
UPDATE FROM THE OFFICE

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Kate will soon be trialling a new workshop for Canberra Health Services (CHS) health staff about how to write good response letters to consumer feedback, and especially, responses to complaints. She would like to hear from consumers about their thoughts on what the elements of a good response letter are, and, what health services should not do in response letters to consumers.

If you would like to share your thoughts about this (by Tuesday 23 June), please email Kate on kategorman@hcca.org.au or if you'd prefer to chat, leave a message on the office number 6230 7800 and Kate will call you.

Report on Inquiry into Maternity Services in the ACT

The Legislative Assembly Standing Committee on Health *Report on Inquiry into Maternity Services in the ACT* was released last week. HCCA made a submission to the Inquiry last year. You can read the report [here](#).

Darlene Cox
Executive Director

COVID19 UPDATE

Canberra Health Services - Access changes

Health services in the ACT are easing visitor restrictions in line with the most recent easing of restrictions across the Territory.

- From 4 June 2020 patients in the ACT's health facilities can have up to two visitors per day. Only one visitor is allowed with the patient at any one time.
- Admitted children 17 and under may always have one parent or carer present, with an additional visitor for up to one hour a day.
- Women admitted for care related to birthing may now have up to two support persons present. This arrangement needs to be pre-planned with the relevant midwifery and obstetric staff during antenatal care.

The visitor policy will continue to be applied with compassion and common sense. Compassionate exceptions to the visitor policy will be determined on a case by case basis in consultation with clinical staff.

HCCA EVENTS

HCCA Consumer Issues Report Weeks 8 to 11

- [Click link here](#)

Health Issues Online Forum – TCH Master Plan

- 2-3pm, Thursday 18 June 2020 by Zoom

Social distancing principles still apply to all those visiting the hospital. To reduce the spread of COVID-19 health services will continue to undertake screening of visitors and will also be recording contact details of visitors.

The restrictions apply to all Canberra Health Services campuses, including Canberra Hospital, University of Canberra Hospital, Calvary Public and Private Hospitals, and National Capital Private Hospital. More information can be obtained [here](#).

ACT Government Interim Report on the COVID-19 Pandemic Response

On 2 April 2020, the ACT Legislative Assembly established **The Select Committee on the COVID-19 pandemic response**, to provide oversight to the ACT Government response to the COVID-19 public health emergency. The Select Committee will periodically release interim reports on the COVID-19 pandemic response and released its second interim report on 29 May 2020. The Committee draws on evidence provided in public hearings and submissions, to examine any aspect of the ACT Government's response (not just health) and make recommendations for improvement. The following recommendations are some of the 15 in the current interim report:

Recommendation 1: The Committee recommends the ACT Government direct that all delegated legislation made in response to COVID-19 (including notifiable instruments) include a statement of compatibility outlining whether and how the instrument is compatible with human rights.

Recommendation 2: The Committee recommends that where emergency measures are introduced by way of delegated legislation, they should be accompanied by a statement of compatibility with human rights.

Recommendation 4: The Committee recommends that ACT Policing make public all guidance or directions it has provided to officers to inform their enforcement of public health directions to enable assessment of whether such guidance is sufficient, updated and accurate while also establishing clear community expectations about compliance.

Recommendation 5: The Committee recommends that ACT Policing, ACT Health and Access Canberra publish weekly de-identified data about compliance activities taken under any public health emergency directions, including:

- the number of infringement notices or formal cautions issued,
- the number of compliance checks conducted, and
- basic socio-demographic indicators of affected individuals or businesses.

Recommendation 6: The Committee recommends that the ACT Government either:

- put in place additional controls and procedures to ensure that only approved employees or personnel may access data in the National COVIDSafe data store and may do so solely for the purpose of contact tracing; or
- if the ACT Government believes that data agreements signed with the Commonwealth containing rules governing their usage of COVID app data are legally enforceable, publicly release those agreements.

The full report is available at [here](#). For further information please contact the Committee Secretary on 6205 0129 or email: LACCommitteeCOVID19@parliament.act.gov.au.

Support for Temporary Visa Holders in the ACT

The Red Cross have received funding from both the Commonwealth and ACT governments to distribute one-off payments to the most vulnerable temporary visa holders who have no means to support themselves under COVID-19. These payments are designed to help with basic needs, such as food, medicine, and immediate housing needs, to ensure people are safe.

Temporary visa holders who are significantly impacted by COVID-19 can contact Red Cross on 6234 7695 or email hspcanberra@redcross.org.au More information can be found [here](#).

Red Cross is also partnering with tertiary education providers to support International Students. In the first instance, International Students should contact their education provider, who may refer their application to Red Cross after an initial assessment.

Where applicants are not eligible for government relief, Red Cross will support applicants to access the relevant ACT community service providers. More information on the assistance available is [here](#).

POLICY AND RESEARCH UPDATE

A New System for Electronic Prescribing

Along with the increased access for Australian consumers to telehealth services during COVID-19 in 2020, we have also seen the introduction of electronic scripts. In the last few months there has been an interim arrangement in place for electronic prescriptions. These electronic prescriptions can be sent by your doctor directly to your pharmacy of choice.

In the next few months, consumers will soon be able to access the new long-term system for electronic prescriptions throughout Australia. The Capital Health Network is working with ACT doctors, particularly GPs, and pharmacists, to ensure that the IT systems are in place, and software is up to date, to enable this new system of electronic prescribing.

Electronic prescriptions will give people convenient access to their medicines and can help improve patient safety by reducing the risk of transcription errors.

What will this new system of electronic prescribing look like in practice?

Electronic prescriptions will not fundamentally change existing prescribing and dispensing processes for medicines. It will provide consumers with more control and choice, and you can still choose which pharmacy you take your prescription to for dispensing.



Remember – you can still choose to have a paper prescription if you prefer.

If you have the choice of an electronic prescription, in your appointment your doctor will send you a unique QR barcode or ‘token’, which you may receive by SMS, email or via an app.

This can be either in a telehealth or face-to-face appointment. If you can, it is a good idea to check you have received the electronic token for your prescription before you end your appointment. You will get a separate token for each medicine you are prescribed.

The token will be scanned by your pharmacist as a key to unlock the electronic prescription from an encrypted and secure electronic prescription delivery service. The token can be used in-person at your pharmacy, from a smartphone or device, or the token can be sent electronically to your pharmacy from a phone, device or computer – check with the individual pharmacy about their system.

The [Australian Digital Health Agency \(AHDA\)](#) has advised that if you have a prescription with repeats, a new token will be automatically sent to you when the prescription is dispensed. You will need to keep this token to send to your pharmacy when you need to get the repeat filled.

Do I need a My Health Record to use electronic prescription tokens?

No, you do not need My Health Record to use electronic prescriptions.

Are there any medicines that can't have an electronic prescription issued?

There are currently no restrictions as to which medicines can be prescribed using an electronic prescription.

HCCA will continue to provide updates on the progress of electronic prescribing in the ACT, through Consumer Bites and via our Facebook page. [Click here for more information and FAQs on electronic prescribing from the ADHA.](#) If you have any further questions about electronic prescribing, please contact Kathryn Briant on 6230 7800 or kathryn.briant@hcca.org.au

*Kathryn Briant
Policy Officer*

HEALTH LITERACY UPDATE

Canberra Health Services: Changes to Referral Management

Canberra Health Services (CHS) is improving how it manages referrals to Outpatient Clinics. It wants your appointment to be timely and managed by the best person for you and for your condition.

This means they will notify you and your GP if:

- they don't offer the service you need (such as aesthetic surgery or the removal of cataracts)
- you live outside the ACT and there are options closer to where you live
- the wait time for a specialist appointment may put you at risk but you can be safely managed by your GP. They will provide guidance to your GP on the management of your condition

If your referral is accepted:

- CHS will inform you and your GP that you have been put on a waiting list. They will contact you with an appointment when available
- Appointments are made according to the clinical urgency indicated by your GP
- If you no longer need the appointment, please tell us so we can offer the appointment time to another patient
- Please make sure your personal details and phone number are correct

If your condition changes (whether or not your referral was accepted):

- It is important that you tell your GP if your condition gets worse or changes. Your GP may refer you again if you meet the criteria

We are interested to hear your experiences about these changes. Please contact Claudia.

Drop the Jargon Day: 20 October – Your Ideas Please

[Drop the Jargon Day](#) is for professionals in Australian health, community services and local government to **use plain language**. When we use jargon, technical terms or acronyms, it can be hard to understand and use information. Better health literacy practice in organisations can dramatically improve health outcomes, particularly in the most marginalised population groups.

HCCA is supporting Canberra Health Services to plan some events for Drop the Jargon Day and your involvement is welcomed. How do you think we can encourage health professionals use plain language? How do you think we can encourage each other to speak up and say we don't understand? Please direct your comments to claudiacresswell@hcca.org.au.

Telehealth

HCCA has been working with CHS on patient communication about telehealth. CHS only uses the term telehealth for video consultations, which may result in some confusion, as the broader definition covers any remote health consultation using ICT (Information and Communication Technologies). This includes emails, video, remote health monitoring and phone calls. We are interested in your experience of telehealth, including how it is arranged.

HCCA will also be offering an online seminar on Making the Best of your Telehealth Appointment in early July. Please contact Claudia on 6230 7800 or claudiacresswell@hcca.org.au if you have feedback on telehealth or are interested in the seminar.

*Claudia Cresswell
Health Literacy Officer*

HEALTH INFRASTRUCTURE UPDATE

HCCA Forum: Canberra Hospital Master Plan and Northside Hospital

The ACT Health Directorate has been developing the Canberra Hospital Master Plan. The Master Plan is an infrastructure plan that will guide development of the hospital over the next 20 years – including short, medium and long term development needs.

Consultation to inform the Master Plan options was due to commence in March, but with the COVID health emergency being declared, that consultation did not go ahead. During the emergency, Health has been progressing some work to inform the Master Plan options based on previous consultations and information regarding service demand, engineering, transport and other known requirements. However, before options are finalised, further consultation will need to take place both with clinicians and stakeholders.

If you would like more information you can participate in our **Health Issues Online Forum** where ACT Health will present on the Master Plan and the Northside Hospital. This update is with Liz Lopa who is the Executive Group Manager, Strategic Infrastructure Division, ACT Health Directorate. The forum will be via Zoom and the details are as follows:

Date: 2 – 3pm, Thursday 18 June 2020

RSVP: KarenJames@hcca.org.au or phone 6230 7800 (login details will be provided)

Changes to Bus Stops at Canberra Hospital

You may be aware that one lane of Hospital Road has been closed to allow for work to be undertaken in preparation for the construction of the new SPIRE building. As a result, Transport Canberra has advised of changes to bus services that commenced on 25 May 2020. It is not known how long these arrangements will be in place. You can find more information on the Transport Canberra website.

*Anne Meuronen
Community Participation Coordinator, Health Infrastructure*

CONSUMER REFERENCE GROUP REPORTS AND INFORMATION

Quality and Safety - Australian Register of Clinical Registries

Clinical quality registries are organisations that monitor the quality (appropriateness and effectiveness) of health care, by routinely collecting, analysing and reporting health-related information, for a self-improving health system.

In November 2019, the Australian Commission on Safety and Quality in Health Care (the Commission) announced the development of the Australian Register of Clinical Registries to share publicly available information on clinical registries across Australia. The Register summarises the purpose and organisation of clinical registries. To date, 90 clinical registries have used the Commission's registration tool and the Commission has published the first group of registries.

The published information includes:

- An overview of the registry and the clinical domain
- Hosting organisation
- Year established
- Whether it is a stand-alone registry
- Ethics approval reference
- Participating sites
- Type of measures collected
- Feedback reporting process
- Key contacts, and
- Web links to the registry website

The search function on the Register allows users to search for information such as clinical condition, registry name and participating sites. The 'prioritised clinical domain' field in the list is in line with the Prioritised list of clinical domains for clinical quality registry development.

Clinical registries will be added to this list as the content of each registered clinical registry is prepared for publishing. You can access the Register on the Commission's website.

Health of Older People – Age-Friendly City Plan 2020-2024

The ACT Government Age-Friendly City Plan was released last week. The principles in the Vision provided the basis for the consultation forums and survey that were completed throughout 2019. These brought together community members and representatives of community and government services to develop solutions to address the barriers that older people face.

The Age-Friendly City Plan is organised under the same four focus areas as the Vision. Each focus area has designated outcomes, actions, and indicators for achievement. It is holistic, intersecting across areas including health, public transport, human rights, and planning.

As Canberra has been working toward becoming an age-friendly city for some years, some programs and initiatives already exist, such as the Age-Friendly Suburbs Program and the ACT Seniors Card. The Age-Friendly City Plan seeks to add value to these, address gaps that were identified through the consultation process, and further embed age-friendly approaches in future service design and delivery. The Plan also aligns with work at the national level, particularly the National Plan to Respond to the Abuse of Older Australians 2019-2023.

The Age-Friendly City Plan will guide the ACT Government over the next four years to continue to work towards helping older Canberrans live their best lives.

Health of Older People - Osteoporosis Data Insights

Osteoporosis is a common condition and costly in terms of public health. It affects many Australians but is frequently undiagnosed. Even after diagnosis, treatment remains suboptimal and poor adherence to it amplifies the problem. An estimated 4.74 million Australians aged over 50 years have osteoporosis or poor bone health, and this figure is predicted to increase to 6.2 million by 2022.

Guidelines tell us that timely diagnosis and appropriate treatment of osteoporosis can reduce the risk of fracture. Find out more about identified gaps in knowledge and treatment and ways to address them in this [NPS Medicinewise article](#).

Accessibility and Design - Consumer Reference Group Meeting Report

The ADCRG met by zoom on 9 June 2020 to talk about accessibility and design issues across Canberra Health Services. Items covered included a report on SPIRE, changes to Outpatients, Telehealth, transport and parking and how we can give instant feedback when there is a design issue.

HCCA has consumer and staff representatives on many different CHS committees that focus on these issues.

Currently Outpatients has a Transformation Steering Committee and a Working Group. There is genuine interest from CHS in transforming waiting lists and processes for patients who need to attend Outpatients appointments. COVID-19 has impacted waiting lists but has also seen the introduction of telehealth which will hopefully improve the consumer experience. CHS is working hard to improve the triage of GP referrals.

ITEMS OF INTEREST

HCCA SURVEY: Looking After Your Health with a Long-Term Condition

If you have one or more long-term health conditions, HCCA would love to hear from you in an online survey. It asks about:

- how you usually look after your health
- any people and organisations that help you to do this
- anything that makes this difficult, and
- any ways that COVID-19 has changed how you look after your health.

You can take part if you have any health condition that lasts more than a year, and means you need ongoing medical care – for example you may take a prescription medication or see a doctor regularly. The survey is part of a HCCA project about consumer and carer experiences of long-term conditions. It's supported by the ACT Health Directorate and is part of our Community Health Literacy Project.

We estimate the survey will take about 15 minutes. You can [find it here](#).

There is also a survey for carers, parents and guardians of someone with a long-term condition [here](#). Please let us know if you'd prefer to complete a paper survey. HCCA will post the survey along with a pre-paid return envelope.

You can also take part in a telephone, Zoom or skype conversation about your experience – this will take about 30 minutes and no more than an hour. If you'd like to do this or have any questions about the project please contact Sarah Spiller on 6230 7800 or sarahspiller@hcca.org.au.

Inaugural Independent Annual ACT Public Health Services Cultural Review

On 4 June 2020 the Minister for Health Rachel Stephen-Smith tabled the outcomes of the ACT Public Health Services Cultural Review Implementation: Inaugural Annual Review. This was an external and independent review undertaken to assess the progression of the implementation of recommendations from the Final Report: Independent Review into the Workplace Culture within ACT Public Health Services.



4 September 2019, Members of the Culture Review Oversight Group with commitment certificates, (L to R): Prof Russell Gruen, Dean, College of Health and Medicine ANU; Mr Matthew Daniel, Branch Sec ANMF ACT; Ms Madeline Northam, Regional Secretary CPSU; Dr Peter Hughes, President, VMOA ACT; Ms Rachel Stephen-Smith, Minister for Health MLA (Chair); Dr Richard Singer, President, ASMOF ACT; Ms Darlene Cox, Exec Director, HCCA ACT; Dr Antonio Di Dio, President, AMA ACT; and Prof Michelle Lincoln, Exec Dean, Faculty of Health, UC.

It is the first of three annual reviews. It meets Recommendation 19: the 'Cultural Review Oversight Group' *auspice for the next three years, an annual, independent and external review of the extent of implementation of the recommendations of the Review and consequent impact on cultural changes within the ACT public health system*. The findings of this annual review reinforce the substantial work and effort to date across the ACT public health system. The key findings include:

- Good progress by the three health organisations (ACT Health Directorate, Canberra Health Services and Calvary Public Hospital Bruce) on vision, values, workplace policies and human resource functions. It was noted that the changes in these areas were evident and encouraging.
- Governance arrangements for implementation through the Oversight and Steering Groups, supported by the Culture Review Implementation Branch, provides a solid structure.
- There has been good advancement in addressing the 20 recommendations of the Final Report.

The annual review provides further findings. It also notes good progress in many aspects, but also highlights the journey ahead, and that sustained and substantive improvements to organisational culture takes years to change, not months. Much more work is occurring in implementing culture improvements across the ACT public health system.

Course: Self Advocacy and Supported Decision Making

Women with Disabilities ACT has a free Self-Advocacy and Supported Decision-Making 5-week online webinar course. The courses are designed for women, non-binary, or feminine identifying people with disabilities in the ACT. Participants will be empowered to find supporters, make decisions, and tell people about the decisions made.

The webinar series will be conducted as live weekly Zoom sessions. The event will be captioned and there will be a transcript available afterward. You can also bring a support person to attend with you. If you would like to receive a workbook packet to accompany the course, please [sign up here](#). For information email: engagement@wwdact.org.au or call 0481 825 093.

The timetable for the workshops is:

- Building Confidence in Self Advocacy: 2 - 4 pm, Thursday 18 June
- Telling Others About My Decisions: 6 - 8 pm, Thursday 25 June
- Areas I May Need to Advocate in: 6 - 8 pm, Thursday 2 July
- Getting Help with Advocacy and Support Within the ACT: 6 - 8 pm, Thursday 9 July
- Self-Advocacy and Supported Decision Making: A Crash Course: 6 - 8 pm, Thursday 16 July

World Blood Donor Day: 14 June 2020

World Blood Donor Day serves to raise awareness of the need for safe blood and blood products and to thank voluntary, unpaid blood donors for their life-saving gifts of blood. It also raises awareness of the need for regular blood donations to ensure that all individuals and communities have access to affordable and timely supplies of safe and quality-assured blood and blood products, as an integral part of universal health coverage.

Blood is an important resource, both for planned treatments and urgent interventions. Blood is also vital for treating the wounded during

emergencies of all kinds (natural disasters, accidents, armed conflicts, etc.) and has an essential, life-saving role in maternal and perinatal care.

Ensuring safe and sufficient blood supplies requires the development of a nationally coordinated blood transfusion service based on voluntary non-remunerated blood donations. However, in many countries, blood services face the challenge of making sufficient blood available, while also ensuring its quality and safety.

Men's Health Week: 15 - 21 June 2020

Men's Health Week provides a platform for challenging and debating key issues in men's health and to raise the profile of men, their health outcomes and health needs around the country. It celebrates the strengths of men, the contributions they make and the important role they play in society. Find out more [here](#).

Bowel Cancer Red Apple Day: 17 June 2020

June is Bowel Cancer Awareness Month, a Bowel Cancer Australia initiative raising awareness and funds for the prevention, early diagnosis, research, quality treatment and best care for everyone affected by bowel cancer.

Red Aussie Apple Day raises awareness of bowel cancer, Australia's second biggest cancer killer. Bowel cancer claims the lives of 103 Australians every week (5,375 per year) - but it is one of the most treatable cancers if found early.

While the risk of bowel cancer increases significantly with age, the disease does not discriminate, affecting men and women equally, young and old. 300 Australians will be diagnosed with bowel cancer this week (15,604 per year).

Support Bowel Cancer Awareness Month - register your interest, fundraise and/or order an awareness pack. To find out more information visit [Bowel Cancer Australia's website here](#).

Find a Dermatologist – Search Facility

It can be hard to find a dermatologist in some parts of Australia. The Australasian College of Dermatologists has a search tool that can be used to find a dermatologist near you. You can search by area or km radius from your home, by state, or by a specific area of interest eg keloid scar treatment. You can find the tool [here](#).

Dietitians Australia New Brand

As of 28 May 2020, Dietitians Association of Australia (DAA) has changed its name and logo. Now known as Dietitians Australia (DA), it has supported and connected thousands of nutrition professionals across Australia and overseas.

Dietitians Australia is Australia's largest and most influential organisation for advocacy in nutrition and dietetics, working to ensure all Australians have access to safe, affordable and nutritious foods and are equipped with the skills to make healthy food choices.

The new logo combines the D and the A of Dietitians Australia, with three lines in a circular shape to represent the path to a healthier Australia through what we put on our plate.

Useful Newsletters

ACTCOSS

- Latest e-Notice [here](#)

Consumers Health Forum of Australia

- June edition [here](#)

Public Health Association of Australia

- Intouch edition [here](#)

Health Consumers NSW

- June edition [here](#)

Australian Institute of Aboriginal and Torres Strait Islander Studies

- Latest edition [here](#)

Public Health Association of Australia

- The Pump [here](#)
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COVID-19 RESOURCES

For up to date information about COVID-19 check the following websites and social media channels:

ACT Health: <https://www.covid19.act.gov.au/>

Healthdirect: <https://www.healthdirect.gov.au/coronavirus> (This has information in other languages)

Facebook: <https://www.facebook.com/ACTHealthDirectorate/>

Twitter: <https://twitter.com/ACTHealth>

ACT Government Helpline: Ph 6207 7244 8am-8pm daily or www.covid19.act.gov.au/contact-us

Disability Information Helpline: Ph 1800 643 787 8am-8pm Monday to Friday and 9am-7pm Saturday and Sunday.

The Older Person's Support Line: Ph 1800 171 866.

Commonwealth Department of Health: <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert>

ACT Communicable Disease Control (CDC) team: Ph 5124 9213 or 9962 4155 after hours.

Symptom checker:

https://www.covid19.act.gov.au/_data/assets/pdf_file/0003/1504974/CV_Identifying-symptoms.pdf

If you are concerned and want further information you can call the Australian Government **Coronavirus Health Information Line** on [1800 020 080](tel:1800020080) 24 hours/day, seven days a week.

CONSUMER PARTICIPATION

HCCA has cancelled all face to face events that were planned until the end of June. We advise consumer representatives not to attend face-to-face meetings of the committees that they are members of. Consumer representatives can continue to contribute to committee work remotely. If you need support to do this, please contact Karen James.

COMMITTEE VACANCIES

Clinical Governance Committee – Calvary Public Hospital

The Clinical Governance Committee (CGC) is the peak clinical governance committee for Calvary Public Hospital Bruce. Guided by the principles of the Clinical Governance Framework, the CGC drives systemic improvements in the quality and safety of clinical operations in the organisation.

This opportunity would suit an experienced consumer representative with knowledge of and interest in quality and safety issues and the inner workings of health service organisations. You will be contributing to a culture that monitors and

improves the provision of quality health care and the implementation of National Standards for Quality and Safety in Health Care. This opportunity would suit a consumer representative who is able to read and consider a volume of papers before each meeting, and who feels confident in building relationships and advocating for the needs of consumers at an executive level.

This opportunity closes on **Tuesday 7 July 2020**. More information about this opportunity is available [here](#). You can nominate for this opportunity [here](#).

Clinical Handover Working Group – Canberra Health Services

Canberra Health Services (CHS) is forming a Clinical Handover Working Group under the NSQHS National Standard 6 Communicating for Safety. The aim of the working group is to ensure CHS has safe and reliable processes for the transfer of patient related clinical information at all points of transfer of care embedded in practice.

This position will suit a consumer representative interested in quality and safety issues and in

contributing to ensuring consumers are involved in setting and implementing safe clinical handover procedures. All meetings will be held monthly, via remote link until further notice.

This opportunity closes on **Tuesday 7 July 2020**. More information about this opportunity is available [here](#). You can nominate for this opportunity [here](#).

Medical Services Group Quality and Safety Executive Committee – CHS

Canberra Health Services Medical Services Group (MSG) is seeking a consumer representative to join its Quality and Safety Executive Committee. The MSG Quality and Safety Executive Committee is the peak clinical governance committee of the Division of Medical Services. Its role is to ensure the delivery of safe, high quality, effective and efficient care delivered by the Division. It reports to the Canberra Health Services Clinical Safety and Quality Committee.

It is the central accountability point for reviewing and monitoring quality and safety improvement activities from individual units. This position would suit a consumer representative with experience, knowledge and an interest in quality and safety issues and the development of clinical policies, protocols, and guidelines.

This opportunity closes on **Tuesday 7 July 2020**. More information about this opportunity is available [here](#). You can nominate for this opportunity [here](#).

Bariatric Surgery Advisory Committee – Canberra Health Services

The Canberra Health Services Bariatric Surgery Advisory Committee assesses and ranks the suitability of patients for publicly funded bariatric surgery. The committee considers the medical summaries of those patients who have engaged with the Obesity Management Service for a minimum of six months and who meet the surgery selection criteria, provides expert advice and monitors matters such as wait times and the number of surgeries performed each financial year. The committee operates within the Division of Medicine.

Meetings are held quarterly, and out of session decisions may be made via teleconference or email.

This opportunity would suit an experienced consumer representative with knowledge of or an interest in bariatric surgery and quality and safety issues. More information about this opportunity is available [here](#). You can nominate for this opportunity [here](#). This opportunity closes on **Tuesday 7 July 2020**.

OTHER COMMITTEE VACANCIES

Consumer Advisory Group – Royal Australasian College of Physicians (RACP)

The Royal Australasian College of Physicians (RACP) connects, represents and trains Physicians and trainee physicians across Australia and New Zealand.

The RACP has established a consumer advisory group to provide strategic advice on the integration of patient centred care in the College's professional standards and education and integrates consumer priorities into policy and advocacy activities.

The RACP is seeking a consumer member with a disability background and/or sector experience and highly developed skills and expertise in health consumer affairs, including the ability to represent a broad consumer perspective, understanding of the complexity of medical

practice and health systems, excellent communication skills and the ability to work collaboratively and build positive partnerships, a commitment to valuing diversity and maintaining high professional and ethical standards.

The appointment is for two years from September 2020. There will be four meetings each year, either in person or by teleconference and RACP will pay sitting fees and travel costs.

More information on the Consumer Advisory Group and a position description is available [here](#). To apply, please complete the Expression of Interest form and attachments [here](#) and send to RACP Senior Executive Officer Jae Redden (jae.redden@racp.edu.au). The closing date is **midday Tuesday 16 June 2020**.

Contact Us

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Consumer Bites is the newsletter of the **Health Care Consumers' Association**.

Please note that Consumer Bites provides a small snippet of health related articles our members might find interesting to consider, ponder and analyse. The HCCA does not purport to endorse any opinions or the veracity of claims contained within the articles.

Editor: Darlene Cox