



Government of **Western Australia**  
**South Metropolitan Health Service**  
Fiona Stanley Fremantle Hospitals Group

# Consumer Advisory Council (CAC)

## Annual Report 2024

April 2023 to March 2024

***Excellent health care, every time***

Care ■ Integrity ■ Respect ■ Excellence ■ Teamwork



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**FSFHG CAC members, November 2023**

# From the Chair and Executive Sponsor

## A Message from the CAC Chair

During the past year, the Fiona Stanley Fremantle Hospitals Group (FSFHG) Consumer Advisory Council (CAC) has continued to work enthusiastically to achieve our goals of advocating for consumers and carers across the organisation. This annual report provides a snapshot of our achievements over the past twelve months against the priorities identified in the Operational Plan for 2021–2024.

CAC members are involved across Fiona Stanley and Fremantle Hospitals in advising and working with staff on ways to improve the patient experience at FSFHG. This report details the extent of our involvement, which includes providing consumer perspectives as representatives on over 20 hospital committees and giving feedback to staff on written and online publications for patients. We are also increasingly involved in co-designing quality improvement projects.

During the year we said goodbye to several members who left the CAC. We also farewelled long-standing consumer advisor Robert Blakeman who sadly died in December 2023. We have greatly missed Robert's compassionate, thoughtful, and wise contributions to the CAC. We would like to thank all former members for their hard work and commitment to the CAC over the years and welcome the new members to the Council.

Our member profiles show the exceptional range of experience and interest that members bring to the work of the CAC. New members bring renewal by providing fresh ideas, different expertise, and new perspectives, and when combined with the experience of long-standing members this represents a rich resource. The CAC is a highly motivated and engaged group of people, and my thanks go to all members for their active enthusiasm for exploring new opportunities to contribute to shaping our health services. As one member put it, "being in the CAC is important to me because I know we are making a difference, and because staff with whom we participate value our contributions to improving the patient experience."

My special thanks go to retiring Deputy Chair Kathleen Vaughan, who has been a wonderful support to me as Chair and a staunch advocate for consumers throughout her six years of involvement in the CAC. I also thank Angela Piscitelli, Sally Freight, Renae Drenthe, Lisa Reading and Claudia Alvarado of the Patient and Family Liaison team for their essential administrative support for the CAC over the past year. I also note my appreciation of the encouragement and support that the CAC continues to receive from Jaymie Arthurson and Sarah Glover from the South Metropolitan Health Service (SMHS) Safety, Quality and Consumer Engagement team; from the Partnering with Consumers Committee; from the FSFHG Executive Director Neil Doverty; and from SMHS Chief Executive Paul Forden.

Finally, CAC Executive Sponsor Nyrene Jackson's commitment to our work has been fundamental to its success. Her enthusiasm and her energetic support are truly valued.

**Jane Pearce**

Chair, FSFHG Consumer Advisory Council



## A Message from the CAC Executive Sponsor

Huge thanks to the FSFHG CAC for their hard work over another year and continuing to support improving the consumer experience at FSFHG. The CAC have worked tirelessly to increase their profile across the organisation, ensuring that staff look to consider consumer views in all new developments and service reviews. This is demonstrated by the CAC's inaugural involvement as panel members for the FSFHG Improve Conference in 2024 and in co-designing the SMHS Framework for Consumer involvement in Research.

As the current CAC Operational Plan rolls up and we look to develop new goals for the coming years I am excited to build on the achievements to date, and know that with the vision and passion of CAC members further improvements to the consumer experience across FSFHG will be achieved!

### **Nyrene Jackson**

Executive Sponsor, Partnering with Consumers, FSFHG



## Endorsement

Annual Report endorsed by CAC members at the Annual Review Meeting (ARM) on 4 April 2024.

# About the FSFHG CAC

## Fiona Stanley Fremantle Hospitals Group

Fiona Stanley Hospital is the major tertiary hospital in the south metropolitan area of Western Australia and offers comprehensive health care services to adults, youth, and children. Providing specialist hospital services, Fremantle Hospital plays a vital role in supporting the tertiary services of Fiona Stanley Hospital.

The single streamlined governance structure of Fiona Stanley Fremantle Hospitals Group (FSFHG) helps to ensure integration between Fiona Stanley and Fremantle Hospitals with better access and flow for patients within and across specialty areas.

## The FSFHG CAC

The FSFHG CAC membership comprises up to 13 consumer representatives, plus two quarantined positions: one for an Aboriginal representative and one for a Carer representative. There is also one representative of each FSFHG Consumer Advisory Group (CAG).

This combination of perspectives has proved invaluable in ensuring the CAC has maintained its momentum and commitment to advocacy for patients, families, and carers, while incorporating new ideas and considering different points of view in its planning and decision making.

To help ensure that perspectives from both hospital sites are considered, the CAC meets alternately at Fiona Stanley Hospital (FSH) and Fremantle Hospital (FH), and a standing item on the agenda is dedicated to developments at Fremantle Hospital.

## Members of the CAC

Consumer and carer members of the FSFHG CAC, April 2023 to March 2024:

- Jane Pearce - Chair
- Jenny Bedford - FSH Mental Health CAG representative
- Robert Blakeman (until December 2023)
- Pip Brennan
- Anthea Crawford
- Roland Domoraud
- David Earl
- Kerry Elder - FH Mental Health CAG representative
- Kylie Ekin – FSH Maternity Advisory Group representative (from January 2024)
- Deborah Purdy
- Ruth Rodda (until May 2023)
- Richard Shepherd (August 2023 to February 2024)
- Guy Stapleton (October 2023 to November 2023)
- Faith Taylor – Carer Representative (from August 2023)
- Amelia Toffoli – FSH Emergency Department CAG representative
- Kathleen Vaughan – Deputy Chair

## Education and induction

FSFHG facilitates up to three education sessions for CAC members per year.

In 2023, a workshop held in August and presented by Gary Colley, Assessor for the Australian Council on Healthcare Standards, explored the topic 'Understanding and Implementing NSQHS Standard 2 – Partnering with Consumers.

A second workshop, held in December 2023, presented by Jaymie Arthurson and Sarah Glover from the SMHS Safety, Quality and Consumer Engagement, was an opportunity for CAC members to inform planning for the SMHS Consumer and Carer Engagement Strategy 2025-2030.

To support newly recruited members, a CAC induction pack is available and there is an informal mentoring program in place.

FSFHG requires and supports CAC members to undertake the Health Consumers' Council WA Consumer Representative training.

## Consumer Advisory Groups (CAGs)

Four Consumer Advisory Groups (CAGs) are currently active in FSFHG:

- FSH Emergency Department CAG
- FSH Mental Health CAG
- FH Mental Health CAG
- FSH Maternity Advisory Group.

Consumer advisory groups provide more focused, local consumer representation to support particular services within the organisation.

During 2023/2024, these CAGs have been represented on the CAC by

- FSH Emergency Department CAG - Amelia Toffoli
- FSH Mental Health CAG - Jenny Bedford
- FH Mental Health CAG - Kerry Elder
- FSH Maternity Advisory Group - Robyn Wright / Kylie Ekin

# Terms of Reference and Operational Plan

## Terms of Reference

The Terms of Reference for the FSFHG CAC were most recently reviewed in October 2022 and are next due for review in October 2024.

The purpose of the FSFHG CAC is to:

- Advocate for consumers and carers in relation to FSFHG services.
- Facilitate communication between consumers and carers and FSFHG.
- Advise FSFHG on consumer and carer issues and perspectives.

To ensure there is a framework to formally demonstrate the effectiveness of the CAC in fulfilling its purpose, eight functions are listed in the Terms of Reference with a linked set of measures. Evaluation against these measures takes place as part of the biennial review of the Terms of Reference. The CAC also conducts annual evaluation and diversity surveys.

## Operational Plan

The CAC Operational Plan for 2021-2024 provides a framework for all CAC activities. The plan was endorsed by the CAC in September 2021 and includes the following priorities:

1. To work with staff to improve communication with consumers, and provide education for health literacy for all FSFHG consumers
2. To enhance staff understanding of the patient experience, with particular reference to under-served and disadvantaged groups
3. To ensure that consumer and carer perspectives are considered in service/project planning, design and evaluation aimed at improving the patient experience

Every CAC activity is linked to Operational Plan Priority 3: Ensure that consumer and carer perspectives are considered in service planning, design and evaluation of projects aimed at improving the patient experience. The consumer-led and co-designed projects described later in this report also relate to Operational Plan Priorities 1 and 2.

Any participation by CAC members in activities that relate to the Operational Plan, such as involvement in project working groups and committee representation, is reported to the CAC at its monthly meetings, and an update on the progress of the Operational Plan priorities is given every quarter.

# Evaluation

Twelve members responded to the 2024 Evaluation Survey. Summary data is presented over the following pages. Members' suggestions how to improve the CAC included:

- “Greater awareness, guidance, and support be made available to new committee members as to where to find relevant informational resources.”
- “Improved communication: Consider creating a temporary WhatsApp group for each special project to help encourage and manage greater communication, collaboration, and analysis between committee members.”
- “Further follow-up support checks within CAC for new committee members; from time to time, especially during the first year to provide further support and direction where needed.”
- “The meetings always feel rushed and we often don't dig into the reports.”
- “I would like the CAC to provide better mentoring for new members.”
- “More time for indepth discussions. Increase number of members.”
- “I think to add on the agenda a time frame for each agenda item.”

2. The CAC Terms of Reference have been reviewed in the past 2 years.

Agree	10
Not sure	2
Disagree	0



3. The CAC Terms of Reference are readily available to members.

Agree	12
Not sure	0
Disagree	0



4. The CAC meets its functions and responsibilities as outlined in the Terms of Reference

Agree	11
Not sure	1
Disagree	0



5. Agendas and meeting materials are received in sufficient time for meetings.

Agree	12
Not sure	0
Disagree	0



10. The frequency and length of CAC meetings is appropriate.

Agree	10
Not sure	0
Disagree	2



11. Adequate support is provided to the CAC.

Agree	7
Not sure	5
Disagree	0



12. CAC members receive appropriate training.

Agree	6
Not sure	6
Disagree	0



13. The skills and expertise of CAC members are recognised and utilised.

Agree	8
Not sure	4
Disagree	0



14. If you joined the CAC in the past year, did you receive induction and information relating to your role and the CAC.

Agree	4
Not sure	0
Disagree	0
Not applicable - I have been a m...	8



15. Quorum is regularly achieved.

Agree	12
Not sure	0
Disagree	0



16. CAC meetings are well structured and organised.



17. CAC members are well prepared for each meeting.



18. Any conflict is effectively resolved.



19. Communication is constructive, open and respectful.



20. Input from all members is encouraged.



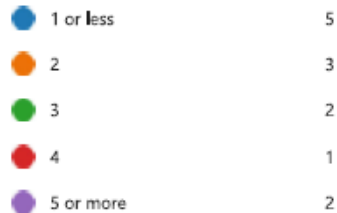
21. Do you feel FSFHG values and hears the CAC?



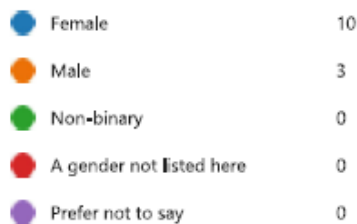
## Diversity

Thirteen CAC members responded to the 2024 Diversity Survey. This survey is voluntary and is similar to the staff diversity survey. Summary data is presented below.

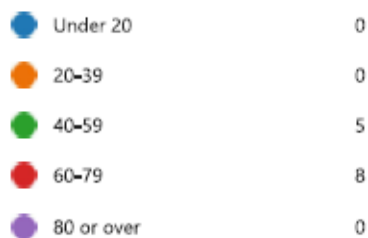
2. How many years have you been a CAC member?



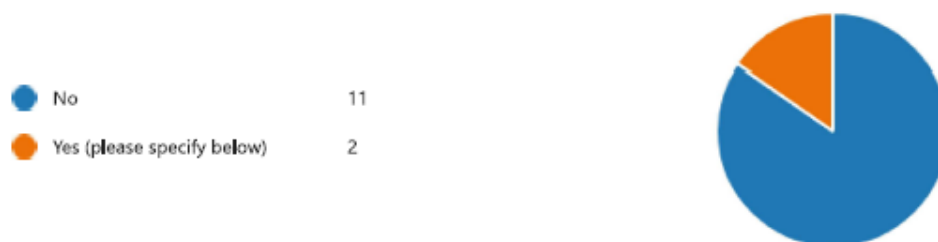
4. What is your gender?



5. What is your age group?

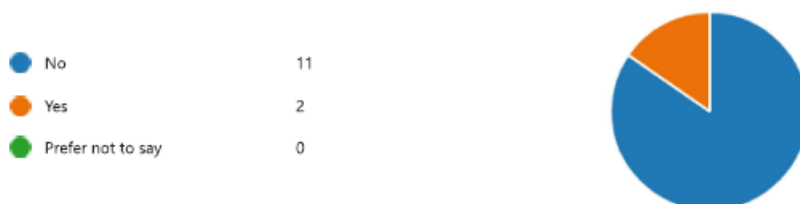


8. Do you speak a language other than English at home?



14. Do you have an ongoing disability?

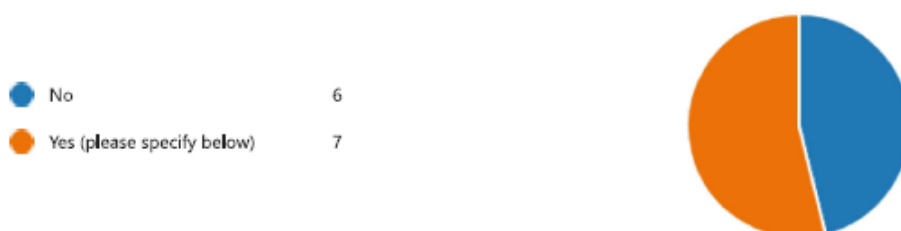
(Australia is a signatory to the United Nations Convention on the Rights of Persons with Disabilities that defines disability as: Persons with disabilities include those who have long-term physical, mental, intellectual, or sensory impairments, which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.)



15. Do you have experience as a healthcare:



16. Are you involved with other health consumer or carer groups and activities (internal or external to FSFHG)?



# Committee Participation

Consumer participation in hospital committees is an important aspect of the CAC's work. Having consumer representatives on hospital committees ensures that consumer perspectives inform the decision making of each committee and is an important mechanism to keep the CAC informed about the work of the organisation.

CAC members report monthly on the activities of their committee and can escalate any issues or concerns to the full CAC for possible action. Likewise, consumer representatives can request that issues of concern arising during CAC meetings be tabled for discussion at a committee they sit on. This two-way communication is important in ensuring that consumer and carer issues and perspectives are made known to the organisation.

## **CAC members listed below are full members of the respective committee**

FSFHG Hospital Executive (HEC)	Chair (Jane Pearce)
FSFHG Corporate Governance	Pip Brennan
FSFHG Clinical Governance	Robert Blakeman/Kerry Elder
FSFHG Clinical Outcomes Review	David Earl
FSFHG Partnering with Consumers	Jane Pearce
FSFHG Medication Safety	Robyn Wright*
FSFHG Communicating for Safety	Robyn Wright*
FSFHG Comprehensive Care – Falls	Anthea Crawford
FSFHG Comprehensive Care Cognitive Impairment	Pamela Robinson*
FSFHG Service 1 Nursing SQR	Jenny Bedford
FSFHG Outpatient Management	Robert Blakeman#
FSFHG Service 4 SQR	David Earl
FSFHG Service 6 SQR	Jenny Bedford
FSFHG Education, Workforce and Culture (ceased Oct 23)	Jane Pearce
FH Site Management	Kathleen Vaughan
FH Additional Aged Care Beds Project	Kathleen Vaughan
FSFHG Preventing and Managing Unpredictable Behaviours	Anthea Crawford
FSFHG End of Life Care Committee	Kathleen Vaughan
FSFHG Reconfiguration Project Control Group	Jane Pearce
SMHS Research Steering Committee	Pip Brennan

## **Other**

FSH Food Audits	All, monthly by nomination
FSFHG Human Research Ethics Committee (HREC)	Amelia Toffoli

\* E-Network member

# Until December 2023

# Snapshot of the Year

All activities included in the following snapshot are linked to Operational Plan Priority 3 - Ensure that consumer and carer perspectives are considered in service planning, design and evaluation of projects aimed at improving the patient experience.

- We held eleven CAC meetings and achieved a quorum at every meeting.
- We continued our involvement as consumer representatives on 20 hospital committees and four Consumer Advisory Groups.
- We took part in monthly meal audits.
- We reviewed 24 complaint response letters.
- We reviewed 50 patient publications.
- We continued our program of Ward Walks.
- We provided mentoring for new CAC members.

## Patient Publication Reviews

In 2023, the FSFHG CAC and the FSFHG Consumer E-Network were invited to review 50 patient publications. Collated feedback from CAC members is provided to the publication authors for consideration and amendments as appropriate. Evidence of consumer review is provided to the SMHS Communications team, who apply the *consumer reviewed* icon to the publication. A report is completed annually and available on the CAC hub page. The review process is voluntary and completed out of meeting time.

In 2023, CAC members worked with the SMHS Corporate Communications team to review and make changes to the Consumer Feedback Checklist. The changes are intended to provide a clearer focus for consumers as reviewers of publications, and to make the questions read from the point of view of the consumer rather than the reviewer. The feedback form now includes a preamble as a reminder of the purpose of the review. The new checklist has been in use since January 2024.

## Complaint Response Reviews

Each month, members of the FSFHG CAC are requested to review two complaint responses. The de-identified complaints and response letters are provided to the CAC members via email, and members provide feedback via MS Forms and make suggestions for improvement. Collated feedback from CAC members is provided to the service authoring the response letter. A report is completed annually and available on the CAC hub page. The review process is voluntary and completed out of meeting time.

## Ward Walks

Ward walks are an important mechanism to ensure that the consumer voice is heard, acknowledged and valued by FSFHG. CAC members talk to patients using a set of agreed questions designed to capture information on key aspects of the patient experience. Unfortunately, only 22 of the target of 50 Ward Walks were completed in 2023, making data analysis limited.

## Ward Walks

- provide an opportunity for patients to give feedback to another consumer
- provide CAC members with direct contact with patients and a broader insight to the patient experience
- provide the hospital a deeper understanding of the patient experience via direct patient perspectives.

## Additional activities

- **Consumer participation in SAC1 Review Panels**

Having successfully advocated for a trial of consumer participation in SAC1 reviews, a consumer cohort of six members representing the FSFHG CAC and three CAGs is now available to join these panels. Feedback from staff and consumers continues to indicate that involving consumers in SAC1 reviews has led to a better understanding of consumer and carer perspectives by staff involved in the review process.

- **Hidden Disabilities Sunflower Scheme**

CAC members have received training in awareness of the Hidden Disabilities Sunflower Scheme, to gain an understanding of what a non-visible disability is and to enable them to become confident to approach and support people who are wearing a Sunflower.

- **Zero Preventable Healthcare Associated Infections project**

A two-hour consumer focus group workshop was conducted on 15 May 2023 to better understand the barriers consumers face when asking staff if they have cleaned their hands and to keeping their room in hospital clean, tidy, and decluttered. Five consumers attended the workshop and identified eight primary drivers and 27 solutions to help address this problem.

- **Participation as judges in the IMPROVE Conference**

For the first time in 2024, CAC members have been closely involved in the FSFHG IMPROVE Conference. Members recommended a new judging criterion regarding 'impact on quality of care from a consumer's perspective' to be included for IMPROVE abstract assessment and presentation judging, and two members were nominated to join the judging panels on the IMPROVE Conference day, one for oral presentations, another for poster presentations.

Part of the CAC judges' role is liaison with the IMPROVE Conference Convenor following the conference to advise which project/s could benefit from strengthening consumer engagement. The CAC will reach out to these chosen project team/s for discussion on further collaboration.

- **Involvement in consumer-related activities outside FSFHG**

Many CAC members are involved in consumer advocacy activities outside FSFHG. We welcome opportunities for members to contribute as consumer advocates outside the FSFHG.

Some examples are:

Membership of Curtin University's Patient and Carer Activated Escalation of Care for Clinical Deterioration Consumer Advisory Group (PCAE CAG). The purpose of the PCAE CAG is to provide a consumer/community perspective on a research project: *Partnering with Patients and Carers from Culturally and Linguistically Diverse Backgrounds to Enable Escalation of Care for Clinical Deterioration*.

Membership of the Health Consumers' Council *Emergency Access Reform Program Consumer Advisory Group*. This group provides input and consumer advocacy with respect to the Government of Western Australia's current initiatives designed to improve health consumers' access to emergency care across the state.

Participation in judging the submissions to 'The Challenge', a Government of Western Australia competition to identify world-leading medical research and innovation solutions to resolve the problem of health service delivery in the Pilbara region of Western Australia.

# Consumer-led and Co-designed Projects

The past year has seen members becoming closely involved in partnering with FSFHG staff to plan and implement consumer-initiated and co-designed projects. These projects included the Intern education workshops on Communicating for Person-Centred Care and the implementation of Teach-back. These projects are described below.

## Intern Workshops

*Activity related to Operational Plan Priorities 1 and 2*

- *Work with staff to improve communication with consumers, and provide education for health literacy for all FSFHG consumers*
- *Work to enhance staff understanding of the patient experience, with particular reference to under-served and disadvantaged groups*

For the third year running, consumer members presented workshops on 'Communication for Person-Centred Care' to the incoming FSFHG medical Interns as part of their orientation program in January 2024. The workshops draw on staff education modules developed by the Emergency Department CAG as part of the Patients at Risk project. The workshops were an opportunity for the CAC to influence how junior doctors engage with patients, family members and carers by promoting person-centred care at the beginning of the Interns' clinical practice. It has also set the scene for the Interns by providing a positive experience of engagement with consumers.

This initiative featured in the December 2023 issue of the Australian Commission on Safety and Quality in Health Care's publication *Person-centred Care Insights*.

<https://www.safetyandquality.gov.au/sites/default/files/2023-12/person-centred-care-insights-3rd-edition.pdf>

## Teach-back

*Activity related to Operational Plan Priorities 1 and 2*

- *Work with staff to improve communication with consumers, and provide education for health literacy for all FSFHG consumers*
- *Work to enhance staff understanding of the patient experience, with particular reference to under-served and disadvantaged groups*

The Teach-back project was initiated in response to consumer concerns with aspects of staff communication. CAC members worked with staff to create a series of five videos to demonstrate Teach-back, which is a communication technique designed to involve all consumers in meaningful conversations about their health care. CAC members co-wrote scripts, presented the introductory video focusing on the value of Teach-back, and role-played patients and family members in the remaining four videos demonstrating Teach-back in a range of clinical settings. The project was launched across Fiona Stanley and Fremantle Hospitals in May 2022, and CAC members continue to promote the videos and the use of Teach-back whenever there is an opportunity.

The videos are relevant and easily available resources that can be incorporated into a variety of staff education programs to teach staff about how to engage consumers in conversations about their own care. There is evidence that Teach-back is gradually being adopted across the organisation to improve communication with consumers. Teach-back videos are now available on the FSFHGCAC website.

The CAC developed a 'Take 5' presentation on Teach-back in collaboration with Dr Chris Lomma and Dr Andrew Toffoli from the FSFHG Medical Education Unit, which was endorsed for release on the FSFHG staff hubpage by the FSFHG Education and Training Operations Group.

## **Development of a Framework for Involving Consumers in Research**

*Activity related to Operational Plan Priority 3*

- *Ensure that consumer and carer perspectives are considered in service planning, design and evaluation of projects aimed at improving the patient experience.*

Following the identification of the SMHS Research Strategy's first Pillar of Change as 'an engaged community participating in innovative research' CAC members are working in conjunction with the SMHS Research team to co-design a high-quality *Framework for Involving Consumers in Research*, to be used across SMHS. The framework is intended to be a source of information and support for both SMHS researchers wanting to involve health consumers in research and for consumers themselves.

The co-design component so far has consisted of a series of planning workshops with the first involving consumers only, the second involving researchers only, and culminating in a combined consumer and researcher workshop leading to the development of a draft for the Framework.

CAC members involved in the project have found the process to be very inclusive and responsive for all parties present. Ultimately this will benefit consumers by opening the door to improving health outcomes for all consumers. It will also give opportunities to empower consumers to acquire further knowledge and skills on how to engage whilst at the same time benefiting the SMHS research community.

# Member Profiles

## Jenny Bedford (FSH Mental Health CAG representative)



I am a fulltime carer to my young adult daughter who has both intellectual and psychosocial disabilities. I have over 20 years lived experience in mental health, disability, allied health advocacy and early intervention. I have also had over 30 years' experience in the hospitality, corporate, sales and retail sectors. I currently sit on a number of committees that allow me to advocate and have a voice on behalf of carers and consumers. My passion in all aspects of health care allows me to focus on the importance of person-centred care and the safety and quality of hospital services. I hope to continue to be involved in making positive changes representing carers, consumers, and the broader community. I feel very privileged and supported in my role as a member of the CAC.

## Robert Blakeman



Robert was a highly respected member whose unwavering commitment to advocating for all consumers, but particularly those living in regional, rural and remote parts of WA, was invaluable to the work of the CAC. Robert resided in Bunbury and was a member of the Bunbury District Health Advisory Council. He also, more broadly, represented consumers further through his involvement with WACHS (South-West), and the three Metropolitan Health Services. He was particularly focused on regional and country patients' journeys, but was also interested in consumer, family and carer interaction with health care in regard to Forensic Mental Health, Outpatient Reform, Respiratory Health, Telehealth, Sustainable Health Review and Emergency Medicine. Very

sadly, Robert died in December 2023. He will be very much missed throughout Western Australian consumer networks.

## Pip Brennan



Since 1998 I have had many different roles working in and around health advocacy. I have been a volunteer, a consumer representative, a paid Advocate, a conciliation officer in a statutory complaints office, and most recently a seven-year stint as the Executive Director of the Health Consumers' Council WA. I have been involved in every type of project from a service re-design through to state reforms (Panel Member Sustainable Health Review for example) and national committees and inquiries. I am a deeply committed lived experience systemic advocate. In 2022 I was one of a team of carers for a friend with terminal cancer and minimal family support. She died at Fiona Stanley Hospital several weeks after an emergency admission and this has sparked in interest in

joining the CAC. As an active local resident, I am also interested in what could be done to leverage relationships at local government and grassroots levels to drive consumer involvement in our health services.

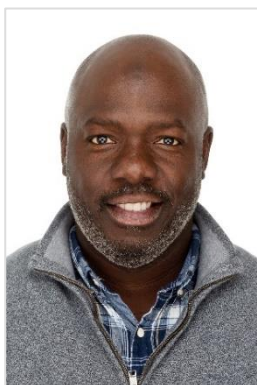
## **Anthea Crawford**



I am a semi-retired Registered Nurse who has spent 50 years in the nursing workforce, working in several countries in numerous areas of health care from war zones through to the pandemic. I have Diplomas in Midwifery, Intensive Care nursing, Management, a Certificate in Aged Care, and a Master of Nursing degree from Notre Dame University. My primary interest in later years has been nursing in Aged Care, recognising the need to lift the profile of nurses in the discipline, enhancing the quality of care that patients receive and improving the environments they inhabit. I joined the CAC to continue contributing to the health industry and to assist in ensuring standards of care are met and consumers are heard. A key aspect of this is my participation in

SAC1 Review Panels as a consumer representative. It is interesting observing health care from the consumer's perspective and working with people equally committed to improving the health experience.

## **Roland Domoraud**



I am a professional engineer (Member of the Institution of Engineers Australia), currently working for Chandler McLeod as Project Electrical Engineer. While living in Tasmania I cared for someone with a disability, we developed a strong bond and continued communicating when I moved back to Africa. I feel privileged to be part of the Consumer Advisory Council of Fiona Stanley Fremantle Hospitals Group. I am contributing to scan the environment to offer the best advice and feedback to the FSFHG CAC, and to give accurate facts of consumers and carers concerns. I have enjoyed our monthly meetings.

## **David Earl**



I have a background in university administration at both Edith Cowan University and Curtin University. After retiring, I joined the Fremantle Hospital volunteer program in December 2013 and transferred to Fiona Stanley Hospital's Volunteer Service in January 2015. As well as being a member the FSFHG Consumer Advisory Council I am a member of the FSH Emergency Department Consumer Advisory Group, and a member of the Emergency Department's Safety and Quality Committee (Clinical Governance), the Service 4 Safety, Quality and Risk Committee, and the Clinical Outcomes Review Committee, and participate in SAC1 Review Panels as a consumer representative. I also have experience as a consumer of health services, in WA medical practices and WA and

overseas hospitals and brings this wide consumer experience to my work as a volunteer and a consumer member on committees.

**Kylie Ekin** (FSH Maternity Advisory Group representative)

I have been a maternity consumer representative since becoming a mum 11 years ago. My experience in the WA public maternity system led me to become an engaged consumer and sparked passion for improvement. During this time I have worked on many projects including the Fiona Stanley Hospital (FSH) Family Birth Centre, the Western Australian Country Health Service Pregnancy App My Baby WA, and the Bentley Hospital Midwifery Birth Unit Project. I joined the FSFHG CAC in 2024 as the representative of the FSH Maternity Advisory Group. I am passionate about consumer/person centred care, continuity with a known midwife and consumer education, decision making and consent. It was my drive for change that led me to complete a Graduate Certificate in Health Economics last year to further understand how I can push forward the consumer voice. Having a background in health has provided me with a well-rounded understanding of how the system works which allows me to navigate that system and fight for change for women having babies

**Kerry Elder** (FH Mental Health CAG representative)



I have been volunteering as a consumer with lived experience for over 8 years now in one way or another. I am very passionate about consumer input into all services but most importantly in health. My experience in this area is a direct consequence of having lived as a consumer and carer in various fields of health. My main passion is in mental health as at times it is very hard for those of us who experience various mental health issues to speak out and say what they want or what isn't working or can be improved. I am also passionate about not wasting resources on things that are not working or could be done better. The consumer's voice is the only way for professionally educated people working in these areas to learn what works and what doesn't

work. Working together developing strategies and adopting new approaches to improve health services is a very positive step moving forward into the future. One aspect of this is my participation in SAC1 Review Panels as a consumer representative.

**Jane Pearce** (Chair)



I came to Perth with my family 28 years ago and taught in the School of Education at Murdoch University for 20 years. When I retired, I joined the volunteer team at Fiona Stanley Hospital. I became a member of the FSH Emergency Department Consumer Advisory Group in 2016 and was elected Chair of that group in 2017. I joined the CAC the same year and became Chair of the newly formed Fiona Stanley Fremantle Hospitals Group CAC in 2021. As a consumer representative I enjoy feeling part of the hospital community and feel very privileged to be able to make a positive contribution to the caring work of FSFHG. A key part of my role is to advocate for person-centred healthcare and co-design in service planning and designing care. I am extremely proud of the

achievements of the FSFHG CAC and am immensely grateful to all members for their commitment and enthusiasm.

### **Deborah Purdy**



I have been extremely fortunate to have received three separate kidney transplants in the three cities in which I have lived (Los Angeles US, Auckland NZ, and for the last 13 years, Perth). My most recent kidney transplant was at Fiona Stanley Hospital in 2017. I was first diagnosed with Glomerulonephritis [GN] in 1980 and though I have lived with this condition for over four decades, it has not defined me. I have had a rewarding and fulfilling professional life in real estate management and consultancy in all these cities. However, during my extensive period of lived experience with kidney disease, dialysis and organ transplantation, I have gained a broad insight into the complexities of health care systems. I have been the recipient of skills and knowledge of a network of dedicated health care professionals, both medical and allied. My experience has also shown me the importance of being a health-literate consumer and the necessity for effective consumer advocacy. So, it is a privilege to share my positive consumer health knowledge and perspective alongside the dedicated and qualified team at FSFHG CAC, while advocating for enhanced consumer care.

### **Richard Shepherd**



### **Guy Stapleton**



### **Faith Taylor (Carer Representative)**

I became engaged in the Hospital system in 2009 when my sister was admitted to Emergency with an ABI. I spent many years navigating the medical system and realised with my lived experience that there was very little support after the main event happened, particularly supporting children who were impacted by their mother's life changing circumstances. Additionally, I am my mother's primary carer, with her recent move into Aged Care. I note that in Aged Care there needs to be a shift to a people centred approach, in addition to a modern model of care where residents are more involved in their personal lifestyle decisions. I have a background in Government policy, Industrial Relations, and most recently have worked within the National Disability Insurance Agency within the Administrative Appeals Tribunal. I welcome the acceptance to the CAC in late 2023 and look forward to contributing as an active member in 2024.

### **Amelia Toffoli (FSH Emergency Department CAG representative)**



I am a professional 'nonna', an active grandmother of five, retired after 42 years in education, most of the latter service in various leadership roles. During this time I became interested in quality research informing decision making, which led to my own research in policy analysis across an education system and a doctorate. I continue to value the role of research and analyses of trustworthy data for continuous improvement in health service and care. Currently, I am a member of EDCAG, MSSM and FSFHG CAC, with particular interest in the Emergency Department and hospitality. I have been a patient and/or carer in several emergency departments, in Western Australia and in Darwin, so have firsthand experiences. Twenty years after life-saving emergency intervention, I

have an artificial aorta. As a result, I have a deep appreciation for the medical skills and care of health professionals. Having received excellent but fragmented health care, I am also now a strong advocate for the voices of patients, carers and families to be heard, during the journey in, through and out of hospital, for what I consider a more effective whole-of-person approach.

### **Kathleen Vaughan (Deputy Chair)**



I have a background in nursing, disability services, social work and child protection. I have had personal experiences at FSH as an outpatient for myself and family members.

## Member perspectives

This year, we invited CAC members to share their perspectives on why being in the CAC is important to them by completing this statement 'Being in the CAC is important to me because.....

Here are some responses:

... it allows my ideas and improvements to be developed and integrated within a large medical sphere. Making a difference is important as a collective group.

... I firmly believe our health services are better when there's a strong, dedicated, networked group of consumers and carers working in partnership to continuously improve. I live near Fiona Stanley Hospital and am keen to provide input into my local hospital, and be a positive force for change!

... I feel I can be a catalyst in shaping positive outcomes for patients, family members and carers who attend Fiona Stanley and Fremantle Hospitals.

... I feel I can make a difference. I have seen FSFHG operations, research and discussions becoming more and more 'consumer/carers-centred', because of consumers being able to communicate collaboratively.

... as a consumer member of several hospital committees I have a forum to make suggestions that are taken seriously and are therefore more likely to be acted on.

... we are making a difference and staff with whom we participate value our contributions to raising the profile of person-centred care.

**We thank all CAC members, past and present, for their commitment and dedication.**

This document can be made available in alternative formats on request.

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