

# SSHC Consumer Advisory Committee Minutes

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**Date:** 4<sup>th</sup> of April 2022

**Time:** 6.00 - 8.00 pm

**Venue:** Online (Microsoft Teams meeting)

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Present: Thomas Munro, Jason, Parvesh, Packy, Joao, Andres, Antony

Apologies: Kelly O'Reilly, Gabriel Alnajes

**Guest members:** 

## 1. Acknowledgement of country

## 2. Minutes of last meeting

We will ask that somebody approves the previous minutes as being true and accurate.

Approver: Jason

## 3. Previous Actions

Due	Action	Who	Status
Ongoing	Website review	TM	In Progress
Next meeting	TM to include You said, we did design on social media and prezi	TM	Complete
Next meeting	CAC members to complete evaluation.	CAC	Complete

# 4. Agenda Items

## a) Introduction

We welcomed Andres as the new member and introduced ourselves.

# b) Updates

Painting complete

Highly positive feedback about the new colour scheme from those who have been in recently.

 Close the Gap day podcast and latest art exhibit – still seeking to recruit an Aboriginal or Torres Strait Islander CAC member

Shared some ideas for recruitment.



Action: TM to contact AMS and ACCHS to see if they can assist in CAC member recruitment.

• Website will be updated with picture of staff and consumers – any volunteers?

Most CAC members were interested in being a part of the photoshoot. Availability better in May after the Easter holidays.

Action: TM to organise photoshoot with available CAC members, staff and other interested people.

#### c) Evaluation findings

A copy of the evaluation of the CAC has been circulated with feedback from CAC members and SSHC management. All responses are anonymous.

- Did anything surprise you from the evaluation?
- Is there anything you agree or disagree with?

# **Recommendations for discussion:**

Attempt to maintain diversity of CAC membership in future recruitment efforts

Agreed important to have different perspectives.

- Attempt to recruit an Aboriginal or Torres Strait Islander representative
- Ensure quieter CAC members are able to contribute to discussions

Discussion about how to ensure all voices are heard – discussed the option to use the hand raise icon if a CAC member has something to contribute. Worked well during the session. Agreed that would be easier to facilitate group dynamic in person, though mixed views over if face to face was preferable.

Consider scheduling in the CAC dates for the year in advance

Agreed this was preferable.

- Call out to all staff for agenda items for the CAC
- Invite consumers to attend the next Planning Day and provide input

Funding has been acquired to have 4 CAC members attend for half a day each (2 in the morning, 2 in the afternoon.) CAC members would be interested in coming along to contribute. SSHC will contact CAC members closer of the date.

Action: TM to schedule in CAC dates for a Monday evening over the remainder of the year.

Action: TM to organise poll for whether meetings should be in person or online

# d) Telehealth Vs Videohealth

We are investigating the best way to help people access PrEP. Currently, if someone is asymptomatic and has a full screening completed at aTEST, they will then have to come to see a doctor at SSHC to get their PrEP prescription.



- Would this be better as a telehealth/video health appointment as the samples have been collected already?
- What are your thoughts on this generally? Have you tried videohealth? How does it compare to telehealth?
- Would you prefer videohealth to face to face appointments if it was an option?

The group agreed that Telehealth or videohelath saves time for routine appointments for people who are used to the process, while newer attendees may need to come in to the centre. Some people may need training or guidance on how to use it. One CAC member had a bad experience at another service where they had a poor connection and no option to see their results on the phone. Some people with language barriers preferred to come in (can speak to Birdie.) Suggestion that there could be some self assessment questions as a short survey before booking an appointment to decide if it could be a telehealth appointment.

## e) Dietitian

We will be having a dietitian from the Albion Centre come to SSHC every fortnight. There will be limited appointments mainly for people living with HIV, but also anybody else who may benefit.

- Have you ever seen a dietitian before? Do you think it's useful for the service?
- We may conduct a survey of people's eating habits to determine who may benefit any thoughts about this?
- How would you like to see this communicated?

Group agreed it was a good idea, though noted the limited availability. There was a suggestion that the dietitian could run group classes to see more people. It could be promoted through the waiting room, or short videos could be made for social media with some tips for healthy eating and key messages for PLHIV. One CAC member shared a story about her friend who had some dietitian support for anorexia, may be relevant to the sex working population in particular.

Action: TM to investigate if group classes are possible for the dietitian to run.

## f) Accessing HIV meds through community pharmacies

- Were you aware that people don't have to come here to the hospital pharmacy for HIV meds?
- How would you like to see this communicated (if necessary)?

The group was already aware of this. One CAC member was told by his doctor when printing off script. Others found out through friends or when they came in to a consult. Nobody was aware of the Positive Life NSW pharmacy locator resource, and they weren't very familiar with the organisation at all. All agreed community pharamcies were more convenient, though newer people or people with language barriers may prefer to come to the hospital until they are confident. The group suggested that it could be promoted through the waiting room, website banners, posters in the hospital pharmacy and through the pre-recorded message when people phone up.

Action: TM to investigate promotional strategies for letting people know that HIV meds are available through community pharmacies



#### g) Covid

We would like some feedback on how coming to SSHC felt during the covid outbreak and how you feel about the precautions ongoing into 2022.

- Did you feel safe entering SSHC?
- Have you had any difficulties accessing the service?
- Ways to improve on telehealth?
- Ideas for the future in a post-covid world?

Signing in was important over Covid, but now the group expressed Covid fatigue and being 'sick of signing in.' One CAC member mentioned it can be a bit rushed at reception because they are busy and it's an extra thing to do. Another expressed that most places don't require people to sign in, so they don't mind still having to do it at health facilities. It was raised that the process at SSHC (and health services generally) was different to the Services NSW sign in process and it was preferable that it be consistent with other places for ease of use. A story was shared that Western Sydney Sexual Health Centre was far more difficult over Covid as they required consumers to have a negative PCR test every time (even when asymptomatic.) RATs are too expensive to do each time before coming in. Some members expressed no longer being concerned about covid for themselves, but worried about passing in on to vulnerable people still. One member talked about how the forced behaviour change lockdowns have been difficult and while Covid was less of a concern, the effects on trusting others and socialising remain: "It's hard for extroverts." He has been seeing a counsellor which he has found useful, though suggested there needed to be a roadmap for helping people out of the lingering effects of the last 2 years. CAC members have been spending a lot more money online, being more sedantry. A CAC member suggested a dinner catch up for the group.

Action: TM to promote mental health support through social media and waiting room Action: TM to investigate organising a social dinner for CAC members

# h) Complaints feedback

When we receive a complaint we would like to be able to respond in a way that satisfactorily resolves the concern.

- Would a text message or short survey monkey follow up be beneficial to ensure the matter was adequately resolved?
- A phone call from a neutral person?
- Have you seen this done elsewhere? What worked and what didn't?

A CAC member suggested that SSHC should get few complaints as it was a great service. Suggestions that complaints be handled in a timely way, even if it can't be solved there and then let people know the process. Do not use a generic 'copy and paste' response, make it more personal so the person knows they are being heard (which may be all they need.) Question if we measure how long it takes to get back to people (unsure.)

Action: TM to review complaints SOP

#### 5. Workplace Health and Safety

None



# 6. Busness without notice

It was raised that it would be good to have cups in the waiting room. Unaware that cups are available from reception.

Action: TM to ask Birdie and Maggie to translate cup sign in language.

# 7. Next Meeting

To be scheduled in advance.

## **Actions**

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