SESLHD Consumer and Community Council (DCCC) Informal Meeting



MINUTES 14 May 2020 – 11:30am – 1:30pm

Teleconference				
Part A	Item 1	MEETING OPENING – 11:34am		
	1.1	 Acknowledgement of Country Acknowledgement of Country was given by GC. 		
		A Antiowicagement of Country was given by CO.		
	1.2	Apologies:		
		 CT, HIV Outreach Team Consumer CW, Eastern Suburbs Mental Health Consumer 		
		 JS, The Albion Centre Consumer 		
		 KB, Consumer/Community Representative 		
		SM, Sutherland Hospital Consumer		
		Present:		
	4.0	CF, War Memorial Hospital Consumer		
	1.3	DM, Consumer/Community Representative		
		DN, HIV Outreach Team Consumer		
		 EP, St George/Sutherland Mental Health Consumer 		
		FP, Kirketon Road Consumer		
		GL, St George Hospital Consumer		
		HM, Prince of Wales/Sydney Eye Hospital Consumer		
		JR, Consumer/Community Representative		
		 JW, The Royal Hospital for Women Consumer KS, Drug and Alcohol Consumer 		
		 KS, Drug and Alconol Consumer MM, Consumer/Community Representative 		
		 MR, Eastern Suburbs Mental Health Consumer 		
		 PL, Sutherland Hospital Consumer 		
		 PN, Patient Reported Measures Program Manager 		
		SR, The Royal Women Hospital Consumer		
		Guests		
		CB, Community Partnerships Officer		
		KO, Dietetic Student, University of Wollongong		
		MDM, Dietetic Student, University of Wollongong		
		Chair:		
		GC, Prince of Wales/Sydney Eye Hospitals Consumer		
		Minutes:		
		SB, Engagement and Support Officer, CPU		
	Item 2	Approval of Minutes		
		Minutes of the DCCC Formal Meeting held 7 April 2020 and Extraordinary Food		
		Security meeting held 8 April 2020 were approved, as moved by GL and seconded by SR.		
	Item 3	Declaration of Conflict of Interest: Nil		
Part B	Standing			

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	Item 4	Albion Presentation - JS		
		Held over		
Part C	New Busi	iness		
	Item 5	 DCCC Annual Plan and COVID-19 - AJ The DCCC Annual Plan, which was initially created following a detailed planning and brainstorming phase, was updated at the end of 2019. However, due to the current COVID-19 pandemic, the work of the Council has been impacted and the Annual Plan should be updated to reflect that. The following comments were noted: Environmental sustainability remains under-developed but the Council has a long term commitment to making an impact in this area Dr Kate Charlesworth, SESLHD Environmental Sustainability Lead, is also a public health physician and has been assisting with the COVID-19 response but has returned part time to business as usual JW suggested adding a new objective in the plan to reflect the support done on COVID-19 for the District CF proposed keeping the Annual Plan as it is but colour code it for COVID-19 work JR agreed that the current format incorporates COVID-19 activities into the plan in a clear way AJ reasoned that, based on the discussion, the current priorities are still relevant and COVID-19 crollo lie within the existing objectives EP recommended creating objective 1.3, "Support for SESLHD response to COVID-19" for all COVID-related activities, and there was broad agreement on this addition JR suggested an update to the version control at the bottom of the document to reflect agreed upon changes, as well as promoted an expansion upon the Health Navigation objective AJ suggested that a collaboration on telehealth could possibly be added to the Health Navigation objective. ACTION 1 Update the version control within the Annual Plan and add objective 1.3, COVID-19 related activities. ACTION 3 Table the updated Annua		

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	Two dietetic students from the University of Wollongong are on placement with
	Community Partnerships Unit to support the food security response during
	COVID-19 and sought feedback from the DCCC on resources they could create.
	The following comments were noted:
	 CPU have already created and collaborated with the DCCC on two
	resources, one for staff on food availability/provisions and another to
	assist consumers with online shopping registration
	There are a number of other resources available such as; what foods
	to buy during quarantine, affordable and available foods, the
	importance of keeping healthy, and healthier meal options
	 Two external resources (one from UNICEF and one from Enliven)
	stood out with particularly positive attributes, including imagery, plain
	English and a non-judgmental and empathetic tone
	However, the resources are very wordy, and the subject matter is not
	very realistic or maybe useful for consumers
	 JW and CF agreed that the UNICEF resource is very wordy
	CF commented that bullet points and pictures are very helpful but that
	the content was very general
	• FP suggested that a useful resource would outline information around
	safely accessing food while homeless and places that allow people to
	prepare meals
	KS offered that the Drug and Alcohol service produced a document
	outlining the facilities available for washing, the services that are still
	 preparing food, and where food vans are operating SR suggested food security resources for asylum seekers, as well as
	 SK suggested tood security resources for asylum seekers, as well as victims of domestic violence
	 KS mentioned that OZ Harvest is doing hamper drives for asylum
	seekers and the police have identified domestic violence as an issue
	 KS and GC commented that there are a number of mental health
	resources currently available
	 CF queried whether a resource listing help lines for various vulnerable
	populations could be compiled and AJ mentioned that a SESLHD
	colleague is putting together a directory but no there is no one stop
	shop in terms of national contact lines due to the feasibly of that
	Randwick Council has a COVID-19 emergency relief support site and

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	 a number of Councils should have something similar – JW KO proposed that recipe cards with simple cooking techniques and ingredients could support the food security of at risk populations CF suggested a Jamie Oliver series on cooking during isolation could support the recipe card idea and GC recommended the Sydney Morning Herald and Channel 7 who are doing something similar In terms of ingredients, beans, mince, pasta, bread, and canned food were recommended as simple ingredients to include in a recipe card JW proposed a resource on how to choose healthier canned food options, including reduced salt soups HM suggested contacting the Renal Department at the hospital for their resources on reduced salt options FP proposed a resource supporting people with eating disorders in isolation and on a similar vein, DN suggested targeting those individuals who are comfort eating as a mechanism for dealing with COVID-related anxiety and who are also physically inactive Concerns were raised about the increase in scams and the perceived insecurity of online shopping with PayPal JW argued that older consumers are frightened of opening up something new and there is difficulty for them to understand that PayPal can be reliable and easy HM – a benefit to PayPal accounts is the insurance safety net, should it become compromised MDM suggested that, to reduce scam anxiety around PayPal, a resource outlining the benefits and security features could be developed A limitation to online grocery shopping is the assumption of online competency or use GC suggested that pre-paid debit cards could be an alternative option to suggest, while also outlining any additional charges JW – a resource listing the different payment alternatives that are compatible with online shopping could be useful 			
	recipe cards, healthier food alternatives/swaps, and payment methods for online			
	shopping/how to avoid scams.			
Item 7	TeleClinical Care COVID-19 app - AJ			
	An update on the TeleClinical Care COVID-19 app was provided (see agenda			
	papers), along with an additional note from SJM on how patients receive the			
	home equipment. To be involved in the program, the patient must have attended			
	one of the fever clinics and returned a positive result. The fever clinic staff will			
	then contact the patient, discuss the program and then arrange for the pulse			
	oximeter to be dropped off to the patient at home, at their door, with no contact.			

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	Item 8	Skype for Business Trial				
		The DCCC meetings are currently held using teleconference and it was				
		proposed to trial a video conferencing platform to enhance engagement.				
		The following comments were noted:				
		 Although Zoom has some issues with privacy, it was noted that many of those had been rectified 				
		JR has used Zoom extensively and had a positive experience				
		• AJ proposed that to trial videoconferencing, something casual and fun could be held, such as a trivia session				
		 JW discussed how Randwick Campus Committee use both Skype and Zoom with little difficulty 				
		It is possible to dial in like teleconference to a videoconference line				
		for members that do not have a laptop or camera				
		ACTION 5				
		SB to organise a trivia videoconference trial.				
	Item 9	Business without notice				
		 Executives have advised the DCCC to focus upon COVID-19 work instead of having a formal June meeting 				
		 Telehealth is the next big issue in the COVID-19 context 				
		Members agreed that informal meeting discussions were more useful				
		in the COVID-19 context				
Part D	Meeting C	Close 1:04pm				
	Item 10	Next Meeting				
		Date: TBC				
		Time: TBC				
		Venue: Teleconference or Skype				
		Type: Informal/Project meeting				

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Action Items from District Consumer and Community Council Meetings

Meeting Date	Item	Action	Who	Status
12 Dec 19	7	SB to follow-up with Media and Communications regarding a standing spot in The Pulse.	SB	Pending
	12	SB to develop a methodology paper, outlining the approach to the Innovative Projects Recognised by the DCCC event.	SB	Pending
7 Apr 20	5	Follow-up on how pharmacy outpatients safely receive their medication.	КО	Email sent 7/4/20 Jennie Barry to follow-up with HM and JW
	11	Follow-up with Alcohol and Other Drugs (AOD) meeting with the Ministry of Health to determine the wording for an AOD question for the Diversity Survey.	КВ	Pending
8 Apr 20	3	Contact Environmental Health Officers to see what practices are in place for delivering food in this pandemic.	AJ	SB contacted Directorate Population & Community Health for follow-up.
14 May 20	5	Update the version control within the Annual Plan and add objective 1.3, COVID-19 related activities.	SB	
		Follow-up telehealth as a Health Navigation priority.	SB	Complete. Added to the June agenda.
		Table the updated Annual Plan for approval at the next meeting.	DCCC	
	6	KO and MDM to send food security resources for DCCC to review and feedback upon.	KO & MDM	
	8	SB to organise a trivia videoconference trial.	SB	