

MINUTES



South Western Sydney Local Health District Board

Date: Monday 26 August 2013

Time: 3:30pm – 6:30pm – Board Meeting

Venue: Seminar Rooms 5 & 6, T & R Moore Education Centre, 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	✓		Mark (Jack) Johnson	✓	
Christine Carriage		✓	Prof Neil Merrett	✓	
Prof Brad Frankum	✓		Dr Matthew Gray	✓	
Frank Conroy	✓		Nina Berry	✓	
Dr David Abi-Hanna	✓				
<i>Other Attendees</i>					
Amanda Larkin, Chief Executive SWSLHD	✓		Mark Zacka, Director Clinical Governance, SWSLHD	✓	
Graeme Loy, Director Operations, SWSLHD	✓		Dr Nicholas Collins, Medical Staff Executive Council Representative	✓	
Greg King, Director Finance, SWSLHD	✓		Kung Lim, Director Nursing and Midwifery Services, SWSLHD	✓	
Nel Buttenshaw, A/Manager Executive & Board Secretariat, SWSLHD	✓				

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
2. In Camera Session	<ul style="list-style-type: none"> Discussion was held regarding the Chief Executive Officer's Annual Performance Review. 	
At 4:05pm A Larkin, G Loy, G King, N Collins, K Lim, M Zacka, and N Buttenshaw joined the meeting.		
3. Welcome	<ul style="list-style-type: none"> The Chair noted correspondence recently received from the Ministry of Health noting the LHD's performance in 2012/13 as reasonable. The Chair conveyed that the Board considered the LHD's performance in 2012/13 to be excellent. The LHD's performance level has been reduced from a Level 1 to a Level 0. Only six LHD's State-wide are on a performance level 0. 	
4. Declaration of Interests	<ul style="list-style-type: none"> The Chair invited declarations of interest. Nil declarations were received. 	
5. Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> Motion: A motion was moved by B Frankum and seconded by C Burlew that the minutes of the meeting held on 22 July 2013, be accepted as a true and accurate record of the meeting, subject to: 	

	<ul style="list-style-type: none"> Confirmation that the wording in Item 6.2 in relation to the Board's recommendations duplicated the wording in the Chief Executive's brief to the Board on the matter. The motion was carried. Action: Confirm the wording in the Minutes at Item 6.2 with the Chief Executive's brief to the Board on the matter. 	N Buttenshaw
<i>N Berry joined the meeting at 4.15pm</i>		
5. Business Arising		
5.1 Update on the Aggression Incident at Bankstown Hospital	<ul style="list-style-type: none"> A brief was circulated with the Agenda and noted by the Board. Following completion of the internal review an action plan was developed to ensure all issues that were identified are addressed. Implementation of the action plan is being managed by the facility General Manager. Additional information regarding the incident has been provided to both the NSW Nurses Association and NSW WorkCover. As a result of the internal review the Community Health Mental Health Emergency Team have made a claim which includes, amongst other things, a request for lockers and access to parking. The claim is being addressed as part of the ongoing process. A gap analysis of related risks in all Emergency Departments in the Local Health District is due for completion in October 2013. 	
5.2 Update on Inter-District Agreements	<ul style="list-style-type: none"> A brief was circulated with the Agenda and noted by the Board. The two Chief Executives and the Ministry of Health representative continue to meet on a fortnightly basis to negotiate the termination of the Inter-District Agreements. This management framework includes an escalation process, to the Ministry of Health. The process is currently focussed on the management of the related human resource and accommodation issues arising from the termination of the Agreements. It is not intended to terminate Agreements for some cancer related services such as the Cancer Registry, Genetics, which are considered specialist services and comprise very small numbers of staff. 	
5.3 Update on Bowral and District Hospital	<ul style="list-style-type: none"> The Chief Executive and Mr Stuart Muirhead of Capital Insight met with the Bowral and District Hospital's Clinical Council on 13 August 2013 in relation to the redevelopment options for Bowral and District Hospital. The Clinical Council voted to decide the matter at the meeting and voted in the affirmative with a majority supporting the preparation of documents regarding a direct approach. It was noted that a clinical co-Chair for the Bowral and District Hospital Clinical Council will be arranged. 	

	<p><u>Finance</u></p> <ul style="list-style-type: none"> The 2013/14 budgets are currently being finalised. Further detail regarding finance will be provided within the presentation regarding Schedule C of the 2013/14 Service Agreement. <p><u>South Western Sydney Hand Centre</u></p> <ul style="list-style-type: none"> As previously advised to the Board, the transfer of hand surgery from Liverpool to Fairfield Hospital is scheduled to occur on 2 September 2013. The Board determined that the decision regarding the name of the Service should be devolved to the Chief Executive, following consultation with clinicians. 	
<p>6.1.1 Presentation – 2013/14 Service Agreement – Schedule C</p>	<ul style="list-style-type: none"> The 2013/14 Service Agreement, previously provided to the Board comprises 3 parts: <ul style="list-style-type: none"> Schedule A – Strategic Priorities Schedule B – Services and Facilities Schedule C – Budget A detailed analysis on Schedule’s A and B has previously been provided to the Board. In relation to the updated Schedule C, the following information was presented: <p><u>Overview</u></p> <ul style="list-style-type: none"> The Service Agreement establishes a framework for negotiating with the Ministry of Health in a purchaser / provider model. The Service Agreement reflects the required services and availability of resources to provide health care to the South Western Sydney community. The total budget specified includes Third Schedule facilities and non-government organisations (NGOs). Agreements with the NGOs are being reviewed to ensure alignment with strategic direction. Schedule C specifies the: <ul style="list-style-type: none"> Budget for the LHD Activity targets (NWAUs) Price (per NWAU) Expenditure budget Revenue budget and provides a comparison to the 2012/13 budget There are no substantive changes to the KPIs reported to the Board each month except NEST and NEAT. <p><u>Highlights</u></p> <ul style="list-style-type: none"> The State price per NWAU is \$4,671; the SWSLHD price is \$4,355. Funding is based on the lower of these; therefore SWSLHD is funded at \$3,355 per NWAU. The SWSLHD price of \$4,355 is the 2nd lowest in the State. ED, non-admitted, sub-acute and mental health have been added into the scope for ABF for 2013/14. Each one of these additions has an individual NWAU price. The average of these provides the final LHD price. If any of the prices exceed the State average price, a transition grant is provided to cover the ensuing budget deficit. 	

	<ul style="list-style-type: none"> • The SWSLHD price for each of these additions is below the State price and therefore a transition grant does not apply. SWSLHD is the only LHD within the State that has not received a transition grant. <p><u>2013/14 Budget</u></p> <ul style="list-style-type: none"> • General Fund 2013/14 expenditure budget is \$1.419 billion • General fund expenditure budget as at 30 June 2013 was \$1.376 billion • General Fund 2013/14 own source revenue budget is \$160.3M • General fund own source revenue budget as at 30 June 2013 was \$151.6M <p><u>Budget Allocation</u></p> <ul style="list-style-type: none"> • A detailed presentation was provided to the 23 August 2013 Finance Committee meeting. • Budgets for 2013/14 have been allocated on an historical basis, adjusted for: non-recurrent budgets removed; COAG funding removed; Labour Cap reductions applied; RMR budgets increased; and growth funding allocated. • The allocated budgets reflect an approximate 2% growth for all facilities. • A \$31M contingency budget has not been allocated, which is comparable to the previous financial year. • It is planned to allocate the 2014/15 budgets on an ABF basis. • The Board recommended that the Chair and Chief Executive sign the 2013/14 SWSLHD Service Agreement for submission to the Ministry of Health and publication on the SWSLHD website. • Action: • The Chair and Chief Executive to sign the SWSLHD 2013/14 Service Agreement for submission to the Ministry for Health and publication on the SWSLHD website. 	<p>P Harris & A Larkin</p>
<p>Mr Johnson left the meeting at 5.23pm</p>		
<p>6.2 Performance</p>		
<p>6.2.1 KPI and Comparative Report</p>	<ul style="list-style-type: none"> • The KPI and Comparative Report was circulated with the agenda and noted by the Board. • There has been a recent deterioration in NEAT performance due to increased demand. Campbelltown Hospital is struggling to meet the demand. • A meeting with Campbelltown Hospital's Executive Team and Senior Clinicians was held today, with short and medium term solutions identified. Solutions will incur financial implications. • Action: Provide a costed report to the Board to re-configure beds at Campbelltown Hospital to increase capacity. • Data provided in the PMF Key Performance Indicators Reports on pp23-25 is Year-to-Date. • Significant improvements in surgical performance compared to the previous year were noted. 	<p>G Loy</p>

<ul style="list-style-type: none"> BreastScreen Oral Health 	<ul style="list-style-type: none"> A service report for BreastScreen was circulated with the Agenda and noted by the Board. The Service exceeded its screening target for women aged 50-69 this month, and is just below target for the participate rate. A service report for Oral Health was circulated with the Agenda and noted by the Board. The National Partnership on Public Dental Waiting Lists between the Commonwealth and the States will continue to be funded in 2013-14. 	
6.3 Work Safety	<i>(due September)</i>	
6.4 Risk Management 6.4.1 Enterprise-wide Risks – Quarter 2	<ul style="list-style-type: none"> A brief providing the status of Enterprise-wide risks across SWSLHD was circulated with the Agenda and noted by the Board. <p><u>Additional Risks</u></p> <ul style="list-style-type: none"> Eight additional risks have been added to the Risk Register during the reporting period (as at June 2013). As at June 2013 the total risks reported were 53, compared to 45 in the previous quarter. <p><u>Change in Risk Profile</u></p> <ul style="list-style-type: none"> The number of extreme risks reported remains at zero. Changes in risk profile were compared to the previous reporting period as follows: <ul style="list-style-type: none"> The total number of high risk ratings increased; from 12 to 17. The number of medium risk ratings increased from 29 to 34. The number of low risk ratings increased from 2 to 4. The increase in risk ratings is attributed to the inclusion of the risks identified in the Asset Strategic Planning process. 	
6.4.2 Enterprise-wide Risk Management – Summary Report: Top 25	<ul style="list-style-type: none"> The Top Twenty Five Risk Report was circulated with the Agenda and noted by the Board. The Risk Management Committee is currently reviewing the descriptors regarding the risk to the organisation field within the Report. The Board noted that only sixteen risks were reported; rather than the top twenty five. The Board requested a review of the presentation of this Report in relation to the font size. Action: Provide the Top Twenty Five Risk Report in a larger font size. It was stated that the Top Twenty Five Risk Report does not include patient safety related risks, which are reported through the Incident Information Management System (IIMS). 	G Loy

		<ul style="list-style-type: none"> • An update on the risk management framework was provided: <ul style="list-style-type: none"> ○ Two workshops have been held regarding implementation of the new risk management software, Risk Man, with one further workshop planned. These initial workshops will be followed by a series of workshops for risk owners in the first quarter of next year. ○ The Risk Management Committee has recently signed off on the revised SWSLHD Enterprise-wide Risk Management Policy. ○ Communication and education initiatives regarding risk management are ongoing actions. 	
6.5	Chairman's Report		
6.5.1	Board Workshop - October	<ul style="list-style-type: none"> • The proposed Board Workshop was discussed earlier at the in-camera session of the Board meeting. The Chairman will discuss arrangements for the Workshop with the Chief Executive. 	
6.5.2	Deputy Director General Attendance at September Board Meeting	<ul style="list-style-type: none"> • Mr Ken Whelan, Deputy Director-General System Purchasing and Performance will be attending the September 2013 Board meeting. 	
6.5.3	NOUS Board Training Program	<ul style="list-style-type: none"> • The Chair, Dr Gray and Mrs Berry attended the recent 2-day Board Training Program, facilitated by NOUS. • The September program has been amended and will now run as a one day program. • Board members were encouraged to attend a future program. 	
7. Committees of the Board			
7.1	Health Care Quality and Safety		
7.1.1	Patient Story	<ul style="list-style-type: none"> • A patient story provided by Liverpool Hospital's Ambulatory Care Unit was outlined to the Board. • The patient story was about a 76 year old man diagnosed in 2010 with Myelodysplastic Syndrome (a condition that can lead to severe anaemia requiring blood transfusions). • Through collaboration and carefully planned, multidisciplinary care - that addressed not only physical but also individual psychosocial needs – the patient was given a longer and better quality of life. • Subsequently, the family have indicated how happy they were with the care the patient received and how grateful they are for everything we did. 	
7.1.2	Minutes – 3 July 2013	<ul style="list-style-type: none"> • The minutes of the Health Care Quality and Safety Committee meeting held on 7 August 2013 were circulated with the Agenda and noted by the Committee. 	

		<ul style="list-style-type: none"> • Clarification is being sought from Liverpool Hospital in relation to the analysis and rationale provided to the Committee regarding the Length of Stay (LoS) of cardiology patients in the Emergency Department. • NEAT performance at Campbelltown Hospital resulting in discussions planned regarding an increase to Campbelltown Hospital's bed base. • The number of falls causing death (a small number of which were on anti-coagulant medication and identified as high risk) was noted. 	
7.1.3	Health Care Quality and Safety Report	<ul style="list-style-type: none"> • A brief regarding Incident Management and Root Cause Analysis was circulated with the Agenda and noted by the Board. • The RCA methodology is designed to investigate and identify system weaknesses and support a just culture. The process does not aim to investigate individual performance, however if identified they may be referred to the Chief Executive for management. 	
7.1.4	RCA Summary	<ul style="list-style-type: none"> • A brief and table summarising the recent Root Cause Analysis investigations was circulated with the Agenda and noted by the Board. • Data is reported to the Health Care Quality & Safety Committee on a quarterly basis and documented within the minutes of meetings. • It was agreed that future RCA Summary Reports to the Board will only include new matters and causal statements of RCAs completed since the last Report. • Action: Update the RCA Summary Report to include new RCAs and Causal Statements of RCAs completed since the last Report. 	M Zacka
7.2	Finance Committee		
7.2.1	Minutes – 23 August 2013	<ul style="list-style-type: none"> • The minutes of the meeting held 23 August 2013 were tabled to the Board. • Arising from the meeting were two recommendations to the Board for approval: <ul style="list-style-type: none"> ○ Implementation of, including the associated expenditure (from Nuclear Medicine's SP&T account) for, Phase 2 of the Liverpool Hospital's Radiopharmaceutical Laboratory Project ○ Amendments to the SWSLHD Delegations Manual, as follows: <ul style="list-style-type: none"> ○ General presentation matters relating to pages 2, 3 and 12 as follows: <ul style="list-style-type: none"> - Page 2: the heading for Chapter 7 is missing and 7.18 and 7.19 should be 7.17 and 7.18; - Page 3: numbers 9.4-10 are all one digit too high - Page 12: the first dot point of 5.1.5 refers to 5.2.2 but there is no 5.2.2 (or indeed 5.2.3). 	

	<ul style="list-style-type: none"> ○ Section 8.19 - Role delineation of Health Services: <ul style="list-style-type: none"> - Authorised Delegate: Chief Executive - Signoff in the NSW Health Role Delineation Application tool Authorised Delegate: Manager Planning - In accordance with NSW Health policy ○ Section 9.5 – Accounts Receivable <ul style="list-style-type: none"> - It is requested that the delegation for the Chief Executive be changed to greater than \$5,000 (> \$5,000). - It is requested that a delegation be created for the Chief Executive, at the same level as the recommended write-off delegation, referred to above. <ul style="list-style-type: none"> ● The Board approved the implementation of, including the associated expenditure for, Phase 2 of the Liverpool Hospital’s Radiopharmaceutical Laboratory. ● The Board approved the recommendations of the Finance Committee in relation to amending the SWSLHD Delegations Manual. 	
7.2.2 Finance Report – July 2013	<ul style="list-style-type: none"> ● The Finance Report for July 2013 was tabled at the meeting. ● A brief regarding the 2013/14 budget build up process and the template allocation letter, as presented to the Finance Committee meeting held on 23 August 2013 were tabled to the Board. ● The Finance Committee meeting dates are scheduled to enable receipt of the financial information. The Finance Committee’s meeting schedule does not enable copies of the Minutes or Finance Report to be included within the Board Papers. ● Action: Draft the Board and Board Committee Meeting Schedule for 2014 for the Board’s further consideration. 	N Buttenshaw
7.3 Audit and Risk Management <i>Due September</i>	<ul style="list-style-type: none"> ● Not due. 	
7.4 Research and Teaching 7.4.1 Minutes – 7 August 2013	<ul style="list-style-type: none"> ● The minutes of the Research and Teaching Committee meeting held on 7 August 2013 were circulated with the Agenda and noted by the Committee. ● Mrs N Berry previously resigned from the Research and Teaching Committee however was still listed as a member on the minutes. ● The Research and Teaching Committee meeting held on 7 August 2013 was inquorate. 	
7.5 Community Engagement 7.5.1 CCC Minutes – 2 August 2013	<ul style="list-style-type: none"> ● Not available. 	

8. New Business		
8.1 Corporate Governance Attestation Statement	<ul style="list-style-type: none"> • A brief and the draft SWSLHD Corporate Governance Attestation Statement for 2013 were circulated with the Agenda. • There are five proposed qualifications to the statement: <ul style="list-style-type: none"> • The Strategic Plan is not finalised • The Workforce Development Plan is not finalised • The Information & Technology Plan is not finalised • Creditor levels did not always comply with Ministry of Health requirements. • There is no delegation to write off patient fees above \$10,000. • The Board recommended the Chair and Chief Executive sign the 2013 Corporate Governance Statement, with minor amendments. • Action: That the Chair and Chief Executive sign the 2013 Corporate Governance Attestation Statement. 	P Harris & A Larkin
9. Items for Information		
9.1 Public Relations	<ul style="list-style-type: none"> • A brief regarding public relations matters was circulated with the agenda and noted by the Board. 	
9.1.1 Upcoming Events	<ul style="list-style-type: none"> • Nil upcoming events were noted in the brief. 	
9.1.2 August 2013 Newsletter	<ul style="list-style-type: none"> • Copies of the August 2013 newsletter were circulated with the Agenda. 	
9.2. Meetings with Interested Parties	Nil.	
10. Other Business without Notice		
10.1. NSW Nurses & Midwives Awards	<ul style="list-style-type: none"> • Three nurses have been selected as finalists within three of the ten categories in the NSW Nurse of the Year Awards. 	
11. Next Meeting	Monday 23 September 2013 1530 – 1830 – Board Meeting Campbelltown Hospital	

Meeting closed at 6:54pm