



## Precis of Minutes of

### CONSUMER REFERENCE GROUP

Friday 26th February 2016

Five members were present with two apologies.

#### **New Business**

**2.3** Joe reported on the PHN/LHD consumer groups. Penrith and Hawkesbury have complete numbers now. Blue Mountains have lost their chair due to ill health and are looking for another person to fill the role. The Lithgow group need more members. We are well represented in the Penrith Group.

Consumer training sponsored by the LHD will be held soon.

**2.4** Michael reported on the Nepean GP Network:

Dr Viviane Leventhal has been re-elected onto the board for another 2 years. Directors continue to have the same portfolio responsibilities.

Viviane spoke about LHD '**Checkpoint Program**' and said that it only applies to Emergency at the moment. There is funding for this project for 18 months. The aim of the program is to provide clinical support to individuals and families by linking them with services. It is aimed at people under 70, have ongoing health issues, have attended ED a multiple of times and are attending multiple services for care. Contact number is 4734888

#### **2.5 Increasing Membership of the CRG**

It was agreed that membership of the CRG be based on and represented by the Penrith LGA demographics population percentages.

People have been approached to join the group and Viviane spoke about having an Aboriginal person who could be representative of all the differing groups in our area.

Following the retirement of David from UWS, Michael has approached WSU to send another student representative. We are also trying to obtain a High school student representative.

Catherine is attempting to find a rep from the refugee population.

Alan, who could be considered as a battler, and is in contact with some who are doing it rough has agreed to join the CRG. He would be able to bring an understanding of the health needs of this particular cohort of the population. However he is undergoing a knee replacement at the moment.

It was agreed that we (GPs and CRG Members) should all be looking out for new members the main criteria being that they should be associated with or belong to wider groups and fall within the Penrith LGA demographic cohorts where we have gaps. In this way our group will be truly representative of our community.

**2.6** Referring to the minutes of the CRG meeting dated 25th Feb 2005, Joe is now in his 11th year as a member of the CRG. Michael spoke about an award being appropriate. All offered their congratulations to Joe.

**2.7** Michael directed the group to the new [www.nepeanGPnetwork.org.au](http://www.nepeanGPnetwork.org.au) website.

The group discussed the website and said that it was easy to navigate. There is opportunity to have 3 or 4 services to advertise on the site. The board has directed that only GP Members be listed under Local GPs, however all Practices in the Penrith LGA are listed along with contact details.

The FAQ section was discussed and members were asked to think of likely questions and answers which could be helpful.

Michael and Joe will review the Terms of Reference of the CRG which is published under the CONSUMERS tag. It was agreed that a precis of the minutes be also included on this page to give the community an idea of what the CRG is discussing.

The website is Smartphone friendly.

Karen commented on the need to use key words that search engine like Google would pick up and therefore direct people to the website.

**2.8** Michael reported on his recent visit to Victoria to assess an Area Health System for ACHS. He said that for him the systems set in place were a benchmark for others to aspire, especially in engaging and partnering with Consumers.

Michael spent 5 days in Victoria and two of these was in the Mental Health area which he found very impressive and helpful for patient recovery. This was especially so for engaging carers.

Michael said that there are so many opportunities to partner with consumers. This Victorian hospital issued amongst others a Patient Information booklet which had first been examined carefully by consumers. All public material has to have a Consumer tick of approval before issued. Also the whole design concept of health care and even new buildings had consumers involved. In most cases committees were chaired by a consumer

**4 Other business:** There was an invitation for us to attend the Board Strategic Planning Day: Back to Basics in March.