

T19/60742



Health
South Eastern Sydney
Local Health District

TRIM: T18 /xxxxxxx

Meeting: POWH/SSEH Community Advisory Committee
Date: Wednesday 22 May 2019

Chair: Mr George Constantin
Minutes: RS/SB

Presentations : Jacqueline Stephenson - Diversity Health

Jacqueline Stephenson discussed the review of the 'Consumer Health Information and Education Business Rule. This also included the presentation and information presented on the Consumer Feedback Form. Consumers provided their input and agreed on the CHIER Logo.

1. Attendance/Apologies

NAME	AREA	status	NAME	AREA	status
Jennie Barry	A/GM	Present	Tanya Kant	Consumer	Present
Karen Tugiri	DON POWH	Present	Susan Nicholson	consumer	Present
Jenny Wilson	A/DON SSEH	Present	Ben Steele	Consumer	Apology
Sheamol Barrett	A/NM POWH	Present	Erica Van Aalst	Consumer	Present
George Constantin	Consumer/Chair	Present	Jan Titterton	Consumer	Present
Nava Turner	Consumer/Dep Chair	Present	Andros Eleftheriou	Consumer	Present
Kathleen Sutherland	Consumer	Apology	Sue Suchy	Consumer	Present
Ajay Varshney	Consumer	Present	Harris Mihalidis	Consumer	Present
Keren Hong	Consumer	Present			

2. Minutes

2.1	Confirmation of minutes	The minutes from March 2019 were confirmed as a true and accurate record by Ajay Varshney
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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	Recording of meeting	Minutes were requested to be recorded however one member of the committee disagreed. Minutes were hand written. DON discussed the draft business rule for recording a meeting is currently in draft mode to be finalised June 2019. DON advised the minutes will be action based with brief statements.	No further action		

Issue	Discussion	Action Required	Who	Due	
5.1	POWH/SSEH update by hospital Executive	<p>Prince of Wales Hospital:</p> <ul style="list-style-type: none"> Jennie Wilson relieving SSEH DON position as Jennie Barry A/General Manager POWH. A/General Manager Jennie Barry advises she is currently understanding the business at POWH, focusing on prioritising the redevelopment. A/GM advised preparations have commenced for winter to ensure targets are met. A/GM position currently advertised. <p>Sydney/Sydney Eye Hospital:</p> <ul style="list-style-type: none"> A/DON Jenny Wilson advised currently there are no updates to provide. 	Updated list of current committees and consumer representation to be tabled	SB	June Meeting
5.2	POWH/SSEH update by Committee Members	<ul style="list-style-type: none"> AV attended the Wayfinding committee meeting advised improvements have been made with the signage around the hospital – POWH. AV attended the Food & Nutrition meeting attended. Being the first meeting in a while the focus was to re-establish the meeting. AV attended the Pressure Injury meeting and advised there is a decrease in number of pressure injuries occurring in the hospital. SN attended the Patient Safety Committee, Presentation conducted by Prof Lin Perry on Pressure Injury Prevention Management. <p>Hand Hygiene audit compliance has been trending lower.</p>			

		<ul style="list-style-type: none"> • SN attended 'Communicating for Patient Safety' currently a few projects in process ie: Time out audit, Medical Handover. Presentation conducted by Scott Lamont on Code Black situations and interventions. • SN attended the SSEH Quality and Risk Management meeting, Discussions around Redesign of QSRM to meet the second edition of the National Standards requirements. • SN attend the POW Nursing Quality and Clinical Council, Current projects, Patient's Rights and responsibilities and information. • HM attended POWH Medication Safety Subcommittee, advised Modified National Inpatient Medication Chart Audit. • Safety Notice – 'Return of Patient own medications' received across the hospital. Review to be undertaken for patients own medication management across the hospital. • HM attend the DCCC April meeting, Patient Opinion discussed. • Climate Change was discussed how it affects the hospitals. • JB advised in response to Climate Change that hospitals are actively involved in waste recycling management in particular the recycling arrangement at SSEH. This is also looked at a District Level. • HM advised he is a member of the Disability Implementation action plan for the district. 			
5.3	Committee Action Plan 2019	<ul style="list-style-type: none"> • Chair to provide update at next month's meeting. 			

6. General Business

Issue	Discussion	Action Required	Who	Due
6.1 Feedback from Patient Experience Symposium	AV attended the Symposium, advised it was very informative. Discussions were had around Patient Experience, how patients were treated in Health care facilities. Takeaway message – 'How to be kind and treat people with respect'.			
6.2 Election of Chair and Co-Chair	Secret ballot undertaken resulting with George Constantin holding Chair position for 2019. Harris Mihalidis as Co-Chair.			
6.3 Discuss – Meeting Feedback form	The Meeting Feedback Form was discussed. Amendments to be made, agreed by committee members to be	Update to be made prior	SB / IG	June 19

	reviewed and finalised at the next meeting.	to next meeting		
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7. New Business without notice

Issue	Discussion	Action Required	Who	Due
7.1 Patient Flow Collaborative Meeting	DON KT advised the Consumers that the Patient Flow meeting does not exist anymore and has been replaced with the Patient Flow Collaborative meeting. The committee is currently identifying projects and will require consumer input once these projects have been established. DON advised the committee will provide an update to this committee at the next meeting.			
7.2 A/GM Recommendation	A/GM to meet with the Chair to discuss moving forward the purpose and structure of this meeting with an outcome to have an agreed way of working. A/GM offer to meet with JT and Chair to discuss Patient Flow Collaborative and consumer engagement			

- Further correspondence received after the meeting resulted in the recording of the meeting being deleted and minutes generated by personal notes taken by KT and JB.

The next meeting will be held on Wednesday, 26 June 2019

There being no further business the meeting closed at 5.30 pm

Accepted as a true record:

Signature Chair

Chair:  GEORGE CONSTANTIN

Date: 25/09/19

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	HARRIS MIHALIDIS		
COMMITTEE/MEETING TITLE	Medication Safety Sub Committee	CHAIR OF MEETING	Dr Catherine McVeigh
DATE/TIME OF MEETING	9 th May 2019	LOCATION	Parkes 7W Meeting Room
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<ul style="list-style-type: none"> • Modified NIMC (National Inpatient Medication Chart) Audit. Low percentage of PRN orders have maximum dose within 24 hrs documented. To be reviewed and eMR CAB updated accordingly. Discussion by MSSC confirmed categories to include alert to prompt maximum dose to opioids. Benzodiazepines, antipsychotics, paracetamol PRN orders. • Metronidazole 100ml bags. Medication safety alert by Central Coast DON. Errors involved using metronidazole bags instead of sodium chloride 0.9% bags due to similar appearance. • Safety Notice 008-18: Return of Patient Own Medications. Review Patient own medicines management across hospital and where to locate them. KT, POWH DON to be consulted on secured actions. 		

DATE: 9th May 2019

SIGNATURE:

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	HARRIS MIHALIDIS		
COMMITTEE/MEETING TITLE	Medication Safety Sub Committee	CHAIR OF MEETING	Dr Catherine McVeigh
DATE/TIME OF MEETING	11 th April 2019	LOCATION	Parkes 7W Meeting Room
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<ul style="list-style-type: none"> ▪ Concerns with transition of care with ICU/eRIC and eMR causing medication errors. Toescalated to Patient Safety Committee. Prescriber medication order view for medication history view vs active medication orders in EMR. ▪ eMR prescriber medication view on individual MO's has a risk of email communication not updated. This is a result of Coroner's report indicates visibility contributed to death. Review of process for tracking prescriber action and response to email. Held over to next month as person is absent. Discussed at RMO teaching sessions, and more beneficial to have the eMR System updated to do on login on eMR. More info to follow next month. ▪ Patient Safety Watch Alert. Keeping patients with medication allergies safe. Noted by MSSC and plans in 2019 to review IIMS data against coding data of adverse event rates. ▪ High Risk Medication Working Party Reports. Heparin/Anticoagulated report noted and of late several anticoagulant issues. Review of new HETI module with current anticoagulant education. ▪ Placeholders for IV infusions for high risk medications. Trial of placeholders currently being done by 3E/3S/CCU/3N. Looking at December 2019 QUM meeting for approval and further rollout of SESLHD. 		

DATE: 20th April 2019

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MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	SUSAN NICHOLSON	
COMMITTEE/MEETING TITLE	POUOH Patient Safety and Improvement	
DATE/TIME OF MEETING	29.04.19 2-3.30pm	CHAIR OF MEETING
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	LOCATION	Martin MacKerlich EUA
<p>1) Pressure Injury prevention and management, presentation, Kim Perry, Pressure Injuries are a hospital key word. Complications on average, lead to extra 4-3 days stay. All patients must undergo an initial risk assessment within 8 hours of admission. All risk assessments most be documented. Audits show lack of documentation of Pressure Injury although patient on air mattress, or no IMLI report - HoS of patients on inadequate mattresses.</p> <p>2) Hand Hygiene Audit: Compliance has been trending lower at POUH 1st Audit 60% lower. Compliance when gloves on.</p> <p>3) Culture of patient safety: concern raised above deficits in the culture of patient safety; Ms Karen Tiffin (DON) will oversee the embedding of comprehensive culture of patient safety plan</p> <p>4) Progress Report April 2019 to POUH 2017-2020 Quality Plan table 2</p> <p>5) Action Plan for Medical Devices, Australian Government, Department of Health, table 1</p>		

DATE: 01.05.19

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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	02-04-14; 11.30 - 12.30	CHAIR OF MEETING	Chris Conn
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>Time Out Auditing PROCOS, one a day being conducted and covers all specialities.</p> <p>2) Medical Handover needs to be expanded to cover all patient transfers out of ICU.</p> <p>3) JMO's: Need to include a JMO in; Transfer of Care project</p> <p>4) Discharge Communication Project.</p> <p>4) Business Rules; Review of clinical procedure Checklist</p> <p>proceeding to include Sedation procedure</p>	LOCATION	EU, A

DATE: 03.04.14

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**MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE**

Please submit to CAC secretariat for submission with minutes

NAME	Susan Nicholson Communicating for Patients		CHAIR OF MEETING	Chris Conn
DATE/TIME OF MEETING	07.05.19. 11.30 - 12.30 PM		LOCATION	EVA
KEY POINTS and ITEMS FOR DISCUSSION WITH CAC MEMBERS	<p>1) Presentation, Scott Kamont, Nurse Coordinator Mental Health Referral Team: Recognising deterioration in a person's mental state. Preventing self-harm and suicide. Ongoing state education to prevent Code Black situations and interventions in Code Black events.</p> <p>2) Afternoon Medical Handover: Discussion who should be included. If there are any program which would be automatically list patients who should be included.</p> <p>3) JMO Job List. Review notes still includes events which should have been PACED calls. Job list also requires time lines reassessment.</p> <p>4) Hottel RCA Recommendation that there is automate the notification to Infectious disease team for all positive Staphylococcus Aureus Bacteremia pathology results is in place.</p>			

DATE: 08.05.19

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**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 DISCUSSION WITH CAC MEMBERS	
04.04.14 2-3-30 PM	Russett Quality Safety and Risk Management	<p>04.04.14 2-3-30 PM</p> <p>1) Re Design QSRM committee: Discussion and edition of all standards require ment assessment particularly and as a result new two committees (SSRH Patient Safety and Improvement) SSRH Quality and Safety presentations (Multidisciplinary team presentations).</p> <p>2) Patient Safety quarterly report. What could be improved. Consideration for what time support; what work good quality of care doing. Action plan leadership work around medical devices. Action process to ensure correct documentation. Explanation of 4110s digital require ment details document.</p> <p>4) the panel that that apply to such as selection of the panel in commission on safety and quality in health care for the safety on the table</p>	

DATE: 04.04.14

SIGNATURE: J. Nicholson

MEETING FEEDBACK FORM
CONSUMER ADVISORY COMMITTEE

Please submit to CAC secretariat for submission with minutes

NAME	Susan Nicholson		
COMMITTEE/MEETING TITLE	Poor Nursing Quality, Clinical Practice Council	CHAIR OF MEETING	Michael Kelleher
DATE/TIME OF MEETING	28.04.16 2.30-3.30 PM	LOCATION	EVA
KEY POINTS and DISCUSSION WITH CAC MEMBERS	<p>Members provide updates of the various projects which they are involved in undertaking</p> <p>2) Patients rights and responsibilities Information booklet sent out brochures to persons to be admitted from out patients. To inform them on how information is communicated to patients and via Emergency or Doctors Room.</p>		