



Health
South Eastern Sydney
Local Health District

TRIM: T18/xxxxxx

Meeting: POWH/SSEH Community Advisory Committee
Date: Wednesday 27 June 2018

Chair: Ms Verity Luckey
Minutes: Ms Ildiko Greener

Presentation: Margaret Holyday Nutrition Committee Update

Margaret Holyday conducted a presentation on Nutrition. Informing that poor nutrition is a problem in hospitals and due to this the impact is considerable. The NSW Health 'Nutrition Care' policy was updated in 2018. With responsibility lying with the districts and facilities to have a Food and Nutrition Committee with these representatives from Consumer, Clinical, Corporate. In SESLHD we have established District Food and Nutrition Committee, POWH & SSEH Food and Nutrition Committee. These committees provide Nutrition screening, assistance to eat, incident reviews, special projects.

1. Attendance/Apologies

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

2. Minutes

2.1 Confirmation of minutes	The minutes from 23 May 2018 were confirmed as a true and accurate record.
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3. Actions/ Plans arising from previous minutes

Issue	Discussion	Action Required	Who	Due
3.1 Mixed Gender Report (Monthly)	Quarterly update March – June, higher rate of mixed gender rooms due to Winter. No bed capacity due to flu season. For noting only: This will be taken into consideration with the new build.	Keep on agenda	NM Nursing	Sept meeting
3.2 Concessional Parking – Validation concerns	Committee members would like clarification around this ongoing issue regarding carpark tickets, validation and access in comparison to other LHD processes. Concerns were again raised about the detailed information required to validate concessional tickets. A formal response was requested by members to be received by the next meeting.	Keep on agenda	NM Nursing	Next meeting
3.3 Disabled toilets - NELUNE	Committee member Sue Suchy advised self closures have not been removed as advised. Requested this to be followed and to advise at next meeting.	Keep on agenda	NM Nursing	Next meeting
3.4 CAC Training HCNSW	Training has been confirmed for committee to attend 26 September. Members to register on line for attendance.	Keep on agenda	Members	Next meeting
3.5 POWHF Display at High St entrance	Concerns were raised with the POWHF about personal details mentioned on the new display unit at the High Street entrance. It was confirmed by the foundation that all personal information was addressed and approved by the persons mentioned prior to displaying. No further action required.	Remove from agenda		
3.6 Leatherette chairs at Barker Street torn	Maintenance advised they are following up the delay and will advise as soon as possible.	Keep on agenda		Next meeting
3.7 High Street lifts – update	Response was received by GM Tobi Wilson and advised 'funding for the lifts is being pursued through MOH. Hopping funding will come through no later than the end of September allowing commencement of repairs'.	Keep on agenda	NM Nursing	Sept meeting
3.8 Pharmacy seating and hours of outpatients operations	Seating at outpatient's pharmacy has now been increased to accommodate in total 10 extra chairs. Hours of operation were amended to fit in with hospital cashier for the	Remove from agenda		

		ease of patients paying their medication co-payment. The pharmacy needs to close at 4pm to accommodate inpatients orders and discharges. No further action required.			
3.9	POWH/SSEH draft charter for review and ratification	Charter still up for comment, due to limited responses received. Extension for extra time has been granted, any suggestions to be forwarded by email to Sheemol Barrett. <ul style="list-style-type: none"> Committee members raised concerns regarding the length of membership and requested that it should be longer period of time before they reapply as it takes a while to gain a good understanding of the committee's responsibilities. Members requested a business rule to be added advising mentorship to assist new members would be ideal with transition into the committee including other committee meetings. Committee members advised some haven't received responses for applications submitted to other committees of either being successful/unsuccessful. 	Draft to be reviewed and ratified at next meeting	DON/All members	Next meeting

4. Standing Items

Issue		Discussion	Action Required	Who	Due
4.1	POWH/SSEH update by hospital Executive	<p>Prince of Wales Hospital:</p> <ul style="list-style-type: none"> Accreditation preparedness currently in process for September 2018 Hospital is very busy for a number of factors ie: overall low surgery cancellations, flu season. Overall staff have been commended for a positive attitude dealing with a busy hospital. Approximately 80% of staff in high risk – Category A areas have been immunised, vaccinations continuing. Peoples Matters Survey conducted by NSW Government closes early July, low responses received to date. VL has been around the hospital to promote the survey and encourage staff to complete the survey. <p>Sydney/Sydney Eye Hospital:</p> <ul style="list-style-type: none"> SSEH also in the process preparing for accreditation in September. SSEH was nominated by the Patient Opinion for the 2018 Best 	Noting only		

		City Hospital award. SSEH received the award for the amount of stories received and the quick action taken by SSEH to respond back to the patients.			
4.2	Community Advisory Committee members questions	<ul style="list-style-type: none"> Erica Van Aalst would like confirmation to attend the Standard 2 Committee as no responses have been sent to acknowledge applications. Keren Hong queried the process in place for follow up review appointments for patients at SSEH. Jennie Barry advised the follow review appointment depends if it is necessary however if no contact is made by the hospital it is recommended to make a follow up call and ascertain if one is required. Sheemol Barrett reminded committee Fire Training is being conducted and to ensure it is completed. Harris Mihailidis advised of road repairs required for pot holes located towards the exit of the High Street patient drop off. The other being located along Hospital Road half way up towards the entry of carpark. Susan Nicholson enquired if all the homes along Botany Road have been acquired for the redevelopment. VL advised this is information is not available to the Redevelopment meetings. 	To be followed up and advise committee members	SB	Next meeting
4.3	Updates from Committee Membership	<p>SN – Patient Safety & Improvement Committee meeting.</p> <p>SN – Communication for Patient Safety meeting.</p> <p>SN – Quality Safety & Risk Management meeting</p> <p>SN – Quality and Clinical Practice committee meeting</p> <p>HM – Medication Safety Consumer Representative Committee</p> <p>TK – Falls Advisory Committee</p> <p>TK – General Rehabilitation</p> <p>JT – Integrated Steering Committee Care</p> <p>Feedback forms are attached to the minutes.</p>			
4.4	Consumer Engagement for Redevelopment working party	Ajay Varshney – Schematics signed now complete and signed off. Detailed design has commenced.			

5. General Business

Issue	Discussion	Action Required	Who	Due
5.1 Patient Real Time Experience Survey	To be discussed at next meeting	DON		Next meeting

The next meeting will be held on Wednesday 22 August 2018 at POWH

There being no further business the meeting closed at 5.30pm

Accepted as a true record: Leo Ross **Chair:** CONSTANTIN

Date: 25/7/2018

Signature Chair



Meeting Feedback Form
Consumer Advisory Committee

Name Tanya Kant
Committee meeting title Falls Advisory Committee
Date/time of Meeting 24 May 2018

Key points

Falls – 2018 are the lowest ever injuries in one month

How many preventable hard to say

No sack 2 this year so far

3 North 115 days without falls then 3 in March, 3 in April 1 in May
lowest rate ever !!!

Sydney Hospital has no falls alarms – asked for help to determine
what to purchase suggested to discuss with 1 West level 6 re
preferred alarms

Director of Nursing to send an email to all NOT TO USE THE RED
DOT SYSTEM

4 East and 9 West should have representation on this committee

The planned bathroom audit is to be dropped for now only

DISTRICT WIDE FALLS COMMITTEE

better value care at 3 North started off really well considering the
number of patients at risk of falls \

Out of 26 patients 20 are high risk

Recommended to do an equipment audit – check the commode
chairs – uneven shower surfaces is a problem with some commodes

**MEETING FEEDBACK FORM'
CONSUMER ADVISORY COMMITTEE**

NAME : TANYA KANT

COMMITTEE MEETING TITLE: SESLHD P1W GENERAL REHABILITATION

DATE/TIME of MEETING: 13/6/2018

KEY POINTS :

Incident reports March 2018 : 7 falls,2 pressure injuries,1 medication error, all SAC 3

Incident reports April 2018: 2 falls,1 pressure injury, all SAC 3

Rehabilitation staffing levels

P1W nursing staff ok

O/T, PHYSIO/ Speech therapy OK

Medical – New Intern started

EQUIP NATIONAL STANDARDS

Ongoing Accreditation planning for September 2018

SYSTEMATIC ISSUES DELAYING DISCHARGE'

Lack of nursing home beds

Acuity of patients increasing

Number of PACE calls,/Code blue for the past 6 months (A. Murray and J. Park to follow up trends)

Delays in NDIS despite recent improvements

RISK MANAGEMENT

Management of patient with TB –

Infectious patient was not identified early as findings were incidental – increased health risk concerns for staff and visitors

MORBIDITY AND MORTALITY : Nil

**MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE**

Please submit to CAC secretariat for submission with minutes

NAME	Susan Nicholson		
COMMITTEE/MEETING TITLE	Patient Safety Committee	CHAIR OF MEETING	Sally Buckley
DATE/TIME OF MEETING	04/06/18 13-14.30 hrs	LOCATION	EJL A + B
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<ul style="list-style-type: none"> • Discussion - Patient stories; collection resources, use of data collected. • Report on NSW ombudsman complaint handling workshop for Eventline staff. All respondents would recommend training • Presentation - Medication Safety Committee - Catherine Neveigh • Top notes: Medication storage. 540 + 58 Drug registers. • Patient allergies - recorded. • Noteed. Anaesthetics now providing services to Endoscopy Unit. • Presentation - Standards 2 - Partnering Partnering with consumers • Relinda Rabet 		

DATE: 04.06.18

SIGNATURE: *J Nicholson*

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	Susan Micholissen		CHAIR OF MEETING	Chris Conn
COMMITTEE/MEETING TITLE	Communicating for patient safety committee		LOCATION	EUA
DATE/TIME OF MEETING	05-06-18 12:30 - 1:30 pm			
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>* Nursing clinical handover audits: HS audit completed. Identified - some handovers being conducted in corridors not at bedside.</p> <ul style="list-style-type: none"> • Discussion of documentation of nursing handover. • Identified some patients and carers appeared to be giving positive answers in order to put staff in a good report. • Risk register. JM0 job list to be added to Risk Plan. • Discussed communication of medication information to GPs. <p>Noted no process for communication</p>			

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DATE:

09.06.18

SIGNATURE:

Janine Chubb

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	Susan Nicholson		
COMMITTEE/MEETING TITLE	SSEL Quality Safety and Risk workshop meeting		
DATE/TIME OF MEETING	LOCATION	CHAIR OF MEETING	07.06.18 ~ 1400 - 1600 hrs Wordal Theatre
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>• Safety and Improvement report, February - falls and medication incidents up → 2 East Patient Safety projects - 0 falls. 2 medication safety.</p> <p>• REDI program - information pamphlet being developed</p> <p>• Presentation. Kate Stewart, SSEL Business & Quality Plans</p> <p>• Presentation Kate Stewart, National Standards - Audit</p> <p>Schedule with breakdown of various audits of each</p> <p>Stun down.</p> <p>• Schedule for reader ship Walkarounds noted.</p> <p>• Progress report on Register of recommendation from leadership walkarounds noted.</p>		

DATE: 09.06.18

SIGNATURE: 

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	
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS			
06-06-18 -	Susan Nicholson Powdering Quality and Clinical Practice	Michaela Kelleher E U R	<p>* Noted co-ordinating Council review of Committees. This Council to proceed with projects. Current projects to continue ie. UV project review current Nursing practice with regard to bundle and bag use.</p> <p>* Noted. Communicating for Patient Safety Committee will have governance over JMO Job list.</p>

DATE: 09.06.18

SIGNATURE: *S. Nicholson*

INTEGRATED CARE 21/6/18
ACI ROLLOUT PREMS + PROMS.

PROMS - PATIENT REPORTED OUTCOMES
PREMS - PATIENT REPORTED EXPERIENCE

PROMS - FORM COMPLETED PRE GP CONSULT
- OVERVIEW PATIENTS GENERAL HEALTH
- INTO EMR

PREMS ANONYMOUS SURVEY

INCORPORATED INTO EMR ROLL OUT TO GPs
DEC 2019

ROADSHOW ON P/P WELL RECEIVED.
SMALL PILOT
40 TABLETS FREE TO CLINICS
TO UPTAKE P/P

QUESTIONS ON IMPLEMENTATION ~~(NOT CLEAR)~~
NEEDS MORE ADAPTIVE DATA CAPTURE -
NOT REAL TIME
EXECUTIVE LEADS - DR GREG STEWART?
BETTER NAME NEEDED FOR PROJECT

ACI TO CONTROL DATA - SLOW PROCESS
NO FEEDBACK TO PATIENTS - DATA TO BE
USED TO IMPROVE SERVICES GENERALLY

SOCIAL / ECONOMIC DATA NEEDS INCLUSION
SURVEY QUESTIONS NEED REFINING.

MUCH DISCUSSION EXCELLENCE SSE
SYSTEM
A GREAT DEAL OF RESISTANCE FROM
COMMITTEE "PEOPLE JUST USE SYSTEM TO
COMPLAIN". BUT CONSUMER SEES IT AS
VERY VALUABLE

FUNDING

CDMP & NWOW NO CHANGE

INNOVATOR FUND \$1 mill TO MIRANDA
WOUND CARE WITH BARIATRIC COMPONENT

PERSON CENTERED NEIGHBOURHOOD AUDIT
COMPLETED

* MEDICAL ADVISOR

DRUG & ALCOHOL & MENTAL HEALTH TO
JOIN IC Committee

* 45 OP PROJECT LINKS WITH 9 DATA SETS
1 PAGE REPORT TO CIRCULATE

* PHC TO MOUC TO MASCOT MID AUGUST

* SUGAR BABIES (GESTATIONAL DIABETES)
TO ROLL OUT IN DISTRICT

* INTERVENTIONAL CARE PROGRAM FOR
INDIGENOUS DIABETES NEED TO
START YOUNGER CURRENTLY 40yrs+
NOT CATCHING EARLY ENOUGH

OUTSIDE PROJECT

@ RADIUS

RAPID ASSESSMENT & DIAGNOSTIC UNIT

GENERAL MEDICAL UNIT & TEAM

① DAY ASSESSMENT (JOIN IF NECESSARY)
REFERRAL FROM E.D., GPs, COMMUNITY.

FACILITATE HOSPITAL AVOIDANCE

ECONOMIES IMPORTANT DIFFERENT PATHWAYS
AFFECT BUNDLE PAYMENTS.

NEED CASE MANAGERS - GP CLINICS?

LOTS OF "HEALTH COACHING" AFTER ASSESSMENT

② ST VINCENTS CARE COORDINATION FOR DEMENTIA

DEMENTIA CTC THINKS COMMUNITY INTERVENTION MOST VALUABLE

CONNECT AGED CARE STREAM

GP'S, DEMENTIA AUS.

AMBOS - FALLS FREQUENT.

POLICE

ALL TO HD. AT RISK - BOTANY BAY TRIAL

MAJOR WORKS INTEGRATED CARE Committee

① GP CLUSTERS

6 MONTHS BEFORE ANY REAL ACTION

6 PRACTICES INVOLVED

NO DEFINATE PLAN

CO DESIGN WITH MEDICAL NEIGHBOURHOOD COMMUNITY SERVICES FIND WAYS TO ENGAGE WITH WELLNESS HEALTH.

② HEALTH PATHWAYS

NEEDS AT LEAST 50 PATHS

NOTHING COMPLETE

MUST BE LIVE BY OCTOBER 2018

DOESNT LOOK GOOD

SHOULD HAVE = SERVICE DIRECTORY

• HERO SYSTEM LINK TO HEALTH DIRECT

• LINK GPs TO SPECIALISTS

• ACCESSED BY CONSUMER