

# AREA HEALTH ADVISORY COUNCIL MEETING

THURSDAY 30 JULY 2009 9.00AM – 12.00PM  
(8.00AM – 9.00AM CLINICAL REPRESENTATION)  
VMO LOUNGE, RYDE HOSPITAL

NORTHERN SYDNEY  
CENTRAL COAST  
NSW HEALTH

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## MINUTES

<b>1 Present:</b>	Prof Carol Pollock	Chair
	Dr Greg Fulcher	Clinical Representative
	Dr Magda Campbell	Clinical Representative
	Dr Ann Wignall	Clinical Representative
	Mrs Georgia Sidiropoulos	Community Representative
	Ms Selina Chaine	Community Representative
	Mr Paul Tonkin	Community Representative
	Ms Pauline O'Connor	Community Representative
	Mr Paolo Totaro	Community Representative

In attendance:	Mr Matthew Daly	Chief Executive
	Ms Wendy Hughes	Director Finance and Corporate Services
	Mr David Miles	Manager, Health Services Planning
	Ms Carolyn Treharne	Community Participation Officer
	Ms Martina Fox	Ryde Hospital & Community Health Services Community Participation Manager
	Mr Phil Peterson	Chair, Yerin Aboriginal Health Service Inc

<b>2 Apologies</b>	Prof Margaret McMillan	Community Representative
	Mr Rick O'Brien	Acting Project Director, Population Health Planning and Performance
	Mr. Pete Whitecross	Manager, Community Participation Unit
	Ms Sue Shilbury	RNS & Ryde Health Service General Manager

### 3 Welcomes:

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### 4 Presentations

#### 4.1 Analysis of Budget Impact (AC-09-Jun-12)

Ms Wendy Hughes provided a presentation on the analysis of 2009/10 budget impacts for Northern Sydney Central Coast Area Health Service (NSCCAHS). Ms Hughes gave an overview of the 2008/2009 results – variance to budget, a comparison of 2008/2009, Key General Fund variances and the 2009/2010 budget impacts.

#### 4.2 Primary and Community Health (PaCH)

Mr David Miles provided a presentation on the Primary and Community Health (PaCH) Strategic Plan update. The presentation covered the PaCH Strategic Plan Steering Committee Membership, the process for review, the background and issues papers, the PaCH Planning Framework, the reference groups, other consultation processes.

The aim of the PaCH Strategic Plan is to take into account demographics, the level of need across the area and current practices and whether they are still required, to look at new opportunities to work with GPs and identify alternative sources of funding.

Mr Miles outlined the process as comprising of two stages:

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1. Information collection and developing a profile of services (current stage)
2. Review of services and synthesis into service proposals.

Mr Miles informed members the Steering Committee has identified ways to involve Community Participation Committees (CPCs) and other participation bodies in the review process. The Steering Committee is planning a number of consultative events. A workshop around key principles will be held in late August /early September 2009, with CPC involvement being encouraged. Reference groups are to commence in September 2009 and leaders have been identified. There has been a call for CPC representation on these. Also, planning for General Practitioner (GP) and other key stakeholder forums has begun.

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## 5 Confirmation of Minutes

The Committee accepted the minutes of the meetings held on 25 June 2009 as true and accurate records of proceedings.

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## 6 Business Arising from Previous Meetings

### 6.1 Review of Action Items from Previous Meetings

#### Meeting on 25 June 2009

Ref No.	Issue	Action	Officer:	Due Date	Outcome
AC-09-Jun-12	2009-2010 State Budget	Analysis of Budget impact on NSCCAHS - presentation	Director, Finance and Corporate Services	30 July 2009	Complete
AC-09-Jun-13	NSCCAHS FTE numbers	Detail the process to describe how externally funded positions are accounted for & recruited in relation to FTE caps	Director, Workforce Development	30 July 2009	
AC-09-Jun-14	Primary and Community Care Services	Report to AHAC detailing feasibility of a web based directory of NSCCH Community Health Services	Director Clinical Operations	24 September 2009	
AC-09-Jun-15	Food Services Governance - NSCCAHS Food and Nutrition Advisory Committee (FANAC)	Report on the role of the Food and Nutrition Group in relation to FANAC	Director, Clinical Governance	27 August 2009	
AC-09-Jun-16	Caring Together - AHAC monitoring	Request to LICs regarding changes to local monitoring, reporting and governance of Caring Together activities.	Manager, Community Participation and Partnerships (CPU)	30 July 2009	Complete

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Ref No.	Issue	Action	Officer:	Due Date	Outcome
AC-09-Jun-17	Caring Together - Themes and Recommendations Report	Distribute to the AHAC members and General Managers for distribution to Local Implementation Councils	Manager, Community Participation and Partnerships	30 July 2009	Complete
AC-09-Jun-18	Essentials of Care Project	Report on implications of the rollout of the Essentials of Care Project	Director, Nursing and Midwifery Services	24 September 2009	
AC-09-Jun-19	NSCCAHS Trust Funds	Report on the allocation of all Trust funded staff to appropriate cost centres	Divisional Manager Medical Services RNSH	30 July 2009	
AC-09-Jun-20	Patient Safety Program - War on Warfarin Project	Report to AHAC on General Practitioner involvement in the Project	Director, Clinical Governance	27 August 2009	

## Meeting on 21 May 2009

Ref No.	Issue	Action	Officer:	Due Date	Outcome:
AC-09-May-08	NSCCH Multicultural Health issues	Formation of an AHAC taskforce to review and develop strategies	AHAC member to be nominated	30 July 2009	Delegated to LICs Complete
AC-09-May-11	Signage at Royal North Shore Hospital	Raise concerns over lack of signage	AHAC/North Shore Ryde CPC members	30 July 2009	Complete

- The Multicultural Health action item (AC-09-May.08) will be left to the Local Implementation Councils (LIC) to monitor.
- Members have requested further information with regard to signage at Royal North Shore Hospital. This will be emailed to all members. Members agreed once the redevelopment is finalised it would be helpful for maps to be available in other languages.

## Meeting on 30 April 2009

Ref No.	Issue	Action	Officer:	Due Date	Outcome:
AC-09-Apr-06	PaCH Strategic Plan	Presentation to CPCs	Manager, Health Services Planning	30 July 2009	
AC-09-Apr-07	AHAC meeting with Yerin Aboriginal Health Services	Arrange a combined AHAC/Yerin meeting	CPU	30 July 2009	Complete

- It was noted that Northern Beaches CPC had received the PaCH update, Hornsby Ku-ring-gai CPC were to receive the presentation at this months CPC meeting while North Shore Ryde and the Central Coast CPC updates were yet to be scheduled.

## Meeting on 19 March 2009

Ref No.	Issue	Action	Officer:	Due Date:	Outcome:
AC-09-Mar-03	Community Representation on the PaCH reference groups	Contact CPCs to seek representation	Health Service General Managers	29 May 2009	Complete

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## 6.2 Review of Action Items from Staff/CPC Meetings

Action Items report from the AHAC Meetings with Staff/CPC members was distributed in the papers. See attachment 1.

- With regard to the Wood Report action item, Mr Daly advised that funds had been reallocated from the Department of Community Services (DoCS) to Health. Mr Daly has requested a presentation looking at what we can do with them.
- Dr Wignall will monitor any issues that arise from the presentation.
- Professor Pollock has requested the work plans from each Local Implementation Council (LIC).
- Mr Daly announced that planning money has been approved for Hornsby Ku-ring-gai Health Service to prepare a master plan of the site this year. The Asset Strategic Plan is currently in draft format, but will be available for AHAC review for the September 2009 meeting. This action has been combined with ACS-09-Mar-05 staff / CPC list (HKH costed proposal for refurbishment of operating suites).

## 6.3 CCHS Insulin Pump Services for Children and Adolescents (ACS-09-Mar-06)

Paediatric Diabetes Educator is waiting for confirmation of start date.

## 6.4 Impact of Enhanced Primary Care Scheme (EPC) on Allied Health (AC-08-Jul-004)

Members noted that the brief provided a good background that highlighted the complexities associated with the impact of the EPC Scheme on NSCCAHS. The brief outlined the new Allied Health award changes and the effects of this.

Some private community practitioners, eg psychologists and allied health professionals, have increased their fees due to the introduction of the EPC Scheme, with the result that some patients may have significant out of pocket costs.

The Mental Health aspect of EPC presents more complexity especially with recruitment issues in some areas for psychologists who are not covered under the new Allied Health award. Members asked if different models of care can be developed to solve some of the recruitment issues including utilisation of Rights to Private Practice in services and locations that are hard to staff.

Mr Miles advised that the PaCH Strategic Plan can easily pick up some of the issues resulting from the EPC Scheme, and that such issues can be fed into the issues papers.

Ref No.	Issue	Action	Officer	Due Date
AC_09-Jul-22	DoCS to Health Resource reallocations	Presentation on what we can do with them		August 09
AC-09-Jul-23	Work plans for each LIC	To be forwarded to AHAC for monitoring	General Managers	ASAP

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## 7 Key Business

### 7.1 Caring Together Implementation – Update

#### 7.1.1 AHAC Monitoring - Report submitted to DoH 22 July 2009

Professor Pollock advised that she had recently written to the LICs outlining the AHAC requests for administrative changes to their minutes as well as the data requirements that AHAC had previously discussed. Professor Pollock has some concerns that AHACs requests noted below (from letter to GMs dated 3 July 2009) do not appear to have been discussed in full by the LICs and is hoping this will be rectified.

- That the LICs exchange their minutes with each other;
- In the LIC meeting attendance list, the person's role be included as well as their name;
- Work plans should be developed detailing milestones for implementation. We would recommend that the plans are forwarded to AHAC;
- Where it doesn't already occur, AHAC would recommend the inclusion of a senior allied health practitioner on the LIC;
- That a Community Participation Committee member be invited to attend the LIC;
- That the LIC minutes be shared with the Community Participation Committees (CPCs);
- The following adaptation of the action point summary format was found to be very clear and succinct and we request its adoption.

Mr Daly advised that the LICs appreciate the AHAC input. He acknowledged AHACs added dimension of evaluation during the process as well as a key monitoring role. However, Mr Daly added that the LICs do need to respond to the dynamics of their local facilities.

It was suggested that a more robust way needs to be found for distributing AHAC suggestions and Mr Daly reinforced the importance of not missing these.

Members raised a number of issues for notation.

- Consideration should be given to the development of Advanced Care Directives.
- Concerns were raised that there was no ongoing education for Career Medical Officers (CMOs) in the Garling Recommendations.
- Hospitalists have been assisting with identifying and improving the education of medical officers.
- CMO reviews should be undertaken by the Director of Medical Services.
- Nursing education is working well. Mandatory training is offered after hours.

#### 7.1.2 LIC Agendas and Minutes

Professor Pollock raised AHAC's concerns recently at Area Executive Team Governance Meeting regarding the tick box approach to the Caring Together actions and implementations. Professor Pollock cautioned against this approach adding in the event of an audit, the Area would need to be confident in their process regarding implementation.

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## 7.1.3 Themes (AC-09-Jun-17)

A list of recommendations attached to the five Caring Together themes was included in the papers this month.

Professor Pollock took the opportunity to update members on the four pillars mentioned in the Garling recommendations:

1. Bureau of Health Information (BHI)  
This is a statutory body led by a Board that reports to Health Minister.
2. Clinical Excellence Commission (CEC)
3. Clinical Innovation and Enhancement Agency.  
This agency will have a statutory board and Chief Executive as will the CEC.
4. Institute for Clinical Education and Training

There have been advertisements for new Clinical Support Officer (CSO) positions. The role of the CSOs will be to support a multidisciplinary team, including nursing, medical and allied health professionals. Members agreed that very rigorous performance reviews will be required.

## 7.1.5 Mental Health Drug and Alcohol and Primary and Community Health Reports

These tables indicate which of the Stage One LIC recommendations for implementation apply to Mental Health Drug and Alcohol and Primary & Community Health, and which do not.

## 7.1.6 NSW State-wide Summaries - 15 June 2009

For information only.

## 7.1.7 AHAC letter to LICs (AC-09-Jun-016)

Covered in 7.1.1

Prof C Pollock

## 7.1.8 Progress Reporting – 2009 Timelines

For information only

## 7.2 Yerin Aboriginal Health Services invitation to AHAC

Members have indicated Wednesday 11 November 2009 as the most convenient date for convening the meeting. The Community Participation Unit is awaiting confirmation of this date from the Yerin Board and will provide confirmation details to the AHAC members as soon as practicable.

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## 8 Standing Agenda Items

### 8.1 Chief Executive Update (including Finance and Performance)

The Chief Executive's update was tabled for information. Matthew Daly raised key issues.

The Ryde Rehabilitation Centre redevelopment is still under discussion.

There are many important issues that were raised in the National Health and Hospital Reform Commission (NHHRC)

Professor Pollock advised that AHAC does have an opportunity for a formal response to the NHHRC, adding that she sees this as part of the AHACs role. Members have requested the Executive Summary and the Recommendations. Professor Pollock has indicated she will include member comment in an AHAC response and has suggested members review these within the next month in preparation of a response.

Mr Daly commented he had received documents outlining the views of the Minister and he was happy for these to be circulated amongst the AHAC members.

It was generally agreed the aim was to see considerably improved services develop from this report.

Members discussed if there were any specific risks / benefits for NSCCAHS. Mr Daly indicated he would be happy to take feedback from members in this regard, while awaiting the Commonwealth's position regarding these recommendations.

Members raised concerns regarding the ease of using the NSCCH website.

Initially, they queried NSCCAHS presentation of the internet/website. Specifically the accessibility and usefulness of the website to external use and especially finding staff.

Secondly, they raised the issue of AHAC members having access to the intranet, requesting progress regarding how external people can gain intranet access.

Mr. Daly provided a swine flu update to members.

NSW Health is anticipating the problem to continue up to October 2009 when Health Care Professionals can access the new vaccine. There will be a mass vaccination of school children.

There has been a greater increase in sick leave of staff. This has been monitored with limited interruption of services at Royal North Shore and Gosford Hospital. GPs and practice nurses are receiving free education from NSW Health regarding swine flu and access to Tami flu vaccine. Patients are being encouraged to wear masks when waiting in GP surgeries. The State has been sending out regular updated media releases.

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AC-09-Jul-25	AHAC to review NHHRC Executive Summary, Recommendations & associated.	Email Executive Summary, Recommendations (available on web) and other documents to members with a view to AHAC responding	CPU and AHAC members	27 Aug 09
AC-09-Jul-27	Functionality of NSCCH website and intranet access for AHAC members	Report regarding the accessibility/functionality and or usefulness of the NSCCAHS website and AHAC access to the NSCCAHS intranet	IM&T Chief IM & T Chief Information Officer	September 09

## 8.2 Area Clinical Council

AHAC received Area Clinical Council's Meeting Minutes.

Major ongoing issue is appointment of VMOs.

## 8.3 Allied Health Council Report

Need to ensure industrial concerns are alleviated.

Patricia Norton is the Acting Chair of the Allied Health Council Meetings.

A number of issues have been raised but unfortunately possible solutions have not been suggested.

## 8.4 Nursing and Midwifery

Members discussed the opportunity for the Nursing Council to engage with some of the problems regarding the Caring Together recommendations, by taking a broad approach across the Area in their discussions.

## 8.5 Primary and Community Health (PaCH)

Covered in item 4.2.

## 8.6 Community Participation Committees (CPCs)

Ms Georgia Sidiropoulos reported on behalf of the Central Coast CPC that the committee was seeking AHAC endorsement for the election of the local General Manager (GM) as CPC Chair and a Community Representative as Co Chair. Members discussed this and agreed that the CPC Terms of Reference would provide the final guidance on this issue.

The Terms of Reference state that,

*No more than 13 members will be appointed. **The process for selecting the Chair for the Committee will be decided locally.** The General Manager is responsible for ensuring that the Chair is capable and supported in their role.*

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## 8.7 GMCT Communication

As discussed in item 7.1.3, reporting on the 'four pillars' from the Garling recommendations that will supercede the GMCT.

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## 9 Items for Information/Notation

### 9.1 Directions, Site Map and Parking information for Ryde Hospital.

Directions, map and parking instructions were provided in the AHAC papers

### 9.2 CE and AHAC Chair letters from Ryde Hospital Staff/CPC meetings held July 2008 for 8.00am Clinical Representation Meeting

These were provided as background information to the preceding staff meeting today.

### 9.3 Caring Together - GMCT Recommendations for Community Participation Report from June 2009 meeting

For information.

### 9.4 Caring Together – Bullying documents from June 2009 meeting

Members discussed the online training that raises awareness against bullying, and how the session helps make the process much clearer by providing examples about the performance management aspects of this issue.

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## 10. New Business

### 10.1 Organ and Tissue Transplants: NSW Clinical Advisory Committee

Mr Paolo Totaro has recently been appointed to the Organ and Tissue Transplants Network Committee. It was requested consideration be given to AHAC receiving a presentation about organ and tissue transplants. Members have resolved that if important issues arise these can be conveyed to the AHAC. Mr Totaro will raise relevant issues with AHAC as they come before the NSW Clinical Advisory Committee.

There has been a reduction in the number of cadaveric transplants due to there being fewer deceased with appropriately healthy organs. There are enhancements for donor coordinators in a nationally funded program. There have been difficulties to appoint to this program.

## 11 Venue and Time for Next Meeting

Thursday 27 August 2009, 8.00am – 12.00pm, Green Room, D Block, Wyong Hospital

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**Meeting Closed: 11.50am**

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**CERTIFIED A CORRECT RECORD**

Prof Carol Pollock

.....

**Name**



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**Signature**

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**Date**

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Attachment 1

## AHAC (Meeting with Clinicians and CPCs) Action Sheet - as at 30 July 2009

1					
1	<b>ACS-08-Jul-005</b>	31-Jul-08	Ryde5 - NSCCH Exec to request PACC (SSWAHS) to accommodate cross area patient referrals	Director Clinical Operations	December 2008
2	<b>ACS-09-Feb-01</b>	5-Feb-09	GOS1 - Action plan on forensic sexual assault services to be provided to AHAC	Director Primary and Community Care	August 2009
3	<b>ACS-09-Feb-02</b>	5-Feb-09	GOS2 - Action plan on NSCCAHS Child Protection service changes (Wood Report) to be provided to AHAC	Director Primary and Community Care	Awaiting advice from NSW Health
4	<b>ACS-09-Feb-03</b>	5-Feb-09	GOS3 - Copy of review of Acute Services staff workload to be provided to AHAC	General Manager Central Coast Health Service	July 2009
5	<b>ACS-09-Mar-05</b>	3/19/2009 & 30 July 09	HKH1 - Complete costed proposal for the refurbishment of operating suites at Hornsby Hospital. Ryde1 HKH Asset Strategic Plan to be provided for review	General Manager, Hornsby Ku-Ring-Gai Health Service	September 2009
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