







MINUTES



For the meeting of the TSH Consumer Advisory Group
3 July, 2019 Level 4 Multipurpose Function Room.




ITEM	DESCRIPTION	CARRIAGE
1	Attendance:	
	Staff / Consumer Reps Peter Lewis (PL) Consumer Representative (Chair) Malcolm Ricker (MR) Consumer Representative Marian Foulcher (MF) Consumer Representative Debbie Wood (DW) Consumer Representative Jenny Church (JC) Consumer Representative Jim Hankins (JH) Consumer Representative Sharon Bennett (SB) Consumer Representative (Minute Taker) Shirley Smith (SS) Consumer Representative Patrice Thomas (PT) Acting Patient Safety Manager Gillian McDonnell (GM) Consumer Representative Sonia Markoff (SM) Consumer Representative Apologies: Valerie Jovanovic (VJ) General Manager Jan Heiler (JH) Director of Nursing and Midwifery Katerina Volas (KV) Director Corporate Services Valmai Ciccorello (VC) Consumer Feedback and Medico-Legal Virginia Hughes (VH) Consumer Representative Karina Stamef (KS) Community Engagement and Fundraising Manager Stephanie Kelly (SK) Consumer Representative Guests: Amanda Pisani A/NUM Warada (patient survey)	
2	Guests Welcomed	Peter Lewis
	Presentations: N/A	N/A
3	Approval of May minutes – Approved	Peter Lewis
4	Items Arising – Please refer to Actions List	Peter Lewis
5	Declaration of conflict of interest – N/A	All
6	General Business – N/A	All
	6.1 – Report from the Chair - N/A	Peter Lewis
7	Management Reports	
	7.1 GM Report	Apology
	7.2 Nursing and Midwifery	Apology
	7.3 Overview of Patient Feedback	Apology
	7.4 Corporate Services	Apology


ITEM	DESCRIPTION	CARRIAGE
8	Standing Items	
	8.1 Standards / Accreditation – N/A	As required
	8.2 TSH Food and Nutrition <ul style="list-style-type: none"> • Meeting cancelled due to crisis last week. 43 beds opened due to numbers presenting and being admitted. • To be rescheduled 	Jenny Church
	8.3 Clinical Council <ul style="list-style-type: none"> • Meeting cancelled due to crisis last week. 43 beds opened due to numbers presenting and being admitted. 	Jenny Church
	8.4 Emergency Department <ul style="list-style-type: none"> • Meeting cancelled due to crisis last week. 43 beds opened due to numbers presenting and being admitted. 	Peter Lewis
	8.5 Falls Prevention <ul style="list-style-type: none"> • Increase in falls in rehabilitation ward predominantly occurring after hours. There were 60 falls which is the highest on record (5.4% above average - average is 47). Mitigation: <ul style="list-style-type: none"> ○ Unannounced spot audit by the after-hours manager. ○ Fall prevention forum was held. ○ All patients will be given a falls prevention brochure on admission and discuss the importance of asking for help and using assist button for nurses. ○ For patients who are a high falls risk and/or post-operative patients, a nurse should accompany to the bathroom and remain in the area until the patients is ready to go back to the bed. ○ Staff in service education, communication in huddle, patient journey board, bedside handover, falls flowchart. ○ Application for TICK funding for research on falls resulting in strategies to support staff reduce falls particularly with patients presenting with delusion, confusion and cognitive challenges. • Decrease in falls with significant harm. • Minutes provided to CAG from this meeting. <p> ACTION ITEM: Challenges with some members of team towards consumer rep. To be discussed off-line with Patrice.</p> <p> ACTION ITEM: Patrice will request Nicole Weddell to present the falls portal at a CAG meeting</p>	Sonia Markoff
	8.6 Person Centered Care – N/A	Debbie Wood
	8.7 Pressure Injury Prevention and Management – N/A	Sonia Markoff

ITEM	DESCRIPTION	CARRIAGE
	<p>8.8 Patient Flow and Demand Management</p> <ul style="list-style-type: none"> N/A 	<p>Gregory Cramery <i>(Written Update)</i></p>
	<p>8.9 TSH Emergency Response Working Group</p> <p>Hospital signage – in progress</p> <ul style="list-style-type: none"> Access to areas on Level 1 – in progress. To make it clearer to visitors because some have been found wandering lost. Review possibility of signage on floor before auto out sensor due to costs. There needs to be signs for the Respiratory Clinic and Cardiac Clinic - in progress Signage to the ED (outside South Care) – too small needs to be replaced. Investigate possibility of signage painted on the roadway as well as larger signage outside Southcare - – in progress. <p>Infection Prevention & Control / Staff Health Update</p> <ul style="list-style-type: none"> There’s been a significant increase in flu presentation and numbers. Approx. 1,800 staff have had flu vaccinations so far Two healthcare associated patients have come down with influenza There was a Gastro outbreak in Barkala – 12 patients and 4 staff members <p>Garrawarra Centre Update</p> <ul style="list-style-type: none"> There was a fire onsite on 26 May. Lit by person or persons unknown at this stage. The building turned out to be carrying friable asbestos which was then removed within the week. We now have a certificate of clearance saying it’s safe. When the building was cleared they found more asbestos buried underneath the building down to 60 square metres. There was more media attention around the demolishing of the old site. <p>UPS Maintenance</p> <ul style="list-style-type: none"> TSH recently received a GIPA - Government Information (Public Access) which came about because we sent some information off to Media around a power fail (district-wide). The UPS System in Security went down so all swipe access failed. The information which was taken from the Emergency Response Risk Assessment, was misinterpreted by the Media. The information on the Risk Assessment said that all the fire doors were locked when it was actually only one door in Killara that was locked. We have to be very specific about what’s written in the Emergency Response Risk Assessments Education needed for After Hours <p>No Notice Exercise Summary (30.5.19)</p> <ul style="list-style-type: none"> Summary circulated Facilities lost water. There was major structural problems at the Pumping Station impacting on the whole local area Responses were very good and varied and the information was very useful. Most facilities knew how long they would be able to last without water Public Health confirmed that Sydney Water have an obligation to provide us with water no matter what. TSH has a huge water reservoir on Level 1. It is being investigated how we could utilise that in an emergency. In the short period of time after the Exercise St George lost the ability to chill their environment. Because of the No Notice Exercise they had put things into their Emergency Plan 	<p>Sharon Bennett</p>
	<p>8.10 Children’s Acute Review Service Committee – N/A</p>	<p>Stephanie Kelly</p>

ITEM	DESCRIPTION	CARRIAGE
	<p>8.11 Patient Safety and Clinical Quality</p> <ul style="list-style-type: none"> Recruited an additional pharmacist for a 6 month trial completed due to issues when patients appear in a ward and are confused around what medications they require or what the medications they bring along are for. Although it was felt valuable at the end of the trial there were no funds to continue additional position. The Pharmacy Director is currently reviewing capacity in an attempt to re-engineer her staffing to provide the extra position. CAG had concerns about the lack of this position and it was agreed that the Director of Pharmacy should be asked to attend CAG and present. Malcolm was asked to present about safety and changing cultures. He provided examples from his experience working at Qantas and used the book Hospitals Should Fly as a valuable resource. Due to issues that occurred last year 2018 a mitigating strategy was the Sign Up for Safety program. TSH is in the infancy of this program, developing that to start on. <p> ACTION ITEM: Patrice will request Director of Pharmacy to present challenges and potential innovative possibilities around the pharmacy position.</p> <p> ACTION ITEM: CAG members requested Malcolm present his safety and changing cultures at future CAG meeting. Peter to organise with Karina</p>	Malcolm Ricker
	<p>8.12 Clinical Practice Improvement Unit (CPIU)</p> <p> ACTION ITEM: Peter to request Karina to remove this agenda items from future agendas.</p>	Patrice Thomas / Compliance Manager (ETA Aug)
	<p>8.13 Volunteer Report – N/A</p>	Karina Stamef
	<p>8.14 Advance Care Planning</p> <p> ACTION ITEM: Peter to request Karina to remove this agenda items from future agendas.</p>	Patrice Thomas/Malcolm Ricker

ITEM	DESCRIPTION	CARRIAGE
	<p>8.15 Consumer Walk Around</p> <ul style="list-style-type: none"> • For any concerns raised around issues being actioned – feedback has been passed on to NUM for the previous walk around. • TSH Consumer Walk Around Feedback Form provided to CAG. • MR’s feedback from today’s walk around was a happy experience overall. • SB’s feedback from today’s walk around –Praise for staff (nurses, doctors, NSW Uni trainees and volunteers). BBQ organised for patients and staff was “wonderful” it made the patient feel really happy and cared for. Three negative experiences <ol style="list-style-type: none"> 1. Food request - patient was on a fluid balanced diet. The patient praised the menu list of food however, wasn’t hungry so requested pea and ham soup. The iPad stated the patient wasn’t to have soup. The doctor gave OK for soup, nurses along with patient advised staff member collecting food orders. After a week of requesting patient still not able to have the soup because no one in the kitchen new how to amend the iPad to allow the soup. 2. Cleanliness & cleaners – first example about cleaner mopping under the bed and when cleaner left the patient looked under the bed and there was a pill cup, tea bag and dust. Second example patient could see the mop lines around the bathroom floor. 3. Temperature of room – the room was very cold. However, patient stated they understood due to location and nurses always ensure blankets were provided. 	<p>Patrice Thomas / Malcolm Ricker</p>
9	Reports for Noting	
	9.1 Diversity Reports Pending (Quarterly) – N/A	Jim Hankins
	<p>9.2 Diversity</p> <ul style="list-style-type: none"> • N/A <p> ACTION ITEM: Karina Stamef to follow up on an update for which it would be appreciated if it included information about NAIDOC Week.</p>	Yu Dai (Written)
	<p>9.3 DCCC Representatives Update</p> <ul style="list-style-type: none"> • Environment sustainability Policy 2019-21 was released approximately two weeks ago • End of Life policy being developed and the draft has been sent out for consultation. 	Sonia Markoff & Peter Lewis
	<p>9.4 Infection Control Committee</p> <ul style="list-style-type: none"> • Cancelled for the second time in a row. <p> ACTION ITEM: Karina Stamef to follow up with Joshua Philip to request a written update and advice (briefly) on the challenges stopping the meetings.</p>	Sonia Markoff
10	Correspondence – N/A	Peter Lewis

ITEM	DESCRIPTION	CARRIAGE
11	Governance Items – N/A	Peter Lewis
12	<p>Any other Business</p> <ul style="list-style-type: none"> Gillian welcomed as new member of CAG. Gillian advised that she is part of the Mental Health Restructure Joint Committee (Sutherland & St George). Sonia advised that she is a member of the bi-monthly Antimicrobial (AMS) working group. Peter advised that he will be attending the Palliative Care Workshop. Shirley shared that the Resident Medical Officer (RMO) stated that the volunteers at TSH are the greatest of anywhere he has worked. 	Chair
13	<p>Document Reviews</p> <ul style="list-style-type: none"> Amanda Pisani (ANUM, Warada) - Warada Patient Survey which has been developed to inform future website of information. 2-3 CAG members required to interview approximately 5 patients using the Patient Survey. <p> ACTION ITEM: Debbie Wood will edit the Patient Survey, liaising with Patrice and the final draft will be provided to the CAG for endorsement at the next meeting.</p>	Consumers
14	<p>Business Without Notice</p> <ul style="list-style-type: none"> Patrice advised that it is a requirement that CAG should be an agenda item on all meeting attended. Discussion ensued that this was not occurring at many of the meetings. Patrice distributed a draft CAG Meeting Report form she developed to be used by CAG members to discuss their relevant section at meetings attended. Further, CAG member to provide to secretariat prior to the meeting for distribution with meeting papers. Suggested this form should also be provided to the Clinical Council. Discussion about inconsistencies with minute endorsement. Some CAG members being asked to endorse the minutes at the specialty meetings held whilst most are not. The CAG Terms of Reference (TOR) states that the Clinical Practice Unit Manager should attend CAT meetings, however, this position no longer exists on the establishment. Agreement that the Patient Safety Manager position should attend in replacement. Malcolm introduced a new draft attendance sheet, which provides a yearly view of attendance. CAG agreed with one amendment - instead of in the key a tick ✓ = present should read initials = present. <p> ACTION ITEM: Patrice will draft with Karina a convention guide to mitigate confusion about inconsistencies and whether a requirement or preference only.</p> <p> ACTION ITEM: Patrice drafting a CAG Meeting Report for the Sutherland Hospital.</p>	

ITEM	DESCRIPTION	CARRIAGE
	<p> ACTION ITEM: Peter to request Karina to add Gillian as a presenter about her experience and learning about the mental health committee.</p>	
15	Items Arising – See Action List	Peter Lewis
16	Confidential Items – N/A	
17	Meeting Closed	
	<p>Date of next meeting: Date: Wed 7 August 2019 Time: 3pm Venue: Exec. Meeting Room</p>	
	17.2 Payment voucher collection – N/A	To Sign
	<p>CERTIFIED AS A CORRECT RECORD</p> <p>_____</p> <p>Name</p> <p>_____</p> <p>Signature _____</p> <p>Date _____</p>	

TSH Consumer Advisory Group

Minutes Ref /Date	Agenda Item	Action	Responsibility	Progress
01-05-A1	11	KS to contact IT to retrieve PIN for CAG conference details.	KS	2019/05/20 – Requested new conference number, ticket in progress with IT.
1.11.17	3.3	PL to look into sourcing a Training Manual for CAG Committee	PL CD	2019/04/03 – Ongoing 2019/03/06 – Ongoing Colin/ now Karina seeking support from the original manual produced by Directorate Planning Population Health & Equity
May 18	2.	CAG input for speakers MH CAG to be invited	CAG reps	2019/04/03 – TBA – Maybe Lisa Ryan. Also NSW Health has just released a new document (Advanced Care Planning) which may be of interest to the committee. 2019/03/06 – MH CAG to be invited