

Friday 4 December 2015, 10 am

MINUTES

PRESENT:

Ms N Cowlshaw, Community member
Ms T Fletcher, Community member
Ms H Mantziaris, Community member (Co-chair)
Mr P O'Donoghue, Community member
Ms S Rawlinson, Community member
Dr J Wilson, Community member (Co-chair)

RHW/SESLHD representation :

Ms L Woodhart, Clinical Practice Improvement Manager, RHW
Ms V Madunic, General Manager, RHW
Dr J Svensson, Health Education Co-ordinator and Diversity Health Officer, RHW
Ms J East, Secretariat RHW

IN ATTENDANCE

Ms A Justice, Community Partnerships Co-ordinator, SESLHD

2. APOLOGIES:

Ms G Parsonage, Community member
Ms H Gunn, Director of Nursing & Midwifery Services, RHW
Ms E Hutchings, Community member

J Wilson added the following agenda items to General Business :

- a) New member – Gail Parsonage
- b) S Rawlinson attendance at the Consumer training course
- c) V Madunic's appointment as General Manager

It was noted that since the last meeting Ms Deidre Kennedy has left the SESLHD and therefore will no longer be attending meetings. There is no replacement as the position of Community Partnerships Officer, Northern Hospitals Network has been removed.

1. ACKNOWLEDGEMENT OF COUNTRY

I would like to acknowledge the Gadigal people of the Eora Nation who are the traditional custodians of the land on which we are meeting today and pay my respects to their elders both past and present.

3. CONFIRMATION OF AGENDA

4. MINUTES OF PREVIOUS MEETING

The minutes from the previous meeting held 7 August 2015 were adopted and informal notes from 9 October 2015 noted.

5. MATTERS ARISING FROM THE MINUTES

5.1 HETI online

V Madunic showed the Committee the HETI website and the training modules available. Access is driven by the staff member's Stafflink number. It was agreed that in the new year V Madunic and L Woodhart will organise a separate meeting and set up a computer for Committee members to access and review the modules.

During discussion the following was noted :

- New modules are continually being developed
- Some modules are all online while others also have a face-to-face component
- As access is driven by the staff member's Stafflink number there is no access for non-staff members such as Community representatives. This is being discussed at state level but to date there is no resolution.
- A Justice will enquire with HETI if they bring in people with disabilities and/or multicultural background to consult on training modules.
- Project for the new year – L Woodhart to provide list of mandatory and non-mandatory training for staff as well as % list of staff attendance.

ACTIONS

- A Justice will provide information when received on resolution of access by community representatives to online training.
- V Madunic and L Woodhart will organise an extraordinary meeting for committee members to access and review HETI modules
- L Woodhart will provide list of mandatory and non-mandatory training for staff with % list of staff attendance
- A Justice to ascertain if people with disabilities and/or multicultural background are consulted on HETI training modules

Action Items – updated

Summation of action items completed - noted

6. STANDING ITEMS

6.1 Community Partnerships update – remove from agenda

A Justice tabled copies of the SESLHD Community Partnerships Strategy November 2015 and summarised the content.

- Action plan being completed – will be circulated when finalised
- Health literacy – monitoring Prince of Wales Hospital model – will be evaluated for District wide roll out
- J Svensson outlined the model followed at the Royal Hospital for Women which is similar. All fact sheets are co-ordinated by J Svensson and are circulated to relevant consumers for feedback. Content is also put through an online readability check. Following the approval process they are loaded to the hospital website and a copy is given to patients on discharge.
- T Fletcher enquired if there were consumers with disabilities to provide feedback – A Justice advised this is embodied in the evaluation as it is important that resources are tested by the appropriate group. As the Local Health District is large it is an enormous task. Appropriate organisations are accessed where possible.
- SESLHD is considering the formation of a Consumer Council
- A Justice noted that her role is a District resource

The Committee thanked Amanda for attending (left 10.55 am)

6.2 Youth Health update

The written report was noted. J Svensson advised that at the last SESLHD meeting it was decided not to proceed with developing an app as there is a Youth Point website.

Locally the Hospital's Youth Health Network meetings have resumed which comprise of RHW staff and representatives from Kirkton Road. The SESLHD have youth health co-ordinators who disseminate relevant information via social media and to general practitioners.

6.3 SESLHD Falls Committee

J Wilson provided a brief verbal report noting the committee is assessing the baby falls policy following an incident at St George Hospital.

6.4 Quality & Safety Data

L Woodhart tabled two documents :

- a) Information on free education channel available to patients – currently only available for maternity. Gynaecology will be added in the future.
- b) ACHS data – to be deferred to the next meeting and circulated with the agenda.

6.5 Patient Feedback

- a) Oncology Chemotherapy patient satisfaction survey 2015

L Woodhart outlined the results of the survey. H Mantziaris asked how interpreters are used when advising patients on medications – L Woodhart will report back at the next meeting.

ACTION L Woodhart to advise how interpreters are used

6.6 Disability Awareness training for staff project

As there are disability awareness courses (not mandatory) available it was agreed to hold further discussion with T Fletcher until a review of the existing modules has taken place.

6.7 Feedback from Hospital Committee representatives

- a) Clinical Council – P O'Donoghue advised that a financial report is given at each meeting along with medical and workforce. At the last meeting the Chief Executive and a Board member of the RHW Foundation attended and outlined various areas they are currently fundraising for as well as special projects. Donations are sourced from companies and family trusts. H Mantziaris noted that any relevant issues that arise from the patient story will be brought to this Committee.

- b) Patient Care Committee – N Cowlshaw advised that this committee has been combined with the Quality Committee commencing next year and will be a trial for six months.

7. GENERAL BUSINESS

7.1 Announcement of Lyn Rex's resignation

The Committee noted L Rex's resignation. A letter from the Co-Chairs has been sent thanking her for her contribution.

7.2 Revised pamphlet for the Community Advisory Committee

Pamphlets were distributed for dissemination.

7.3 Save the Date – 2016 Patient Experience Symposium

The dates for the Symposium were noted – 5 & 6 May 2016.

7.4 New member

Ms Gail Parsonage has joined the committee but unfortunately unable to attend this meeting.

7.5 Consumer training course

S Rawlinson attended the recent course and gave a brief report. The training was of interest and outlined the importance of involving the Committee in all stages of new projects from information provision, consultation, partnership, development, delegation and assessment of these projects. It is important to understand Standard 2 of the ACHS Standards (a copy will be mailed)

7.6 Hospital General Manager

The Committee congratulated Vanessa Madunic on her appointment.

8. NEXT MEETING 5 February 2016

Signature



Date 5/2/16

Signature



Date 5/2/16