

MINUTES



South Western Sydney Local Health District Board

Date: Monday 22 September 2014

Time: 3:25pm

Venue: MJ Goot Centre, Karitane

1. Present and Apologies

| Members | Pres. | Apol. | Members | Pres. | Apol. |
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| Prof Phillip Harris (Chair) | ✓ | | John Gordon | ✓ | |
| Carolyn Burlew | ✓ | | Mark (Jack) Johnson | | Absent |
| Christine Carriage | ✓ | | Prof Neil Merrett | | ✓ |
| Prof Brad Frankum | ✓ | | Dr Matthew Gray | ✓ | |
| Frank Conroy | | ✓ | Nina Berry | ✓ | |
| Dr David Abi-Hanna | ✓ | | | | |
| Other Attendees | | | | | |
| Amanda Larkin, Chief Executive | ✓ | | (Vacant), Medical Staff Executive Council Representative | | |
| Graeme Loy, Director Operations | ✓ | | Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes) | ✓ | |

| Agenda Item | Discussion/Decision/Recommendation | Responsible |
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| 2. In-camera Session | <ul style="list-style-type: none"> The Board discussed the process relating to the annual performance review of the Chief Executive, scheduled for 10 October 2014. The review meeting will be conducted by Prof Harris and Ms Burlew and will be undertaken in accordance with PD2013_014 – Executive Performance Management. A further in-camera session will be scheduled for the October 2014 Board meeting to confirm the performance rating, prior to submitting documentation to the NSW Ministry of Health. | |
| <i>Ms Larkin, Mr Loy & Ms Buttenshaw joined the meeting at 4:06pm.</i> | | |
| 3. Declaration of Interests | <ul style="list-style-type: none"> The Chairman invited declarations of interest. <ul style="list-style-type: none"> In relation to incident 1632110-20 (pg 41 of 154) Prof Harris reminded the Board that he is an employee of Royal Prince Alfred Hospital. The Board NOTED the declaration of interest made. | |

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| <p>4. Confirmation of the previous minutes and action list</p> | <ul style="list-style-type: none"> • <u>MOTION</u>: A motion was moved by Mr Gordon and seconded by Prof Frankum that the Minutes of the Board meeting held on 25 August 2014 be accepted as a true and accurate record, subject to the following correction, to be made prior to the Chairman authorising the Minutes: • [page 9 of 154] – Item 5.5 – Provision of State-wide Incident Comparative Report <ul style="list-style-type: none"> ○ SAC 3 incidents – NSW: 1.00; SWSLHD: 9.27 <i>Data should read as:</i> ○ SAC 3 incidents – NSW: 10.02; SWSLHD: 9.27 • The motion was <u>CARRIED</u>. | <p><i>Ms Buttenshaw</i></p> |
| <p>5. Patient Story</p> | <ul style="list-style-type: none"> • Ms Larkin reported that following correspondence to the Minister for Health, the Department of Veterans' Affairs (DVA) wrote to the District regarding a complaint from the daughter-in-law of 'Grace' (not her real name), a 90 year old DVA gold card holder. The complaint was concerning Grace's treatment in the Discharge Lounge of Bankstown-Lidcombe Hospital. • Grace had experienced a very lengthy delay (approximately 12 hours) in the Discharge Lounge, awaiting a booked non-emergency patient transport to transfer her to a rehabilitation facility at Strathfield, following hip replacement surgery at Bankstown-Lidcombe Hospital. • The complaint highlighted issues regarding communication (Grace's family had not been notified of the delay, transport delay and the care and comfort provided to Grace in the Transit Lounge). • The complaint is yet to be finalised. • Mr Loy provided an overview of the booking and prioritisation arrangements for non-emergency patient transport. • Mr Larkin reported that the District's Director of Nursing & Midwifery Services is overseeing a review of the care provided in transit / discharge lounges across the LHD. • The Board <u>NOTED</u> the patient story. | |
| <p>6. Business Arising</p> | | |
| <p>6.1 Clinical Skills & Simulation Centre [25/08/14; Item 7.1.3]</p> | <ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note regarding the current management structure of the Clinical Skills & Simulation Centre, circulated with the Agenda. • Membership of the Governance, Management and Planning Committee includes representation from the University of New South Wales (UNSW), the University of Western Sydney (UWS), the LHD and the Ingham Institute of Applied Medical | |

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| | <p>Research (IIAMR).</p> <ul style="list-style-type: none"> Some members of the Committee represent one or more or different organisations. | |
| <p>6.2.1 Incident 1693625-20 [25/08/14; Item 7.2.1]</p> | <ul style="list-style-type: none"> The Board NOTED the Referral Note regarding incident 1693625-20, circulated with the Agenda. Ms Larkin reported that the death relating to the incident was not referred to the Coroner, a death certificate was written in the Intensive Care Unit of Liverpool Hospital. Ms Larkin provided an overview of the criteria for coronial referrals and confirmed that cases may be referred retrospectively. | |
| <p>6.2.2 Point of Care Blood Testing at Bowral & District Hospital [25/08/14; Item 7.2.1]</p> | <ul style="list-style-type: none"> The Board NOTED the Referral Note regarding point of care blood testing at Bowral & District Hospital, circulated with the Agenda. Ms Larkin confirmed that point of care blood testing is available in the Emergency Department of Bowral & District Hospital. In relation to incident 165361-20, the issues related to identification and management of a deteriorating patient. | |
| <p>6.3 Oran Park Integrated Primary Care Centre (IPCC) [25/08/14; Item 5.2]</p> | <ul style="list-style-type: none"> The Board NOTED the Referral Note regarding the Oran Park IPCC, circulated with the Agenda. Mr Loy highlighted: <ul style="list-style-type: none"> The Business Case at Section 1 has been updated (to reflect SWSLHD). The Agreement for the lease is in the final stages of negotiation with the building owners. Section D is yet to be agreed by parties to the contract. Specialist rooms will be allocated through a competitive tender process, and will be a source of revenue for the project. The Board raised two concerns relating to: <ul style="list-style-type: none"> The use of Health eNet as an appropriate platform to support integrated care The nature of specialist care delivery to deliver true integrated care, recognising financial requirements to support the business model. Action: Convene a SWSLHD Board meeting at Oran Park. | <p>Ms Buttenshaw</p> |

| 7. Standing Items | | |
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| <p>7.1 Chief Executive's Report</p> <p>7.1.2 – Starring Item</p> | <ul style="list-style-type: none"> • Ms Larkin reported that results of the People Matter Employee Survey, a Public Sector Commission initiative, were made available on 25 August 2014. The Survey occurs in parallel to the Your Say Survey, a health-specific initiative, which means that health staff are required to complete two employee related surveys. • Ms Larkin highlighted: <ul style="list-style-type: none"> • The response rate of SWSLHD employees was 14.6%, above the NSW Health average of 13.0%, but below the NSW public sector average of 19.4%. • Within each main indicator SWSLHD made an improvement greater than +5%, in comparison to NSW Health and the Public Sector broadly. • Highlights included that staff understood what is expected of them to do well in their role and their working group strived to achieve customer/client satisfaction. • Opportunities for improvement include managers dealing appropriately with poor performance, change not being handled well and senior managers listening to staff. • The Board <u>NOTED</u> the positive results for SWSLHD arising from the People Matter Employee Survey 2014. | |
| <p>7.1 Chief Executive's Report</p> <p>7.1.3 – August Report</p> | <ul style="list-style-type: none"> • The Chief Executive's Report was circulated with the Agenda. • The Chief Executive highlighted the following items: <p><u>Cancer Care Centres – Visit to Melbourne</u></p> <ul style="list-style-type: none"> • On 2 September 2014 a delegation of SWSLHD staff visited the Olivia Newton John Cancer & Wellness Centre and the Victorian Comprehensive Cancer Centre Project to review: <ul style="list-style-type: none"> ▪ Architecture, building design – environment, space and ambiance ▪ Models of care ▪ Operational flow and staff and patient experiences • Outcomes of the visit will inform planning for the development of the Liverpool Hospital Cancer Care Centre. <p><u>Community Health Review</u></p> <ul style="list-style-type: none"> • The Community Health Review recommends significant service changes. An overview will be presented to the October Board meeting prior to any community consultation. | <p><i>Ms Buttenshaw</i></p> |

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| | <p><u>ICT Strategy</u></p> <ul style="list-style-type: none"> The draft ICT Strategy will be discussed further at the October Board Planning Workshop. <p><u>SAHRT Application to NHMRC</u></p> <ul style="list-style-type: none"> The SAHRT Governing Council has been expanded to include the SWSLHD Chief Executive and Prof Annemarie Hennessey, UWS and the inaugural meeting was held on 9 September 2014. Applications will be reviewed by a Panel, which includes international representation. <p><u>2014 NSW Health Excellence in Nursing and Midwifery Awards</u></p> <ul style="list-style-type: none"> SWSLHD was well represented with three finalists in the Awards, presented on 11 September 2014 at NSW Parliament House. Two of our three finalists won their respective categories and the third finalist achieved runner up. Action: Issue letters of congratulations from the SWSLHD Board. Ms Larkin confirmed that the Aboriginal Estimated Resident Population (ERP) figures were correct. Dr Abi-Hanna reported that the descriptor for Priority Strategic Direction 1 and 2 had been duplicated. The Board <u>NOTED</u> the Chief Executive’s August Report. | <p><i>Ms Buttenshaw (Prof Harris)</i></p> |
| <p>7.2 Performance</p> | | |
| <p>7.2.1 KPI Report</p> | <ul style="list-style-type: none"> The KPI Report was circulated with the Agenda. | |
| <p><i>Safety & Quality</i></p> | <ul style="list-style-type: none"> Ms Larkin highlighted the following items from within the Report: <ul style="list-style-type: none"> Based on the July data, the SABSI rate is at 1.22 (per 10,000 occupied bed days) and remains below the State upper limit. The rate of unplanned hospital re-admissions, within 28 days, at 7.02% remains above the acceptable limit of 6.2%. Strategies in response to the top 20 presenters are being implemented in each facility. Action: Provide re-admission rate data over a time period, with analysis to the October Board meeting. The District conducted, with success its fourth Annual Patient Safety Seminar and Quality Awards on 4 September 2014, hosted by the Clinical Governance Unit. The Clinical Excellence Commission made available an international keynote speaker. | <p>Mr Loy</p> |

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| | <ul style="list-style-type: none"> • The SWSLHD Quality Awards, presented by Nina Berry, provide an important acknowledgment. A summary of the Award winners, including a brief description of each project is included within the KPI Report for the Board’s information. <ul style="list-style-type: none"> ○ The Patient Safety Champion Award for 2014 was won by Dr Bilyana Konstantinova, Campbelltown and Camden Hospital Staff Specialist, Geriatrics. ○ Action: At pg 39 of 154 – Confirm that the outcomes reported against the Category – Excellence in provision of non acute/sub acute care is correct. • There were eight new serious incidents reported since the last report, which will undergo a Root Cause Analysis (RCA). There were nine RCAs completed since the last report. • New SAC 1 Incident 1712987-20 (pg 41 of 154) – Ms Larkin clarified the transfer to a ‘tertiary facility’ for ongoing management, meant Liverpool Hospital due to the nature of care required. • Action: Review the number of incidents involving ‘missed aortic dissection’ and provide a report to the October Board meeting. [Relates to Causation Statements from completed RCA Report (pg 43 of 154) – Incident 1667727-20 – missed aortic dissection]. • The Board <u>NOTED</u> the Safety & Quality KPI Report. | <p>Mr Zacka</p> <p>Mr Zacka</p> |
| <i>Ms C Carriage left the meeting at 5:15pm.</i> | | |
| <p><i>Service Access & Patient Flow</i></p> | <ul style="list-style-type: none"> • Mr Loy highlighted the following items from within the Report: <ul style="list-style-type: none"> • For the month of August NEAT performance at 58.95% is comparable to the previous year’s performance at 57.19% but a significant improvement is required to meet the State target of 81%. • A range of strategies are being implemented to improve performance regarding the Whole of Hospital Program, particularly at Liverpool and Campbelltown Hospitals. • NEAT and TOC targets relates to quality and safety of care rather than financial penalties or incentives. • The reduction in surgery may be attributed to plans to manage activity over the Winter period. • The Board <u>NOTED</u> the Service Access & Patient Flow Report. | |

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| <p><i>People & Culture</i></p> | <ul style="list-style-type: none"> • Ms Larkin highlighted the following items from within the Report: <ul style="list-style-type: none"> • The percentage of Aboriginal workforce a proportion of total workforce has increased by 0.23% for August 2014. The current percentage against the State 2.6% target is 1.65%. In August 2014 a further 28 trainees were recruited. • The increase in nursing premium staff usage can be attributed to the Winter period with an increase demand on services and increased sick leave. • The Board <u>NOTED</u> the People & Culture Report. | |
| <p><i>Finance & Activity</i></p> | <ul style="list-style-type: none"> • Ms Larkin highlighted the following items from within the Report: <ul style="list-style-type: none"> • Higher than anticipated activity in July and August has resulted in expenses being over budget. The result to August 2014 is a 1% or \$1.5M unfavourability to budget. The LHD continues to forecast an on budget result. • The budget load was completed in August 2014. Budgets have been allocated to cost centre and account level and have been seasonalised. • Financial performance meetings are being held with each Facility, attended by the SWSLHD Chief Executive, Director of Finance and Director of Operations. • July NWAU data indicates that acute inpatient activity is 5.7% and emergency department activity 4.1% over their respective targets. Strategies will be discussed with facilities to recover the related over budget expenditure. • The Oracle issue relating to payment of small businesses within 30 days has been resolved and the LHD is performing at the 99% target. • The Board <u>NOTED</u> the Finance & Activity Report. | |
| <p>7.2.2 Service Reports</p> | <ul style="list-style-type: none"> • Reports for the following services were circulated with the Agenda: <ul style="list-style-type: none"> • Mental Health • Community Health • Drug Health • Population Health • Oral Health • Ms Larkin highlighted the following items from within the Service Reports: | |

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| | <ul style="list-style-type: none"> • <u>Population Health Service Report</u> As at June 2014 coverage at 1 year of age for children who are not identified as Aboriginal on the Australian Childhood Immunisation Register is at 88%; lower than the previous annual reported coverage of 90%, and below the expected target of 92%. • <u>Office of Preventive Health Service Report</u> The Office of Preventive Health implements and coordinates State-wide preventive health programs and is based at Liverpool (Eastern Campus). An overview of major programs is provided within the Report, including: <ul style="list-style-type: none"> • Healthy Children Initiative • The Get Healthy at Work Service • The Get Healthy Information and Coaching Service • The Board <u>NOTED</u> the Service Reports. | |
| <p>7.3 Work Health & Safety Report</p> | <ul style="list-style-type: none"> • The Board <u>NOTED</u> the Quarterly Work Health and Safety (WHS) Report (April to June 2014), as circulated with the Agenda. • Mr Loy highlighted the following items: <ul style="list-style-type: none"> • <u>Critical Infrastructure Incidents</u> <ul style="list-style-type: none"> • Three critical infrastructure incidents occurred during the period, which is comparable to the previous reporting period. • <u>WHS Dashboard</u> <ul style="list-style-type: none"> • No physical assaults were notified to the NSW Police, from a total of 42 incidents. • Code black incidents are cumulative. • Action: Adjust Dashboard format to be consistent with other performance dashboards provided to the Board (including provision of data, i.e. raw numbers for period, YTD and comparison to period and YTD of previous year). • <u>Treasury Managed Fund Risk Management Report: Workers Compensation Dashboard</u> <ul style="list-style-type: none"> • There has been a reduction in the total number of claims. | <p>Mr Loy</p> |
| <p>7.4 Chairman's Report</p> | <ul style="list-style-type: none"> • <u>2014 Board Workshop</u> <ul style="list-style-type: none"> • The Board <u>AGREED</u> to discuss the topics as proposed. • The Chairman advised that a facilitator will be engaged for the Workshop. • The Chairman invited comment on the proposed agenda: | |

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| | <ul style="list-style-type: none"> • ICT Strategic Plan – Invite the Chief Medical Information Officer • Service Development Priorities – the aim is to be confident and clear that what we are planning (services and models of care) will meet the health needs of the population • Include within the Agenda a review of our Vision, Mission and Values • <u>Council of Board Chairs Meeting</u> <ul style="list-style-type: none"> • Ms Burlew reported on attendance at the recent Council of Board Chairs meeting. • Presentations were delivered in the morning session, including: <ul style="list-style-type: none"> • Mid North Coast LHD – Efficiencies arising from public private models • Sydney LHD – Organ & Tissue Donation • Hunter New England – Strategic Framework. One of their strategic priorities was ‘positioning for the future’; an issue SWSLHD should consider. • The afternoon session focussed on the dimensions of aged care. | |
| 8. Committees of the Board | | |
| 8.1 Health Care Quality and Safety | | |
| 8.1.1 Minutes – 10 September 2014 | <ul style="list-style-type: none"> • The Minutes of the Health Care Quality and Safety Committee meeting held on 10 September 2014 were circulated with the Agenda and <u>NOTED</u> by the Board. • Dr Gray highlighted the following items: <ul style="list-style-type: none"> • Item (3.1) – ANZIC Report - The Committee noted that the strategies adopted by Liverpool Hospital in response to the ANZIC Report have not yet been reflected in the data. The Committee will consider the most recent quarterly data at their October meeting. • Item (3.4) – Patient Satisfaction Survey - The Committee agreed to the plan for reporting facility actions in relation to the Survey. • Item (5.1) – Blood Wastage Report – A new report noted by the Committee in relation to blood and blood product wastage. Mrs Berry clarified the Radio Frequency Identification Fridge. | |

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| 8.2 Finance Committee | | |
| 8.2.1 Minutes | <ul style="list-style-type: none"> The August meeting of the Finance Committee did not proceed due to a lack of quorum. | |
| 8.2.2 Membership | <ul style="list-style-type: none"> The Board <u>APPROVED</u> the appointment of Dr Abi-Hanna as a Board member on the SWSLHD Finance Committee, as a result of Prof Merrett's resignation from the Committee. The Board acknowledged Prof Merrett's significant contribution to the Finance Committee. Dr Abi-Hanna provided thanks to Mr Gordon and Mr King for their recent tutorial. | |
| 8.3 Research & Teaching Committee | | |
| 8.3.1 Minutes - | <ul style="list-style-type: none"> The Minutes of the Research & Teaching Committee meeting held on 4 September 2014 were circulated with the Agenda and <u>NOTED</u> by the Board. Prof Frankum highlighted the following items: <ul style="list-style-type: none"> Item (3) – Input from the District's Clinical Information Manager regarding student access of medical records for research purposes. Item (4.1) – HET Medical Program Review - Significant discussion regarding the proposed changes to training programs auspiced through HETI. Item (6.5) – Quarterly Report: Research Strategy – A copy of the Report is provided to the Board to demonstrate the significant progress towards achieving the Plan over a relatively short period of time. Ms Larkin clarified that the reported damage to the magnet in Item 8 relates to the Linear Accelerator, which is a manufacturer issue resulting in a 22 week delay. | |
| 8.4 Audit & Risk Management Committee | | |
| 8.4.1 Minutes – 26 August 2014 | <ul style="list-style-type: none"> The Minutes of the Audit & Risk Management Committee meeting held on 26 August 2014 were circulated with the Agenda and <u>NOTED</u> by the Board. Ms Burlew highlighted: <ul style="list-style-type: none"> Item 7.3.2 – Risk Register – a further review of the revised risk register was undertaken. Ms Burlew reported the process undertaken in relation to the | |

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| | <p>submission of the Annual Finance Statements:</p> <ul style="list-style-type: none"> Reviewed in detail at the Audit & Risk Management Committee meeting of 17 September 2014. Emailed to the Board on 17 September inviting comment. It was reported to the Finance Committee meeting of 19 September 2014 that no comments were received by the Board. Ms Burlew considered that the email to the Board could have been clearer. The Board suggested advance notice is provided in relation to the provision of the Annual Financial Statements for comment. The Annual Financial Statements were signed by the Chief Executive and Director of Finance and submitted to the NSW Audit Office on 19 September 2014 (due date). | <i>Mr King</i> |
| 8.4.2 Matters referred to the ICAC | <ul style="list-style-type: none"> The Board <u>NOTED</u> that there was one notification made by the Chief Executive to the Independent Commission against Corruption (ICAC) during the period 8 August to 5 September 2014. | |
| 8.5 Consumer & Community Council | | |
| 8.5.1 Minutes – 1 August 2014 | <ul style="list-style-type: none"> The Minutes of the Consumer & Community Council meeting held on 5 September 2014 were circulated with the Agenda and <u>NOTED</u> by the Board. Mrs Berry highlighted the following item: <ul style="list-style-type: none"> Item (3.2) – Involvement of the Liverpool Network in the Liverpool Hospital car park tender process. | |
| 9. New Business | | |
| 9.1 June 2013/14 6-Monthly Performance Review | <ul style="list-style-type: none"> The Board <u>NOTED</u> correspondence received from the Ministry of Health, circulated with the Agenda, advising that SWSLHD will remain at the performance level of '0' and congratulated the Chief Executive and District Team. | |
| 10. Items for Information | | |
| 10.1 Public Relations | <ul style="list-style-type: none"> A Referral Note regarding public relations matters for August 2014 was circulated with the Agenda and <u>NOTED</u> by the Board. Ms Larkin highlighted the following items: <ul style="list-style-type: none"> Changing Minds will be broadcast on 7, 8, 9 October 2014. Minister Rowell is visiting Liverpool Hospital on 5 October 2014 and will tour the Psychiatric Emergency Care Centre (PECC). | |
| 10.1.1 District Newsletter | <ul style="list-style-type: none"> The September 2014 District newsletter was circulated with the Agenda and <u>NOTED</u> by the Board. | |

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| 10.2 Meetings with Interested Parties | <ul style="list-style-type: none"> The Chairman advised that there were no meetings with interested parties during August 2014. | |
| 11. Other Business without Notice | | |
| | <ul style="list-style-type: none"> The Chairman invited other business without notice. Ms Larkin announced that Ms Kung Lim, District Director of Nursing & Midwifery has advised her intention to retire effective February 2015. A recruitment process will be undertaken and notice provided of the farewell function. Board members advised forthcoming leave periods, as follows: <ul style="list-style-type: none"> Ms Burlew will be on leave for the October Board meeting. Dr Abi-Hanna will be on leave this week and next, but this absence will not affect attendance at any Board related meeting. | |
| 12. 2014 Board Calendar | <ul style="list-style-type: none"> The 2014 Board Calendar was circulated with the Agenda, and <u>NOTED</u> by the Board. | |
| 13. Next Meeting | Monday 27 October 2014 1330-1530 – Board Room, District Office, Eastern Campus, Liverpool Hospital | |

Meeting closed at 6:47pm