

**Friday 3 June 2016, 10 am**

**MINUTES**

**PRESENT:**

Ms T Fletcher, Community member  
Ms C Heckendorf, Community member  
Ms H Mantziaris, Community member (Co-chair)  
Mr P O'Donoghue, Community member  
Ms G Parsonage, Community member  
Ms S Rawlinson, Community member  
Dr J Wilson, Community member (Co-chair)

RHW/SESLHD representation :

Ms V Madunic, General Manager, RHW  
Ms L Woodhart, Clinical Practice Improvement Manager, RHW  
Ms J East, Secretariat RHW

**2. APOLOGIES:**

Ms N Cowlshaw, Community member  
Ms M Fenn, Acting Director of Nursing & Midwifery Services, RHW  
Dr J Svensson, Health Education Co-ordinator and Diversity Health Officer, RHW

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H Mantziaris opened the meeting.

**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 8 April 2016 were adopted.

**5. MATTERS ARISING FROM THE MINUTES**

**Action Items** – updated

H Mantziaris advised for information that the Medical Board of Australia has guidelines for supervised practice for international medical students.

**6. STANDING ITEMS**

**6.1 Youth Health update** - deferred to next meeting

**6.2 SESLHD Falls Committee**

- J Wilson noted areas covered at the last meeting and tabled a report :
- Presentation from Clinical Governance Unit Quality Manager which included patient safety programme
  - Report on falls education working with HETI
  - No serious incidents reported

Baby falls poster from CEC – noted a number of errors : L Woodhart advised that the poster was devised from the RHW model and was changed so language wasn't needed. Brief discussion held on the problems with the CEC poster.

L Woodhart reported that there is an educational process given to patients in Postnatal in conjunction with the posters.

On receipt of the poster and resources from the CEC the Hospital will provide feedback.

**ACTION:** L Woodhart will advise when resources have been received

**6.3 Quality & Safety Data** - nil to report

**6.4 Patient Feedback**

L Woodhart tabled the following documents and outlined:

- Flow chart showing the process for complaints and management
- Example of a complaint report from the online system – Severity Assessment Code (SAC) 1 generates an investigation with an external person which then reports to the SESLHD and then the Ministry of Health. The Clinical Excellence Commission reviews all reports and uses them as a guide for programmes across the State. RHW has approximately 2-4 SAC1 incidents a year and 3-4 Health Care Complaints Commission cases.

There are Key Performance Indicators (KPIs) around complaints management – acknowledgement within 5 days and a response in 35 days. Written responses are signed off by the General Manager. Issues are managed on a case by case basis and there is always an offer given to meet and debrief.

L Woodhart co-ordinates legal matters with the Hospital's insurer and legal representatives.

**6.5 Disability Awareness training for staff project**

On hold pending review of current training available – refer to Action Item No 4.

**6.6 Feedback from Hospital Committee representatives**

a) Clinical Council – P O'Donoghue noted a presentation on activity based management systems.

b) Quality & Patient Care Committee – deferred

**7. GENERAL BUSINESS**

**7.1 Report on pre-meeting of CAC community representatives**

G Parsonage tabled a document summarising discussion points:

- Introduced C Heckendorf and exchanged knowledge and backgrounds
- Proposal from the Hospital to collect and collate patient feedback information – need further clarification

- Need a separate meeting to work through Standard 2
- Ways and means of getting information across to the community at local network levels
- Explore the possibility of attending a Community Advisory Committee meeting at another facility – L Woodhart is liaising with A Justice

**ACTION:** L Woodhart will liaise with A Justice re attendance at another facility CAC

**7.2 Standard 2 – Partnering with Consumers**

L Woodhart will organise a separate meeting of the Committee.

**8. BUSINESS WITHOUT NOTICE**

**8.1 TV Information Channel**

S Rawlinson queried the commencement of an information channel. L Woodhart advised that this will be looked at further after the upcoming Work Health Safety Survey in July and there will be consumer input.

**8.2 Internal Audit**

L Woodhart noted an audit being conducted on Standard 2 compliance and will organise consultation with members of the Committee.

**ACTION:** L Woodhart will organise consultation

**8.3 Access Audit**

T Fletcher asked if there has ever been an access audit undertaken for people with disabilities. L Woodhart and V Madunic will ask the SESLHD Work Health & Safety Department to advise. If needed T Fletcher has information on access consultants for this purpose.

**ACTION:** L Woodhart and V Madunic will seek advice from Work Health Safety Department

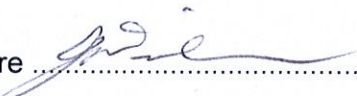
**8.4 Consumer input**

L Woodhart noted input on a number of projects :

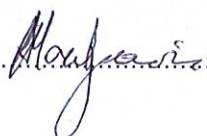
- Fertility Centre renovations : 2-3 consumers who have undergone fertility treatment
- Maternity care survey : C Heckendorf involved – current survey has been removed from the Hospital website and is being reviewed

Meeting closed 11.35 am

**NEXT MEETING** 5 August 2016

Signature  .....

Date ..... 17/8/16 .....

Signature  .....

Date ..... 14/10/16 .....