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BUNDABERG HEALTH SERVICE DISTRICT RECORD OF MEETING

QHB.0004.0005.0009Z
[Barcode]

Meeting of: Executive Council

Meeting No: 04/04

Date: 2 April 2004

Start Time:

Present: Kees Nydam, Dr Martin Carter, Dr Darren Keating, Dr Jay Patel, Dr Malcolm Stumer, Peter Leck, Jenny Kirby, Peter Health, Dr Judy Williams, Dr Naldo Kiel,

Apologies: Tina Wallace, Linda Mulligan, Judith McDonnell, Leonie Raven

Confirmation of Minutes: Dr Malcolm Stumer

Seconded: Dr Jay Patel

Minute Amendment/ Addition

Minute Taker: Jenny Kirby

Correspondence • Minimising Harm to Patients in Hospital

PRESENTATION

Consumer & Community Participation Project

- Project officer, Joan Dooley, presented "Listen to the Voices"
- Focussing on increasing consumer involvement within Bundaberg Health Service District
- Establishment of partnership approach between consumers and providers of BHSD - attuned to consumer needs
- DEM & Surgical Ward identified as Pilot Sites

BUSINESS ARISING

Item No.	Topic	Discussion	Agreed Action, Person Responsible, and Time Frame
12/03-1	Radiology Services	<ul style="list-style-type: none"> • Meeting with Regional Manager MIA Queensland • Billing model will be changed • Films will be reported within 24 – 28 hours via teleradiology 	<ul style="list-style-type: none"> • Complete
03/04-1.1	DEM – Triage Nurse Training	<ul style="list-style-type: none"> • Held over 	<ul style="list-style-type: none"> • Held over
03/04-1.2	DEM – Trauma Course Funding	<ul style="list-style-type: none"> • Course and contact details currently being sourced and followed up 	<ul style="list-style-type: none"> • Report back as required • Complete
03/04-1.3	DEM – Aggressive Patients	<ul style="list-style-type: none"> • Meetings held with clarification issues identified and discussed • Marie Blake will be attending the Queensland Health Behaviour Management course as train the trainer with view of rolling this out in the district 	<ul style="list-style-type: none"> • Complete
03/04-1.4	BFU – New Birth Suite Beds	<ul style="list-style-type: none"> • Straps ordered and delivered • Shape of stirrups remain a concern to Director Obstetrics and Gynaecology 	<ul style="list-style-type: none"> • P Health to follow up • Complete

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03/04-2.1	Monthly Performance Monitoring	<p><u>Paeds Overtime</u></p> <ul style="list-style-type: none"> Increased overtime paid to Dr Chris Ryan during leave arrangements 	<ul style="list-style-type: none"> Complete
03/04-2.2		<p><u>Family Unit Post Procedure Infections</u></p> <ul style="list-style-type: none"> Discussed with ICC CHRISP report to be reviewed regarding Infection Rate data 	<ul style="list-style-type: none"> Dr Stumer & Gail Aylmer to follow up further
03/04-2.3		<p><u>Cancellation of Surgery Stats</u></p> <ul style="list-style-type: none"> Cancellation for medical reasons continue to be investigated re classifications 	<ul style="list-style-type: none"> Complete
03/04-5	Kathy Roughan Report	<ul style="list-style-type: none"> Circulated to Clinical Directors by DMS Discussions have been held with the District Health Council 	<ul style="list-style-type: none"> Clinical Directors to provide to Dr D Keating or Peter Leck feedback for discussion at next meeting
03/04-6	PKI Secure Email	<ul style="list-style-type: none"> Issues and Risks discussed Queensland Health advised the BHSD interested in becoming a pilot site towards the end of the calendar year 	<ul style="list-style-type: none"> Complete

STANDING AGENDA

Item No.	Topic	Discussion	Agreed Action, Person Responsible, and Time Frame
04/04-1.1	Clinical Risk Management & Clinical Services Forums	<p><u>ASPIC CSF</u></p> <ul style="list-style-type: none"> New forms discussed NUM's receiving reports Colonoscopy consent issue resolved Surgical – monthly meetings looking at Incident Monitoring and Outcomes Complaints issues discussed Press Ganey Report discussed with identifying priorities Waste Audit EPA rules discussed 	<ul style="list-style-type: none"> Complete
04/04-1.2		<p><u>Bundaberg Family Unit</u></p> <ul style="list-style-type: none"> Topics Discussed Inductions Risk Registers ANC Routine Changed Press Ganey – communication Outpatient Hysteroscopy discussed Perinatal Data - collection data tabled Birth rates last 3 months have increased considerably Caesarean Section – 15.4% Induction Rate 19.5% - decreased in last 3 months 	<ul style="list-style-type: none"> Complete

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STANDING AGENDA	
04/04-1.3	<p>BIMHS CSE</p> <ul style="list-style-type: none"> • Held over
04/04-1.4	<p>DEM</p> <ul style="list-style-type: none"> • Triage Data not available as yet • Thrombolysis of patients within 30 minutes and keeping in DEM discussed • Monitor in Resus 2 needed – NOW!! • Meeting held with BIMHS re Aggressive Patients <p>Medical</p> <ul style="list-style-type: none"> • Held over <p>Paeds</p> <ul style="list-style-type: none"> • Fail to Attend Stats reviewed • Appointment scheduling waiting list reviewed • Short term stay ward – Business Case being developed • Need minute taker • Domestic Violence in-service planned for Paeds staff – 3 – 4 nurses identified • ENT teleconferencing continuing • Top 20 DRG's reviewed • Medical Early Warning Signs will be followed up with Dr Martin Carter • Child Protection Policy – consideration being given for Child Advocacy Unit to be established • Erromed Group continues • Quality Issue – readmissions stats reviewed • Press Ganey – communication skills of administration officers • Palliative Care Initiative to commence within unit
04/04-1.5	<p>Medical</p> <ul style="list-style-type: none"> • Held over
04/04-1.6	<p>Paeds</p> <ul style="list-style-type: none"> • Fail to Attend Stats reviewed • Appointment scheduling waiting list reviewed • Short term stay ward – Business Case being developed • Need minute taker • Domestic Violence in-service planned for Paeds staff – 3 – 4 nurses identified • ENT teleconferencing continuing • Top 20 DRG's reviewed • Medical Early Warning Signs will be followed up with Dr Martin Carter • Child Protection Policy – consideration being given for Child Advocacy Unit to be established • Erromed Group continues • Quality Issue – readmissions stats reviewed • Press Ganey – communication skills of administration officers • Palliative Care Initiative to commence within unit
04/04-1.7	<p>Theatre Management Group</p> <ul style="list-style-type: none"> • Staffing issues discussed • Monday and Thursday evening shift roster commencing 1st July • Elective Surgery Activity <ul style="list-style-type: none"> - 20 lap choles completed - 20 ortho cases to be completed - 6 urology to be completed - 15 gynae to be completed - Category 1 - 0%, Category 2 – 4% today, Category 3 – 31%

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STANDING AGENDA

		<ul style="list-style-type: none"> Additional Theatre Procedures excluding Minor Op Procedures total: <ul style="list-style-type: none"> - 250 Jan - 250 Feb - 362 March 5 Unplanned readmissions to theatre investigated 	
04/04-2.1	Monthly Performance Monitoring	<ul style="list-style-type: none"> Paeds Medical Staff Change in pay scale since budget build-up Locum for Paeds recently – unsure whether this was budgeted for Medical Ward Decreased pathology tests noted Medical Ward – Post Procedure Infection 	<ul style="list-style-type: none"> To be followed up with Gail Aylmer
		<ul style="list-style-type: none"> Renal Unit – Post Procedure Infection 	<ul style="list-style-type: none"> To be followed up with Gail Aylmer
		<ul style="list-style-type: none"> Theatre cancellation decrease noted 	<ul style="list-style-type: none"> Complete

NEW BUSINESS

Item No.	Topic	Discussion	Agreed Action, Person Responsible, and Time Frame
04/04-4	Summary Complaints Report	<ul style="list-style-type: none"> Individual complaints should not be discussed in a group forum/committee Access/Communication/ Treatment remain three major issues Issues to be discussed further at CSF's Quarterly report and year to date reporting to be provided Feedback welcome 	<ul style="list-style-type: none"> Clinical directors to include for discussion on CSF agendas
04/04-5	Clinical Indicator Report	<ul style="list-style-type: none"> Report tabled General improvement across many clinical indicators 	<ul style="list-style-type: none"> Surgical 2.4 Indicator will be investigated (Dr Patel)
04/04-6	Good Documentation Guide	<ul style="list-style-type: none"> Circulated to all Clinical Directors 	<ul style="list-style-type: none"> Complete
04/04-7	Doctor / Patient Communication Workshop	<ul style="list-style-type: none"> Scheduled 23rd June 2004 – presenter will be Dr Mark O'Brien 	<ul style="list-style-type: none"> Clinical Directors to schedule activities of non emergency work around this date and ensure medical staff attendance encouraged

NEW BUSINESS			
04/04-8	Day of Surgery Admission Rates	<ul style="list-style-type: none"> Report from Surgical Access Service tabled 	<ul style="list-style-type: none"> Complete
04/04-9	Not for Resus Policy	<ul style="list-style-type: none"> Policy distributed Information awareness needed for medical staff including the checklist that is available 	<ul style="list-style-type: none"> Clinical Directors to discuss and disseminate information to medical officers
04/04-10	Discharge Summaries	<ul style="list-style-type: none"> Ongoing problem Double handling and inefficiency due to large volumes of discharge summaries 	<ul style="list-style-type: none"> Discharge summaries will be completed in Health Information Services following Easter
04/04-11	Alert & Pathology Filing Policies	<ul style="list-style-type: none"> Policies have been endorsed and will be implemented 	<ul style="list-style-type: none"> Complete
04/04-12	Minister of Health Visit	<ul style="list-style-type: none"> Visiting Wednesday 7th April DEM, ICU, Renal, Family Meet and greet - open staff forum with morning tea 	<ul style="list-style-type: none"> Complete
04/04-13	Integrating Strategy and Planning Process (ISAP)	<ul style="list-style-type: none"> Commencing rollout from May 2004 Project Officer - J Kirby 	<ul style="list-style-type: none"> Complete

Closed: 1630 hours
 Next Meeting: 7th May 2004