

SUTHERLAND HOSPITAL AND COMMUNITY HEALTH SERVICES

LOCAL COMMUNITY ADVISORY COMMITTEE

Date: Wednesday 6 August 2008
Venue: Group Rooms, Level 2, Sutherland Hospital
ATTENDEES: Brenda Hagan (Chairperson), Lyndall Howes, Paul Moore, Robert Brice, Colleen Loder, Sharon Hudson, Chris Bentley, Ross Johnson, Bronwyn Carruthers (DON), Linda Vari (Secretary)

Item	Comments	Action
1. Apologies	Sarmistha Kar, Lisa Broadley who has taken up a new position. Two new members of the consumer group were welcomed. Sharon Hudson with an interest in the Health System in general and Chris Bentley an ex. Health employee- Director, Quality Unit at Nepean.	
2. Acceptance of Minutes – July 2008	New Business no. 5 Signage. Delete sentence “ Lyndall Howes reported that she received comments regarding poor signage at TSH”. This was incorrect.	L.V
3. Matters Arising from Previous minutes:		
a) Communication Flowcharts	Bronwyn reported that these are in all rooms(concerns/compliments)	
b) Representatives on committee	Bronwyn Carruthers to send out list to Committee. The committee was asked whether they knew of anyone out in the community who may also be interested.	B.C
c) traffic management survey	Laurie Boyd from Maintenance told the group that a traffic Survey had been done by an independent body and had been completed. An Action plan is being drawn up including a pedestrian crossing. Laurie will forward the Action Plan to Bronwyn Carruthers and it will be sent on to members.	L.B and B.C
d) Signage	Laurie Boyd from Maintenance explained that due to construction on site there have been difficulties but signage is underway for these new areas. The signage near Reception is under review and a map is being considered. Recommendations to rename levels is being taken by Bronwyn Carruthers to the Executive meeting following consumer recommendations. A directory on each floor was recommended by the group as well as educating the Switch operators	B.C.

	of the various meeting rooms within the hospital. Laurie stated that Management recognises there is a problem and are working on it but are waiting for all building work to be completed.	.
e) Allied Health Positions	All management positions are now Central Network based. We are in the progress of recruiting for other positions.	
f) Consumer group Profile box	We are awaiting the Patient Survey results before we go any further with the suggestion box. This will have to be approved by the Executive Committee first. Consumer Group could have a small stall at the hospital's 50 th Anniversary celebrations.	B.C.
f) Patient Survey results	Bronwyn to send out copy of NSW report. Ross Johnson mentioned a booklet titled Your Health Record. A copy of the TSH results can be used as a benchmark against other hospitals with the same services.	B.C.
g) Change machine	It was mentioned the difficulties in finding change on weekends especially for patients. Bronwyn to take to Finance Manager.	B.C
h) Patient's telephone	Bronwyn stated that patients do not need change as notes can be used. There are Hostel machines on each floor.	
I) Patient Feeding	Linda Vari informed group that at present volunteers are involved on the Barkala ward. After another training day with existing and new volunteers the programme will be introduced to Killara and the Dementia Unit. This should happen before the end of the year.	
J) Relative Feedback	Flowcharts are now in place. Relatives can ask R.N. if any concerns.	L.V
K) Drink machines	Can not be used?	
d) Standing Agenda Items		
a) Hospital Update	A new General Manager has been appointed Cath Whitehurst. Cath was an Intensive Care nurse and CNC and has experience in Clinical Operations in the Western Sydney Area health Service. She will be attending the next meeting. Mental Health:	

	<p>The Mental Health Rehab Unit will open later this year. It has 28 beds and will be very slow stream with a 12 -18 month stay.</p> <p>Nursing Home: At present this is on hold.</p> <p>Emergency Dept: At present it is very busy with presentations up 10%. There is an increase of 3% in aged persons requiring ambulance admission.</p> <p>Children's Ward: The only adults who have been admitted to the ward have been suitable female patients who have been housed in separate rooms. Management are considering taking some beds from this ward and dividing them from the children's ward with fire doors.</p>	
<p>5. New business</p> <p>Pamphlets</p>	<p>Brenda Hagan reported that she received an email from Gail Smith, Clinical Governance Unit to review a draft pamphlet. Bronwyn asked for copies of pamphlet to be brought long to next meeting.</p> <p>.</p>	B.H.
<p>7. Guest Speaker</p>	<p>Nicole Shepard , Co-Director Aged and Extended Care; Aged care consists of</p> <p>Killara Acute, Aged care: with 17 beds including 10 dementia specific. They are hoping to begin a Leisure Support service using volunteers.</p> <p>Rehabilitation Unit: this is a 29 bed ward and accommodates all ages.</p> <p>Barkala: has 25 beds and is located on level 2. On 26/3/08 ACAU Aged Care Assessment unit was opened. It contains 7 Rapid Assessment beds. This service includes Allied Health as well as Nursing assessment and appropriate services are implemented.</p> <p>Southcare: there are 130 staff providing a comprehensive range of services including Occupational Therapy, Physiotherapy, Dietetics and Continence services.</p>	

	<p>Services: COMPACS; this is a 12 week service to patients at home.</p> <p>Transitional care: this provides 6 weeks of services to those at home.</p> <p>Caring Centres: We have a co-ordinator who looks after 20 centres.</p> <p>Dementia Services: Aged care have 2 day centres the Retreat and the Cottage.</p> <p>Teams; ACAT: these staff carry out assessments of people at home who may need respite, hostel or nursing home care.</p> <p>SHALT: Sutherland Heart Lung team. These mservice is for discharged patients who may need more management.</p> <p>ASSET:Chronic patients who may often present at Emergency and may not be able to remain at home.</p> <p>COMMUNITY NURSES: these nurses endeavour to get patients home as soon as possible with services. How is the service measured?</p> <ol style="list-style-type: none"> 1. patient satisfaction Surveys 2. length of stay 3. key performance indicators 4. readmission rates 	
8. Next Meeting	Wednesday 3 September 2008 at 5.00 pm Group Rooms 1 & 2	