

SUTHERLAND HOSPITAL CONSUMER ADVISORY GROUP

MINUTES of MEETING

3 Pm Wednesday 7 June 2017
TSH Executive Meeting Room, Level 4

Item 1	MEETING OPENING – Welcome	
1.1	Apologies:	
	Bernadette Woods	Consumer Representative
	Tracy Harding	Consumer Representative
	Yui Dai	Diversity Health Co-ordinator
	Jenny Church	Consumer Representative
	Jan Heiler	Director of Nursing
	Jim Hankin	Consumer Rep
	Colleen Loder	Consumer Rep
	Joanne Flannery	Consumer Feedback and Medico-Legal Manager The Sutherland Hospital & Community Health Service – invited to speak
	Yu Dai	
1.2	Present:	
	Peter Lewis (PL)	Consumer Representative (Chair)
	Karen Becker (KB)	General Manager
	Jan Heiler (JH)	Director of Nursing and Midwifery
	Shirley Smith (SS)	Consumer Representative
	Colin Dent (CD)	Community Engagement and Fundraising Manager
	Karen crawley	Guest
	Carol Robinson	Guest Volunteer
	Max Tuffano	Manager Corporate Services
	Joanne Newbury	Acting Director of Nursing and Midwifery
	Marion Wulf	Guest
	Heather Doolan	Acting Patient Safety, Risk and Quality Manager
Item 2	APPROVAL OF MINUTES: Not able as not a quorum.	
Item 3	GUEST SPEAKER	
3.1	Heather Doolan outlined the requirements of the CAG involvement for Accreditation.	
Item 5	BUSINESS ARISING	

5.1	Action Items – None arising
5.2	Nursing and Midwifery Services Report Performance Data Summary(attached)
Item 6	Report form the Chairman
	<ul style="list-style-type: none"> • Action: PL attended patient symposium – will send a report • Broad discussion on Consumer Engagement instigated by KB • Community partnerships coordinator – KB asked for a report back from Virginia at the next meeting
Item 7	Corporate Services Report – Max Tuffano
	<ul style="list-style-type: none"> • Overview of Corporate Services support • Increase in car par fees also slight in concession (CPI) • Car park strategy has been undertaken by the ministry – work being done on reduction of impact on patients – concession process currently exists. • Discussion and questions from the group on the car park arrangements for concession
Item 8	Feedback from Allocated Committees
8.1	TSH Food and Nutrition – (Karen) <ul style="list-style-type: none"> • Health support manages food services – roll out state wide (my food choices) may be delayed to next year • Dieticians working as part of the Allied Health Team
8.2	Emergency Department – <ul style="list-style-type: none"> • Winter hit early in May with challenges – challenges meeting off load targets – er performance targets 73% needs met within 4 hours . Currently below trajectory. • Increase in presentations by about 20% • Demand management report • 50000 presentations a year • Presentation on what we are building and what it will look like for next meeting? • Constrained by the current capital works
8.3	Diversity Health Usually Jim Hankins
8.4	Falls prevention Hasn't been to the last meeting Karen outlined the Falls Prevention Program Staff have done the training in falls
8.5	TSH Emergency Response Working Group Looks at the different codes for emergency Maintaining the emergency management protocols

	<p>Clinical Council</p> <p>Committee that has the exec and heads of dept to discuss clinical issues (peak clinical body)</p> <p>Monitor of the IMMS program</p> <p>Investigations are launched depending on the seriousness of the incident</p> <p>Also a district clinical council</p>
8.6	<p>Care Coordination Committee</p>
	<p>Accreditation update -Heather Doolan –</p> <ul style="list-style-type: none"> • Meeting national standards and getting an update on how we are sin comparison to previous targets met • Team of surveyors in November • The committee will be key role in the 10 standards – feedback on improvements • Karen elaborated on the Accreditation process
Item 9	<p>Hospital Update – Karen Becker</p> <ol style="list-style-type: none"> 1. Karen elaborated for the benefit of the group to how to expand the committee 2. Executive supports the community engagement process – want to allow community to have a voice without intimidation through highly skilled clinical members- more input is needed- need to get new members on the committee to invigorate consumer engagement- 3. More feedback from patients is needed 4. Redevelopment and accreditation already discussed 5. KPIs in the hospital 6. Surgical KPIs. Meeting 000 (done within 30-90 or 365 days) currently met our targets – sometimes we don't have beds and surgery is cancelled but very carefully considered 7. Looking to having an open day on opening of hospital – staff and community <p>Clarification on KPI and patient safety</p>
Item 10	<p>Nursing & Midwifery Services Update – Joanne Newbury</p> <p>May IND and Midwife included awards to staff in nursing at event</p> <p>Recruiting for the winter beds</p> <p>Winter is always a busy time</p> <p>District Facebook page SESLHD (get link)</p>
Item 11	<p>Business paper (Volunteer Report and Diversity Health Report)</p>
	<p>Not tabled- Yu Dai</p>
Item 12	<p>CPIU Report (incl. Patient & Safety Quality Dashboard)</p> <p>Incident management – identify trends on</p> <p>Quality and risk management</p> <p>Any legal issues</p> <p>Covers so many areas it would be hard to do a one page summary</p> <p>Suggested a different focus each month / discuss interpreting reports</p>
Item 14	<p>NEW BUSINESS</p>
	<p>Shirley Smith - a series of negative comments made to Shirley on Sutherland Hospital at a family wake.</p> <p>Karen suggested the complaint be directed to the Consumer feedback Manager.</p>

