

**BUNDABERG HEALTH SERVICE DISTRICT
RECORD OF MEETING**

Meeting of: ASPIC Clinical Forum

Meeting No: 05/04

Date: 19th May, 2004

Start Time:

Present: G.McDermid, T.Hoffmann, G.Aylmer, J.Truscott, M.Mears, M.Carter, M.Hunter, J.Elmes, J.White, K.Smith

Apologies: D.Jenkins

Confirmation of Minutes: K.Smith

Seconded: G.Aylmer

Minute Taker: G.McDermid

Correspondence: Nil

BUSINESS ARISING

Item No.	Topic	Discussion	Agreed Action, Person Responsible, and Time Frame
02/03-1.1	Regional Analgesia Post op Pain Management	To obtain costs for forms then take to executive for approval. Jelms to see J.Thorne to obtain quotes and inform M.Carter	M.Carter
11/03-5	Colonoscopy Consents	Policy developed re colonoscopy. Discussion with PAC, M Carter. K.Smith to see J. Joiner on Monday.	Resolved
02/04-6	Risk Management	Move to standing agenda. Discussion held re risk register kept in all area. Difficult to have a risk register for ASPIC committee.	Committee members. Jane Truscott
04/04-6	Wound Dehiscence	Di Jenkin is still collating data Di Jenkin is checking on the definition of wound dehiscence. Toni, Michelle to form a subcommittee.	D.Jenkin/M.Hunter

STANDING AGENDA

Item No.	Topic	Discussion	Agreed Action, Person Responsible, and Time Frame
02/04-1.1	Performance Monitoring Monthly Performance and Cost Centre Reports	ICU acting outside level 1 ICU- Toni contacted Hervey Bay. (Hours greater than HB level 2). After 24-48hrs vent patient to be transferred to Brisbane. Over budget because of long term vent. Patients.	Toni to talk to DOMS & P.Leck
02/04-2	Infection Control	K.Smith- Data not correct – monthly performance report. Running report before data is all entered DSU – over clerical. PAC- Pathology- Triple than normal. Pathology charged from all areas Report tabled. Discussion held. Relevant to surgical division report for hospital level only	Jane to talk to DQDSU
02/04-3	Quality Management	Jane – self assessment by end July Mandatory criteria to be met Think how to evaluate and document Lap Cholecystectomy Infection Control - Peripheral lines	
03/04-4	Theatre Booking Report	Clinical indicators collected. Jenny Kirby asked Karen to look at indicators- discussion held. J. White & M.Carter look at indicators & any trends. A discussion held. Add clinical indicators to standing agenda.	

NEW BUSINESS

Item No.	Topic	Discussion	Agreed Action, Person Responsible, and Time Frame
05/04-5	New Time and Day	8.15 2 nd Wed Seminar Room	G.Aylmer to check room
05/04-6	Bed Heading	Admitting patients to ICU- all under Dr Carter. Plan to admit to MICU or SICU. Dr Carter remains head of ICU(Coordinator)	J.Elms to check with DOMS & J.Kirby
05/04-8	Anti-Embolotic Stocking	Guide for use developed - guidelines will change into protocol.	Advise any changes to M.Mears
05/04-9	Colonoscopy protocol	Protocol developed and presented	
05/04-10	Preoperative medication instruction	Instruction sheet developed. Patient will be given sheet and copy in chart	
05/04-11	Pre- anaesthetic questionnaire and Pre-Admission/Admission Booklet	Form presented and discussed. Margie would like any feedback. Some changes made and information added.	E Mail M. Mears with any changes before next meeting.

Meeting Closed: hrs
Next Meeting: 12th May, 2004

**BUNDABERG HEALTH SERVICE DISTRICT
RECORD OF MEETING**

Meeting of: ASPIC Clinical Service Forum

Meeting No: 06/04

Date:

9th of June 2004

Start Time: 0825hrs

Present: Martin carter, Darren Keating, Jenny White, Dianne Jenkins, Jenny White, Margie Mears, Peter Leck, Jane Truscott, Kaye Ferrar, Karen Smith

Apologies: Toni Hoffman, Gail Alymer, Gwenda McDermid

Confirmation of Minutes: Darren Keating

Seconded: Jenny White

Minute Taker: Karen Smith

Correspondence: Nil

Business Arising					
Item No	Equip Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
02/03-1.1	CC	Regional Anaesthetic Post-op Pain Management Replacement Forms	Costing of printing of forms by Joanne Elms 31 cents Epidural infusion per sheet. 18 cents Local Anaesthetic per sheet 39 cents Epidural Birthing Suites per sheet Costs will be budgeted to individual wards.	M Carter	Closed
04/04-6	IM *	Wound Dehiscence	Definition supplied by Dr Jenkins of Wound Dehiscence from Miller B. & Keane C (1987). Spreadsheet on occurrence of wound dehiscence in Surgical Ward commencing 1/03/04	Email of both documents to Jenny Kirby to follow up with coders. Operation status Emergency/Elective needs to be added to Spreadsheet. ? Jenny White will supply information to Dianne Jenkins. Total number of surgical cases need to be added to spreadsheet to give denominator figure for percentage of wound dehiscence. Degree of Dehiscence also needs to be recorded on spreadsheet	Ongoing



Business Arising					
Item No	Equip Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
05/04 -7	IM	Bed Heading	Patients are no longer admitted to ICU under Dr M Carter. Patients are admitted under their respective Medical/Surgical Team	None	Closed
05/04-8,9,10	CC	PAC Protocol/Forms Presented	Pre-Admission protocol, Pre- Anaesthetic Form and new patient booklet are all modified as requested and ready for use, will come into circulation when old stocks are depleted. Warfarin and Antiplatelet Protocol to be finalised prior to circulation for approval.	Margie Mears to finalise Warfarin and Antiplatelet protocol.	Open

Standing Agenda					
Item No	Equip Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
06/04-1	IM	Performance monitoring Monthly and Cost centre reports	PAC No problems Surgical Nothing Significant Theatre 200,000 over year to date ICU Pharmacology cost shifted to DEM where appropriate Remifentanyl increase in cost but decreased LOS Anaesthetics Study Leave increased costs		Ongoing
06/04-2	SPE	Infection Control	Report presented and tabled	Further investigation into listed superficial infection. Gail Alymer	Open
06/04-2	IP	Quality Management	Quality Management Coordinator identified areas to be addressed Wound Dehiscence, Theatre Bookings, Continuum of Care, Clinical Indicators, and Infection Control Adverse Event Guidelines. Dr Carter to compile protocol on Blood Replacement in consultation with Dr Mlach. The protocol will then be presented to the Executive council	QMC to meet with various areas to discuss QM issues.	Ongoing



Standing Agenda

Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
06/04-4	IM	Theatre booking Report	<p>Long wait Cat1 0%, Cat 2 0% & Cat 3 33% Lowest % for Cat 1 & 2 ever.</p> <p>Activity target in jeopardy additional sessions planned to help achieve target.</p> <p>Endoscopy sessions will be rescheduled for General surgery sessions.</p> <p>2 Additional minor op sessions planned for Dr Gaffield.</p> <p>2 Additional Gynae sessions booked for June.</p>		Ongoing
06/04-5	SPE	Risk Management	<p>Unit specific Risk management registers to be emailed to QMC.</p> <p>Surgical Ward</p> <ul style="list-style-type: none"> Disabled Bathroom Quote \$14,000 requires New bins for clinical waste with lids Theatre 3 Caesarean Section babies developed infections post Caesarean 	<ul style="list-style-type: none"> Approval from DON required due to cost Investigative meeting conducted with BWU and Theatre staff. 	Closed

New Business

Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
09/06-1		Orthopaedic Surgeon	Additional Orthopaedic surgeon to commence work in Town employed by the Mater. He will provide some services VMO sessions to the Base as well as the on call roster.	Dr Chris O'Brein has arrived in town will conduct negotiations with hospital executive as to working schedule and start date.	Ongoing
09/06-2		ENT Outpatient Clinic	Negotiations are being undertaking regarding an outpatient session for the ENT surgeon		Ongoing

Meeting Closed: 0900hrs
Next Meeting: 14.07.04

**BUNDABERG HEALTH SERVICE DISTRICT
RECORD OF MEETING**

Meeting of: ASPIC Clinical Service Forum

Meeting No: 07/04

Date: 14th July, 2004

Start Time: 0815hrs

Present: M. Carter, J. Patel, D. Jenkin, M. Mears, G. McDermid, K. Ferrar, J. White, K. Smith, P. Bardini, J. Truscott, C. McMullen

Apologies: G. Ayimer

Confirmation of Minutes: M. Mears

Seconded: J. Truscott

Minute Taker: Gwenda McDermid

Correspondence: Nil

Business Arising

Item No	Equip Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
04/04-6	IM	Wound Dehiscence ✱	Report tabled. Discussion held re DRG's classification. Discussion held re dehiscence co morbidity of Patient. Look at number of Abdominal surgery and dehiscence. M. Cater thanked D. Jenkin for the information.	J. Patel and K. Ferrar to look at DRG'S	Open
05/04-8,9,10	CC	PAC Protocol/Forms Presented	Changes made to protocols, information sheets and introduced at PAC. Pre-op Medication information sheet to have a MR NO added. Anticoagulation information sheet to be completed.	M. Mears to arrange MR NO for medication sheet	Open

Business Arising					
Item No	Equip Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
06/04-7	CC	Orthopaedic Surgeon	Dr O'Brien - started 13 th July. Theatre session Tuesday mornings and Outpatients clinic in the afternoon. Joint Replacement Pathway for revision.	M. Mears and D. Jenkin to review Joint Replacement Pathway.	Open
06/04-8	CC	ENT Outpatient Clinic	No further information available		Closed
02/03-1.1	CC	Regional Anaesthetic Post-op Pain Management Replacement Forms	M. Carter informed the meeting the draft forms were not collected and they have now been sent to the printers.		Closed

Standing Agenda					
Item No	Equip Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
07/04--1	IM	Performance monitoring Monthly and Cost centre reports	DSU - Labour within budget, Non Labour \$ 12,047.05- and YTD \$ 26,508.39-. Major cause is the cost of drugs, YTD \$145,462.58, \$ 24,507.58- Surgical - Over Theatre - Anaesthetic and Surgical equipment are the major costs. Anaesthetic cost should have a separate budget. PAC - Pathology \$ 3,000, discussed with the Pathology Dept.	M. Cater and J. White to discuss with T. Fleming K. Ferrar to review the costs.	Ongoing Open Open

Standing Agenda

Item No	EQuIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
07/04-2	SPE	Infection Control	Defer to next meeting		Open
07/04-3	IP	Quality Management	<p>Self Assessment – discussion held</p> <p>ASPIC – Full number of Surgeons and Anaesthetist –</p> <ul style="list-style-type: none"> - increase in Surgical activity - waiting list down to zero - no increase in Theatre utilization - take to Theatre Management Committee. 		Open
07/04-4	IM	Theatre booking Report	Report tabled – long wait Cat 1 & 2 – 0% Cat 3 – 33%		Open
07/04-5	L & M	Risk Management	<p>J. Truscott – Clinical Forms are to maintain Risk Management Registrar.</p> <p>J. Truscott discussed the policy, matrix and training over the next 12 mths for Integrated Risk Management,</p> <p>Surgical Ward – first meeting – 15.07.04</p> <p>ASPIC Registrar – Advance Health Directive.</p>		Open
07/04-6	CC	Clinical Indicators	Theatre – no sufficient problems Elective Surgery – green form is to be changed.		Open



New Business

Item No	Equip Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
07/04-7	CC	Cardiac Arrest Audit	Cardiac Arrest and Trauma call – not totally ASPIC, DEM involvement. To look at NFR and Advance Health Directives. M. Carter thanked C. McMullen for attending the meeting.	M. Carter to take to Executive.	Closed
07/04-8	SPE	Surgical Antibiotic Prophylaxis Policy	Policy presented.	G. Aylmer to change policy	Open
07/04-9	SPE	New Guidelines for Risk Management for Procedures	Discussion held. Theatre to start audit on consents of Patients arriving in theatre without a consent signed.	Committee members to read information on guidelines.	Open
07/04-10	CC	Emergent Patient Orders from DEM	Registrars not ordering pain relief, fluid etc.	J. Patel to discuss with staff	Closed
07/04-11	L & M	Terms Of Reference	Discussion held - DQM – not ex officio	J. Truscott to change.	Closed
07/04-12	IP	Brickbats and Bouquets	M. Cater – compliment received from another hospital on the excellent management by ICU staff of a young patient. Please bring compliments and complaints to the meetings		Closed
07/04-13	L & M	Presentation at HOD Meeting	D. Jenkin informed the committee that we are required to do a presentation at the HOD meeting in September.	J. Patel to present Day Only Laparoscopic Cholecystectomy.	Closed
07/04-14	L & M	Meeting Time	New meeting time not suitable, discussion held and meeting time to return to 1215hrs on the 2 nd Wednesday of the month.	G. McDermid to arrange on meeting calendar and venue.	Closed

Meeting Closed: 0920hrs
Next Meeting: 11.08.2004



**BUNDABERG HEALTH SERVICE DISTRICT
RECORD OF MEETING**



Meeting of: ASPIC Clinical Service Forum

Meeting No: 08/04

Date: 18th August, 2004

Start Time: 12.15hrs

Present: Gail Aylmer, Karen Smith, David Levings, Martin Carter, Gwenda McDermid, Jay Patel, Kay Ferrar, Toni Hoffmann, Margie Mears, Peter Leck, Dianne Jenkin

Apologies: Nil

Confirmation of Minutes: J. Patel

Seconded: K. Smith

Minute Taker: Gwenda McDermid

Correspondence: Nil

- Commenced Signal Swivel Drop 09/04
- Commenced stats on forms May 2004
- " " Marketing " June 2004

Business Arising					
Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
04/04-6	C of C	Wound Dehiscence	Information from coded data. Number of Abdominal Operations table presented. Data has been viewed by J. Patel and within indicators for 2003/2004, improvement shown. T Hoffmann asked if the wound dehiscence is documented on an Adverse Events form. Documented on Theatre Clinical Indicator within 24hrs.	M. Carter to report to this meeting re indicators available. M. Carter, J. Patel and K. Ferrar to meet.	Open
05/04-8,9,10	C of C	PAC - MR No Medication sheet	Medication Sheet sent to J. Elmes to take to Medical Record Committee for MR No. PAC has commenced using the Medication sheet.		Closed
07/04-1	IM	Anaesthetic Cost Centre	No separate cost centre.		Closed
07/04-1	IM	PAC - Pathology	Resolved		Closed
07/04-5	L & M	Risk Management/	Held over. Discussion held re Advance Health	P. Leck to take to Executive, are we legally	Open

Business Arising					
Item No	EQiP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
		Risk Register. Advance Health Directive	Directive. Discussion by P. Leck how forums are managing there Risk Register, how issues are dealt with. Risk Register from all areas are to be sent to DQDSU by the 25 th Aug.	responsible to ask for Directive	
06/04-7	C of C	Joint Replacement Pathway	Dr O'Brien and M. Mears met and discussed the Joint Replacement Pathway. M. Mears and D. Jenkin to meet with Dr Keating	M. Mears to report to the committee	Open
07/04-8	SPE	Surgical Antibiotic Prophylaxis Policy	Policy to change when new drug available		Closed
07/07-9	SPE	New Guidelines for Risk Management for Procedures	Audit – Patients arriving in theatre without a consent signed has commenced.	Theatre MUN to report to committee	Open

Standing Agenda					
Item No	EQiP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
08/04--1	IM	Performance monitoring Monthly and Cost centre reports	<p>DSU – Drugs \$ 515- Surgical – 3%. positive penalties and overtime, Maintenance over budget due to new cooling system.</p> <p>PAC – Pathology corrected. 189 patients for July. Orientated new staff.</p> <p>ICU - \$ 10,000- Overtime budget. One Sentinel event, staff working long hours. Vent. Hours over 700 hrs, 500hrs above normal and this does not include the BI pap hours. Discussion held re ICU category, investment by QH mainly in Brisbane, Gold Coast and Nambour</p> <p>Theatre/Anaesthetic – almost on budget. FTE staffing for Theatre, discussion with L. Mulligan, R. Goodchild, K. Smith and D. Levings. Unable to replace staff on fatigue leave and sick leave.</p>		Open
08/04-2	SPE	Infection Control	Discussion with J. Rate. re wound infection, how to capture wound infections at follow up visits.	G. Aylmer to discuss with J. Patel and D. Keating re the poor compliance by Junior Medical Staff.	Open

PTO

Standing Agenda

Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
			Form developed for use at clinics but there is poor compliance.		
08/04-3	IP	Quality Management	Nil		Open
08/04-4	IM	Theatre booking Report	Cat 1 – 0% Cat 2 – 1% Cat 3 – 35% Clerical staff shortage at present. Endoscopy Blitz August, September and November		Open
08/04-5	L & M	Risk Management	Surgical Ward – monthly meeting commenced in July.		Open
08/04-6	C of C	Clinical Indicators	ACHS Indicators – due end of August. Collated and will present at next meeting.	K. Ferrar to send report to M. Carter	Open

New Business

Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
08/04-7	C of C	IV Tubing	D. Jenkin requested an explanation in the change of IV tubing used for patients in theatre. M. Carter gave an over view why to use a non restricting tubing with a non return valve to enable a large volume of fluid to be given.	D. Jenkin and D. Levings to meet.	Closed
08/04-8	L & M	No Blame culture	Any issues to be discussed.		Closed

Meeting Closed: 1320hrs
Next Meeting: 08.09.04

BUNDABERG HEALTH SERVICE DISTRICT RECORD OF MEETING

Meeting of: ASPIC Clinical Service Forum

Meeting No: 10/04

Date: 13th October, 2004

Start Time: 12.15hrs

Present: Martin Carter, Gwenda McDermid, Jay Patel, Toni Hoffman, Margie Mears, Gail Doherty, Darren Keating, Peter Leck, Dianne Jenkin

Apologies: Jenny Kirby, Leonie Raven, Gail Aylmer, Karen Smith.

Confirmation of Minutes: Martin Carter Seconded: Margie Mears

Minute Taker: Toni Hoffman

Correspondence: Nil

Business Arising

Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
04/04-6	C of C	Wound Dehiscence		Jay Patel	Item Closed. Wards will obviously continue to report Wound Dehiscence as adverse event/outcome.
06/04-7	C of C	Joint Replacement Pathway		Di and Margie working on them	Open / Ongoing. Di Jenkin and Margie Mears.
07/04-5	L & M	Risk Management ASPIC Register – Advance Health Directive	Gwenda and Di discussed AHD, not easily found, process in place but not adequate. Risk Register done , but process of finding/tracking AHD is not adequate	Risk rating of medium/ process needs to be addressed properly, Requires further education/discussion.	Di to ask Joanne Elmes to present AHD
07/04-9	SPE	New Guidelines for Risk Management for Procedures	Most of this is supposed to be in place by Jan next year.	Darren will chase up Risk Management procedure	Open. Darren Keating to Follow up and present back to ASPIC.



QH8.0004.0008.00359

Standing Agenda

Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
10/04--1	IM	Performance monitoring Monthly and Cost centre reports	ICU	Well over budget due to large number of vents and OT required to care for them. Discussion ensued about ways to change this. Surgical ward over budget due to S/L and increased acuity of patients. Also the number of patients that required specialising. PAC in budget. OT Over budget due to joints.	Open Ongoing All Staff.
10/04-2	SPE	Infection Control		Apologies from Gail Nill reported	Open
10/04-3	IP	Quality Management	ICU DSU	Completed ACS study, Collecting Aortic data. CI collaborative Continues and our results look very good Updating Chemo package. Survey of staff ongoing redoing of manual.	Open
10/04-4	IM	Theatre booking Report	Surgical ward. OT	Doing Consent audit.	Open
10/04-5	L & M	Risk Management	Slowly long term Cat 2 list rising AHDs ICU Surgical	Huge influx of cat ones , and loss of anaesthetists.	Open
10/04-6	C of C	Clinical Indicators	ICU Surgical DSU PAC	Problem with Blood not being able to be obtained. Ongoing.AORTIC, Ongoing	Martin Open

New Business

Item No	EQUIP Function	Topic	Discussion	Agreed Action & Outcome, Person Responsible, and Time Frame	Open/Closed
10/04-7		Morbidity / Mortality Subcommittee	Discussion ensued about whether The old format of looking at the arrest data in the hospital should be changed to a formal morbidity and mortality meeting, with all involved staff invited	Suggested that Terms of Reference be developed and then represented back to the meeting.	Open. Martin Carter will develop.

Meeting Closed:

Next Meeting: 10.11.04



QHB.0004.0008.00360