

# MINUTES



## South Western Sydney Local Health District Board

Date: Monday 20 March 2015

Time: 3:30pm

Venue: Board Room, 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)	✓		Mr John Gordon	✓	
Ms Carolyn Burlew	✓		Mr Mark (Jack) Johnson	✓	
Ms Christine Carriage	✓		Prof Neil Merrett	✓	
Prof Brad Frankum	✓		Dr Matthew Gray	✓	
Mr Frank Conroy	✓		Mrs Nina Berry	✓	
Dr David Abi-Hanna	✓		Ms Kerrie Murphy	✓	
Dr Shameran Slewa-Younan	✓				
<i>Other Attendees</i>					
Ms Amanda Larkin, Chief Executive	✓		(Vacant), Medical Staff Executive Council Representative		✓
Mr Graeme Loy, Director Operations	✓		Ms Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes)	✓	
Ms Amelia Dunn, 2 <sup>nd</sup> Year Student GHMP, CE's Unit	✓				

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
<b>2. Declaration of Interests</b>	<ul style="list-style-type: none"> <li>The Chairman invited declarations of interest.</li> <li>Ms Murphy reported that she has close relatives on staff at Campbelltown and Liverpool Hospitals.</li> </ul>	
<b>3. Confirmation of the previous minutes and action list</b>	<ul style="list-style-type: none"> <li><b>MOTION:</b> A motion was moved by Mr Gordon and seconded by Dr Abi-Hanna that the Minutes of the Board meeting held on 20 February 2015 be accepted as a true and accurate record.                             <ul style="list-style-type: none"> <li>The Motion was <b>CARRIED</b>.</li> </ul> </li> </ul>	
<b>4. Patient Story</b>	<ul style="list-style-type: none"> <li>Ms Larkin referred to the patient story presented to the February 2015 Board meeting - the case of an 84 year old male patient ('Mr P') who presented to the Fairfield Falls Clinic, on referral from his GP with lower back pain after a fall.</li> <li>Mr P was invited by the Clinical Excellence Commission to feature in their Falls Theme for their 10<sup>th</sup> anniversary video.</li> </ul>	

	<ul style="list-style-type: none"> <li>The video was shown, in which, Mr P was asked to recap on his experiences in the Falls Clinic and the Able and Stable Program. The interview will be released nationally. The physiotherapist and falls clinic doctor also participated in the video interview. During this interview Mr P expressed his gratitude and satisfaction with his experience.</li> <li><b>Actions:</b> Provide advice to the Board regarding the: <ul style="list-style-type: none"> <li>Referral process to the program (specifically the GP referral process)</li> <li>Number of patients participating in each Program annually</li> </ul> </li> <li>The Board <u>NOTED</u> the patient story.</li> </ul>	Mr Zacka
<b>5. Business Arising</b>		
<b>5.1 Hospital Quarterly Publication</b> [23/02/15; Item 10.1.1]	<ul style="list-style-type: none"> <li>Health Care Quality and Safety Committee - Provide a copy of the Referral Note regarding the Hospital Quarterly publication to the Board.</li> <li>The Board <u>NOTED</u> that the item will be discussed at Agenda Item 7.1 – Health Care Quality &amp; Safety Committee.</li> </ul>	
<b>6. Standing Items</b>		
<b>6.1.1 Chief Executive's Report – Starring Item</b>	<ul style="list-style-type: none"> <li>The Chief Executive's Report – Starring Item – Proposal to reconfigure of the mental health bed base in SWSLHD was circulated with the Agenda.</li> <li>Ms Larkin highlighted the following items: <ul style="list-style-type: none"> <li>The proposal: <ul style="list-style-type: none"> <li>relates to a change in service provision and is therefore presented to the Board for approval</li> <li>seeks to reconfigure the mental health bed base in SWSLHD</li> </ul> </li> <li>Reconfiguration of the mental health bed base will achieve the following objectives: <ul style="list-style-type: none"> <li>Increase the availability of acute observation type beds</li> <li>Increase the capacity for gender specific beds within the District to address identified organisation risk (sexual safety related risks)</li> <li>Align the sub-acute bed ration to the projected requirements of the Ministry of Health's Mental Health Clinical Care Prevention Model (MH-CCP)</li> </ul> </li> <li>The proposed reconfiguration is to create a 12 bed female high observation unit and a 24 bed sub-acute unit: <ul style="list-style-type: none"> <li>Increase High Acuity/Observation Beds – It is proposed that Mental Health Unit North is converted into a 12 bed female observation unit. Some renovation work is required to ensure that the accommodation meets the required standard. This work is near completion.</li> </ul> </li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>• Increase sub-acute bed numbers in Mental Health Unit South – It is proposed that Mental Health Unit South maintains its sub-acute classification and be utilised as a 24 bed unit. South was built as a 24 bed unit, but only recurrently funded for 20 beds.</li> <li>• Advantages of the proposal include: <ul style="list-style-type: none"> <li>• There is no change to the subacute classification for Mental Health Unit South; which is the basis on which it was commissioned.</li> <li>• The reconfiguration of Mental Health Unit South to 24 non-acute beds aligns the subacute numbers to that predicted as being required for SWSLHD by the Mental Health Clinical Care and Prevention Model.</li> <li>• The proposal will increase the District’s higher acuity bed-base by 12 beds to meet the increasing demand.</li> <li>• The proposal provides some access to gender-specific inpatient beds. There are clinical and risk-related rationales for having some capacity to manage vulnerable female consumers in gender-specific setting.</li> </ul> </li> <li>• A comprehensive consultation process has been undertaken.</li> <li>• The Board <u>ENDORSED</u> the proposal to reconfigure the mental health bed base in SWSLHD.</li> </ul>	
<p><b>6.1.2 Chief Executive’s Report</b></p>	<ul style="list-style-type: none"> <li>• The Chief Executive’s Report for February 2015 was circulated with the Agenda.</li> <li>• Ms Larkin highlighted the following items: <ul style="list-style-type: none"> <li><u>\$50M for Redevelopment of Bowral &amp; District Hospital</u> <ul style="list-style-type: none"> <li>• An election promise by the current Government of \$50 million to be invested in the major upgrade of Bowral &amp; District Hospital.</li> </ul> </li> <li><u>General Manager, Campbelltown &amp; Camden Hospitals</u> <ul style="list-style-type: none"> <li>• Interviews for the General Manager position are scheduled for 24 March 2015.</li> </ul> </li> <li><u>Your Say Survey</u> <ul style="list-style-type: none"> <li>• The Survey is open from 30 March to 24 April 2015. Site champions have been appointed and a number of strategies are being implemented. SWSLHD has set a nominal target of 35% participation (21% of SWSLHD staff participated in the previous Survey in 2013).</li> </ul> </li> <li><u>ABF Road Show</u> <ul style="list-style-type: none"> <li>• A NSW Ministry of Health ABF Road Show was held at SWSLHD on 13 March 2015. The Road Show was designed to generate discussion and facilitate an understanding of the 2015/16 ABF Framework and provide an opportunity to discuss the methodology as it applies to SWSLHD.</li> </ul> </li> </ul> </li> </ul>	

	<p><u>Priority Strategic Direction 2 – Redesign of services bringing them closer to people and their communities</u></p> <ul style="list-style-type: none"> <li>• The Secretary, NSW Ministry of Health is visiting SWSLHD on 25 March 2015. A discussion regarding community health, integrated care strategies (Oran Park and Wollondilly), the PEACH Program and the Triple I Hub is planned.</li> </ul> <p><u>Oran Park Integrated Primary Care Centre</u></p> <ul style="list-style-type: none"> <li>• <b>Action:</b> Confirm the entry (and details) in the Risk Register of the Oran Park Integrated Primary Care Centre.</li> </ul> <p><u>Response to cessation of frontline services provided by the Medicare Local</u></p> <ul style="list-style-type: none"> <li>• Dialogue between the Medicare Local and the District continues in relation to the cessation of frontline services operated by the Medicare Local. The Medicare Local have advised that written communication has been issued to medical practitioners, clients and other stakeholders advising of the impending changes to services.</li> <li>• Dr Gray provided a summary overview of the reform agenda reporting that delivery of frontline services is not within the scope of a Primary Health Network.</li> </ul> <p><u>Working with NSW Kids and Families on the development of a tertiary regional paediatric service</u></p> <ul style="list-style-type: none"> <li>• Further discussion regarding paediatric services in Campbelltown is required, specifically in relation to the multiple stakeholders, i.e. SWSLHD, NSW Kids and Families and the Children’s Hospital Network.</li> <li>• <b>Action:</b> List paediatric services as a potential discussion topic for the Board Planning Workshop.</li> </ul> <p><u>Expanding teleconferencing, tele-health, web based technologies, fibre-optic initiatives and social media to improve connectivity of all the healthcare team, including patients and carers</u></p> <ul style="list-style-type: none"> <li>• Funding has been sourced from eHealth NSW for the permeation of wireless for Bankstown and Fairfield Hospitals. This will coincide with the implementation of electronic medications management at Bankstown-Lidcombe Hospital.</li> </ul> <p><u>Review of the District-wide Policy Framework</u></p> <ul style="list-style-type: none"> <li>• A review of the currently policy and legislative process within SWSLHD has commenced.</li> <li>• The Management Letter issued following the Audit (FY ending 30 June 2014) recommended that ‘management should establish formal procedures and document its compliance through a comprehensive compliance register’ and that ‘management should monitor and report on its compliance with laws and regulation quarterly to the Audit and Risk Management Committee’.</li> </ul>	<p>Mr Loy</p> <p>Ms Buttenshaw</p>
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	<ul style="list-style-type: none"> <li>• <b>Action:</b> Provide advice regarding the number of policies in SWSLHD, including facilities.</li> </ul> <p><u>Didja Know Launch</u></p> <ul style="list-style-type: none"> <li>• The 'Didja Know' Aboriginal Cultural Information and Communication Guide was launched on 18 March 2015 at the Liverpool Hospital 'Close the Gap Day' event. The resource increases cultural competence through providing cultural information about the diverse culture, customs, heritage and health needs of Aboriginal communities. 'Didja Know' has been adapted to answer commonly asked questions relating to Aboriginal people and communities.</li> <li>• Ms Larkin undertook to provide Board members with a copy of the Guide.</li> </ul> <p><u>Deadly Tots Phone App</u></p> <ul style="list-style-type: none"> <li>• Also launched at the Liverpool Hospital 'Close the Gap Day' event was the Deadly Tots phone App, which provides health and wellbeing information and advice to Aboriginal families with young children.</li> </ul> <p><u>Healthy People and Places</u></p> <ul style="list-style-type: none"> <li>• Ms Larkin clarified that the work being undertaken by the Healthy People and Places Team on the regeneration of Airds Bradbury Public Housing Estates was being undertaken in partnership with the Campbelltown City Council.</li> <li>• The Board <u>NOTED</u> the Chief Executive's February 2015 Report.</li> </ul>	<p>Mr Loy</p> <p>Ms Buttenshaw</p>
<p><b>7.2 Performance – KPI Report</b></p>	<ul style="list-style-type: none"> <li>• The February 2015 KPI Report was circulated with the Agenda.</li> </ul>	
<p>7.2.1 – Safety &amp; Quality</p>	<ul style="list-style-type: none"> <li>• The Chair highlighted that the percentage of acute post-discharge community care follow up for mental health clients performance at 57.11% for December 2014 correlates to the unplanned readmission rate (7.64% in January).</li> <li>• Ms Larkin confirmed that the Clinical Governance Unit and District Mental Health are reviewing suicides and will provide a report to the Health Care Quality &amp; Safety Committee.</li> </ul>	
<p>7.2.2 – Service Access &amp; Patient Flow</p>	<ul style="list-style-type: none"> <li>• Mr Loy clarified that the 196 presentations staying in ED &gt; 24 hours in February included the 86 mental health presentations reported for the same period.</li> <li>• Mr Loy highlighted that ED presentations have increased to 171,304 YTD February 2015 compared to the same period last year at 165,744. Campbelltown Hospital for the same period experienced an increase of 2,296 presentations to ED.</li> <li>• <b>Action:</b> Update the report to include data for 'did not waits', by facility</li> <li>• <b>Action:</b> Provide a comparison to metropolitan hospitals of</li> </ul>	<p>Mr Loy</p> <p>Mr Loy</p>

	<p>admissions by triage category</p> <ul style="list-style-type: none"> <li>• Ms Larkin provided an overview regarding the SWSLHD Board's engagement with strategic capital works. The process includes: <ul style="list-style-type: none"> <li>• Routine reporting to the Board</li> <li>• Approval of the Asset Plan (annually) <ul style="list-style-type: none"> <li>▪ In 2014 further approval was sought to re-prioritise the Asset Plan prioritised in relation to mental health</li> </ul> </li> <li>• Approval of proposals to government, i.e. Bowral &amp; District Hospital</li> </ul> </li> <li>• <b>Action:</b> List 'lobbying efforts' as a potential discussion topic for the Board Planning Workshop.</li> <li>• The Board <u>NOTED</u> the Service Access &amp; Patient Flow component of the KPI Report.</li> </ul>	Ms Buttenshaw
7.2.3 – People & Culture	<ul style="list-style-type: none"> <li>• Ms Larkin reported that the current focus is on reducing excessive leave, an issue predominately related to medical staff.</li> <li>• The Board <u>NOTED</u> the People &amp; Culture component of the KPI Report.</li> </ul>	
7.2.4 – Finance & Activity	<ul style="list-style-type: none"> <li>• Ms Larkin highlighted: <ul style="list-style-type: none"> <li>• That the year-to-date February 2015 Net Cost of Service position is \$2.2M unfavourable.</li> <li>• A follow up meeting with the Ministry related to the 2015/16 final targets is being scheduled for March. The District has identified a number of issues for discussion, including: <ul style="list-style-type: none"> <li>• Increase to non-admitted baseline activity</li> <li>• Baseline adjustments for annualised 2014/15 growth at Campbelltown Hospital</li> <li>• Campbelltown Hospital redevelopment in 2015/16</li> <li>• Review of admitted (acute and sub-acute) mental health baseline</li> <li>• Determination of non-admitted mental health baseline</li> <li>• Reduction to private patient target</li> <li>• Additional ophthalmology</li> <li>• Additional paediatric surgery</li> </ul> </li> </ul> </li> <li>• The Board <u>NOTED</u> the Finance &amp; Activity component of the KPI Report.</li> </ul>	

<p><b>7.3 Performance – Service Reports</b></p>	<ul style="list-style-type: none"> <li>• The February 2015 Service Report was circulated with the Agenda and the Board commended management on the high standard of the Report.</li> <li>• Reports for the following services were circulated with the Agenda: <ul style="list-style-type: none"> <li>• Mental Health</li> <li>• Drug Health</li> <li>• Population Health</li> <li>• Community Health</li> <li>• Oral Health</li> </ul> </li> </ul>	
	<ul style="list-style-type: none"> <li>• Ms Larkin highlighted the following items from within the Service Reports: <p><u>Community Health</u></p> <ul style="list-style-type: none"> <li>• Community acute and post-acute nursing referrals increased slightly in February to 987 compared to 945 in January.</li> <li>• The targets for universal health home visits offered and attended were all exceeded during February.</li> <li>• The transition of Women’s Health and HARP (HIV and AIDs Related Program) and health promotion to population health has been finalised as a result of the community health review.</li> <li>• An independent review of the GP Academic Unit has commenced, led by Professor Mark Harris from the UNSW Centre for Primary Health Care Equity. The review will consider the research strategy and infrastructure priorities for the Unit.</li> <li>• <b>Action:</b> Provide advice regarding the evaluation methodology of the ‘deadly tots’ app.</li> </ul> </li> <li>• Mr Gordon noted that recommendations from the recent internal audit of the Opioid Treatment Program have been completed, as reported in the Drug Health Service Report.</li> <li>• The Board <b>NOTED</b> the Service Reports.</li> </ul>	<p>Ms Larkin</p>
<p><b>7.5 Work Health &amp; Safety Report</b></p>	<ul style="list-style-type: none"> <li>• The Board <b>NOTED</b> the Referral Note regarding the Work Health and Safety Report, as circulated with the Agenda.</li> <li>• Mr Loy highlighted: <p><u>Critical Infrastructure Incidents</u></p> <ul style="list-style-type: none"> <li>• There were six critical infrastructure incidents reported during October to December 2014, all of which occurred at Liverpool Hospital, which may reflect the reporting culture at Liverpool.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>• A tagging and testing system is in place in relation to the incident in the cardiology ward where a charger and its components had melted.</li> <li>• Security Officers have a role relating to the smoke free policy. Officers usually rely on verbal approaches. At times Officers are accompanied by facility executive team members.</li> <li>• The top three work health and safety areas for noting relate to manual handling, falls and slips and physical aggression. Eight physical aggression incidents were recorded in mental health wards, with no incident requiring staff to be absent from work or treatment.</li> <li>• The newly appointed District Manager commences on Monday 30 March 2015.</li> <li>• <b>Actions:</b> In relation to the Due Diligence Action Plan: <ul style="list-style-type: none"> <li>• Clarify the components of training required for the Board</li> <li>• Provide future reports in A3 size</li> </ul> </li> </ul>	Mr Loy
7.6 Chairman's Report	<ul style="list-style-type: none"> <li>• <u>SWSLHD 2015 Meeting Schedule</u> <ul style="list-style-type: none"> <li>• The SWSLHD Board <u>APPROVED</u> the amendments to the 2015 meeting schedule as follows: <ul style="list-style-type: none"> <li>• Board Planning Day – Monday 4 May 2015, between 12noon and 5:00pm</li> <li>• Annual Public meeting – Thursday 3 December 2015 (venue to be determined)</li> <li>• December Board meeting and Christmas Dinner – Thursday 17 December 2015</li> </ul> </li> </ul> </li> <li>• <b>Action:</b> Update the SWSLHD Board Calendar (Govdex) to reflect the agreed amendments</li> <li>• <u>SWSLHD Board Evaluation</u> <ul style="list-style-type: none"> <li>• The SWSLHD Board <u>NOTED</u> the progress report regarding the implementation of the Board's Evaluation Action Plan (NOUS Group, March 2014). All recommendations have been implemented with the exception of the Board Charter, which is in progress.</li> </ul> </li> <li>• <u>Study Tour and Conference Attendance</u> <ul style="list-style-type: none"> <li>• The SWSLHD Board <u>NOTED</u> and supported the Chief Executive's attendance to an overseas conference and participation in a study tour from 11 to 24 April 2015.</li> </ul> </li> </ul>	Ms Buttenshaw



	<ul style="list-style-type: none"> <li>• <u>Official Announcements</u></li> <li>• The NSW Premier and NSW Minister for Health attended Campbelltown Hospital on 21 March 2015 to make official announcements.</li> </ul>	
<b>8. Committees of the Board</b>		
<b>8.1 Health Care Quality &amp; Safety</b>		
8.1.1 - Minutes	<ul style="list-style-type: none"> <li>• The Minutes of the Health Care Quality and Safety Committee meeting held on 4 March 2015 were circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Dr Gray highlighted the following items: <ul style="list-style-type: none"> <li>• Item (4.3) – Update on Campbelltown Hospital’s quality issues: <ul style="list-style-type: none"> <li>• A Quality Systems Review completed by the Clinical Governance Unit in 2014 identified a rise in adverse events in the Emergency Department, specifically relating to the deteriorating patient.</li> <li>• A further meeting with the NSW Health Clinical Risk Action Group has been requested.</li> </ul> </li> <li>• Item (4.2) – Bankstown-Lidcombe Hospital Accreditation <ul style="list-style-type: none"> <li>• The recommendation for the Board to convey their acknowledgment of the efforts of staff in achieving the successful accreditation result at Bankstown-Lidcombe Hospital has been completed.</li> </ul> </li> <li>• Ms Larkin confirmed: <ul style="list-style-type: none"> <li>• Item (4.3) – Update on Campbelltown Hospital’s quality issues – that recruitment efforts continue in relation to the Emergency Department Director position. 2FTE staff specialists have been appointed.</li> <li>• Item (4.1) – Radiology Reports – that operating theatre reports are imaging guided procedures completed by the surgeons and require no further radiology report.</li> </ul> </li> </ul> </li> </ul>	
8.1.2 – BHI Report	<ul style="list-style-type: none"> <li>• The SWSLHD Board <u>NOTED</u> the Referral Note regarding the Bureau of Health Information (BHI), Hospital Quarterly Report (July-September 2014), as circulated with the Agenda.</li> <li>• The Chairman highlighted that the SWSLHD median waiting times for surgery are longer than the State average. Consider that the SWSLHD price per NWAU reflects equity and access to and for surgery.</li> <li>• <b>Action:</b> Invite Professor Merrett to provide commentary regarding the Report.</li> </ul>	Prof Merrett Ms Buttenshaw

<b>8.2 Finance</b>		
8.2.1- Minutes	<ul style="list-style-type: none"> <li>• The Minutes of the Finance Committee meeting held on 20 February were circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Mr Gordon highlighted: <ul style="list-style-type: none"> <li>• Mr Geoff Berry has been appointed to the Committee as a community representative.</li> <li>• The NSW Ministry of Health have updated their monthly reporting requirements, from a narrative letter to a report.</li> <li>• The LHD projects an on-budget result for the financial year end.</li> <li>• The rating for the 'achieve budget' risk within the register has been down-graded from 'medium' to 'low'</li> </ul> </li> </ul>	
<b>8.3 Research &amp; Teaching</b>		
8.3.1- Minutes	<ul style="list-style-type: none"> <li>• The Board <u>NOTED</u> that the next meeting of the Research &amp; Teaching Committee meeting is scheduled for 2 April 2015.</li> </ul>	
<b>8.4 Audit &amp; Risk Mgt</b>		
8.4.1- Minutes	<ul style="list-style-type: none"> <li>• The Minutes of the Audit &amp; Risk Management Committee meeting held on 20 February were circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Mr Gordon highlighted: <ul style="list-style-type: none"> <li>• Item (6.2) – Recovery of salary overpayments</li> <li>• Item (7.2.1) – Financial narratives</li> <li>• Item (7.2.2.) – Time-frames relating to the submission of the 2014/15 financial statements</li> <li>• Item (7.3.2) – The efforts of management were recognised in relation to the Risk Register</li> <li>• Item (4.1) – Activity Based Funding – JMO workforce audit</li> </ul> </li> <li>• <b>Action:</b> Clarify the author of the JMO Workforce Audit</li> </ul>	Ms Larkin Ms Pronger
8.4.2 – Matters referred to the ICAC	<ul style="list-style-type: none"> <li>• The Board <u>NOTED</u> that there were no notifications made by the Chief Executive to the Independent Commission against Corruption (ICAC) during the period 7 February to 9 March 2015.</li> </ul>	
<b>8.5 Aboriginal Health Committee</b>		
8.5.1- Minutes	<ul style="list-style-type: none"> <li>• The Board <u>NOTED</u> that the inaugural meeting of the Aboriginal Health Committee meeting is scheduled for 24 March 2015.</li> </ul>	

<b>8.6 Consumer &amp; Community Council</b>		
8.6.1- Minutes	<ul style="list-style-type: none"> <li>• The Minutes of the Consumer &amp; Community Council meeting held on 6 February 2015, circulated with the Agenda were <u>NOTED</u> by the Board.</li> <li>• Mrs Berry highlighted:           <ul style="list-style-type: none"> <li>• Item (3) – LHD Report. The Minutes should read that Dr Shameran Slewa-Younan has joined the Aboriginal Health Committee, rather than Sharon Smith, as stated.</li> </ul> </li> <li>• <b>Action:</b> Advise the Manager Community &amp; Consumer Participation of the required correction to the Minutes at Item (3).</li> </ul>	Ms Buttenshaw
<b>9. New Business</b>		
<b>9.1 Six-monthly Performance Review 2014/15 – Qtrs 1 &amp; 2</b>	<ul style="list-style-type: none"> <li>• The Board <u>NOTED</u> correspondence received from the NSW Ministry of Health regarding the six-monthly performance review for 2014/15; Quarters one and two.</li> <li>• The Board conveyed congratulations to management - As a result of the review the SWSLHD will remain at the performance level of "0".</li> </ul>	
<b>9.2 NSW Ministry of Health: Capacity Assessment Project</b>	<ul style="list-style-type: none"> <li>• A Referral Note regarding the Capacity Assessment Project was circulated with the Agenda.</li> <li>• The Chairman highlighted that the meeting on 27 April 2015 with NSW Ministry of Health presents an opportunity to discuss the limitations for SWSLHD within the ABF Framework.</li> </ul>	
<b>9.3 MDAAC Membership</b>	<ul style="list-style-type: none"> <li>• The SWSLHD Board <u>ENORSED</u> Dr Rahul Bharadwaj as the mental health representative on the Medical and Dental Appointments Advisory Committee.</li> <li>• Dr Rahul Bharadwaj has recently been appointed as the Director Medical Services, mental health.</li> <li>• <b>Action:</b> Convey the Board's resolution to the MDAAC Secretariat.</li> </ul>	Ms Buttenshaw
<b>10. Items for Information</b>		
<b>10.1 Public Relations</b>	<ul style="list-style-type: none"> <li>• A Referral Note regarding public relations matters for February 2015 was circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Ms Larkin highlighted that as of February 2015 the number of SWSLHD staff contributing to the Workplace Giving Program was 2,228 or 17.97 per cent of all staff.</li> <li>• <b>Action:</b> Include the name of the recipient Hospital in the next</li> </ul>	Mr Yeandel

	<p>report.</p> <ul style="list-style-type: none"> <li>The March 2015 District newsletter was circulated with the Agenda and <u>NOTED</u> by the Board.</li> </ul>	
<b>11. Other Business without Notice</b>		
	<ul style="list-style-type: none"> <li>The Chairman invited other business without notice.</li> <li>Ms Burlew provided an overview of the visit to Ward 1 A and reported a positive and efficient working environment.</li> <li><b>Action:</b> Draft correspondence to the Nurse Unit Manager for Ms Burlew's signature.</li> <li>The Chairman reported: <ul style="list-style-type: none"> <li>His attendance, together with the Chief Executive at a meeting with Peter Noble, recently appointed Vice-President at UNSW.</li> <li>The first District Partnership lunch (LGA based) will be held in Macarthur on 22 May 2015.</li> </ul> </li> <li>Mr Conroy reported meeting with medical staff of Bowral &amp; District Hospital. Discussion included the quality of buildings and staffing levels.</li> </ul>	Ms Buttenshaw
<b>12. 2015 Board Calendar</b>	<ul style="list-style-type: none"> <li>The 2015 Board Calendar is available from the Govdex website.</li> <li>The 2015 Board Items Due Calendar was circulated with the Agenda, and <u>NOTED</u> by the Board.</li> </ul>	
<b>13. Close /Next Meeting</b>	<p>The meeting closed at 6:40pm.</p> <p>The next meeting is scheduled for Monday 27 April 2015:</p> <p>2:30-3:30 Capacity Assessment Project: Feedback</p> <p>3:30-6:30 Board Meeting – Liverpool Hospital</p>	