

MINUTES



South Western Sydney Local Health District Board

Date: Monday 25 May 2015

Time: 3:30pm

Venue: Smart Work Hub, Oran Park Town Centre, Oran Park

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	✓				
Other Attendees					
Ms Amanda Larkin, Chief Executive	✓		Dr Karuna Keat, Medical Staff Executive Council Representative	✓	
Mr Graeme Loy, Director Operations	✓		Ms Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes)	✓	

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
Welcome	<ul style="list-style-type: none"> The Chairman welcomed Dr Karuna Keat to the meeting, in his capacity as the Medical Staff Executive Council representative. Dr Keat is also the Chair of the Campbelltown Hospital Medical Staff Council. Dr Keat or Dr Frankel, Chair of the Bankstown Hospital Medical Staff Council will attend future Board meetings in the above capacity. 	
2. Declaration of Interests	<ul style="list-style-type: none"> The Chairman invited declarations of interest. Nil were received. 	
3. Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> <u>MOTION</u>: A motion was moved by Mr Gordon and seconded by Prof Merrett that the Minutes of the Board meeting held on 27 April 2015 be accepted as a true and accurate record. The Motion was <u>CARRIED</u>. 	
4. Patient Story	<ul style="list-style-type: none"> Ms Larkin presented correspondence received at Campbelltown Hospital regarding a patient's positive experience in the Emergency Department. 	

	<ul style="list-style-type: none"> The patient had received advice to attend the nearest emergency department during a telephone conversation with the national 'GP Phone Line'. The compliment highlighted that the attitude of staff and their communication contributed significantly to this patient's positive experience. Ms Larkin advised that 'compliments' received are fed back to staff/ward areas. The Board <u>NOTED</u> the patient story. Action: Write to the staff of the Campbelltown Hospital Emergency Department advising that the compliment had been received positively by the Board. 	Ms Buttenshaw
5. Business Arising		
5.1 JMO Workforce Audit [23/3/15; Item 8.4.1]	<ul style="list-style-type: none"> JMO Workforce Audit – LHD needs to increase intern numbers by > 25% The Board <u>NOTED</u> the Referral Note regarding the Junior Medical Officer (JMO) Workforce Audit, as circulated with the Agenda. Ms Larkin highlighted: <ul style="list-style-type: none"> The recommendation relating to an increase of interns for SWSLHD was made by the Health Education & Training Institute (HETI). HETI allocates JMOs and the SWSLHD allocation has increased. These positions are funded from within the existing budget. SWSLHD allocates JMOs to meet service delivery requirements across the District. 	
5.2 KPI Report – Quality & Safety [27/4/15; Item 7.2.1]	<ul style="list-style-type: none"> Incident 1841906-20 – Clarify how treatment/care may have differed if the patients HIV status was known The Board <u>NOTED</u> the Referral Note regarding Incident 1841906-20, as circulated with the Agenda. Ms Larkin highlighted that maternal viral load is a strong determinant of transmission risk. In this case, the woman would have commenced highly active anti-retroviral therapy (HART) during pregnancy. 	
5.3 KPI Report – Service Access & Patient Flow [27/04/15; Item 7.2.1]	<ul style="list-style-type: none"> Review 'did not waits' at Fairfield Hospital The Board <u>NOTED</u> the Referral Note regarding the Fairfield Hospital patients that 'did not wait' to be seen in the Emergency Department. Mr Loy highlighted that the initial analysis indicates data entry errors relating to 'nurse seen time' and commencement of some form of treatment (i.e. x-ray) before being seen by a doctor and thus being recorded as 'did not wait'. 	

	<ul style="list-style-type: none"> • A further review of the data is to commence at Fairfield Hospital to identify the extent of the issue. • Action: Provide the results of the further review of the 'did not waits' at Fairfield Hospital to the Board. 	Mr Loy
<p>5.4 Sustainability Action Plan [11/12/14; Item 6.1.1]</p>	<ul style="list-style-type: none"> • Submit the draft Sustainability Plan to the March Board meeting • The Board NOTED the Referral Note providing an update regarding the status of the Sustainability Plan, as circulated with the Agenda. • Mr Loy reported that the initial plan developed was considered too onerous and as a result the Plan has been re-drafted following Consultation Forums, to focus on limited key strategies, including: <ul style="list-style-type: none"> • Sustainable clinical services • Energy sustainable initiatives • Capital works • Following the 2nd Forum, planned for 12 June 2015, to which Dr Abi-Hanna noted his attendance, the Plan will be submitted to the Board for endorsement. 	
<p>6. Standing Items</p>		
<p>6.1.1 Chief Executive's Report – Starring Item</p>	<ul style="list-style-type: none"> • The Chief Executive's Report – Starring Item – Current SWSLHD integrated health care initiatives was circulated with the Agenda. • Ms Larkin provided an overview of the key elements of the integrated health care program, including: <ul style="list-style-type: none"> • Governance Arrangements <ul style="list-style-type: none"> ▪ Integrated Health Committee - membership includes SWSLHD, SWS Medicare Local, community representatives • Wollondilly Health Alliance <ul style="list-style-type: none"> • Population health focus • Virtual model • Oran Park Integrated Primary Care Centre <ul style="list-style-type: none"> • 3 Stage process, with the first stage relating to GPs and community health • Legal advice has been sought, and received, relating to the tender for a general practice/primary care provider • UWS is currently scoping a formal evaluation methodology 	

	<ul style="list-style-type: none"> • Core principles for the Centre, include: <ul style="list-style-type: none"> ▪ The general practice is an independent, private practice providing GP and other primary health care services use space leased from SWLHD under a sub-lease and billing patients in accordance with the Health Insurance Act and other applicable legislation (i.e. DVA, MAA, workers compensation) ▪ Services provided to, and/or received from SWSLHD, by the private general practice are provided or received under formal agreements with either the private general practice or SWSLHD ▪ Other third party primary health, diagnostic services and specialist health services in the Centre are provided under formal agreements with either the private general practice or the SWSLHD ▪ Team based multi-disciplinary care of patients and clients provided by the private practice, SWSLHD community health and other health services and other third party health professionals and/or diagnostic services based in the Centre ▪ Use of shared infrastructure and services, including shared access to clinical records ▪ A shared commitment to integrated care and improved health outcomes for at risk population groups and clients ▪ Active participation of the private general practice and primary care service in SWSLHD programs to improve patient flow and reduce inappropriate emergency department attendances and hospital admissions ▪ Active partnerships with the University of Western Sydney, other universities and education organisation, the new South Western Sydney primary Health network and community and consumer organisations • The integrated health care program is supported by a number of projects, including: <ul style="list-style-type: none"> • Health Pathways • Triple I Hub • IT connectivity between cancer services and GPs • The Board <u>NOTED</u> the integrated health care initiatives. 	
<p>6.1.2 Chief Executive's Report</p>	<ul style="list-style-type: none"> • The Chief Executive's Report for April 2015 was circulated with the Agenda. • Ms Larkin highlighted the following items: 	

	<p><u>UWS Clinical School</u></p> <ul style="list-style-type: none"> To be discussed under the Finance Committee’s Report. <p><u>Campbelltown Hospital Redevelopment</u></p> <ul style="list-style-type: none"> Invited the Chairman to address in his Report. <p><u>Humanitarian Overseas Service Medals</u></p> <ul style="list-style-type: none"> Director of Refugee Health, Dr Mitchell Smith and Liverpool Hospital Emergency Department nurse, Rima Mohamed were recently awarded the Humanitarian Overseas Service Medal for their work in Samoa following the earthquake and subsequent tsunami. Action: Convey the Board’s recognition and congratulations to Dr Smith and Ms Mohamed on their receipt of the Humanitarian Overseas Service Medal. <p><u>ICT Strategy</u></p> <ul style="list-style-type: none"> The 3-year ICT Roadmap for clinical, corporate and infrastructure programs of work was recently presented to the ICT Executive Committee. The Roadmap links the Blueprint for eHealth in NSW, the SWSLHD ICT Strategic Plan and the SWSLHD Strategic and Healthcare Services Plans. <p><u>Ophthalmology Outpatient Clinic</u></p> <ul style="list-style-type: none"> The Project is almost complete. As of 8 May 2015, 408 patients (compared to 390 patient at 8 April) have had their surgery performed – an 88% clearance. The Board <u>NOTED</u> the Chief Executive’s April 2015 Report. 	Ms Buttenshaw
7.2 Performance – KPI Report	<ul style="list-style-type: none"> The April 2015 KPI Report was circulated with the Agenda. 	
7.2.1 – Safety & Quality	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> Based on March 2015 data, the Staphylococcus Aureus Bloodstream Infections (SABSI) rate is 0.94 (per 10,000) bed days, which is lower than for the same period in 2014 (1.77). Seven new serious incidents since the last report, which will undergo an RCA. One of the incidents involved the death of an in-patient of a drug health service detox unit, which is very uncommon. The Board <u>NOTED</u> the Safety & Quality component of the KPI Report. 	
7.2.2 – Service Access & Patient Flow	<ul style="list-style-type: none"> Mr Loy highlighted: <p><u>Readmission Project</u></p> <ul style="list-style-type: none"> The Project is underway, supported by a Project Officer. The project will include a data review, which will deconstruct data to enable a ‘reason’ for re-admission. 	

	<p><u>NEAT Performance</u></p> <ul style="list-style-type: none"> For the month of April 2015 NEAT performance at 72.12% has improved in comparison to the same period last year at 68.04%. <p><u>Transfer of Care (TOC)</u></p> <ul style="list-style-type: none"> For the month of April 2015 TOC performance at 84.69% remains below the target of 90%, but an improvement on the same period last year at 78.86%. <p><u>Surgery</u></p> <ul style="list-style-type: none"> The waiting list turnover ratio has improved. The LHD has no overdue Clinical Priority Category 1 patients. For the month of April, Category 2 was 100% and Category 3 was 97%. <p><u>After-Hours GP Clinics</u></p> <ul style="list-style-type: none"> Ongoing funding to the SWS Medicare Local for the provision of after-hours general practice is currently being negotiated. This service is available in a number of LHD hospitals and if ceased would adversely affect emergency departments. <ul style="list-style-type: none"> The Board <u>NOTED</u> the Service Access & Patient Flow component of the KPI Report. 	
7.2.3 – People & Culture	<ul style="list-style-type: none"> Mr Loy highlighted: <p><u>Your Say Survey</u></p> <ul style="list-style-type: none"> The Survey concluded on 8 May 2015. The participation rate for SWSLHD was 54.1%, an increase of 33.3% on the 2013 Survey, and the highest of the metropolitan LHDs. <p><u>Excessive Leave</u></p> <ul style="list-style-type: none"> The focus on reducing excessive leave continues. Excessive leave is defined as greater than 30 days. <p><u>Director, Workforce Development</u></p> <ul style="list-style-type: none"> Ms Glenda Dingwall commenced in the position today (25 May 2015). <ul style="list-style-type: none"> The Board <u>NOTED</u> the People & Culture component of the KPI Report. 	
7.2.4 – Finance & Activity	<ul style="list-style-type: none"> Ms Larkin highlighted: <p><u>Budget</u></p> <ul style="list-style-type: none"> The Net Cost of Service position for April 2015 was \$1.6M favourable. The LHD predicts a favourable year end result. <p><u>Activity</u></p> <ul style="list-style-type: none"> Negotiations continue with the Ministry of Health in relation to 2015/16 targets. SWSLHD continues to raise issues relating to some adjustors and has submitted proposals for growth, including: 	

	<ul style="list-style-type: none"> • Campbelltown Hospital – annualised growth 2014/15 (1833 NWAU) and growth for 205/16 (843 NWAU) – focus for the Board and the Chief Executive • Paediatric Surgery – and additional 150 NWAU • Action: Provide a comparison of ED presentations at Campbelltown Hospital to other metropolitan hospitals. • The Board <u>NOTED</u> the Finance & Activity component of the KPI Report. 	Mr Loy
<p>7.3 Performance – Service Reports</p>	<ul style="list-style-type: none"> • The April 2015 Service Report was circulated with the Agenda. • Reports for the following services were circulated with the Agenda: <ul style="list-style-type: none"> • Mental Health • Drug Health • Population Health • Community Health • Oral Health • Ms Larkin highlighted the following items from within the Mental Health Service Report: <ul style="list-style-type: none"> • Mental Health is a service ‘at risk’, due to a number of factors, including: <ul style="list-style-type: none"> • A number of KPIs are above target • New service, following transition • A number of staff have ‘stepped up’ into more senior roles following the transition • Inability to recruit psychiatrists • Service is working toward accreditation • Following accreditation, the District will work with mental health on priority areas that are identified as a result of the current strategic planning exercise. • Action: Provide actual numbers relating to the Community Health KPI – ‘All child sexual assault clients contacted within 1 week of substantiation of JIRT’. • The Board <u>NOTED</u> the Service Reports. 	Ms Larkin
<p>7.4 Risk Management Report</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the quarterly update regarding the SWSLHD Risk Register. • Mr Loy highlighted: <ul style="list-style-type: none"> • There has been two changes to risk ratings since the November 2014 report: 	

	<ul style="list-style-type: none"> • Seamless Networks Risk – Inadequate relationship with primary care providers has moved from ‘high’ to ‘medium’. • Finance and Legal Risk – Failure to provide services within budget has moved from ‘medium’ to ‘low’. • There has been three additions to the Risk Register which relate to the Oran Park Integrated Primary Care Centre and include: <ul style="list-style-type: none"> • Compliance with State and Commonwealth policy and legislation • Risk to organisational reputation should the integration model fail • Financial risk due to delay in the appointment of the GP entity. 	
<p>7.4 Chairman’s Report</p>	<ul style="list-style-type: none"> • <u>Draft Board Charter</u> <p>The Board considered the draft Board Charter, as circulated with the Agenda and made the following comments:</p> <ul style="list-style-type: none"> ▪ 1st para – delete “...and Chief Executive...” ▪ Action: Mr Gordon to advise other changes to Ms Buttenshaw ▪ Action: Place the final draft version on Govdex for ratification • <u>LHD Board & Speciality Networks Conference</u> <p>The Chairman reported that the LHD Board and Speciality Network Conference will be held on Monday 15 June 2015 (rather than Friday 19 June 2015). Ms Larkin will be presenting a keynote address.</p> • <u>District Partnership Lunch – 22 May 2015</u> <p>The Chairman reported a successful inaugural District Partnership Lunch, convened on Friday 22 May 2015. Representatives of the Board included Prof Frankum and Dr Gray. Topics discussed included hospitals versus integrated primary care centres, population growth, Premier is Minister for Western Sydney – how to raise the profile of South Western Sydney in this portfolio.</p> • <u>Proposed Dinner – LHD and PHN Boards</u> <p>The Board confirmed their availability to attend a combined Board dinner with the Primary Health Network in Bowral, following the Board meeting.</p> 	<p>Mr Gordon</p> <p>Ms Buttenshaw</p>

	<ul style="list-style-type: none"> • <u>Proposed Triage Process for Events</u> <p>The Board <u>APPROVED</u> the triage system for event invitations, as circulated with the Agenda.</p>	
8. Committees of the Board		
8.1 Health Care Quality & Safety		
8.1.1 - Minutes	<ul style="list-style-type: none"> • The Minutes of the Health Care Quality and Safety Committee meeting held on 6 May 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted the following items: <ul style="list-style-type: none"> • Item (4.2) – ANZICS Report regarding Liverpool Hospital’s ICU <ul style="list-style-type: none"> - For the second consecutive quarter Liverpool Hospital lies within the 95% confidence interval for Standard Mortality Rate and APACHE III score on the funnel plot. • Item (5.2.1) – Emergency Department Patient Survey results (BHI Report) <ul style="list-style-type: none"> - The Survey results, released on 14 May 2015, identify a numbers of areas for improvement. - A project officer is being identified to lead the initiative, which will include further analysis of the survey responses as well as focus groups with ED staff to determine their understanding of the results as well as their ideas for improvement. 	
8.1.2 – Committee Self-Assessment	<ul style="list-style-type: none"> • The SWSLHD Board noted the Referral Note regarding the Annual Committee Self-Assessment results, as circulated with the Agenda. • The SWSLHD Board <u>ENDORSED</u> the proposed amendments to the Terms of Reference subject to the addition of a statement noting that any Board member may attend a meeting. This enables consistency with other Board committee terms of reference. • Action: Publish the updated Terms of Reference. 	Ms Buttenshaw
8.2 Finance		
8.2.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Finance Committee meeting held on 17 April 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon highlighted: <ul style="list-style-type: none"> • Item (5.4) – Asset Strategic Plan Top 5 Priority Capital Projects – to be discussed further under ‘New Business’. 	

8.2.2- Committee Self-Assessment	<ul style="list-style-type: none"> The SWSLHD Board noted the Referral Note regarding the Annual Committee Self-Assessment results, as circulated with the Agenda. In relation to the feedback, Mr Gordon reported that he has met individually with the Chief Executive, Director of Operations and Director of Finance. In response to the 'seek Board feedback on what members would value as input from the Committee', members of the Board were invited to provide comment to Mr Gordon and validated the Finance section of the KPI Report – noting that the Committee reviews the data and position prior. The SWSLHD Board <u>ENDORSED</u> the proposed amendments to the Terms of Reference. Action: Publish the updated Terms of Reference. 	Ms Buttenshaw
8.3 Audit & Risk Mgt		
8.3.1- Minutes	<ul style="list-style-type: none"> The Minutes of the SWSLHD Audit & Risk Management Committee meeting held on 15 April 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. Ms Burlew reported that the meeting focussed on the early close of the financial statements. In relation to the Committee's responsibilities relating specifically to clinical governance, the Committee ensures that there is appropriate structures, processes, policies etc to report and minimise risk. Further, the Committee receives two presentations at each meeting, one of which focuses on clinical risk. Action: Check/confirm that the risk register is a standing agenda item for Board Committees. 	Ms Buttenshaw
8.3.2 – Matters referred to the ICAC	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note, circulated with the Agenda, regarding ICAC matters during the period 13 April 2015 to 11 May 2015: <ul style="list-style-type: none"> There was one notifications made by the Chief Executive to the Independent Commission against Corruption (ICAC). 	
8.4 Research & Teaching		
8.3.1- Minutes	<ul style="list-style-type: none"> The next meeting of the Research & Teaching Committee meeting is scheduled for 4 June 2015. 	

8.5 Aboriginal Health Committee		
8.5.1- Minutes	<ul style="list-style-type: none"> The next meeting of the Aboriginal Health Committee meeting is scheduled for 25 June 2015. 	
8.6 Consumer & Community Council		
8.6.1- Minutes	<ul style="list-style-type: none"> The Minutes of the Consumer & Community Council meeting held on 9 April 2015, circulated with the Agenda were <u>NOTED</u> by the Board. Mrs Berry highlighted: <ul style="list-style-type: none"> Minutes – are provided to the Board for the previous month, due to timing issues. Item (4.3) – A draft Business Plan has been circulated for comment. 	
9. New Business		
9.1 Asset Strategic Plan	<ul style="list-style-type: none"> The Board <u>ENDORSED</u> the amendments to the 2015 Asset Strategic Plan top five priority capital projects, as detailed in the Referral Note, circulated with the Agenda. In summary: <ul style="list-style-type: none"> Priority 1 – Campbelltown Hospital Stage 2 and Inpatient Mental Health Redevelopment Priority 2 – Liverpool Hospital Stage 2.2 (including the Comprehensive cancer Care Centre) Priority 3 – Bowral and District Hospital Redevelopment Priority 4 – Bankstown-Lidcombe Hospital Redevelopment Priority 5 – Redevelopment of the Prairiewood Health Campus <p>The changes from the 2014 submission include:</p> <ul style="list-style-type: none"> The inclusion of the Comprehensive Cancer Care Centre as an element of the Liverpool Hospital Stage 2.2 Redevelopment Proposal The inclusion of the Prairiewood Campus Redevelopment as Priority 5 – replacing the Oran park Integrated Primary Care Centre. Ms Larkin highlighted that Priority 1 – Campbelltown Hospital and mental health has been deferred to 2018/19. The Planning Unit is developing a summary document to articulate the related issues and a copy will be provided to all Board members to advocate at all levels. 	

	<ul style="list-style-type: none"> • Action: Provide the summary document authored by the Planning Unit to the Board. 	Ms Larkin
9.2 2015 Budget	<ul style="list-style-type: none"> • Item deferred to the June 2015 meeting. 	<i>Ms Buttenshaw</i>
10. Items for Information		
10.1 Public Relations	<ul style="list-style-type: none"> • A Referral Note regarding public relations matters for April 2015 was circulated with the Agenda and <u>NOTED</u> by the Board. • The May 2015 District newsletter was circulated with the Agenda and <u>NOTED</u> by the Board. 	
11. Other Business without Notice		
	<ul style="list-style-type: none"> • The Chairman invited other business without notice. • The Chairman reported that at the June 2015 meeting he may request a leave of absence to undertake a research project in the UK. The leave period would cover the August and September Board meetings. 	
12. 2015 Board Calendar	<ul style="list-style-type: none"> • The 2015 Board Calendar is available from the Govdex website. • The 2015 Board Items Due Calendar was circulated with the Agenda, and <u>NOTED</u> by the Board. 	
13. Close /Next Meeting	<p>The meeting closed at 6:38pm.</p> <p>The next meeting is scheduled for Monday 22 June 2015 3:30-6:30 District Office, Eastern Campus, Liverpool Hospital</p>	