St George Hospital Consumer Advisory Group

Tuesday 24 April 2018 at 9.00am Boardroom, Level 4, James Laws House St George Hospital



	Minutes			
	Description			
1	Present:			
	 Maria Bulmer, A/Nurse Manager, Women's and Children's Health 			
	Jan Denniss, Consumer Representative			
	Sandra Grove, Clinical Quality Manager, SGH			
	Paul Holdsworth, Consumer Representative			
	Advija Huseinspahic, Consumer Representative			
	Michael Jordan, Consumer Representative			
	Samantha Knight-Gifford, Aboriginal Hospital Liaison Officer			
	Gregory Lill, Consumer Representative			
	Rod Lynch, Consumer Representative (Chair)			
	Elizabeth Martin, Consumer Representative			
	Leisa Rathborne, SGH General Manager			
	Lauren Sturgess, A/SGH Director of Nursing			
	Apologies:			
	Peter Brown, Consumer Representative			
	Susan Hanrahan, Consumer Representative			
	Vicki Manning, SGH Director of Nursing			
	 Lorena Matthews, Nurse Manager, Women's and Children's Health 			
	Nick Skleparis, Director, Corporate Services SGH			
	In Attendance:			
	 Kim Wrightson, SGH Community Relations Officer (Secretariat) 			
	Approval of Minutes			
	 Minutes dated 27 March 2018 were confirmed as a true and accurate 			
	record.			
	Items Arising from Action Plan			
	 10.1 Raise issues of serviette size with the SGH Food and Nutrition 			
	Committee.			
	Action: Deferred until the next SGH Food and Nutrition Committee meeting			
	– Susan Hanrahan.			
	 10.1 Circulate new CAG brochure to CAG members 			
	Circulated at the April 2018 meeting - Completed			
	 7.2 Discuss with Infection Control if a viewing of the "What I heard" – a 			
	patient's perspective of being isolated could be organised for the CAG.			
	Action: Infection Control did not attend the April 2018 meeting. Send invite			
	to attend the May 2018 meeting – Kim Wrightson			
	 7.7 Consumers agreed to hold training sessions as part of our CAG 			
	meetings leading up to accreditation.			
	Action: Organise training sessions – Sandra Grove/Kim Wrightson			

 10.1 Suggested changes for Kensington St & Belgrave St intersection. Obtain advice with Project Director on how to proceed with this proposal. **Action:** Deferred as Nick Skleparis was an apology at the meeting. 11.4 Remicate Infusion Treatment in Ambulatory Care – Investigate reason for scheduling change. Action: Deferred as Vicki Manning was unable to attend meeting. 4 Presentation 4.1 "What I heard" - a patient's perspective of being isolated - Belinda Boston Belinda did not attend the meeting. Action: Send invitation to attend the May 2018 meeting - Kim Wrightson 5 **Declaration of Conflict of Interest** Nothing further to report. 6 **General Business** 6.1 Report from the Chair - Rod Lynch Since the March 2018 meeting, consumers have reviewed 3 pages of documentation. Margaret Foreman has been successful in applying to join our CAG. She is currently on leave and will attend the May 2018 meeting. A number of invitations to apply to join forums/committees have been circulated during the month: NSW CMS Design My Food Choice – Taste testing EOI, SESLHD DIAP Implementation Committee During a meeting with David Coleman, Federal Member for Banks and Assistance Finance Minister he raised the subject and made glowing supportive remarks regarding the SGH Microbiome Research Centre. Article in the St George Leader: The Microbiome Research Centre is leading the study of how microbiota play a vital role in our overall health and how it can prevent and cure diseases Research into how bacteria in the human body can transform health Refurbished centre planned to open in February 2019. Laboratories will be located on Level 2, Research & Education Building The Foundation received \$4m from the Federal Government to establish the Centre plus \$1.5 million from the State Government towards its completion Collaboration with the St George and Sutherland Medical Research Foundation, University of New South Wales and the South Eastern Sydney Local Health District This will be the only centre in Australia dedicated to undertaking research in microbiota Dysfunctional microbiomes are associated with chronic diseases including cancer, obesity, diabetes, asthma, Alzheimer's and autoimmune diseases including multiple sclerosis and rheumatoid arthritis, and various neurodevelopment disorders like autism.

7	Stand	ling Items
	7.1	SGH Signage Committee – Jan Denniss
	•	Meeting on Thursday 26 April 2018.
	7.2 SC	GH Infection Control Committee – Jan Denniss
		2018 Winter planning:
		- Rapid Viral Gastro test
		- Health Pathology
		Penalties for hospital acquired infection complications. Unknown what will
		be penalised. Potentially more impact on Infection Control resources. The
		Committee were advised that the Commonwealth will impose penalties on
		the State from the next financial year. There are seven complications that
		hospitals will be penalised on such as falls, hospital pressure injuries,
		hospital acquired infections, UTI's, thrombosis.
	7.3	District Steering Committee for Falls Injury Prevention in Health
		Facilities – Jan Denniss
	•	Committee did not meet.
	7.4	SGH Patient Safety and Quality Meeting – Paul Holdsworth
	•	Committee welcomed Paul back to our meeting. As this was his first
		meeting for 2018, he was unable to report on SGH Patient Safety and
		Quality meeting; SGH Falls Prevention Committee; SGH Access to Care
		Committee; National Standards 2 Working Party.
	7.5	SGH Falls Prevention Committee – Paul Holdsworth
	•	As per Item 7.4.
	7.6	SGH Access to Care Committee – Paul Holdsworth
	•	As per Item 7.4
	7.7	National Standards 2 Working Party – Paul Holdsworth
	•	As per Item 7.4
	7.8	SGH Food & Nutrition Committee – Susan Hanrahan
	•	Deferred as Susan was unable to attend the CAG.
	7.9	District Community & Consumer Council (DCCC) – Peter Brown
	•	Peter was an apology as he was attending the DCCC meeting at the same
		time as CAG.
	7.10	Clinical Council Report – Rod Lynch
	•	Excerpts of the unconfirmed March 2018 meeting handed to CAG members
		for information.
	•	Meeting held on 20 April 2018. The following items were discussed:
		- Clinical Council – Evaluation
		- Hand Hygiene audit results (substantial improvement)
		- National Standards 6 – Clinical handover
		- End of Life Care Plan Lead
		- Discharge Summary template

7.11 General Manager Report – Leisa Rathborne

- Zouki opened the Belgrave Café. It has been well attended. A florist/gift shop will be located in the vacant area, Gray street foyer. Coffee cart to be installed in the atrium. Coffee shop, Kensington Street entrance has also opened. They are however, still reviewing the outdoor seating area. Jan Denniss raised the issue that the doors to the outdoor area of the Belgrave Café are heavy and difficult to open if you are carrying your food. Automatic doors would be suitable.
- Ward moves are still occurring. Last major ward move was two weeks ago MAU. General Medical Unit will eventually go into ASB. Awaiting works on the Day Surgery Unit to be completed. Last move is Ambulatory Care Unit into 2 East.
- In the next few months the "Patient Opinion" roll out will occur. This program was started in Sydney Hospital. It offers patients an opportunity to feedback on-line regarding their hospital experience. If they do not have access to a computer, they can write it down and ask the nurse to enter their information. Names can be removed from the entry. Over a 12 month period, Sydney Hospital's complaints dropped by 30%. We have the opportunity to respond to the comments. An email will be sent to the person once they have entered their feedback. They will also receive an email if we have responded to their post. These posts will help us identify themes eg what we do well and what areas we need to improve. Advija Huseinspahic asked if we should look at having a computer available for patients on each ward. The Committee was advised that due to space it might be difficult to place a computer in each ward, but we can certainly investigate a computer in common areas such as the Belgrave café.

Action: Invite Anthony Marsh, Patient Experience Manager to present "Patient Opinion" at the next CAG meeting – Kim Wrightson

7.12 Nursing Update - Lauren Sturgess on behalf of Vicki Manning

- International Nurses and Midwives Day on 12 May 2018. We hold an annual ball with 300 staff attending. There is also an award dinner in collaboration with Hurstville Rotary.
- Transitional nurses commenced during the months of February/March 2018.
 120 recruited across the facility. We have a robust mentorship program.
- 11 Irish nurses have also commenced (arrived in March 2018).
- Nursing engagement survey is completed every 2 years across the District.
 The survey covers issues such as job satisfaction, wellbeing etc. The outcomes drive our future visions.

7.13 Quality and Safety Update - Sandra Grove

- Patient Safety dashboard was presented.
- Received mainly A's.
- C's still within acceptable range.
- We received a SAC 1 (harm or unexpected death). This is the 2nd reported SAC 1 for 2018. We received two SAC 1's in 2017.
- Hand hygiene audit from November 2017 to March 2018 showed a significant increase in compliance for Doctors 60% to 75%.
- Innovation and Improvement Awards have closed. We have had a submission for every category.

	7.14	Corporate Services Update – Nick Skleparis				
	•	Deferred as Nick was an apology to the meeting.				
8	Reports for Noting					
	8.1	Volunteer Report				
	•	Report circulated and tabled.				
	•	Item raised by Rod Lynch regarding the recruitment process. The				
		Committee was advised of the problems with the new system and the				
		subsequent processing delays.				
	8.2	Diversity Health Report				
	•	Report circulated and tabled.				
	•	Discussions held that now a consumer will be attending the Diversity Health				
		Committee (quarterly) we do not need to receive a report. Add Diversity				
		Health Committee as an agenda item.				
		Action: Add as an agenda item – Kim Wrightson				
9	Gover	nance Items				
	•	Nil				
10	New B	usiness				
	•	Nil				
11		ess Without Notice				
	11.1	Clinical Excellence Commission's REACH Initiative – Rod Lynch				
	•	Rod Lynch asked if the REACH initiative has been introduced to SGH.				
	•	REACH – A rapid response programme designed to enable patients and				
		their families to escalate their concerns when worried that a patient's				
		condition was deteriorating and clinical staff were not responding – aims to				
		become a key patient safety tool across all NSW hospitals.				
		The Committee was advised that this was developed from a patient				
		outcome in Queensland.				
	•	Posters have been developed to communicate this initiative to visitors,				
		families and carers. Brochures have been printed in 6 different languages				
		and are available on the wards.				
	•	If a family member, carer or friend have concerns regarding the patient care				
		they can initially speak to their nurse. If they don't believe they are being				
		heard, it can be escalated to the Nurse Manager (or in-charge); then to a senior medical staff member. The final course of action would be to submit a				
		PACE call.				
		We rolled out this imitative two years ago. A recent audit has identified gaps that we are addressing.				
		Information about this is also in the Patient Information Booklet.				
	11.2	Director of Clinical Services – Rod Lynch				
	•	Rod asked if there was an impact on patient safety and quality with the				
		absence of the Director of Clinical Services.				
		The Committee was advised that we have put initiatives in place. Senior				
		Doctors are taking carriage of particular areas such as:				
		- Ensuring staff are credentialed				
		- Review of death certificates				
		- Review of death certificates - Reviewing high cost medications				
		- Neviewing high cost medications				

	11.3 CAG Meeting during Accreditation week – Rod Lynch			
	 Surveyors would like to attend a CAG meeting during accreditation week (5 to 9 November 2018). 			
	 At this stage we will keep the scheduled October and November meetings in our diary. Committee will be notified of dates once finalised. 			
12	Confidential Items			
	Nil			
13	Meeting Closed			
	Date of next meeting - Tuesday 22 May 2018 at 9.00am, 3rd Floor Conference			
	Room, James Laws House, St George Hospital			
CERTI	FIED A CORRECT RECORD			
Name RODNEY E LYNCH				
Signati	ure PCCA9			
Date	22-5-18-			