St George Hospital Consumer Advisory Group

Tuesday 25 July 2017 at 9.00am Boardroom, Level 4, James Laws House St George Hospital

the SGH CAG.



	Minutes
	Description
1	Present:
	Jan Denniss, Consumer Representative
	Sandra Gove, Clinical Quality Manager, SGH
	Susan Hanrahan, Consumer Representative (Chair)
	Paul Holdsworth, Consumer Representative
	Michael Jordan, Consumer Representative
	Samantha Knight-Gifford, Aboriginal Hospital Liaison Officer
	Rod Lynch, Consumer Representative
	Vicki Manning, SGH Director of Nursing
	Elizabeth Martin, Consumer Representative
	Leisa Rathborne, SGH General Manager
	Nick Skleparis, Manager, Corporate Services SGH
	Apologies:
	Peter Brown, Consumer Representative
	Advija Huseinspahic, Consumer Representative
	 Lorena Matthews, Nurse Manager, Women & Children's Health
	 Guests from The Sutherland Hospital; Colin Dent and Peter Lewis
	In Attendance:
	 Kim Wrightson, SGH Community Relations Officer (Secretariat)
2	Approval of Minutes
	 Minutes dated 27 June 2017 were confirmed as a true and accurate record.
3	Items Arising from Action Plan
	 2.1 Draft signage options for the comprehensive information board to be circulated for
	further comment.
	Complete
	7.9 Remove SGH Heart Failure Project from the SGH Consumer Advisory Group
	Agenda.
	Complete
	 7.10 Discuss the availability of the CAG minutes for the Clinical Council meetings with Sarah McCosker.
	Kim Wrightson advised that all signed minutes are available on the SESLHD Internet site.
1	Declaration of Conflict of Interest
	Nothing further to report.
5	General Business
	5.1 Report from the Chair – Rod Lynch
	4 pages of documents plus the SGH CAG Charter reviewed since the last meeting.
	CAG members conducted further review of the updated signage options.
	Orientation of SGH CAG members will be conducted via the presentations during the
	monthly meetings.
	The Volunteer Report, compiled by Michelle Davidson will be presented to the CAG on a
	quarterly basis.
	A letter of appreciation has been forwarded to Paul Sullivan on his past involvement with
	and the second s

6	Stand	ling Items
	6.1	SGH Patient Safety and Quality Meeting – Jan Denniss
		Jan Denniss was unable to attend due to the time change for this meeting.
	6.2	SGH Signage Committee – Jan Denniss
		Meeting to be held on Thursday 27 July 2017.
	6.3	SGH Infection Control Committee – Jan Denniss
		Meeting was cancelled.
	6.4	District Steering Committee for Falls Injury Prevention in Health Facilities – Jan
	0.4	Denniss
		No meeting
	6.5	SGH Falls Prevention Committee – Paul Holdsworth
	0.5	Paul Holdsworth was unable to attend the meeting.
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	•	Carmel Moses, Head of the Falls Committee advised Paul that the film clip is available.
	0.0	Action: Organise a screening of the clip – Kim Wrightson
	6.6	SGH Food & Nutrition Committee – Susan Hanrahan
	•	No meeting
	6.7	SGH Patient Flow & Demand Management Strategic Committee
	•	Discussions to be held with Leisa Rathborne regarding a new consumer representative fo
		this Committee.
	•	Paul Holdsworth has expressed an interest in attending.
	6.8	SGH Art Committee – Susan Hanrahan
	•	Meeting to be held on 26 July 2017.
	•	It is anticipated that the installation of the heritage wall will be next week.
	6.9	Clinical Council Report – Rod Lynch
	•	Excerpts of the unconfirmed June 2017 meeting minutes have been circulated.
	•	Rod Lynch attended the meeting held on 21 July 2017 where presentations/discussions
		included Institute for Healthcare Improvement (IHI) Global Trigger Tool (introduction at
		SGH); Basic Physician Training (BPT) Network across Sutherland and St George
		Hospitals; and Hand Hygiene Audit Results.
	•	Rod Lynch asked Leisa Rathborne to clarify the IHI Global Trigger Tool to the Committee.
		This is an internationally recognised measure looking at harm to patients. Currently staff
		are asked to voluntarily report incidences through our IIMS incident reporting system. IHI
		is an audit of clinical notes. 20 patient records are reviewed each month. Staff will be
		identified to complete these investigations. Trends will be identified and addressed. This
		tool will make staff accountable.
	•	Rod Lynch sought clarification on the Hand Hygiene Audit and asked if it was our intentior
		to "name and shame" or to "educate" our staff. The Committee was advised that the hand
		hygiene national benchmark is 80%. All staff, with the exception of medical staff reach the
		85%. Information sessions will be held with departments regarding their hand hygiene
		results. If there is no improvement then counselling will be identified. Hand hygiene
		reports are displayed at all ward entries.
	6.10	General Manager Report – Leisa Rathborne
	•	SESLHD Improvement and Innovation – St George Hospital Award Winners
		Integrated Health Care Award
		Community Assessment and Liver Liaison – CALL project for Chronic Liver Disease
		Professor Amany Zekry, Lisa Dowdell, Ling Zhang, Carlie Stevens, Amy Ko, Sarah Rolls, Jill Cameron
		Preventative Health Award
		Better Health for Homeless Men

Harry Collins Award

Improving Patient Flow and Reducing Access Block during Peak Activity and Influenza Season

Lauren Sturgess, Julie Cosgrove, Belinda Boston, Christine Cook, Dr Chris Weatheral, Dr Peter Taylor, Mary Dunford, Christine Day, Leanne Zhou, Stephen O'Brien, Caitlin Keighley, Dr Steven Lindstrom

Journey to Excellence Award

Nurse Lead Discharge in the ED

Dr Peter Grant, Rochelle Cummins, Lauren Neuhaus, Alana Clements, Dr Trevor Chan, Antoinette Borg

Translational Research Award

Hope: Helping Older People with End-stage Kidney Disease

Professor Mark Brown, Dr Frank Brennan, Elizabeth Josland, Alison Smith, Anna Hoffman, Jessica Stevenson

Volunteer of the Year Award

Douglas Park –Recreational and Leisure Program (Aged Care Precinct)

- Acute Services Building
- 77 days to handover 9 October 2017.
- Community Open Day tentatively scheduled for 14 October 2017. Minister to open the building.
- Western entry/Patient enquiries opens this Friday.
- The Committee were advised that the funding process for redevelopment projects is activity based. Justifiable reasons regarding activity increase are submitted to the Ministry. Activity base funding is a mechanism to compare costs. Not an ideal tool for new services.
- Paul Holdsworth asked with the additional operational areas with the opening of the ASB, will this reduce waiting times. The Committee advised that this is the intension.
- Out of area patients are continually being reviewed. Winter season has hit. Some nursing
 homes have been closed due to the flu virus. Winter strategies are in place. Ambulatory
 care hours have been extended. MRI's are being extended to Saturdays; Flying Squad
 visit nursing homes; extra orderlies have been placed in the Emergency Department;
 additional Allied Health staff covering weekends; trialling a weekend discharge Doctor (as
 of 14 August 2017). These trial services could be of assistance when the ASB opens.

6.11 Nursing Update - Vicki Manning

 Recruitment continuing for the ASB. Strategies and initiatives are in place. Gradually building up staff. Increased new Graduates. Recruitment process commenced last year as it was anticipated it would be a slow process.

6.12 Quality and Safety Update - Sandra Grove

- No significant issues reported.
- Rod Lynch raised the improvement of "Inadequate Hand Over Incidents" from the May report where we received a "C". The current report we received a "B". Sandra Groveadvised that the 'C" related to 13 incidents in March 2017; we are now back to the normal range.

6.13 Corporate Services Update - Nick Skleparis

- Retail Project has commenced. Builders are currently on-site. Stage 1 includes the upgrade of the public bathrooms. There will be a pop up store where the vending machines are currently located (near the old Coffee Shop). There will be outdoor sitting areas. The timeframe for completion is 6 months for the entire zone. Zouki have expressed an interest to take over Villiers Street Canteen. Minor fit out to be completed. This will be a 2 year lease due to the anticipated Stage 3 works. There will be pop up stores at the front of the Hospital which will hopefully include a florist and gift shop.
- Concessional Car Parking Policy commenced 1 July 2017. To date there has not been any issues with the availability of parking spaces.
- Recruitment has commenced for new Corporate Services positions for the ASB.

		Jan Denniss advised that additional volunteers are required and that we should
		investigate an advertisement in the Leader.
		After the meeting, Michelle Davidson, Volunteer Manager advised the following:
		- The promotion of wayfinding volunteers is constantly being advertised upon receiving
		any phone or email inquiries, advertising is also on the internet site to source more
		community interest.
		- There has been no interested received from the existing volunteers to assist with this
		program.
		- The focus has been on Gray Street due to redevelopment changes and assisting with
		the confusion this has created.
	•	Jan Denniss reported that there is a glare in the Information Booth in the mornings and
		suggested that we might like to investigate a blind.
		Action: Nick Skleparis to discuss with Michelle Davidson, Volunteer Manager
		Nick Skleparis advised that ISS clean the booth once a month. Jan Denniss suggested
		that the fly screens be removed as it makes it difficult to see in the booth.
7	-	rts for Noting
	7.1	Volunteer Report
	•	Report will be circulated quarterly.
	7.2	Diversity Health Report
	•	Report circulated and tabled.
	7.3	Central and Eastern Sydney Primary Health Network Report
	•	Report circulated at the meeting.
8	Gove	rnance Items
	•	Nil
9	New I	Business
	•	Nil
10	Carl Dissiller Bills	ness Without Notice
	10.1	Recruitment of CAG members – Susan Hanrahan
	•	Susan Hanrahan suggested that we hold a recruitment process for consumers for the
		Committee.
		Kim Wrightson advised that this has been on hold as we were waiting for finalisation of the
		policy on "Consumer and Carer Representatives – Paid participation in South Eastern
		Sydney Local Health District (SESLHD) Committees" from the District Community
		Partnership Office.
	•	Committee agreed to commence the process.
		Action: Commence recruitment process – Kim Wrightson
	10.2	New signage/Hospital Map – Nick Skleparis
	•	New signage and Hospital map will be presented by to the SGH Signage Committee on
		27 July 2017.
	10.3	Report in the Sydney Morning Herald – Rod Lynch
	•	Rod Lynch raised an article in the Sydney Morning Herald on 11 June 2017 which refers
		generally to the lack of training of Doctors in the use of the critical medical device,
		Ultrasound in Emergency Departments, which can create a predicament where "Point-of-
		care" ultrasounds (POCUS) cannot offer patients faster and more accurate care.
		Rod Lynch asked how this might relate to SGH.
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		Action: Investigate the training for our Doctors in ED – Leisa Rathborne
11	Confi	Action: Investigate the training for our Doctors in ED – Leisa Rathborne dential Items

12	Meeting Closed
	Date of next meeting – Tuesday 22 August 2017 at 9.00am, Boardroom, Level 4 James Laws
	House, St George Hospital

CERTIFIED A CO	RRECT RECORD	
	REDUCT E LYNCH!	
Name	h. E Linch	
Signature		
Date	22-6-2017	