in September – the DON will be dressed as a hand and will assess the effects of hand hygiene using a UV light to scan hands. An audit of infection rates/HH audit display areas and soap dispensers will be carried out during these roving walk rounds. Results from these audits will be presented at the next meeting.</li> <li>• KT asked for consumer advice on and how to raise the importance of hand hygiene and in particular focus on enabling patients to ask Have you washed your hands? With clinicians.- KT advised that student results were also very low therefore links to key universities have been made in relation to this.- the following suggestions were made by the consumers: <ul style="list-style-type: none"> <li>- JT suggested more appropriate signage and soap dispensers throughout public areas and that HH should be displayed at entrances on screens</li> <li>- HM suggested that the soap dispensers need to be filled regularly in public areas as well as on the wards</li> <li>- KH stated that the patient may not see the staff member wash their hands</li> <li>- AV stated that other hospitals are utilising consumers to audit HH on wards</li> <li>- EVA suggested that the layout of bathrooms should be looked at to make HH easier – KH suggested the redevelopment team should be advised of this.</li> </ul> </li> </ul> <p>SSEH no update</p>	<p>Presentation of audit results from roving units</p> <p>Suggestions to be taken to Weekly HH Working group meeting</p>	<p>KT</p> <p>KT</p>	<p>September meeting</p>
<p>5.2</p>	<p>POWH/SSEH update by Committee Members</p>	<p>AV provided feedback:  Infection Control Committee</p> <ul style="list-style-type: none"> <li>- HH a priority as discussed by KT low HH rates</li> </ul> <p>Redevelopment – Transport</p> <ul style="list-style-type: none"> <li>- Looking for an 8% reduction in car usage – looking at car park utilisation</li> </ul> <p>Wayfinding</p> <ul style="list-style-type: none"> <li>- Slow progress as unable to confirm bus routes for signage</li> <li>- New signage for lifts has been completed with different colours signifying each level.</li> </ul> <p>Pressure Injury and Prevention</p> <ul style="list-style-type: none"> <li>- 80% increase in reporting of pressure injuries:</li> </ul> <p>*KT stated that pressure injury prevention sits with nursing and work has commenced to address the prevalence of pressure injuries at POWH.</p>			

	<p>KT is working with Professor Lin Perry using a 6 pronged approach to improve pressure injury prevention and management. Pressure injury specialist form CEC has been invited to come to POWH and review current practices.</p> <p>Skin assessments should be carried out within 24 hours of admission for all patients however wards are ranging from 63%-95% compliance – this will be looked at as part of the 6 pronged approach. Turning of patients and use of pressure relieving equipment will also be reviewed.</p> <p>HM provided feedback:</p> <ul style="list-style-type: none"> <li>- HM asked AV about parking for disabled/less ambulant patients as part of Redevelopment – in particular around the length of link ways – some patients will not be able to move that far. AV will raise again.</li> <li>- HM asked about prototype room – are the consumers able to visit this room at the next meeting – KT advised that this could be arranged for the beginning of the next meeting</li> </ul> <p>Albion street</p> <ul style="list-style-type: none"> <li>- Discussion around what service directory items required for consumers – tight timeline for completion before Christmas 2019</li> </ul> <p>DCCC</p> <ul style="list-style-type: none"> <li>- New charter of rights is available for consumers presented by Health Consumers NSW</li> </ul> <p>Disability Inclusion Action Plan (DIAP) Implementation Committee</p> <ul style="list-style-type: none"> <li>- The DIAP has been developed adapted from the NSW health document.</li> </ul> <p>Medication Safety sub committee</p> <ul style="list-style-type: none"> <li>- Prescriber medication view EMEDS incidents reportedly high with education planned for JMOs – difficult to get senior doctors to complete</li> <li>- Discussion held around the 'green bag/red bag' initiative for own medication – moving into redevelopment the hospital need to look at appropriate medication trolleys to store 'own medications – KT advised that this is being explored by Nursing services.</li> </ul> <p>GC provided feedback: Food and Nutrition</p> <ul style="list-style-type: none"> <li>- Mandatory nutrition screening training is planned for all staff at POWH</li> <li>- My Food Choice program is being implemented at POWH with</li> </ul>	<p>To raise at Redevelopment meeting and feedback</p> <p>To arranged visit to prototype room</p> <p>Circulate</p> <p>Circulate</p>	<p>AV</p> <p>BR</p> <p>HM/BR</p> <p>HM/BR</p>	<p>September meeting</p> <p>September meeting</p> <p>Prior to next meeting</p>
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- a view to renovating the kitchen and looking at improved methods of managing dietary requirements for patients.
- Hospital Acquired malnutrition rates will be tabled at the next meeting
  - GC confirmed that the red/blue mats are still being used to identify patients requiring assistance at mealtimes.

JT provided feedback:

Integrated Care Subcommittee

- HealthENet and MyHealth Record are reporting that hospitals are utilising mainly for medication records – new portals will soon be available for discharge summaries, tests and specialist letters
- A focus on shared care – National digital health record for children has been commenced
- Handover of care projects are at 'proof of concept' phase at a number of hospitals
- A mechanical translator is under development

HM asked about the hearing impaired – JT stated that she would raise at next committee.

SS queried the number of committees available for consumer representation. KT confirmed the EA for the General Manager has been tasked to review current committees with a view for JB to look at resetting and reviewing members of each committee.

SS provided feedback:

Redevelopment:

- Community pop-ups are planned for the local community – these will be held at the Randwick Library in the coming days.

TK provided feedback:

General Rehab Clinical Quality Committee

- Decrease in falls - Four falls reported in July (SAC 3)
- Nursing staff looking at collaborative huddles
- Discussion around CNC position not being replaced – this has been escalated to the Nursing Co-Director

Falls Committee

- Falls audit completed awaiting results – when completing audit TK noted that patients appeared to be more aware of falls prevention

## 6. General Business

Issue	Discussion	Action Required	Who	Due
6.1	<p>Action plan – feedback on priorities to focus on</p> <p>GC asked that members review the action plan and come to next meeting with suggestions for priority areas for 2020. Members would also like suggestions from KT and JB. Members have requested that the latter part of the September meeting is used to work on the action plan – a facilitator was requested</p>	Facilitated session action planning to be arranged	BR/KT	September meeting

## 7. New Business without notice

Issue	Discussion	Action Required	Who	Due
7.1	<p>Standard 2</p> <p>An update was sought by the members on Standard 2 – BR advised that the gap analysis has been completed and will be presented to the Quality and Safety Committee and then to the Consumers</p>	Gap analysis presentation	C Conn	October meeting
7.2	<p>Lithium letters</p> <p>JT stated that community members had received letters inviting them to participate in research studies from the universities based on the fact that they were prescribed lithium. JT suggested that this may have been a breach of confidentiality – BR advised that should be raised with the relevant research study leads.</p>	Noting only		
7.3	<p>Superintendent cottage</p> <p>Members asked for an update on the redevelopment plan for this cottage</p>	Updated at next meeting	JB	September meeting

There being no further business the meeting closed at 5.50 pm

Accepted as a true record:



Chair: GEORGE CONSTANTRATE

23/10/19

Signature Chair