

# MINUTES



## South Western Sydney Local Health District Board

Date: Monday 23 April 2012

Time: 3.30pm – 6.30pm

Venue: SWSLHD Boardroom, Eastern Campus, Liverpool Hospital

### 1. Present and Apologies

<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>	<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>
Prof Phillip Harris (Chair)	✓		John Gordon	✓	
Carolyn Burlew	✓		Prof Margot Kearns	✓	
Christine Carriage	✓		Debbie Roberts		✓
Prof Brad Frankum	✓		Mark (Jack) Johnson	✓	
Frank Conroy	✓		Dr Kathy Gibson	✓	
<i>Other Attendees</i>					
Amanda Larkin, Chief Executive SWSLHD	✓		Mark Zacka, Director Clinical Governance, SWSLHD	✓	
Graeme Loy, Director Operations, SWS LHD	✓		Amanda Walker, Medical Staff Executive Council Representative	✓	
Sally Pearce, Director Finance, SWSLHD	✓		Sally Neideck, Acting Board Secretariat	✓	

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
<b>2.</b> In Camera Session	<ul style="list-style-type: none"> <li>An in camera session was held from 3:30 – 3:50pm.</li> </ul>	
<b>3.</b> Declaration of Interests	<ul style="list-style-type: none"> <li>Nil declarations of interest were made.</li> </ul>	
<b>4.</b> Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> <li><b>Motion:</b> A motion was moved by J Gordon and seconded by F Conroy that the minutes of the meeting held on 26 March 2012 be accepted as a true and accurate record of the meeting. The motion was carried.</li> </ul>	
At 3:50pm A Larkin, G Loy, S Pearce, M Zacka, K Lim, A Walker, S Neideck, R Pronger and B Martin joined the meeting.		
<b>5.</b> Attendance by Chair, Audit	<ul style="list-style-type: none"> <li>Barrie Martin, Chair Audit and Risk Management</li> </ul>	

<p>and Risk Management Committee and Manager, Internal Audit</p>	<p>Committee and Rosemary Pronger, Manager Internal Audit covered themes provided by the Board in the brief that was circulated with the agenda.</p> <ul style="list-style-type: none"> <li>• The following key themes were discussed: <ul style="list-style-type: none"> <li>• The Audit and Risk Management Committee (ARC) was appointed in July 2011.</li> <li>• Three external members were appointed to the ARC in accordance with the pre-qualifications scheme.</li> <li>• According to the current charter, the ARC is accountable to the Chief Executive, not the Board. However the ARC is a Sub-Committee of the Board and therefore the Charter requires updating.</li> <li>• The Chief Executive is currently a member of the ARC while the committee also reports to the Chief Executive. This issue has been raised with the Ministry of Health.</li> <li>• The Risk Register was recently updated and will be submitted to the Sub-Committees prior to submission to the Board. The register covers a variety of risks including clinical and financial risks.</li> <li>• It was noted that the ARC is satisfied with the support provided by the LHD, and the general attitude towards audit within the LHD.</li> <li>• Compliance with government policy TPP0905 still requires resolution.</li> <li>• A presentation on the risk assessment and audit within the LHD was given by the Manager, Internal Audit.</li> <li>• It was noted that audits are conducted on a number of levels including hospital and department level. There are approximately 10 auditable units at each facility as well as a number of district wide units, eg payroll.</li> <li>• It was noted that there have been no breaches of a serious nature brought to internal audit's attention in the last 18 months.</li> <li>• Specific risks associated with the LHD are S8 drug administration (for example ensuring second sign off) and professional registrations.</li> </ul> </li> <li>• It was noted that a formal recommendation should be sought from the ARC regarding the number of times the Chair, ARC should attend the Board Meeting.</li> <li>• B Martin and R Pronger were thanked for their presentation to the Board.</li> </ul>	
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At 4:35pm G Loy left the meeting		
<b>6. Business Arising</b>		
6.1 Nil	<ul style="list-style-type: none"> <li>• Nil business arising was noted.</li> </ul>	
<b>7. Standing Items</b>		
7.1 LHD Performance 7.1.1 March 2012 – 2011/12 Acute Facilities Performance Management Framework Report	<ul style="list-style-type: none"> <li>• The Performance Report for March 2012 was circulated with the agenda and noted by the Board.</li> <li>• It was noted that strategies on patient flow continue to be reviewed on an ongoing basis; however Off Stretcher Time (OST) remains under the target.</li> </ul>	
At 4:40pm G Loy joined the meeting		
	<ul style="list-style-type: none"> <li>• The Board noted their concerns with the data and sought confirmation that the KPIs are appropriate. It was confirmed that the KPIs are developed by the Ministry of Health on advice from the National Health Reform Agreement and are considered appropriate for patient care.</li> <li>• It was noted that it may be more useful to provide a detailed analysis of the top 5-10 KPIs that are an issue for this LHD. It was noted that the PMF report should still be included in the papers for the Board meeting.</li> <li>• <b>Action:</b> Provide a detailed analysis of the top 5-10 KPIs to the next Board Meeting.</li> <li>• It was noted that KPIs relating to patient safety and meeting community needs are important and should be included in this analysis.</li> </ul>	Chief Executive
At 4:55pm C Carriage left the meeting		
7.1.2 Comparison Report	<ul style="list-style-type: none"> <li>• A comparison report for all NSW Local Health Districts was circulated with the agenda and noted by the Board.</li> <li>• An acronym list was tabled to assist with analysing the comparison report.</li> </ul>	
At 5:00pm C Carriage joined the meeting		
	<ul style="list-style-type: none"> <li>• The ICU Central Line Associated Bloodstream (CLAB) Infections rate was noted as an issue when compared to other LHDs.</li> <li>• It was noted that Liverpool Hospital is part of the Clinical Excellence Commission's CLAB program.</li> <li>• <b>Action:</b> Conduct trend analysis of ICU CLAB rates for the past six months.</li> <li>• A detailed analysis of the actual issues affecting Emergency Access Performance (EAP) should be conducted.</li> </ul>	M Zacka
At 5:02pm J Gordon left the meeting		

7.1.3 Service Performance Reports	<ul style="list-style-type: none"> <li>• A brief on Service Performance Reports was circulated with the agenda and noted by the Board.</li> <li>• Service Performance Report templates are currently being finalised and will be provided to the May Board Meeting.</li> </ul>	
7.2 Chairman's Report		
7.2.4 Nil	<ul style="list-style-type: none"> <li>• Nil further to report.</li> </ul>	
7.3 Work Safety Report	<ul style="list-style-type: none"> <li>• Nil report.</li> </ul>	
<b>8. Committees of the Council</b>		
8.1 Finance Committee	This item was discussed after item 8.3	
8.1.1 Minutes	<ul style="list-style-type: none"> <li>• The minutes of the Finance Committee held 19 April 2012 were tabled and noted by the Board.</li> </ul>	
8.1.2 Finance Report – March 2012	<ul style="list-style-type: none"> <li>• The Finance Report for March 2012 was circulated with the agenda and noted by the Board.</li> <li>• The significant increase in revenue was noted by the Board.</li> <li>• It was noted that salary packaging uptake is at 57%. Further work will be completed to promote this across the LHD.</li> <li>• It was noted that a trial year end is currently occurring</li> </ul>	
8.1.3 Shared and hosted services	<ul style="list-style-type: none"> <li>• A brief on Shared and Hosted Services was circulated with the agenda and noted by the Board.</li> </ul>	
8.1.4 HRTO Western Budget Review	<ul style="list-style-type: none"> <li>• A brief regarding the HRTO Western Budget Review was circulated with the agenda.</li> <li>• This review analysed: <ul style="list-style-type: none"> <li>• The historic financial budgets of the facilities and clinical services</li> <li>• \$400m held by the former SSWAHS at a corporate level</li> <li>• \$220 million in budget held by the HRTO Western.</li> </ul> </li> <li>• A meeting was held on Thursday 12 April with the Chief Financial Officer, Deputy Director General, Strategy and Resources, CE SLHD and Director Finance SLHD. <ul style="list-style-type: none"> <li>• Some resolution was found regarding the split of the budget. It was requested that the budget be re-forecast after the split has been entered into the system.</li> <li>• The DDG advised that information sharing would need to occur to resolve this issue.</li> </ul> </li> <li>• The Chief Executive advised that whilst the division of money was agreed to, the budgetary position is not resolved.</li> <li>• It was noted that this process will need to continue until a fair and equitable outcome is achieved.</li> </ul>	

	<ul style="list-style-type: none"> <li>• It was noted that the major issue is a cash shortfall rather than a budget shortfall.</li> <li>• It was noted that the Finance Committee will be strategising about the next steps and the escalation plan. At present the MoH is fully briefed on the matter.</li> </ul>	
	<ul style="list-style-type: none"> <li>• It was noted that this issue is affecting the frontline clinical services and morale within the LHD.</li> </ul>	
8.2 Audit and Risk 8.2.1 Audit Charter         8.2.2 Risk Register	<ul style="list-style-type: none"> <li>• The Audit and Risk Committee Charter and the Internal Audit Charter were circulated with the agenda and noted by the Board.</li> <li>• It was noted that both Charters require updating.</li> <li>• <b>Action:</b> Ensure the Charters are updated accordingly</li> <li>• It was noted that the Management letter was discussed at the meeting and the minutes will reflect the content of the letter.</li> <li>• The risk register and risk management framework and policy will be distributed to the sub-committees and submitted to the June, 2012 Board Meeting.</li> </ul>	Chief Executive
8.3 Health Care Quality and Safety 8.1.1 Minutes	<ul style="list-style-type: none"> <li>• The minutes of the Health Care Quality and Safety Committee held 4 April 2012 were circulated with the agenda and noted by the Board.</li> <li>• The issue surrounding mental health beds was raised at this meeting. It was noted that SWSLHD currently has 19 beds per 100,000 population which is much lower than the state average of 39 beds per 100,000 population. This is further complicated due to the low number of private psychiatry services within south western Sydney.</li> </ul>	
At 5:10pm J Gordon joined the meeting		
8.1.2 Clinical Governance Functions in the LHD	<ul style="list-style-type: none"> <li>• There has been a significant increase in mental health presentations, with 50% of patients now known to the service and therefore unavoidable admissions.</li> <li>• It was noted that the Campbelltown Mental Health development will be crucial in developing more capacity for mental health patients.</li> <li>• The Board accepted the recommendation that the Clinical Director, Mental Health present to the next Board Meeting.</li> <li>• A brief on the Clinical Governance Functions in the LHD was circulated with the agenda and noted by the Board.</li> </ul>	

	<ul style="list-style-type: none"> <li>• It was requested that the 10 standards through the Australian Commission on Safety and Quality in Healthcare (ACSQH) be discussed further at the Board.</li> <li>• <b>Action:</b> Information on the 10 ACSQH standards to be provided to the next Board Meeting</li> <li>• Development of the Clinical Governance Framework for the LHD will be presented to the July, 2012 Board Meeting.</li> <li>• <b>Action:</b> Present the Clinical Governance Framework to the July, 2012 Board Meeting.</li> </ul>	M Zacka  M Zacka
8.4 Research and Teaching 8.1.1 Minutes  8.1.2 Role of the Ingham Institute	<ul style="list-style-type: none"> <li>• The minutes of the Research and Teaching Committee held 4 April 2012 were circulated with the agenda and noted by the Board.</li> <li>• It was noted that the role of the Ingham Institute was discussed at the meeting and clarification was sought from the Board.</li> <li>• It was noted that there has been a partnership with the Ingham Institute since it was separated from the former Sydney South West Area Health Service.</li> <li>• It was noted that the governance of the Ingham Institute may be an issue due to the Research Director of SWSLHD being the same person as the Research Director of the Ingham Institute. An assessment needs to be made as to when these roles should be divided.</li> </ul>	
8.5 Community Engagement 8.1.1 Consumer Community Council Minutes	<ul style="list-style-type: none"> <li>• The minutes of the Community Consumer Council held 13 April 2012 were not circulated to the Board.</li> <li>• It was noted that social media and the patient survey were discussed at this meeting.</li> </ul>	
<b>9. New Business</b>		
9.1 Our Health, Our Communities Workshop	<ul style="list-style-type: none"> <li>• Item to be held over.</li> </ul>	
9.2 Plain Film X-Ray Reporting	<ul style="list-style-type: none"> <li>• A brief regarding plain films x-ray reporting was circulated with the agenda and noted by the Board.</li> <li>• It was noted that there is a backlog of radiology films that are presently unreported. Retrospective reporting will occur for a six week period to determine the level of risk associated with this backlog.</li> <li>• Processes are currently being implemented to ensure there is no backlog for prospective films from 10 April 2012.</li> <li>• <b>Action:</b> Provide a progress report to the next Board Meeting.</li> </ul>	Chief Executive
9.3 Robotic Surgery	<ul style="list-style-type: none"> <li>• A brief regarding the recent submission for the establishment of robotic surgery at Liverpool Hospital was circulated with the agenda and noted by the Board.</li> </ul>	

<b>10. Other Business Without Notice</b>		
10.1 Cordeaux Street Property	<ul style="list-style-type: none"> <li>• A brief regarding the Cordeaux Street property in Campbelltown was tabled for information.</li> <li>• It was noted that discussions have occurred with St Peter's Anglican School regarding purchase of the property which is currently vacant due to OH&amp;S issues.</li> <li>• It was noted that the Board supports the decision to include the property in the SWSLHD Asset Review.</li> </ul>	
10.2 Social Media	<ul style="list-style-type: none"> <li>• It was noted that the Facebook page for the LHD will be launched in the coming month.</li> </ul>	
<b>11. Items for Information</b>		
11.1 Public Relations	<ul style="list-style-type: none"> <li>• A brief regarding Public Relations matters was circulated with the agenda and noted.</li> </ul>	
11.1.1. Upcoming Events	<ul style="list-style-type: none"> <li>• Nil upcoming events were noted.</li> </ul>	
11.1.2. March 2012 Newsletter	<ul style="list-style-type: none"> <li>• A copy of the March 2012 newsletter was circulated with the agenda.</li> </ul>	
11.1.3. Board Calendar	<ul style="list-style-type: none"> <li>• A copy of the Board Calendar was circulated with the agenda.</li> </ul>	
11.1.4. LHD Clinical Council Minutes	<ul style="list-style-type: none"> <li>• Minutes of the SWSLHD Clinical Council Meeting held 4 April 2012 were circulated with the agenda and noted by the Board.</li> </ul>	
11.1.5. Facility Clinical Council Minutes	<ul style="list-style-type: none"> <li>• Minutes of the facility Clinical Council meetings were circulated with the agenda and noted by the Board.</li> </ul>	
11.2 Meetings with Interested Parties		
11.2.1 Minister for Mental Health, Healthy Lifestyles and Western NSW	<ul style="list-style-type: none"> <li>• Kevin Humphries, minister for Mental Health, Healthy Lifestyles and Western NSW visited Waratah House on 13 April 2012.</li> </ul>	
11.2.2 Director General	<ul style="list-style-type: none"> <li>• Mary Foley, Director General met with the Executive and senior clinicians of the LHD on 17 April 2012.</li> </ul>	
11.2.3 Minister for Employment Participation	<ul style="list-style-type: none"> <li>• Kate Ellis, Minister for Employment Participation attended the 'Walk the Talk' event on 17 April 2012.</li> </ul>	
<b>12. Next Meeting</b>	<p>Monday 28 May 2012  Boardroom, Fairfield Hospital  2:30 – 3:00pm – facility tour and meeting with staff and community representatives  3.30 – 6.30pm – Board Meeting</p>	

Meeting closed at 6.55pm.