

MINUTES



South Western Sydney Local Health District Board

Date: Monday 28 May 2012

Time: 3.30pm – 6.30pm

Venue: Boardroom, General Managers Unit, Fairfield 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	✓	
Chris Leahy, General Manager, Fairfield Hospital	✓		Sophie Sharman, Graduate Health Management Trainee	✓	

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
	<ul style="list-style-type: none"> The Chair advised that Debbie Roberts has requested a leave of absence for three months. Motion: The Board approved the leave of absence from 1 May 2012 to 31 July 2012. The Board then continued the meeting with a quorum. 	
2. Declaration of Interests	<ul style="list-style-type: none"> Nil declarations of interest were made. 	
3. Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> Motion: A motion was moved by J Gordon and seconded by B Frankum that the minutes of the meeting held on 23 April 2012 be accepted as a true and accurate record of the meeting. The motion was carried. 	

<p>4. Presentation, Clinical Director Mental Health</p>	<ul style="list-style-type: none"> • A/Prof Victor Storm, Clinical Director, Mental Health provided a presentation to the Board on Mental Health. • The following key themes were discussed: <ul style="list-style-type: none"> • Mental Health is a shared service across Sydney LHD and SWSLHD. • The bed base in SWSLHD is 19 beds per 100,000 population; the NSW average is 39 beds per 100,000 population. • An explanation of services provided within SWSLHD was given. • There has been an increase in mental health referrals per week from ED at Liverpool (65 referrals in 2008/09 to 66 in 2011/12), Campbelltown (48 in 2008/09 to 63 in 2011/12) and Bankstown Hospitals (32 in 2009/10 to 38 in 2011/12) in recent years. • The adult average length of stay in the inpatient unit is 18 days. There are limitations to reducing this due to the time taken for pharmacological agents to work. • Developments for SWSLHD were outlined including the proposed 70 bed mental health unit at Campbelltown. • There was discussion surrounding the facilitation of psychology students into psychiatry as a strategy for increasing the workforce. • V Storm was thanked for his presentation to the Board. 	
<p>At 4:20pm V Storm left the meeting</p>		
<p>5. Business Arising</p>		
<p>5.1. Update on backlog of X-Rays in SWSLHD</p>	<ul style="list-style-type: none"> • A brief on the backlog of x-rays in SWSLHD was circulated with the agenda. • The process for reviewing the backlog was clarified as follows: <ul style="list-style-type: none"> • Films read and report completed by a Radiologist • Project officer checks report against the medical record to confirm whether the results are consistent with the treatment. • If an incidental finding is found that is inconsistent with the documentation in the medical record the treating doctor is contacted to confirm the finding and discuss further actions required in relation to follow up with the patient. • It was noted that Campbelltown and Liverpool have both started the process, with Fairfield and Bankstown to follow. 	

	<ul style="list-style-type: none"> • A process has been implemented for prospective work to ensure no backlog in the future. • Once review of the six week period is completed the Clinical Excellence Commission will advise on further actions required. • It was noted that a review of Radiology occurred in 2011 and a number of issues have been worked through since the review including recruitment, the after hours service and networking. • Action: Provide an update on the backlog of x-rays to the next Board Meeting including data. 	Chief Executive
5.2. Update on patient merge issue	<ul style="list-style-type: none"> • A brief on the radiology patient merge issue was circulated with the agenda and noted by the Board. • The Board noted that all cases have been reviewed with no adverse outcomes identified. • GE has been engaged to fix the database and return files to the original patient. 	
6. Standing Items		
6.1. LHD Performance 6.1.1. April 2012 – 2011/12 Acute Facilities Performance Management Framework Report	<ul style="list-style-type: none"> • The Performance Report for April 2012 was circulated with the agenda and noted by the Board. 	
6.1.2. Detailed KPI Analysis Report	<ul style="list-style-type: none"> • A detailed KPI Analysis Report was circulated with the agenda. 	
At 4:50pm C Carriage joined the meeting		
	<ul style="list-style-type: none"> • Priority KPIs identified include: <ol style="list-style-type: none"> 1. Unplanned readmission within 28 days – It was noted that approximately half of the patients were readmitted to the same ward. 2. Patients in ED greater than 24 hours – This KPI was selected due to a significant increase. This KPI requires further investigation to determine the cause for the increase 3. ICU CLAB – Refer to item 7.3.2 4. Increased Length of Stay – It was noted that a number of strategies have been implemented to address LOS, for example ‘doctor of the day’ at Liverpool Hospital 5. NEAT – A Steering Group and a number of facility working parties have been established to address NEAT. • Action: Provide a break down of NEAT strategies by facility to the Board. • It was requested that resource implications be included in this report. • Action: Include resource implications in the report. 	Chief Executive Chief Executive

6.2.3 Feedback from ABF Symposium – 16 May 2012	<ul style="list-style-type: none"> The ABF Symposium was held on 16 May 2012. P Harris, C Burlew, J Gordon and a number of LHD Executive members attended. Feedback from the Symposium included a reduction in the subsidy for private patients. This will change the incentives for using private health insurance. 	
6.2.4 Board Evaluation Feedback	<ul style="list-style-type: none"> It was noted that the Board evaluation will be discussed at the next in camera session in July 2012. Action: Provide collated evaluation to the Chair and include Board Evaluation to the agenda for July 2012 	S Neideck
6.3 Work Safety Report	<ul style="list-style-type: none"> Nil report. 	
7. Committees of the Council		
7.1 Finance Committee		
7.1.1 Minutes	<ul style="list-style-type: none"> The minutes of the Finance Committee held 17 May 2012 were tabled and noted by the Board. 	
7.1.2 Finance Report – April 2012	<ul style="list-style-type: none"> The Finance Report for April 2012 was circulated with the agenda and noted by the Board. A projection has been completed which indicates an over run of \$25m by the end of June 2012. This over-run is related to a shortfall in revenue against the revenue budget. Expenditure is projected to be within budget. It was noted that the Chief Financial Officer will be reviewing the split of revenue between SWSLHD and SLHD. 	
7.1.3 Recommendation: ABF Performance	<ul style="list-style-type: none"> A cover letter and draft activity targets submitted to the MoH was circulated with the agenda and noted by the Board. It was noted that a summary report will be provided to the Finance Committee on a monthly basis. It was noted that the reversal of outflows may affect the increase in demand and activity. Action: Clarify the use of the term ‘composites’ in the report. 	Chief Executive
7.1.4 Recommendation: Investment Strategy	<ul style="list-style-type: none"> A brief regarding the proposed investment strategy was circulated with the agenda and noted by the Board. The Board approved the current investment strategy and noted a formal strategy will be developed in 2012/13. 	

<p>7.2 Audit and Risk 7.2.1 Minutes</p>	<ul style="list-style-type: none"> • The draft minutes from the Audit and Risk Management Committee meeting held 20 April 2012 were circulated with the agenda and noted by the Board. • The Chair advised that the MoH has directed that the Chief Executive should not be a member of the Audit and Risk Management Committee. This advice is yet to be received formally. 	
<p>7.3 Health Care Quality and Safety 7.3.1 Minutes 7.3.2 Trend Analysis for ICU CLAB 7.3.3 ACHS Standards</p>	<ul style="list-style-type: none"> • The minutes of the Health Care Quality and Safety Committee held 2 May 2012 were circulated with the agenda and noted by the Board. • A brief on the trend analysis for ICU CLAB rates was circulated with the agenda and noted by the Board. • It was noted that although the rate of infection is low, the target is zero. • When analysing the trend data there was an increase in infections between June and October 2011. This may relate to the relocation of ICU at Liverpool but this cannot be confirmed. • It was noted that the Clinical Governance Unit receives a report on each CLAB rate and there is currently no trend as to contributing factors. • This item should read ACSQHC (Australian Commission on Safety and Quality in Health Care) Standards. • A brief on the National Safety and Quality Health Service Standards was circulated with the agenda and noted by the Board. • The standards are mandatory from 1 January 2013; however facilities have opted to be tested against this during 2012 as part of accreditation to pre-empt any issues in meeting these standards. • It was noted that Campbelltown Hospital met 6 of 10 standards at their accreditation last week, with minor work recommended in order to meet the remaining four standards. 	
<p>7.4 Research and Teaching 7.4.1 Minutes</p>	<ul style="list-style-type: none"> • The minutes of the Research and Teaching Committee held 3 May 2012 were circulated with the agenda and noted by the Board. • It was noted that the annual report is currently being completed. 	
<p>7.5 Community Engagement 7.5.1 Consumer Community Council Minutes</p>	<ul style="list-style-type: none"> • The minutes of the Community Consumer Council held 13 April 2012 were circulated with the agenda and noted by the Board. 	

8. New Business		
8.1 Our Health, Our Communities Workshop	<ul style="list-style-type: none"> • A letter and information sheet regarding the Our Health, Our Communities Workshop was circulated with the agenda and noted by the Board. 	
8.2 South West Growth Centre	<ul style="list-style-type: none"> • A brief and Executive Summary from the South West Growth Corridor Integrated Primary and Community Care Model was circulated with the agenda. • The model was written in conjunction with the Medicare Local, University of Western Sydney and other partners. • It was noted that similar models exist in Australia but this model is relatively unique. • Motion: The Board approved the SWGC Integrated Primary Care Model. • The next step is to propose the model to the Director General for SWSLHD to be the pilot site. 	
8.3 Update on the Strategic Plan and Clinical Council presentations	<ul style="list-style-type: none"> • The minutes of the Strategic Plan Steering Committee held on 18 April 2012 were circulated with the agenda and noted by the Board. • It was noted that presentations have been completed by 6 clinical streams, with the other streams presenting on 8 June 2012. • It was noted that the work from the consumer groups has been very valuable to inform the process. 	
8.4 Respecting the Difference	<ul style="list-style-type: none"> • Information regarding the Respecting the Difference Aboriginal Cultural Training Framework was circulated with the agenda and noted by the Board. • The Respecting the Difference Aboriginal Cultural Training Framework was launched at Liverpool Hospital on 17 May 2012, with Board representation by J Gordon. The training aims to improve the knowledge and understanding of Aboriginal culture and traditions. The aim of the LHD is to support a cultural change. • SWSLHD was the first to roll out the state wide program which aims to educate staff on Aboriginal culture and improve relationships through an organisational wide cultural change. • The training will initially be completed by all leadership groups within the district. As such, the Board agreed to complete the online training program. • Logon details for the training program will need to be distributed. • Action: Distribute logon details for all Board Members to access the e-learning program. 	S Neideck

9. Other Business Without Notice		
9.1 Government Information Public Access	<ul style="list-style-type: none"> • J Gordon raised the issue of internal audit documents recently being made available for a GIPA request at another organisation. • The Chief Executive advised that internal audit papers can be accessed through GIPA. • It was noted that the organisation needs to be aware of what is documented across the organisation. 	
10. Items for Information		
10.1 Public Relations	<ul style="list-style-type: none"> • A brief regarding Public Relations matters was circulated with the agenda and noted. 	
10.1.1 Upcoming Events	<ul style="list-style-type: none"> • Nil upcoming events were noted. 	
10.1.2 April 2012 Newsletter	<ul style="list-style-type: none"> • A copy of the April 2012 newsletter was circulated with the agenda 	
10.1.3 Board Calendar	<ul style="list-style-type: none"> • A copy of the Board Calendar was circulated with the agenda. 	
10.1.4 LHD Clinical Council Minutes	<ul style="list-style-type: none"> • Minutes of the SWSLHD Clinical Council Meeting held 2 May 2012 were circulated with the agenda and noted by the Board. 	
10.1.5 Facility Clinical Council Minutes	<ul style="list-style-type: none"> • Minutes of the facility Clinical Council meetings were circulated with the agenda and noted by the Board. 	
10.2 Meetings with Interested Parties		
10.2.1 Minister for Health – 14 May 2012	<ul style="list-style-type: none"> • Jillian Skinner, Minister for Health, visited Camden Hospital to celebrate the 110 year anniversary, Liverpool Hospital to tour the raptor suite and Liverpool Hospital to launch the Consumer and Community Participation Framework on 14 May 2012. 	
10.2.2 Opening of BreastScreen – 15 May 2012	<ul style="list-style-type: none"> • The Camden and Wollondilly local MPs attended the opening of BreastScreen in Brown Street, Campbelltown on 15 May 2102. 	
10.2.3 Respecting the Difference Launch – 17 May 2012	<ul style="list-style-type: none"> • The Respecting the Difference Aboriginal Cultural Training Framework was launched at Liverpool Hospital on 17 May 2012. 	
11. Next Meeting	<p>Monday 25 June 2012 Mental Health, venue TBA 2:30 – 3:00pm – presentation and meeting with staff and community representatives 3.30 – 6.30pm – Board Meeting</p>	

Meeting closed at 6.45pm.