

# MINUTES



## South Western Sydney Local Health District Board

Date: Monday 23 September 2013  
Time: 3:30pm – 6:30pm – Board Meeting  
Venue: Auditorium, Level 1, Campbelltown Hospital

### 1. Present and Apologies

| <b>Members</b>  | <b>Pres.</b> | <b>Apol.</b> | <b>Members</b>  | <b>Pres.</b> | <b>Apol.</b> |
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| 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  | ✓            |              |   |              |              |
| <b>Other Attendees</b>  |              |              |   |              |              |
| 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 (minutes) | ✓            |              | Sibi Matthews, Graduate Health Management Program (Observer)        |              |              |

| <b>Agenda Item</b>  | <b>Discussion/Decision/Recommendation</b>   | <b>Responsible</b> |
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| <b>2. In Camera Session</b>   | <ul style="list-style-type: none"> <li>The Chair reported that the Board was unanimous in its praise of Ms Larkin and her performance in the 2012/13 year. Ms Larkin was congratulated for her efforts.</li> </ul> <p>Discussed at the commencement of Item 7.1</p> <ul style="list-style-type: none"> <li>Ms Larkin thanked the Board for their comments and recognised the efforts and contribution of the Executive Team to a very successful year.</li> </ul> |                    |
| At 4:00pm A Larkin, G Loy, G King, N Collins, K Lim, M Zacka, S Matthews and N Buttenshaw joined the meeting. |   |                    |
| <b>3. Welcome</b>   | <ul style="list-style-type: none"> <li>The Chair welcomed Mr Sibi Matthews, a Graduate Health Management Program participant to the Board meeting.</li> </ul>   |                    |
| <b>4. Declaration of Interests</b>  | <ul style="list-style-type: none"> <li>The Chair invited declarations of interest. Nil declarations were received.</li> </ul>   |                    |

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| <p><b>5. Confirmation of the previous minutes and action list</b></p> | <ul style="list-style-type: none"> <li>• <u>MOTION</u>: A motion was moved by Mr Conroy and seconded by Mr Gordon that the Minutes of the Board meeting held on 26 August 2013, be accepted as a true and accurate record of the meeting, subject to the following amendment: <ul style="list-style-type: none"> <li>• Page 4 of 92, Item 6.1.1 – Highlights – ‘Funding is based on the lower of these; therefore SWSLHD is funded at \$4,355 <del>\$3,355</del>...’</li> </ul> </li> <li>• The motion was <u>CARRIED</u>.</li> <li>• Clarification was sought regarding Item 5.3 – Update on Bowral &amp; District Hospital. It was confirmed that should the Bowral Clinical Council have voted against supporting the preparation of documents for a direct approach in relation to redevelopment options for Bowral &amp; District Hospital that decision would have been returned to the Board for their consideration and action.</li> </ul> <p>Discussed at the conclusion of Item 6.1.</p> <ul style="list-style-type: none"> <li>• The Chair <u>NOTED</u> that the Minutes of the 23 August 2013 Board Meeting, at Item 6.4.2 (page 7) are a true and accurate record of the item as reported. However a clarification of the point was required in that clinical risks are reported through the SWSLHD Risk Register and clinical incidents are reported through the IIM system.</li> </ul> |  |
| <p><b>6. Patient Story</b></p>  |   |  |
| <p>6.1 Patient Complaint – Liverpool &amp; Fairfield Hospitals</p>    | <ul style="list-style-type: none"> <li>• Mr Zacka provided an overview of a complaint regarding the care and treatment of an 87 year old male who had multiple conditions including being an amputee, Charcot foot, diabetic foot ulcer, dementia, severe peripheral neuropathy and heart failure.</li> <li>• The complaint covered several areas including: <ul style="list-style-type: none"> <li>• Administration of medication – the medication was provided in a very small container and due to the patients conditions he was unable to pick it up if he remembered at all to take the medication.</li> <li>• The stump shrinker was frequently not put on after showering.</li> <li>• Urine on the floor – the patient was incapacitated yet was a given a bottle that due to his condition he was unable to use very well.</li> </ul> </li> <li>• In summary the complainant requested a review of processes at both hospitals to bring patient care back to the forefront.</li> <li>• Mr Zacka provided an overview of the process for managing a complaint, which requires a detailed response to be provided, addressing each issue raised, following an investigation by the Facility Patient Liaison Officer. Complainants may also be offered an opportunity to meet with the General Manager and relevant clinicians.</li> </ul>  |  |

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|  | <ul style="list-style-type: none"> <li>Ms Lim advised that work continues through the Directors of Nursing to address concerns and complaints at the ward level.</li> <li>The Chair requested that a copy of the response to the complaint presented be received by the Board.</li> <li><b>Action:</b> Provide a copy of the response to the complaint presented to the Board for information.</li> <li>Similarities between this complaint and issues in mid-Staffordshire were raised.</li> <li>Ms Lim advised that nursing ratios in mid-Staffordshire had a high proportion of unskilled workers; whereas in SWSLHD Registered Nurses are the higher proportion of nursing FTE.</li> <li>The Chair considered that the difference between SWSLHD management and mid-Staffordshire event is our response rather than the incidence.</li> </ul>  | Mr Zacka      |
| <b>7. Business Arising</b>   |  |               |
| 7.1 Clarification of wording in item 6.2 of the July Board Meeting Minutes | <ul style="list-style-type: none"> <li>The Board <b>RESOLVED</b> that the wording within the Minute Extract of the 22 July 2013 Board Meeting at Item 6.2 regarding Bowral &amp; District Hospital – Redevelopment Options accurately reflected wording within the Chief Executive’s Report.</li> </ul>  |               |
| 7.2 Report on the Actions being undertaken to Reduce Falls                 | <ul style="list-style-type: none"> <li>A brief regarding the actions taken in SWSLHD to reduce falls risks was circulated with the agenda and <b>NOTED</b> by the Board.</li> <li>Mr Zacka highlighted the following strategies that are being implemented: <ul style="list-style-type: none"> <li>A falls injury prevention plan has been developed for a 3-year period which includes a range of strategies to reduce falls</li> <li>A multi-disciplinary Falls Steering Committee</li> <li>Regular reports to the Health Care Quality and Safety Committee and Clinical Quality Council</li> <li>CEC has a range of tools available to support strategies</li> <li>Every patient is assessed and every fall is investigated</li> </ul> </li> <li>Mr Zacka clarified that falls are reported by rate (per overnight bed day), rather than by incident. Falls are also reported by District, rather than by facility. SWSLHD is below the latest reported NSW average rate of 4.3 falls per 1000 overnight bed day.</li> <li>There are no specific methodologies to measure the impact of strategies to prevent falls.</li> </ul> |               |
| 7.3 Board and Committee Draft Meeting Schedule 2014                        | <ul style="list-style-type: none"> <li>The Chair provided an overview of timing related to Board and Committee meetings, in particular items arising from the Finance Committee requiring submission to the Board.</li> <li>The Board <b>RESOLVED</b> that there would be no changes to the meeting schedule for the Board and Board Committees for 2014.</li> <li><b>Action:</b> Prepare the Board and Committee Calendar for 2014 for distribution.</li> </ul>   | Ms Buttenshaw |

| 8. Standing Items  |  |  |
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| 8.1 Chief Executive's Report   | <ul style="list-style-type: none"> <li>• The Chief Executive's Report was circulated with the agenda and <u>NOTED</u> by the Board.</li> </ul> <p><u>Strategic Plan</u></p> <ul style="list-style-type: none"> <li>• Ms Larkin advised that a presentation on the Plans would occur later in the agenda, at Items 7.2 and 7.3 respectively.</li> </ul> <p><u>Your Say Survey</u></p> <ul style="list-style-type: none"> <li>• Ms Larkin advised that a detailed paper would be presented on the Your Say Survey results later in the agenda, at Item 9.2.</li> </ul> <p><u>Revised KPI &amp; Comparative Reporting</u></p> <ul style="list-style-type: none"> <li>• Ms Larkin advised that a revised Report, including analysis has been prepared and will be discussed later in the agenda, at item 7.4.</li> </ul> <p><u>Bowral &amp; District Hospital</u></p> <ul style="list-style-type: none"> <li>• Ms Larkin reported that a meeting had been held with the Deputy Director-General on 5 September, rather than 5 October as stated within the Report. The Deputy Director-General has requested further analysis of the current and projected activity to inform the development of the proposal.</li> </ul> <p><u>NSW Community Based Palliative Care Services</u></p> <ul style="list-style-type: none"> <li>• Ms Larkin clarified that 3 proponents: Silver Chain; Hammond Care; and, Silver Chain / SWSLHD have been awarded a tender to expand and enhance palliative care services and provide support for families across NSW. The partnership between Silver Chain and SWSLHD covers 5 LHDs, via a contract/memorandum of understanding with each LHD. The SWSLHD's Triple I Hub will act as the central referral point for the 5 LHDs involved.</li> </ul> <p><u>Inaugural NSW Health Awards for Excellence in Nursing &amp; Midwifery</u></p> <ul style="list-style-type: none"> <li>• Ms Larkin reported congratulations had been extended on behalf of the Board to two SWSLHD nurses who received Awards at the Inaugural NSW Health Awards for Excellence in Nursing &amp; Midwifery.</li> <li>• Dr Abi-Hanna commended Ms McHutchinson, an Award recipient, noting her excellence in service provision.</li> </ul> |  |
| 8.2 SWSLHD Strategic Priorities in Health Care Delivery to 2021<br>8.3 SWSLHD Corporate Plan 2013-2017 | <ul style="list-style-type: none"> <li>• Ms Larkin presented the SWSLHD Strategic Priorities in Health Care Delivery to 2021, which incorporates the Clinical Plan and SWSLHD Corporate Plan 2013-2017 - the culmination of more than 18 months of work led by the SWSLHD Planning Unit. Significant effort was made to ensure consultation on the Plan, e.g. on-line, community, by LGA, etc.</li> </ul>  |  |

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|                                  | <ul style="list-style-type: none"> <li>Ms Larkin described the arrangement of the Plans and emphasised the strategic challenges faced by SWSLHD in achieving its Vision.</li> <li>The Board <b>RESOLVED</b> to endorse the SWSLHD Strategic Priorities in Health Care Delivery to 2021 and the SWSLHD Corporate Plan 2013-2017.</li> <li><b>Action:</b> A copy of Ms Larkin's presentation is to be attached to the Minutes.</li> </ul>   | N Buttenshaw           |
| <b>8.4 Performance</b>           |   |                        |
| 8.4.1 KPI and Comparative Report | <ul style="list-style-type: none"> <li>The KPI and Comparative Report was circulated with the agenda and <b>NOTED</b> by the Board.</li> <li>The revised KPI &amp; Comparative Report reflects the Service Agreement and provides for data and analysis reporting.</li> <li>The Chair, on behalf of the Board, commended the revised reporting format.</li> <li>The Chair requested that the Organisational Chart for Services to be provided in a larger font size for future reports.</li> <li><b>Action:</b> Provide the Organisational Chart for Services in a larger font size in future KPI&amp; Comparative Reports</li> </ul>   | Ms Buttenshaw          |
| <i>Safety &amp; Quality</i>      | <ul style="list-style-type: none"> <li>Mr Zacka presented the Safety &amp; Quality Report.</li> <li>The LHD has received advice that 6 projects have been selected as finalists in the NSW Health Innovation Awards.</li> <li>The Chair requested that the Board's congratulations be conveyed to the finalists.</li> <li><b>Action:</b> Convey the Board's congratulations to the 6 SWSLHD finalists in the NSW Health Innovation Awards.</li> <li>Mrs Berry advised her attendance at the SWSLHD Patient Safety Seminar and Quality Awards 2013.</li> <li>Mr Loy undertook to provide advice directly to Dr Abi-Hanna regarding the definition of unplanned and planned admissions.</li> <li>The Board <b>NOTED</b> the Safety &amp; Quality Report.</li> </ul>       | Mr Zacka<br><br>Mr Loy |
| <i>Access &amp; Patient Flow</i> | <ul style="list-style-type: none"> <li>Mr Loy presented the Access &amp; Patient Flow Report.</li> <li>Mr Loy clarified that the co-dependency of Transfer of Care and NEAT arises from the inability to offload ambulances if the emergency department is full of patients.</li> <li>The SHIP Model on trial at Liverpool Hospital involves using the Medical Assessment Unit (MAU) for persons with intoxication issues. MAU patients do not negatively impact upon NEAT performance because they have been discharged from the emergency department.</li> <li>Mr Loy clarified that the terminology use of 'treated' within the service measures means 'commencement of treatment'.</li> <li>The Board <b>NOTED</b> the Access &amp; Patient Flow Report.</li> </ul> |                        |

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| <p><i>People &amp; Culture</i></p><br><br><br><br><br><br><br><br><br><br><p><i>Finance &amp; Activity</i></p><br><br><br><br><br><br><br><br><br><br><p>8.4.2 Service Reports</p> | <ul style="list-style-type: none"> <li>Ms Lim presented the People &amp; Culture Report, highlighting the medical workforce and retention strategies components of the Workforce Plan and the District’s Aboriginal employment initiatives.</li> <li>Mr Loy undertook to discuss Aboriginal Employment Initiatives directly with Ms Carriage.</li> <li>The Board <u>NOTED</u> the People &amp; Culture Report.</li> </ul> <p>Discussed within Item 9.2</p> <ul style="list-style-type: none"> <li>Ms Larkin confirmed that future versions of the People &amp; Culture Report will include reference to the Your Say Survey results, which will also be taken up within the Workforce Plan.</li> </ul> <ul style="list-style-type: none"> <li>Mr King presented the Finance &amp; Activity Report noting that budgets have been loaded at cost centre level, however work continues in relation to seasonal variation.</li> <li>General Fund Net Cost of Service is slightly over budget by \$0.7M. Mr King advised that the overrun is attributed to the distribution of the budget across the year. If the allocation of budgets had been based on monthly expenditure patterns from 2012/13 the Net Cost of Service result would have been favourable by \$3.5M.</li> <li>Mr King clarified that the LHD’s performance for both acute admitted and emergency presentation NWAU’s is within the tolerance range and therefore attract no financial penalty.</li> <li>The Board <u>NOTED</u> the Finance &amp; Activity Report.</li> </ul> <ul style="list-style-type: none"> <li>A brief regarding the Service Reports was circulated with the Agenda. Reports for the following services were circulated with the Agenda: <ul style="list-style-type: none"> <li>Mental Health</li> <li>Community Health</li> <li>Drug Health Services</li> <li>Population Health</li> <li>Oral Health</li> </ul> </li> <li>The Board <u>NOTED</u> the brief and the Service Reports.</li> </ul> | <p>Mr Loy</p> |
| <p>8.5 Work Safety</p>   | <ul style="list-style-type: none"> <li>A brief updating the Board on work health and safety and critical infrastructure incidents was circulated with the agenda.</li> <li>Mr Loy reported that one WorkCover investigation continues at Bankstown Hospital. The Board have previously been briefed regarding the incident involving an assault on a staff member by a mental health patient.</li> <li>Mr Loy reported two infrastructure incidents, one at Campbelltown Hospital involving the discovery of asbestos pipe and the other at Liverpool Hospital with a generator failing to restart whilst undertaking a general maintenance shut down.</li> <li>The Board <u>NOTED</u> the brief.</li> </ul>  |               |

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| 8.6 Risk Management  | <ul style="list-style-type: none"> <li>• <i>Due November</i></li> </ul>   |  |
| 8.7 Chairman's Report  | <ul style="list-style-type: none"> <li>• Nil.</li> </ul>  |  |
| <b>9. Committees of the Board</b>  |   |  |
| 9.1 Health Care Quality and Safety<br>9.1.1 Minutes – 4<br>September 2013  | <ul style="list-style-type: none"> <li>• The Minutes of the Health Care Quality and Safety Committee meeting held on 4 September 2013 were circulated with the agenda and <u>NOTED</u> by the Board.</li> <li>• Item 7.1 (at page 7 of 8 of the Committee's Minutes) should be read as follows:               <ul style="list-style-type: none"> <li>• The <i>Hospital Performance: Time patients spent in emergency departments <del>on 2012-12</del> in 2011-2012.</i></li> <li>• Mr Zacka clarified that the document referred to in Item 4.1 of the Committee's Minutes was authored by SWSLHD with the intent of developing actions to address issues arising from the Mid-Staffordshire Inquiry.</li> <li>• Mr Zacka confirmed processes around death reviews at facilities and noted that the Clinical Excellence Commission is developing a database which LHDs can access providing mortality data.</li> </ul> </li> </ul> |  |
| 9.1.2 SAC 1 / RCA Summary  | <ul style="list-style-type: none"> <li>• A brief providing an update of new SAC 1 incidents and a summary of completed Root Cause Analysis (RCA) reports was circulated with the agenda.</li> <li>• Ms Larkin provided an overview on the robust process around implementing recommendations arising from an RCA.</li> <li>• The Chair commended the revised report, which now includes a causal statement for completed RCAs.</li> <li>• The Board <u>NOTED</u> the SAC 1 and RCA Summary Report.</li> </ul>   |  |
| 9.2 Finance Committee<br>9.2.1 Minutes – 23<br>August 2013                 | <ul style="list-style-type: none"> <li>• The Minutes of the Finance Committee meeting held on 23 August 2013 were tabled to and <u>NOTED</u> by the Board.</li> <li>• Mr Gordon noted that 2 issues arising from the Finance Committee meeting will be brought forward to the Board for consideration. The issues relate to a proposed car parking fee increase and the Energy Performance Management Strategy.</li> </ul>  |  |
| 9.3 Audit and Risk Management Committee                                    | <ul style="list-style-type: none"> <li>• The Minutes of the Audit &amp; Risk Management Committee's September meeting will be brought forward to the October Board meeting.</li> <li>• The Audit &amp; Risk Management Committee met on 18 September 2013 and formally approved the financial statements for 2012/13.</li> </ul>  |  |
| 9.4 Research and Teaching Committee<br>9.4.1 Minutes – 5<br>September 2013 | <ul style="list-style-type: none"> <li>• The minutes of the Research and Teaching Committee meeting held on 5 September 2013 were circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Dr Abi-Hanna is listed on the Minutes as the Acting Chair, however attended this meeting in his member capacity.</li> </ul>  |  |

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|  | <ul style="list-style-type: none"> <li>Ms Larkin clarified that all research applications approved by the Ethics Committee are approved by the Chief Executive, on a weekly basis.</li> <li>Dr Abi-Hanna advised that both he and Professor Frankum would be on leave at the time of the next meeting of the Research &amp; Teaching Committee is scheduled.</li> <li>The Board <b>RESOLVED</b> to cancel the October meeting of the Research &amp; Teaching Committee.</li> <li><b>Action:</b> Cancel the October Research &amp; Teaching Committee meeting.</li> </ul>   | Ms Buttenshaw           |
| <p>9.5 Community Engagement</p> <p>9.5.1 CCC Minutes – 2 August 2013</p> | <ul style="list-style-type: none"> <li>The Minutes of the Consumer Community Council meetings held on 2 August and 6 September 2013 were circulated with the Agenda and <b>NOTED</b> by the Board.</li> <li>Minutes of the meeting circulated noting 6 October 2013 should be read as 6 September.</li> <li>The Chair reported that the Consumer Community Council have identified their top 5 priorities for improving patient centred care.</li> <li>The Chair will discuss the Council's top 5 priorities for improving patient centred care directly with the Chief Executive.</li> <li>Mr Zacka confirmed that the Patient Rights brochure has been modified and is currently being reviewed by the Consumer Community Council.</li> </ul>  | Prof Harris & Ms Larkin |
| <b>10. New Business</b>  |  |                         |
| 10.1 Notice of Motion – proposed amendment to the SWSLHD By-laws         | <ul style="list-style-type: none"> <li><b>MOTION:</b> A motion was moved by Ms Burlew and seconded by Mr Gordon that a proposed amendment to Clause 16, sub-clause 3, of the SWSLHD By-laws is to be discussed at the October Board Meeting.</li> <li>The Motion was <b>CARRIED</b>.</li> <li><b>Action:</b> List the proposed amendment to the SWSLHD By-laws on the agenda for the October Board Meeting.</li> </ul>   | Ms Buttenshaw           |
| 10.2 Your Say Survey Results   | <ul style="list-style-type: none"> <li>A brief regarding the Your Say Survey was circulated with the agenda.</li> <li>Ms Larkin presented the SWSLHD results of the Your Say Survey.</li> <li>The initial Survey was conducted in 2011 at the time the LHD was being established.</li> <li>The overall SWSLHD participation rate increased, but only by 1%.</li> <li>SWSLHD is above average in most categories and experienced an increase level in overall performance from the 2011 Survey to the 2013 Survey.</li> <li>Ms Larkin highlighted the following: <ul style="list-style-type: none"> <li>Engagement Index – Indicates employee willingness to invest their personal effort to the success of the organisation - increased from 60% in 2011 to 65% in 2013, although under NSW average of 67%</li> <li>Workplace Culture - Increased from 46% in 2011 to 52% in 2013, consistent with the NSW average of 52%. This indicates employee perspective in improvements to workplace culture.</li> <li>Key highlights across the District were: <ul style="list-style-type: none"> <li>Good use of staff skills and abilities in</li> </ul> </li> </ul> </li> </ul> |                         |



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|   | <ul style="list-style-type: none"> <li>○ their role</li> <li>○ Knowledge of reporting unacceptable behaviour</li> <li>○ Receiving appropriate training &amp; development to complete allocated tasks</li> <li>● The key lowlights across the District: <ul style="list-style-type: none"> <li>○ Improving workplace culture</li> <li>○ Senior manager's having a clear direction for the future</li> <li>○ Building a positive relationship between senior manager's and staff</li> <li>○ Encouraging staff to take opportunities to learn new skills and have new experiences</li> </ul> </li> <li>● SWSLHD Facility / Service Comparative Results <ul style="list-style-type: none"> <li>○ Results reported for Bowral, Campbelltown/Camden and Fairfield Hospitals are attributed to the recruitment of the General Manager positions</li> </ul> </li> <li>● Ms Larkin advised than an LHD Action Plan is being developed focussing on strategies to address areas of improvement over a 2-year period.</li> <li>● The Board <u>NOTED</u> the Your Say Survey Results.</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 for August 2013 was circulated with the agenda and <u>NOTED</u> by the Board.</li> </ul>   |           |
| 11.1.1 September 2013 Newsletter        | <ul style="list-style-type: none"> <li>● The September 2013 newsletter was circulated with the Agenda and <u>NOTED</u> by the Board.</li> </ul>  |           |
| 11.2 Meetings with Interested Parties   | <ul style="list-style-type: none"> <li>● The Chair advised that he had met with representatives from Ernest &amp; Young regarding improved procurement practices.</li> </ul>   |           |
| <b>12 Other Business without Notice</b> |  |           |
| 12.1 Meeting Evaluation                 | <ul style="list-style-type: none"> <li>● The Chair invited members to evaluate the meeting. Members considered the meeting structure and highlighted the following key areas of interest: <ul style="list-style-type: none"> <li>● Revised KPI &amp; Comparative report</li> <li>● Community representation on Board Committees</li> <li>● Your Say Survey results</li> </ul> </li> </ul>  |           |
| 12.2 Christmas Celebration              | <ul style="list-style-type: none"> <li>● The Board <u>RESOLVED</u> that a Christmas Dinner with the LHD Executive should follow the December Board meeting.</li> <li>● <b>Action:</b> Confirm arrangements for the Board's Christmas Dinner to be held following the December Board Meeting.</li> </ul>  | Ms Larkin |

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| 12.3 Patient Tracker System | <ul style="list-style-type: none"> <li>• Mrs Berry advised that at her recent conference attendance she collected information regarding a patient experience tracker system which she will pass onto Mr Zacka.</li> <li>• It was agreed that this matter will be discussed further at the Health Care Quality &amp; Safety Committee.</li> </ul> | Mrs Berry |
| <b>11. Next Meeting</b>     | Monday 28 October 2013<br>1530 – 1830 – Board Meeting<br>LHD Board Room  |           |

Meeting closed at 6:35pm