



**Health**  
South Eastern Sydney  
Local Health District

**TRIM: T14/**

**Meeting:** POWH/SSEH Community Advisory Committee  
**Date:** Monday 16<sup>th</sup> June 2014

**Chair:** Mr G Constantin (chair)  
**Minutes:** Ms B Rabet (NM to DON)

**1. Attendance/Apologies**

| NAME               | AREA                   | status  | NAME              | AREA                  | status  |
|--------------------|------------------------|---------|-------------------|-----------------------|---------|
| Jon Roberts        | DO                     | present | Tanya Kant        | consumer              | present |
| Heather Walker     | DON POWH               | apology | Sharnelle Magee   | consumer              | apology |
| Jennie Barry       | A/DON POWH             | present | Susan Nicholson   | consumer              | present |
| Carolyn Smith      | A/DON SSEH             | present | Patricia South    | consumer              |         |
| Belinda Rabet      | NM POWH                | present | Jan Titterton     | consumer              | present |
| Deidre Kennedy     | Community Partnerships | present | Nava Turner       | Consumer/deputy chair | present |
| George Constantin  | Consumer/chair         | present | Margaret Wartmann | consumer              |         |
| Andros Eleftheriou | consumer               | present | Jodie West        | consumer              | present |

**Presentations**

|  |  |
|--|--|
| <p>Smoke free workplace – Kate Sikora (Media &amp; Communications Manager LHD) 1700hrs</p> | <p>K Sikora introduced the smoke free draft brochure for consumers to provide feedback and comments by Thursday 19<sup>th</sup> June 2014 – B Rabet will circulate an E copy.</p> <p>K Sikora stated that changes to the Smoke free health reform had been made at a Government level. The LHD will now have the authority fine people who are smoking on the grounds.</p> <p>SESLHD will rollout as follows:</p> <p>Phase one:</p> <ul style="list-style-type: none"> <li>• 2 smoking areas will be built on the Randwick campus</li> <li>• Vulnerable patients will not have to go off campus to smoke</li> <li>• This is a voluntary measure and if there is a visible reduction in smoking on grounds other than in these areas there may not be a need to move on to phase two.</li> </ul> <p>Phase two:</p> <ul style="list-style-type: none"> <li>• Fines will be given to people found smoking on grounds other than allocated areas</li> <li>• Staff and patients will be provided with support to stop smoking and will have access to nicotine replacement therapy</li> </ul> |
|--|--|

|  |   |
|--|---|
|  | <p>This has been presented to the Sutherland consumer group and changes have been incorporated.</p> <p>The Randwick campus will move to Phase one from the 1<sup>st</sup> July 2014 however the smoking huts will not be built until mid-July. Community advertisements are planned and green and white signs will be placed around the campus to direct people to the allocated smoking areas.</p> |
|--|---|

## 2. Minutes

|     |                         |  |
|-----|-------------------------|--|
| 2.1 | Confirmation of minutes | The minutes for the May meeting were confirmed |
|-----|-------------------------|--|

## 3. Actions/ Plans arising from previous minutes

| Issue | Discussion                 | Action Required   | Who | Due |
|-------|----------------------------|---|-----|-----|
| 3.1   | Action plan - update       | From 1720hrs onward the consumer members of the meeting planned to progress the consumer action plan.   |     |     |
| 4.2   | Toilet signs – outside EDU | Toilet signs in the toilets located outside the EDU have been changed following a complaint by S Nicholson on the low quality and number of signs in each toilet. |     |     |

## 4. Standing Items

| Issue | Discussion                             | Action Required   | Who   | Due                 |
|-------|--|---|---|---------------------|
| 4.1   | POWH/SSEH update by Hospital Executive | J Roberts provided an update from POWH:<br>H Walker and J Roberts met with G Constantin to discuss the hospital priorities for discussion in the consumer arena: <ul style="list-style-type: none"> <li>The patient stories program – to look at developing a model in partnership with the consumers – discussion held around using patient/consumer feedback as a mechanism to better understand the patient experience. S Nicholson stated that the consumer representatives had discussed this when the action plan was being put together and thought that it would be beneficial if the CEC could assist.</li> <li>J Roberts stated that this is a key piece of work that consumers could assist in developing to put into our staff orientation/training schedules. This could be through the development of a DVD on</li> </ul> | Further discussion to be held at next meeting | All<br>July meeting |

patient centred care from the consumer perspective.

- With regards to Wayfinding – the consumers are a valuable asset. D Kennedy and J West commented that wayfinding within the hospitals has improved greatly over the past 2-5 years. J Roberts agreed and stated that there is a need to look at a range of improvements around wayfinding.
- J Roberts discussed the importance of working with the CAC to evaluate systems that are established – discussion held around the use of 'secret shoppers' to evaluate.
- D Kennedy added that Ms Julieanne Hilbers (Diversity Health) had put together a 'patient rights and responsibilities' DVD using staff and volunteers. J Roberts agreed that there various projects have been done to involve consumers and informed members that a steering committee would soon be established to guide the development of patient information and education resources at POWH.
- J West commented that the consumer presentations that were included in the 2013 Patient Centred care symposium were powerful.
- S Nicholson asked about web based tools for patients to evaluate services in the Emergency Department. J Roberts responded that the LHD have a survey tool which is currently not used by the public hospitals which POWH is looking to adopt to evaluate services.
- J Roberts added that the Bureau of Health Information LHD patient survey results were released a month ago – however we are still awaiting facility results. POWH are looking at models to get 'real time' results.

J Roberts provided an update on initiatives at POWH:

- The Emergency Department 'fast track' zone refurbishment is commencing – after-hours access will be changed and the route will be via the Royal Hospital for Women. Construction work will continue until November 2014.
- The Intensive Care Unit refurbishment will be complete by the end of 2014 – additional isolation rooms are being added.
- NEAT performance – the Sydney Morning Herald had released an article with a negative slant – however POWH have improved dramatically over the past 2 years. Mr Richard Yarlett (Whole of Hospital Nurse Manager) looked at statistics from 1997 where POWH had 37% patients accessing beds within 8 hours – at times this year the access is around the 90% mark for patients accessing beds within 4 hours. The key achievement for POWH

|     |                               |  |   |           |              |
|-----|-------------------------------|--|---|-----------|--------------|
|     |                               | <p>over the last few months has been reducing the volatility in reaching the targets. There is now greater consistency in meeting targets following the introduction of a range of strategies.</p> <ul style="list-style-type: none"> <li>• J Roberts commented that POWH Emergency Department are an adult only department. Those with Children's emergency access have a 90% discharge home rate for children which affects the statistics.</li> <li>• NEST performance – POWH are assisting the LHD in improving NEST by adding additional urology cases from other areas to reduce the long wait list for these procedures. Approximately 25-30 cases will be completed at POWH.</li> <li>• The LHD are planning on improving performance and have engaged consultants to look at how to improve the health system across the board.</li> <li>• SSEH have engaged architects to move forward with the hand unit. The amenities block is under construction and due for completion in July 2014.</li> <li>• C Smith commented that the SSEH Bicentennial opening was successful.</li> </ul> |   |           |              |
| 4.2 | Clinical Council Feedback     | <p>J Roberts provided an update:</p> <ul style="list-style-type: none"> <li>• The Clinical Council meeting is scheduled for today 16<sup>th</sup> June – therefore Mr Roberts, Ms Barry and Ms Smith will be leaving the meeting early to attend.</li> <li>• The last meeting looked at models of care around the management of anorexic patients at POWH.</li> <li>• Improvement of patient flow was discussed – specifically around the connectivity between POWH and SSEH.</li> <li>• A Strategic planning master-plan presentation was given to the Executive looking at where the Randwick campus is going in the next 50 years. This is driven by the ever increasing population and high density residential developments. The light rail proposal has been approved and will be moving forward.</li> <li>• The Government will look at recommencing the 'urban activation precincts' in June 2014.</li> <li>• Anzac Parade and High street will have issues with parking. J Roberts stated that the master-plan does include strategies around parking.</li> </ul>                     | Presentation planned for the July meeting | J Roberts | July meeting |
| 4.3 | Community Partnerships Update | <p>D Kennedy provided an update:<br/>D Kennedy stated that she had returned to work following leave today.</p> <ul style="list-style-type: none"> <li>• POWH staged a site visit for 25 year 10 students from South Sydney High School. 2 groups were taken to visit the Physiotherapy Department, the Simulation Centre with the Nurse</li> </ul>   | Nil                                       |           |              |

|     |   |  |   |         |                       |
|-----|---|--|---|---------|-----------------------|
|     |   | <p>Educators and the Clinical Engineering Department. The school is dedicated to engaging students with the community. Evaluation of the visit was completed with 80% students supporting the visit – several positive comments were made around nursing and an increased awareness of allied health and clinical engineering.</p> <ul style="list-style-type: none"> <li>• The Consumer Engagement framework has now been uploaded to the internet/intranet.</li> <li>• The NSW Consumer Engagement state framework has not yet been finalised.</li> <li>• HETI have finalised a 'working with consumers and communities' module. This module was discussed at the last Standard 2 meeting – not overly positive – a query on how to progress has been escalated to the Executive.</li> <li>• 'Anzac celebrations' for 2015 planning is underway. POWH will be engaged to participate. D Kennedy will share information as and when it is available.</li> <li>• Professor Bruce Connelly has authored a book on the SSEH hand unit and how it has evolved.</li> </ul> |   |         |                       |
| 4.4 | Community Advisory Members questions        | <p>J West offered a compliment following an experience with the Billington Endoscopy centre. The 'patient instruction' letter given on discharge was well developed.</p> <p>S Nicholson question: Should nursing staff have shoes with a closed back? J Barry answered that yes they should. Exceptions are those nursing staff in Operating theatres who wear clogs. S Nicholson stated that this was a nurse in Aged Care.</p>   | <p>Noting Only</p> <p>General reminder to be sent out to nursing on appropriate footwear – CLOSE ITEM</p> | J Barry | Prior to next meeting |
| 4.5 | Complaints and Compliments – monthly review | <p>At the previous meeting J West had raised concerns regarding complaint about a patient within POWH administration services – feedback was sought from the complaints officer.</p> <p>B Rabet provided clarification. The complaint was about a patient verbally abusing a staff member. The patient had also complained stating that the staff member had attacked her. Surveillance footage showed that this did not occur. The complaint report did not reflect this as it had not yet been fully investigated. A process has now been put in place to protect both staff and patients. Staff are now able to close the shutter of this desk and call for help.</p> <p>D Kennedy met with a disgruntled patient who attended an appointment</p>   | <p>Noting only</p> <p>To seek</p>   | B Rabet | July                  |

|     |                        |   |   |         |                       |
|-----|------------------------|---|---|---------|-----------------------|
|     |                        | <p>at fracture clinic arranged by the Emergency Department but the clinic was closed on this date. Question around whether the Emergency Department are aware of dates the clinics are closed for ADOs</p> <p>J West asked about the regular closures of the outpatient departments. J Roberts stated that the outpatient department group is looking at a range of issues including this. J Roberts will ensure the agenda includes investigation into how to efficiently provide services. J West stated that the patient is central to this issue and should be included in the conversations.</p> <p>D Kennedy added that the discussions held at today's meeting were revolving around communication issues</p> <p>The March 2014 complaints and compliments report was tabled at this meeting:</p> <p>D Kennedy discussed a complaint around the lack of magazines available in waiting areas at SSEH. In response D Kennedy stated that the print/magazine/media departments experience challenges which are being met as best they can.</p> | clarification around process                              |         | meeting               |
| 4.6 | Minutes from Committee | <p>Consumer representatives provided updates on the following meetings attended:</p> <p>S Nicholson:<br/>         Attended the SSEH UTS student project redesign group which are looking at the Day Surgery unit and ways to improve patient flow.</p> <p>Attended the International Nurses day symposium where various nursing initiatives were presented S Nicholson suggested that more information around the Clinical Assessment Rounding Project would be good for the consumers. B Rabet noted that the project group were planning to present following evaluation and prior to rolling out the initiative across all inpatient wards. S Nicholson complimented Ms Sarah Lyons on her VTE presentation.</p> <p>QOCC</p> <ul style="list-style-type: none"> <li>• Commencing a project on patient property</li> <li>• Feedback requested from the consumers on ways to ensure patient belongings are not lost</li> <li>• Discussion held around labelling belongings</li> </ul>  | Noting only   |         |                       |
|     |                        |   | Request for feedback to be sent to consumers – CLOSE ITEM | B Rabet | Prior to next meeting |

|  |   |  |  |  |
|--|---|--|--|--|
|  | <p>Clinical Handover group</p> <ul style="list-style-type: none"> <li>The next meeting will be devoted to involving patients and carers in handover.</li> <li>Feedback requested from the consumers.</li> </ul> <p>SSEH / POWH Clinical Quality and Risk Management committee:</p> <ul style="list-style-type: none"> <li>A presentation was given on the Whole of hospital initiatives</li> <li>Discussion held around the introduction of the Electronic Medical Record</li> </ul> <p>A Eleftheriou:</p> <p>Infection Control SSEH</p> <ul style="list-style-type: none"> <li>Hand hygiene was discussed</li> <li>Theatre modifications are underway and A Eleftheriou was taken on a tour of the areas</li> </ul> <p>J Titterton:</p> <p>Operational Patient Flow meeting</p> <ul style="list-style-type: none"> <li>Discussions held around the changes to Medicare locals – funding to be withdrawn at the end of June. J Roberts added that the tender will be out in June/July 2014 and Medicare locals are to be phased out by June/July 2015.</li> </ul> <p>Advanced care planning committee</p> <ul style="list-style-type: none"> <li>This committee has now closed and was deemed unsuccessful.</li> <li>Of approximately 5-600 people only 1 person was signed up.</li> <li>Consumers are welcome to comment on this – J Titterton happy to forward any comments to project team.</li> </ul> |  |  |  |
|--|---|--|--|--|

**5. General Business**

| Issue | Discussion                          | Action Required   | Who         | Due |
|-------|-------------------------------------|---|-------------|-----|
| 5.1   | Consumer representative recruitment | B Rabet informed members that more consumers would be recruited. Advertising will be via the Wentworth and Southern Courier. Any suggestions on the recruitment process are welcome | Noting only |     |

**6. New Business without notice.**

| Issue | Discussion          | Action Required   | Who       | Due                   |
|-------|---------------------|---|-----------|-----------------------|
| 6.1   | New Menu            | J Titterton stated that an invitation had been extended to her to taste the new menu that was due to commence on the 1 <sup>st</sup> July 2014. However as yet this invitation had not been received. | D Kennedy | Prior to next meeting |
| 6.2   | Brochure for review | A brochure was circulated to members for comment and feedback: 'Goals while you are in hospital' for patients who have had elective joint replacement.  | B Rabet   | Prior to next meeting |

NIL

The next meeting will be held on Monday 14<sup>th</sup> July 2014 – POWH EDU A

There being no further business the meeting closed at 5.25pm – ACTION PLAN PROGRESSED

Accepted as a true record: G. CONSTANTIN

Chair:



Date:

14/7/14

Signature Chair