

# MINUTES



## South Western Sydney Local Health District Board

Date: Monday 27 April 2015

Time: 3:30pm

Venue: Seminar Room 2, 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)	✓		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	✓				
<b>Other Attendees</b>					
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)	✓	
Mr Ben Kalmar, 2 <sup>nd</sup> Year Student Graduate Health Management Program, Clinical Governance Unit	✓		A/Prof Friedbert Kohler, Clinical Stream Director, Aged Care & Rehabilitation	✓	

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
<b>2. Presentation: National Aged Care Reforms</b>	<ul style="list-style-type: none"> <li>• The Chairman welcomed A/Prof Friedbert Kohler to the meeting to provide an overview of the national aged care reforms.</li> <li>• A/Prof Kohler highlighted:                             <ul style="list-style-type: none"> <li>• The reforms represent a fundamental service change and are underpinned by recommendations of the Productivity Commission.</li> <li>• The main drivers of the reforms:                                     <ul style="list-style-type: none"> <li>- Societal changes</li> <li>- Increased demands from people with complex needs</li> <li>- Increased number of people living with chronic diseases</li> <li>- Growing and ageing population</li> <li>- Increasingly fragmented, complex system</li> <li>- Expansion in separately funded home support programs</li> <li>- Rising consumer expectations</li> </ul> </li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>• The Commonwealth’s objectives (by 2022) for Australia’s aged care system are to: <ul style="list-style-type: none"> <li>- Be sustainable and affordable</li> <li>- Provide diverse and rewarding career options</li> <li>- Encourage aged care businesses to invest and grow</li> <li>- Offer greater choice, with control in the hands of consumers</li> <li>- Support people to stay at home and part of their communities for as long as possible</li> </ul> </li> <li>• Timeline of reform milestones</li> <li>• My Aged Care Gateway <ul style="list-style-type: none"> <li>- A national gateway commencing from 1 July 2015 – providing a central point of access to Commonwealth funded aged care services</li> <li>- Assessment and referrals pathways</li> <li>- National Screening and Assessment Forms</li> </ul> </li> <li>• Commonwealth Home Support Program (CHSP) <ul style="list-style-type: none"> <li>- Home &amp; Community Care (HACC) transition to CHSP</li> <li>- Impacts for NSW Health</li> <li>- Fees Policy and Schedule</li> <li>- Packaged Care Services</li> </ul> </li> <li>• Risks</li> <li>• The Board thanked A/Prof Kohler for the comprehensive and informative presentation.</li> </ul>	
<i>A/Prof Kohler left the meeting at 3:55pm.</i>		
<b>3. Declaration of Interests</b>	<ul style="list-style-type: none"> <li>• The Chairman invited declarations of interest.</li> <li>• Nil were received.</li> </ul>	
<b>4. Confirmation of the previous minutes and action list</b>	<ul style="list-style-type: none"> <li>• <u>MOTION:</u> A motion was moved by Mrs Berry and seconded by Ms Burlew that the Minutes of the Board meeting held on 20 March 2015 be accepted as a true and accurate record, subject to the following amendment: <ul style="list-style-type: none"> <li>• Prof Merrett was an apology.</li> </ul> </li> <li>• The Motion was <u>CARRIED</u>.</li> </ul>	
<i>Mr Loy joined the meeting at 4.00pm.</i>		
<b>5. Patient Story</b>	<ul style="list-style-type: none"> <li>• Ms Larkin presented the story of ‘Tony’, an elderly man who resides at a local nursing home. Tony’s wife ‘Hazel’ is the only person he recognises and understands, due to his dementia. Hazel works closely with the nursing home staff to care for her husband.</li> <li>• Due to a progressively deteriorating infection in Tony’s foot he, accompanied by Hazel, sought treatment at the Liverpool Hospital Emergency Department in late 2014.</li> </ul>	

	<ul style="list-style-type: none"> <li>Hazel reported an excellent experience in the Emergency Department.</li> <li>Tony's subsequent admission to a ward resulted in a written complaint from Hazel. Hazel's concerns related to her inability to help care for Tony and interactions with the nursing staff. For example, as Tony's needs necessitated specific and increased nursing requirements, Hazel attempted to offer information and assistance to the nursing staff – this included the offer to come in early on Saturday morning to assist with breakfast. The nursing staff advised that visiting hours began at 10am.</li> <li>The concerns raised by Hazel were internally reviewed with a number of actions resulting.</li> <li>The Board <u>NOTED</u> the patient story.</li> </ul>	
<b>6. Business Arising</b>		
<b>6.1 Able &amp; Stable Falls Prevention Program</b> [23/3/15; Item 4]	<ul style="list-style-type: none"> <li>Able &amp; Stable Falls Prevention Program – confirm the referral process and provide activity data</li> <li>The Board <u>NOTED</u> the Referral Note regarding the referral process for and activity data relating to the Able &amp; Stable Falls Prevention Program, circulated with the Agenda.</li> </ul>	
<b>6.2 BHI Report</b> [23/3/15; Item 8.1.2]	<ul style="list-style-type: none"> <li>Health Care Quality &amp; Safety Committee – BHI Report – Invite Prof Merrett to make comment.</li> <li>The Board <u>NOTED</u> that the item will be discussed at Agenda Item 8.1 – Health Care Quality &amp; Safety Committee.</li> </ul>	
<b>6.3 JMO Workforce Audit</b> [23/3/15; Item 8.4.1]	<ul style="list-style-type: none"> <li>JMO Workforce Audit – Confirm Author</li> <li>The Board <u>NOTED</u> the Referral Note regarding the JMO Workforce Audit, as circulated with the Agenda.</li> <li>The Audit was authored by David Prince, a resident medical officer and Treasurer of the Liverpool Medical Officers Association.</li> <li><b>Action:</b> Clarify 'who' identified that "...the LHD needs to increase intern numbers by &gt; 25%".</li> </ul>	Ms Larkin
<b>6.4 Workplace Giving Program</b> [23/3/15; Item 10.1]	<ul style="list-style-type: none"> <li>Workplace Giving Program – confirm recipient hospital</li> <li>The Board <u>NOTED</u> that the item will be discussed at Agenda Item 10 – Public Affairs Report.</li> </ul>	
<b>6.5 Deadly Tots phone app</b> [23/03/15; Item 7.3]	<ul style="list-style-type: none"> <li>'Deadly Tots phone app – advise the evaluation methodology</li> <li>The Board <u>NOTED</u> the Referral Note regarding the 'deadly tots' phone app, as circulated with the Agenda.</li> <li>Ms Larkin highlighted a qualitative study will be used to evaluate the phone app.</li> </ul>	

<p><b>6.6 Oran Park IPCC – Risk Register</b> [23/03/15; Item 6.1.2]</p>	<ul style="list-style-type: none"> <li>• Confirm details of the Oran Park Integrated Primary Care Centre (IPCC) entry in the SWSLHD Risk Register</li> <li>• The Board <u>NOTED</u> the Referral Note regarding detail of the Oran Park IPCC project within the SWSLHD Risk Register, as circulated with the Agenda.</li> <li>• Mr Loy highlighted: <ul style="list-style-type: none"> <li>• A total of 16 risks have been identified for the project, which are reported and managed within the Community Health Risk Register.</li> <li>• From the 16 risks identified, 3 have since been classified as ‘high’ level and included in the District’s Risk Register.</li> </ul> </li> </ul>	
<p><b>6.7 SWSLHD Policy Register</b> [23/03/15; Item 6.1.2]</p>	<ul style="list-style-type: none"> <li>• Provide advice regarding the number of policies within the District (including a break-up by facilities).</li> <li>• The Board <u>NOTED</u> the Referral Note regarding the current review of the SWSLHD Policy Framework, as circulated with the Agenda.</li> <li>• Mr Loy highlighted that 2,532 policies exist across the District, of which: <ul style="list-style-type: none"> <li>• 755 are outside the 3 year review date</li> <li>• A number are duplicated or replicate NSW Ministry of Health policies</li> </ul> </li> <li>• The current review of the SWSLHD Policy Framework will: <ul style="list-style-type: none"> <li>• Develop a comprehensive framework and governance structure.</li> <li>• Review policies across the District to identify duplication and make a recommendation regarding the way forward to minimise this.</li> <li>• Seek to utilise NSW Ministry of Health policies, where they exist.</li> </ul> </li> </ul>	
<p><b>6.8 Date for ‘did not waits’</b> [23/03/15; Item 7.2.2]</p>	<ul style="list-style-type: none"> <li>• Include data for ‘did not waits’ within the Service Access &amp; Patient Flow Section of the KPI Report</li> <li>• The Board <u>NOTED</u> that data regarding ‘did not waits’ will be discussed at Agenda Item 7.2 – (Service Access &amp; Patient Flow) KPI Report.</li> </ul>	
<p><b>6.9 Admissions by Triage Category</b> [23/03/15; Item 7.2.2]</p>	<ul style="list-style-type: none"> <li>• Provide SWSLHD admissions by triage category, in comparison to other metropolitan hospitals.</li> <li>• The Board <u>NOTED</u> the Referral Note regarding SWSLHD admissions by triage category, in comparison to other metropolitan hospitals.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Mr Loy highlighted: <ul style="list-style-type: none"> <li>• A comparison of presentations, admissions by triage category for Bankstown-Lidcombe, Liverpool and Campbelltown Hospitals against other metropolitan hospitals, for the period 1 February – 28 February 2015 has been undertaken.</li> <li>• Analysis indicates SWSLHD facilities are comparable to other metropolitan hospitals.</li> </ul> </li> </ul>	
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**7. Standing Items**

<p><b>6.1.1 Chief Executive's Report – Starring Item</b></p>	<ul style="list-style-type: none"> <li>• The Chief Executive's Report – Starring Item – draft SWSLHD Teaching and Education Plan was circulated with the Agenda.</li> <li>• Ms Larkin highlighted: <p><u>Context &amp; Process</u></p> <ul style="list-style-type: none"> <li>• The Corporate Governance Attestation Statement requires the development of a number of plans - Strategic, ICT, Workforce, Research and an Education and Training Plan</li> <li>• A consultant was appointed and worked closely with a multi-disciplinary reference group to develop the plan.</li> <li>• Extensive consultation was undertaken</li> </ul> <p><u>Principles</u></p> <ul style="list-style-type: none"> <li>• The plan is consistent with the overall SWSLHD strategic directions</li> <li>• Maintenance of recognition for current quality and innovation in training (nationally recognised)</li> <li>• Consumer centred</li> <li>• Developing staff to meet current and future demands</li> <li>• Supportive of educators, students and partners</li> <li>• Equitable, i.e. reducing access barriers</li> <li>• Interdisciplinary, collaborative and innovative</li> <li>• Inspiring and creating leaders</li> <li>• Encourages inquiry – research, evaluation and building evidence</li> <li>• Flexible</li> <li>• Rigorously evaluated</li> <li>• Sustainable</li> </ul> <p><u>Education and Training Framework</u></p> <ul style="list-style-type: none"> <li>• A workforce with the knowledge and skills to deliver on organisational priorities now and in the future</li> <li>• Education and training is of a high quality, innovative and accessible to staff</li> <li>• An organisation that is supportive of a responsive to the delivery of education and training</li> <li>• Partnerships strengthen the skills and capacity of the health workforce</li> </ul> <p><u>Implementation</u></p> <ul style="list-style-type: none"> <li>• 6 key areas of education</li> <li>• Overseen by the Workforce Committee</li> </ul> </li> </ul>	
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	<ul style="list-style-type: none"> <li>• Reporting to the SWSLHD Research &amp; Teaching Committee</li> <li>• Includes further work to develop refined performance indicators</li> <li>• Interacts closely with strategic, corporate, workforce, research and ICT plans</li> <li>• The Board <u>ENDORSED</u> the SWSLHD Teaching and Education Plan.</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 March 2015 was circulated with the Agenda.</li> <li>• Ms Larkin highlighted the following items: <ul style="list-style-type: none"> <li><u>Senior Staff Appointments</u> <ul style="list-style-type: none"> <li>• Ms Alison Derrett has been appointed to the position of General Manager, Campbelltown &amp; Camden Hospitals, commencing on 3 May 2015.</li> <li>• Ms Val Jovanovic, Acting Director Corporate Services, Campbelltown Hospital will act as the General Manager, Bowral &amp; District Hospital, pending recruitment action.</li> <li>• Ms Glenda Dingwall has been appointed as the Director, Workforce Development, commencing on 25 May 2015. This position will report directly to the Chief Executive.</li> </ul> </li> <li><u>Oran Park Integrated Primary Care Centre</u> <ul style="list-style-type: none"> <li>• The District has engaged Holman Webb solicitors regarding the architecture of the governance structure for the select GP practice. Specifically, advice is being sought in relation to compliance with the Health Insurance Act (1973).</li> </ul> </li> <li><u>Ophthalmology Wait List Project</u> <ul style="list-style-type: none"> <li>• The waiting time for the Ophthalmology Outpatient Clinic remains less than 12 months and only nine patients remain on the waiting list.</li> </ul> </li> <li><u>Community Health Review</u> <ul style="list-style-type: none"> <li>• The planning for the commissioning of women's health clinical services and the Miller hub, with a view to approaching the market by June 2015, is occurring within the context of the community health review.</li> </ul> </li> <li><u>Study Tour</u> <ul style="list-style-type: none"> <li>• A comprehensive report of the Chief Executive's recent study tour and conference attendance will be provided to the Board in due course.</li> </ul> </li> <li><u>Ingham Institute of Applied Medical Research</u> <ul style="list-style-type: none"> <li>• Negotiations between the District and the IIAMR regarding the Service and Lease Agreements are in the final stage. It is anticipated a presentation (from the Solicitor) of the key elements to the SWSLHD Board for approval in May 2015.</li> </ul> </li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>Mr Gordon suggested an extraordinary meeting of the original working group may be required.</li> <li>The Board <u>NOTED</u> the Chief Executive's March 2015 Report.</li> </ul>	
<b>7.2 Performance – KPI Report</b>	<ul style="list-style-type: none"> <li>The March 2015 KPI Report was circulated with the Agenda.</li> </ul>	
7.2.1 – Safety & Quality	<ul style="list-style-type: none"> <li>Ms Larkin highlighted: <ul style="list-style-type: none"> <li>The rate of unplanned readmissions within 28 days at 7.23% (February 2015) is above the same period last year (6.80%). A six-month project has commenced.</li> <li>The mental health acute post-discharge community care – follow up within 7 days YTD result at 69.52% is only half a percentage point below the lower acceptable limit of 70%.</li> <li><b>Action:</b> Mr Gordon requested clarification in relation to incident 1841906-20, specifically how would the treatment/care have differed if the patients HIV status was known.</li> <li><b>Action:</b> Amend the target for - Service Measure: Unplanned and unexpected hospital readmissions within 28 days of separation – All persons (%), from 'reduction on previous year' to '5%'</li> </ul> </li> <li>The Board <u>NOTED</u> the Safety &amp; Quality component of the KPI Report.</li> </ul>	<p>Mr Zacka</p> <p>Mr Loy</p>
7.2.2 – Service Access & Patient Flow	<ul style="list-style-type: none"> <li>Mr Loy highlighted: <ul style="list-style-type: none"> <li><u>Did Not Waits</u> <ul style="list-style-type: none"> <li>From 1 July 2014 to 31 March 2015 there were a total of 194,268 presentations to emergency departments across the District. Of the total presentations, 8,663 (or 4.46%) were classified as 'did not waits' (left the Hospital following triage). Fairfield Hospital had the highest rate, as a proportion of admissions at 5.82% and Bankstown-Lidcombe Hospital had the lowest rate at 1.82%.</li> <li><b>Action:</b> Review the 'did not waits' at Fairfield Hospital</li> </ul> </li> <li><u>Patients in the Emergency Department greater than 24 hours</u> <ul style="list-style-type: none"> <li>For the month of March 2015, 108 patients recorded a length of staff &gt; 24 hours, in comparison to 136 at the same time last year. Performance remains significantly above the target of 0.</li> <li>Performance has declined for mental health patients in the emergency department &gt; 24 hours, with a total of 50 patients recoded for the month of March 2015, compared to 19, at the same time last year.</li> </ul> </li> </ul> </li> </ul>	<p>Mr Loy</p>

	<p><u>Surgery</u></p> <ul style="list-style-type: none"> <li>For the month of March 2015 there were a total of 26 patients outstanding for elective surgery – 11 of which are waiting for ENT surgery. The LHD has no overdue clinical priority category 1 patients.</li> <li>The Board <u>NOTED</u> the Service Access &amp; Patient Flow component of the KPI Report.</li> </ul>	
7.2.3 – People & Culture	<ul style="list-style-type: none"> <li>Mr Loy highlighted: <p><u>Excess Leave</u></p> <ul style="list-style-type: none"> <li>NSW Treasury Paper No 2 outlines the target for all staff to have less than 30 days excessive leave by 30 June 2015. To assist facilities and services meet the target District Human Resources is assisting with the direction and implementation of numerous strategies.</li> </ul> </li> <li>Ms Larkin highlighted: <p><u>Your Say Survey</u></p> <ul style="list-style-type: none"> <li>As at 27 April 2015 the District’s participation rate was 47.5%. The NSW Ministry of Health has extended the timing of the Survey by a further two weeks.</li> </ul> </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: <p><u>Budget</u></p> <ul style="list-style-type: none"> <li>Expense was favourable for March 2015 by \$1.1M. The average daily expenditure in March, at \$4.3M was increased compared to February 2015 at \$4.1M. A number of factors attributed to the increase, including: <ul style="list-style-type: none"> <li>The base pay increase was partly offset by a reduction in the workers compensation hindsight penalty. Initially the TMF assessed the hindsight penalty at \$2.1M for the year. In March the TMF reassessed the figure and advised a surplus, with \$1.0M to be returned to the District.</li> </ul> </li> <li>Revenue was \$1.1M unfavourable for the month.</li> </ul> <p><u>ABF</u></p> <ul style="list-style-type: none"> <li>At the time of reporting the most current data is YTD for February 2015. In summary the results indicate that SWSLHD is at 100.8% YTD target. The main variance relates to sub-acute admitted (general and mental health), which reflects an improvement in coding.</li> <li>Negotiations continue with the Ministry of Health in relation to 2015/16 targets. SWSLHD has submitted proposals for growth and continues to raise issues relating to some adjustors.</li> </ul> </li> </ul>	



	<ul style="list-style-type: none"> <li>The Board <b>NOTED</b> 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 March 2015 Service Report was circulated with the Agenda.</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> <li>Ms Larkin highlighted the following items from within the Drug Health Service Report: <p><u>Opioid Treatment Program (OTP)</u></p> <ul style="list-style-type: none"> <li>The Service has commenced a Partnership Program with the Oral Health Service. The aim of this project is to increase priority access to oral health services for children of client’s engaged in OTP. The focus will initially be on Liverpool.</li> </ul> <p><u>Aboriginal</u></p> <ul style="list-style-type: none"> <li>The percentage of clients who identify as Aboriginal is 3.99% above the target of 9% for the month of February 2015.</li> </ul> <p><u>Mental Health/Drug Health Case Management</u></p> <ul style="list-style-type: none"> <li>In response to a previous adverse incident and subsequent Root Cause Analysis - There were 23 clients conjointly managed between the Drug and Mental Health Services in February 2015. The Services are currently operating a number of joint initiatives.</li> </ul> </li> <li>The Board <b>NOTED</b> the Service Reports and requested that the FTE and budget data for each Service remain on the Dashboards.</li> </ul>	<p><i>Ms Buttenshaw</i></p>
<p><b>7.4 Chairman’s Report</b></p>	<ul style="list-style-type: none"> <li><u>Board Planning Workshop</u> <ul style="list-style-type: none"> <li>The Chair provided an overview of arrangements for the forthcoming Board Planning Workshop: <ul style="list-style-type: none"> <li>Monday 4 May 2015</li> <li>Revised start time of 12.30pm, concluding at 5.30pm</li> <li>Education Centre at Liverpool Hospital</li> <li>Facilitator – Leanne Wallace, The NOUS Group</li> <li>Topics have been drawn from previous Board discussions and workshops, including:</li> </ul> </li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>- ABF (including a presentation from KPMG),</li> <li>- paediatric planning,</li> <li>- Succession planning (chief executive and executive) and</li> <li>- Board external relationships and profile</li> </ul> <ul style="list-style-type: none"> <li>• The Board confirmed their agreement with the agenda topics.</li> <li>• <u>Ministerial Appointments</u> <ul style="list-style-type: none"> <li>• The Board <u>NOTED</u> the Referral Note regarding health appointments, following the NSW State Election, as follows: <ul style="list-style-type: none"> <li>• The Hon Jillian Skinner MP remains as the Minister for Health but is no longer the Minister for Medical Research;</li> <li>• The Hon Pru Goward MP has been appointed as the Minister for Mental Health, Minister for Medical Research, Assistant Minister for Health, Minister for Women, Minister for the Prevention of Domestic Violence and Sexual Assault; and</li> <li>• The Hon Sarah Mitchell MLC has been appointed as the Parliamentary Secretary for Regional and Rural Health and Western NSW.</li> </ul> </li> <li>• Ms Larkin reported that a briefing session with Minister Goward is being scheduled.</li> </ul> </li> <li>• <u>Medical Staff Executive Council – Board representative</u> <ul style="list-style-type: none"> <li>• The Board <u>APPROVED</u> the Medical Staff Executive Council’s request for two members, (Dr Karuna Keat, Chair Campbelltown Medical Staff Council and Dr Anthony Frankel, Chair, Bankstown-Lidcombe Medical Staff Council) to ‘share’, due to time constraints, the vacant position to attend Board meeting.</li> <li>• <b>Action:</b> Convey the Board’s approval to the Medical Staff Executive Council for Dr’s Keat &amp; Frankel to ‘share’ the attending position.</li> </ul> </li> </ul>	Ms Buttenshaw
<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 1 April 2015 were circulated with the Agenda and <u>NOTED</u> by the Board.</li> </ul>	

	<ul style="list-style-type: none"> <li>• Prof Merrett highlighted the following items: <ul style="list-style-type: none"> <li>• Item (4.3) – Progress Report on Liverpool Hospital’s Ophthalmology Model of Care <ul style="list-style-type: none"> <li>- The model significantly reduced the waiting times from 2.5 years to less than 12 months. An increase in resourcing was required to meet demand and clear the backlog.</li> <li>- The new model has resulted in an increase in funding through the last service agreement.</li> <li>- Involvement of clinicians to lead the process was the key to success.</li> <li>- Bankstown and Campbelltown Hospital use differing models of care. The Ophthalmology model is intended to be rolled out across facilities</li> </ul> </li> <li>• Item (5.1) – Annual Evaluation – Committee and Terms of Reference <ul style="list-style-type: none"> <li>- The annual self-assessment process has been undertaken with mostly positive feedback.</li> <li>- The Reporting Matrix has been published on Govdex.</li> <li>- Full results will be submitted to the May 2015 Board meeting, including proposed revisions to the Terms of Reference.</li> </ul> </li> <li>• Item (5.2.5) – Communication with Purpose (ComPurs) Program Update <ul style="list-style-type: none"> <li>- The Committee expressed concern regarding the limited success of ComPurS Program. Management was requested to focus on improved governance and adopting an effective model for implementation across the LHD.</li> </ul> </li> </ul> </li> </ul>	
<p>8.1.2 – BHI Report</p>	<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>• Prof Merrett highlighted: <ul style="list-style-type: none"> <li>• The BHI Hospital Quarterly Report published hospital performance against established indicators for surgery and emergency performance.</li> <li>• The most recent Report, using July-September, 2014 data, indicates that median wait times for surgery in SWSLHD are longer than other Districts; although SWSLHD continues to meet the NEST targets. The most ‘at risk category is ‘C’.</li> <li>• The average longer median wait times for surgery may reflect the District’s NWAU price (lowest in State).</li> </ul> </li> <li>• Ms Larkin reported that the Population Health directorate are developing a Dashboard Report to measure the health status of communities.</li> </ul>	

<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 March 2015 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 (4.2) – Health Infrastructure funds relating to Campbelltown Hospital <ul style="list-style-type: none"> <li>- Health Infrastructure will transfer \$905,000 start-up costs and \$323,000 operational commissioning costs to SWSLHD from the Campbelltown Hospital Stage 1 Redevelopment Budget Executive contingency. These amounts are intended to cover SWSLHD expenses associated with the staged commissioning and transition into new and refurbished facilities.</li> </ul> </li> </ul> </li> </ul>	
8.2.2- Delegations Manual	<ul style="list-style-type: none"> <li>• The Board <u>APPROVED</u> the proposed amendments to the SWSLHD Delegations Manual V8, without amendment, as circulated with the Agenda and recommended by the Finance Committee.</li> <li>• Mr Gordon reported that future submissions will highlight proposed amendments that are ‘administrative in nature’ or reflect an actual change in delegation.</li> <li>• <b>Action:</b> Publish the revised Manual on the SWSLHD Intranet.</li> </ul>	Ms Buttenshaw
<b>8.3 Audit &amp; Risk Mgt</b>		
8.3.1- Minutes	<ul style="list-style-type: none"> <li>• Minutes of the SWSLHD Audit &amp; Risk Management Committee meeting held on 15 April 2015 are not yet available.</li> </ul>	
8.3.2 – Matters referred to the ICAC	<ul style="list-style-type: none"> <li>• The Board <u>NOTED</u> that during the period 9 March to 13 April 2015: <ul style="list-style-type: none"> <li>• There were three notifications made by the Chief Executive to the Independent Commission against Corruption (ICAC); and</li> <li>• There was one notification made by the ICAC to the SWSLHD</li> </ul> </li> </ul>	
<b>8.3 Research &amp; Teaching</b>		
8.3.1- Minutes	<ul style="list-style-type: none"> <li>• The Minutes of the Research &amp; Teaching Committee meeting held on 2 April 2015 were circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Dr Abi-Hanna highlighted: <ul style="list-style-type: none"> <li>• Item (5.1): Discussion Paper - priority setting for research</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>- SWSLHD needs to have a clear process to identify research priorities.</li> <li>- The Committee approved the use of the priority setting process published by The Council on Health Research Development, applied to the SWSLHD's needs.</li> <li>- The SWSLHD Research Strategy has already identified the following emerging priorities: <ul style="list-style-type: none"> <li>- Health problems such as obesity, hepatitis B (C is also an issue in SWSLHD) and injury (trauma)</li> <li>- Aboriginal people</li> <li>- CALD</li> <li>- Disadvantaged communities and complex families</li> <li>- Growth and ageing</li> </ul> </li> <li>• Item (5.1) – Academic Units <p>The EoI for Stage 3 proposals will indicate that preference will be given to proposals addressing the identified priorities. The staged process enables investment in new research while recognising and encouraging existing research.</p> <p>Stage 1 has been advertised, closing in May 2015. Stages 2 and 3 will be advertised concurrently in the second half of 2015.</p> </li> <li>• Item (6.3) – Ingham Institute of Applied Medical Research (IIAMR) Report <p>All three IIAMR nominees, Prof Minote Apte, A/Prof Lynn Kemp, Ms Grace Micali were shortlisted in the NSW Premier's Woman of the Year Award. Prof Apte was named Woman of the Year; a great recognition of the role of health and medical research and SWS.</p> </li> </ul>	
<p><b>8.5 Aboriginal Health Committee</b></p>		
<p>8.5.1- Minutes</p>	<ul style="list-style-type: none"> <li>• The Minutes of the Aboriginal Health Committee meeting held on 24 March 2015 were circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Dr Slewa-Younan highlighted: <ul style="list-style-type: none"> <li>• In March the inaugural Aboriginal Health Committee meeting was held.</li> <li>• Item (5.1) – Overview of the SWSLHD Aboriginal Health Program</li> </ul> </li> </ul>	

	<p>Mr Nathan Jones, Director Aboriginal Health, provided an excellent presentation to the Committee - an overview of the SWSLHD Aboriginal Health Program.</p> <ul style="list-style-type: none"> <li>Item (6.1) – Strategic priorities for the Committee</li> </ul> <p>The Committee discussed the suggested strategic priorities and resolved to determine priorities for the Committee.</p>	
<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 March 2015, circulated with the Agenda were <u>NOTED</u> by the Board.</li> </ul>	
<b>9. New Business</b>		
<b>9.1 Audit &amp; Risk Management Committee Chair</b>	<ul style="list-style-type: none"> <li>A Referral Note regarding the SWSLHD Audit &amp; Risk Management Committee (ARMC), as circulated with the Agenda.</li> <li>Ms Larkin highlighted: <ul style="list-style-type: none"> <li>The current ARMC membership includes three independent members, one of whom is the Chair. The Chair must be appointed for a period of at least 3 years with a maximum term of 4 years.</li> <li>The term of the Chair, Mr Barrie Martin is due to expire on 30 June 2015.</li> <li>Ms Larkin, Chief Executive has consulted with the current independent members of the ARMC regarding the membership.</li> <li>Ms Christine Feldmanis, (a current independent member) is on the <i>Prequalification Scheme: Audit and Risk Committee Independent Chairs and Members</i> and is qualified to fulfil the Chair role.</li> </ul> </li> <li>In accordance with Treasury Policy Paper TPP09-05, the Board <u>ENDORSED</u> offers of appointment as follows: <ul style="list-style-type: none"> <li>Ms Christine Feldmanis – Chair - 1 July 2015 to 30 June 2019</li> <li>Mr Barrie Martin - Independent Member - 1 July 2015 to 30 June 2018</li> <li>Mr Conroy dissented.</li> </ul> </li> </ul>	

<p><b>9.2 Smoke-free Environment Act</b></p>	<ul style="list-style-type: none"> <li>• A Referral Note regarding By-laws regulating or prohibiting smoking on health grounds was circulated with the Agenda.</li> <li>• Mr Loy highlighted: <ul style="list-style-type: none"> <li>• Advice received in March 2015 from the NSW Ministry of Health indicated that the limit of only one designated outdoor smoking area per service or campus has caused concern for a number of reasons and as such permission for greater discretion regarding the number and placement of designated outdoor smoking areas.</li> <li>• Previously the SWSLHD Clinical &amp; Quality Council resolved to endorse the Working Party's recommendation that all facilities and services within SWSLHD remain smoke-free.</li> <li>• The Working Party revised the Smoke Free Environment Policy and developed an implementation plan.</li> <li>• A six-monthly Progress Report on the Implementation Plan will be provided to the Health Care Quality &amp; Safety Committee.</li> </ul> </li> </ul>	
<p><b>10. Items for Information</b></p>		
<p><b>10.1 Public Relations</b></p>	<ul style="list-style-type: none"> <li>• A Referral Note regarding public relations matters for March 2015 was circulated with the Agenda and <u>NOTED</u> by the Board.</li> <li>• Ms Larkin highlighted <ul style="list-style-type: none"> <li>• The Workplace Giving Program supports the Barbara May Maternity Hospital in Ethiopia.</li> </ul> </li> <li>• The April 2015 District newsletter was circulated with the Agenda and <u>NOTED</u> by the Board.</li> </ul>	
<p><b>11. Other Business without Notice</b></p>		
	<ul style="list-style-type: none"> <li>• The Chairman invited other business without notice.</li> <li>• No items were received.</li> </ul>	
<p><b>12. 2015 Board Calendar</b></p>	<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>	
<p><b>13. Close /Next Meeting</b></p>	<p>The meeting closed at 6:40pm.</p> <p>The next meeting is scheduled for Monday 25 May 2015:  2:30-3:30 Site Visit &amp; Tour – Oran Park  3:30-6:30 Oran Park</p>	