

St George Hospital Consumer Advisory Group

Tuesday 23rd February 2021 @ 0900am
Boardroom Level 4 James Laws House



Health
South Eastern Sydney
Local Health District

Minutes

	Description
1	<p>Present</p> <ul style="list-style-type: none"> • Paul Darcy, General Manager SGH (DM) • Jan Denniss, Consumer Representative (JD) • Jonathan Devasagayam, Corporate Services representative (JoD) • Sandra Grove, Clinical Quality Manager (SG) • Paul Holdsworth, Consumer Representative (PH) • Adjiva Huseinspahic, Consumer Representative (AH) • Gregory Lill, Consumer Representative (GL) • Rod Lynch, Consumer Representative (Chair) (RL) • Lorena Matthews, Nurse Manager, Women's and Children's Health (LM) • Elizabeth Martin, Consumer Representative (EM) • Helen Scarr, Consumer Representative (HS) • Lauren Sturgess, A/Director of Nursing & Midwifery Services (LS) • Felicity Cox, NUM Emergency Department (FC) • Samantha Gifford, Aboriginal Hospital Liaison Officer (SGi) <p>Apologies</p> <ul style="list-style-type: none"> • Chunyu Niu, Consumer Representative • Susan Hanrahan, Consumer Representative • Michael Jordan, Consumer Representatives • Nick Skleparis, SGH Director, Corporate Services <p>In Attendance</p> <ul style="list-style-type: none"> • Susan Borg, On Behalf of SGH Community Relations Manager (Secretariat)
2	<p>Approval of Minutes</p> <p>2.1 Minutes dated 24th November 2020 were confirmed as a true and accurate record.</p>
3	<p>Items Arising from Action Plan</p> <ul style="list-style-type: none"> • Nil
4	<p>Declaration of Conflict of Interest</p> <ul style="list-style-type: none"> • Nil
5	<p>General Business</p> <p>5.1 Report from the Chair – Rod Lynch</p> <ul style="list-style-type: none"> • Since the last report 16 pages of patient information documentation have

	<p>been reviewed.</p> <ul style="list-style-type: none"> • Nancy Nui and Margaret Foreman have resigned from our committee due to work commitments and illness. • The schedule indicating dates for the 2021 CAG meetings have been circulated for member information. • Induction presentations tentative for next meeting. • The 3 Bridges community desk at Hurstville Westfield's have been supplied with additional CAG brochures. Interestingly in excess of 50 pamphlets have been distributed in recent months. • The Scatter Traffic Light Crossing at Kensington Street: JD has informed us that council has applied for \$100,000.00 federal funding for installation. Result will be known next month.
6	Governance Items
	<ul style="list-style-type: none"> • Nil
7	Standing Items
	<p>7.1 SGH Access to Care Report – Paul Holdsworth</p> <p>Meeting was cancelled</p>
	<p>7.2 SGH Cancer Services Patient Safety and Clinical Quality Committee –</p> <p>Deferred</p>
	<p>7.3 SGH/TSH Diversity Health Committee – EM</p> <ul style="list-style-type: none"> • Meeting held 8th February. Report circulated 23/02/2021 • Next Meeting 10th May 2021 • EM raised an issue in regards to complex written patient information not translated into CALD languages. To be raised in Business Without notice
	<p>7.4 SGH Safe use of Medications (SUM) Committee –GL</p> <ul style="list-style-type: none"> • Report was circulated • RL was concerned that some of the issues/incidents raised were not addressed during the meeting. Suggestions were given but rebuked by committee. Appears there was no outcome given. Near misses was also discussed but no solution noted. Patient safety is of a concern. SG will liaise with the Director of pharmacy to confirm if this was a ‘transcript error’ within these minutes. • Shortage of Medications noted in report: PD assured this was not a result of the pandemic but a common problem that is usually resolved by finding an alternative. It is only an issue when a suitable alternative cannot be found. • GL will refer these issues back to the committee also.


	<p>7.5 SGH Falls Prevention Committee – PH</p> <ul style="list-style-type: none"> • Report circulated • Falls and dementia are strongly linked • There is now a Falls National Standard within the National Standard Committee meeting.
	<p>7.6 SGH Food and Nutrition Report – SH</p> <ul style="list-style-type: none"> • Deferred
	<p>7.7 SGH Infection Prevention & Control Committee – JD</p> <ul style="list-style-type: none"> • Report circulated. • Point of interest is that there was a Lack of influenza within the community but there was an increase in staff sick leave for 2020. This is a direct result of the precautions taken for staff when feeling unwell for COVID testing etc. • Surgical site infections statistics given. (Refer to report) • Needle stick injuries for staff totalled 8. (Refer to report)
	<p>7.8 National Standards 2 Partnering with Consumers Working Party- PH</p> <ul style="list-style-type: none"> • Meeting to be held the 26th February
	<p>7.9 SGH Signage Committee – JD</p> <ul style="list-style-type: none"> • JD mentioned that the signage in our hospital is restricted by NSW Health Regarding size and fonts etc. • The COVID checkers have been assisting patients and visitors to find their way. • With the volunteer service suspended the signage issue has increased. • LS mentioned that the electronic signage was to assist with this but JD mentioned that they are difficult to interpret. LS mentioned it can be discussed in the scoping works. With reduced access points to the hospital during COVID this has compounded the wayfinding problem.
	<p>7.10 REACH Working party – GL/ HS</p> <ul style="list-style-type: none"> • The premise behind the REACH program is to provide a facility within the hospital for people to liaise with. RE; Health concerns prior to or after treatment. There is a roll-out on the 15th March (Tentative). Available to patient's and carers. There will be a designated line via hospital switchboard. This compliments the Deteriorating patient program.

	<p>7.11 SGH Patient Safety and Quality Meeting- PH</p> <ul style="list-style-type: none"> • Report circulated.
	<p>7.12 Clinical Council Report – RL</p> <ul style="list-style-type: none"> • Report Circulated
	<p>7.13 General Manager Report – PD</p> <ul style="list-style-type: none"> • Redevelopment: Project management team have been appointed. The tender for the architect is nearer to completion. The clinical services plan that was developed in 2018 is being reviewed. A consumer will be required for the Communication • Refurbishment of the theatres within the ASB is continuing. With works starting in June 2021. • Access and Flo from Emergency department. Our performance has slipped in that area in Dec/January due to COVID precautions. This has been addressed and we will be seeing some improvements in that area. • Elective surgery waitlist is doing really well due to the ministry funding for the private sector assistance and this will continue also there is additional funding provided for in house improvements. • Vaccination program for staff has started yesterday. The first three hubs, RPA, Liverpool and Westmead, with Liverpool being our hub for St George and the southern part of SESLHD. The 1A staff are first to get this, COVID staff, ED, Infection control, Support staff about 900 staff in total. A few week before St George are set up to go.
	<p>7.14 Nursing Update – LS</p> <ul style="list-style-type: none"> • Fairy Sparkle Garden: A Rotary grant for \$400,000 was going to be used for a children’s garden for Paediatrics. There has been a change to move the garden from Paediatrics to the grassy area behind James Laws House. Which will include for children as well as adults. Fairy is no longer involved in the project. Contractors will be sourced for plans for a safe place for patients and staff also. • Grad starts: We had 96 + 8 midwives. $\frac{3}{4}$ have begun their orientation. They start in their clinical areas this week. • Staff wellbeing is a priority after the challenges from last year and this year. A number of different ways has been discussed. There has been a committee formed and feedback from staff is welcomed for what they would like etc. • JD has suggested an area above/raised over the any building/garden that maybe in the ‘works’ for staff.
	<p>7.15 Quality and Safety Update – SG</p> <ul style="list-style-type: none"> • There has been an increased number of compliments. • Complaints were around the COVID restrictions on visiting and the Baths being closed in the birthing unit. Now resolved.

	<ul style="list-style-type: none"> • Positive outcome is the screening of patients who are at risk of delirium which has resulted in a reduction of injury from falls. Credit to our Aged care and Delirium teams. • Patient TV for patient information requires a consumer representative for the working party. GL and JD have agreed to review the content. SG will advise Kym Turnell.
	<p>7.16 Corporate Services Update – JoD</p> <ul style="list-style-type: none"> • Lift replacement works are continuing with James Laws house completed, Burt Nielsen wings nearing completion and Gray Street carpark lift. There is also a gold buggy to assist. • Dental relocation is almost completed • TELCO works on ASB building has recommenced
8	Reports for Noting
	<p>8.1 Volunteer Report</p> <ul style="list-style-type: none"> • Not Submitted Due March
	<p>8.2 District Steering Committee for Falls Injury Prevention in Health Facilities</p> <ul style="list-style-type: none"> • Report circulated
	<p>8.3 SESLHD Infection Prevention & Control Committee</p> <ul style="list-style-type: none"> • JD reports that our area is doing well comparatively.
	<p>8.4 District Community and Consumer Council (DCCC)</p> <ul style="list-style-type: none"> • Last meeting in December and has been disbanded at this time.
	<p>8.5 SGH/TSH Diversity and Aboriginal Health Annual Report 2020</p> <ul style="list-style-type: none"> • The Aboriginal working party has gone into a committee. With PD and Vicki Weeden as chair hosts. There will be 4 meetings a year and are currently updating the 3 year Aboriginal implementation plan and launching the Close the Gap program on the 19th march in the Research and Education building. • RL mentioned that 59% of Australians aged 15-74 were assessed as being inadequate in health literacy skills. Is there any plan for education for the public? SGi to provide information on this.
9	New Business
	<p>9.1 2021 SGH CAG Chair and Co- Chair positions</p> <ul style="list-style-type: none"> • Nominations received for Rod Lynch Chair and Gregory Lill as co-chair.

	<p>Unanimous decision for them to continue within their current roles</p> <ul style="list-style-type: none"> • RL accepted the nomination and thanked everyone for the support of the Committee • GL Accepted the nomination
	<p>9.2 SGH CAG Performance Evaluation Report 2020 SG</p> <ul style="list-style-type: none"> • Positive reflection for this committee. There were some unsure answers for the question for 'Objectives reached'. This could be because of the challenging year we have just had. Consumer input is an invaluable commodity for quality and Safety. • RL mentioned that the Charter is supplied to all the consumer representatives. It is an interesting document that is updated every year.
10	<p>Business Without Notice</p> <p>10.1 Increased Complex Health issues</p> <ul style="list-style-type: none"> • PH Patient's appear to have much more complex health issues. Do we have enough staff for this? PD confirmed that staff are provided with on-going education in relation to Mental Health and other Health issues. LS confirmed that there is a 24 hour process for additional staff or security when needed. Areas are staffed based on demand or patient cohort. There is an escalation process with an on-call roster for the executives. PD also confirmed that our security staff have a strong relationship with the police department in Kogarah. <p>10.2 Resignation</p> <ul style="list-style-type: none"> • Paul Holdsworth tendered his resignation via letter. Due to retiring and health issues. <p>We thank Paul for all his valuable input, since 2013 on the Consumer Advisory Committee and all his attendance with Access to Care Committee, Falls Prevention Committee and the Nations Standards 2 Partnering with Consumers Working party. Very much appreciated.</p> <p>10.3 Patient information brochures not being translated into other languages</p> <ul style="list-style-type: none"> • RL raised the issues that Patient information brochures are not being translated into other languages. JD has been told that the funding has been withdrawn for the last 3 years. Surgical delays because of misunderstanding of requirements for surgery. PD to investigate. <p>10.4 Request to review document "ICU and Hear you"</p>

	<ul style="list-style-type: none"> This document is temporary until the REACH program commences. Document reviewed.
11	Confidential Items <ul style="list-style-type: none"> Nil
12	Meeting Closed 10.45am <ul style="list-style-type: none"> Next Meeting 9am 23rd March 2021

CERTIFIED A CORRECT RECORD	
Name RODNEY E LYNETT
Signature 
Date 23-3-21