

MINUTES



South Western Sydney Local Health District Board

Date: Monday 28 September 2015

Time: 3:30pm

Venue: Tharawal Aboriginal Medical Corporation, 21 Deans Road, Airds

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		✓	Mr John Gordon	✓	
Ms Carolyn Burlew (A/g Chair)	✓		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 Anthony Frankel / Dr Karuna Keat, Medical Staff Executive Council Representative		✓
Mr Graeme Loy, Director Operations		✓	Ms Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes)	✓	
Mr Nathan Jones, Director, Aboriginal Health	✓				

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
Welcome	<ul style="list-style-type: none"> The A/g Chair welcomed Mr Nathan Jones, SWSLHD Director Aboriginal Health to the Board meeting. 	
2. Declaration of Interests	<ul style="list-style-type: none"> The A/g Chair invited declarations of interest. Nil were received. 	
3. Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> MOTION: A motion was moved by Mr Gordon and seconded by Ms Murphy that the Minutes of the Board Meeting held on 24 August 2015 be accepted as a true and accurate record. The Motion was carried. 	
4. Patient Story	<ul style="list-style-type: none"> Ms Larkin presented the story of a 60 year old indigenous man, "Mr Williams" (not his real name) who is widowed and lived alone in a Department of Housing one bedroom unit. He has cardiovascular disease and type 2 diabetes. 	

	<ul style="list-style-type: none"> • Mr Williams has no immediate family living near him and up until June 2015 was quite active in the community. • From early June 2015 Mr Williams had a number of presentations to the emergency department. • In August 2015 the Aboriginal Liaison Officer requested an Aged Care Assessment Team (ACAT) assessment and Mr Williams was recommended for permanent Nursing Home Placement and low level respite care. A case meeting was also held with the Tharawal AMS GP and other staff involved in Mr Williams’ care including: social worker, indigenous outreach worker, Warrumbucca, Aboriginal Connecting Care Coordinator, Aboriginal Liaison Officer to discuss a plan for his ongoing care. • Despite needing supported care, Mr Williams is still able to make his own decisions including in relation to his healthcare and personal needs. • In addition to his nursing home placement, Mr Williams remains linked in with the Aboriginal Chronic Care Program, the Social Worker at Tharawal, and Warrumbucca. • As a result of the collaborative care Mr Williams received, hospitalisation has not been required now in more than a month. • Mr Jones noted the pivotal role of Aboriginal Liaison Officers, which are LHD positions based at each Hospital. • Ms Carriage noted that Tharawal Corporation was exploring models / facilities for culturally appropriate aged care services, which is considered a current service gap. • The patient story demonstrates the importance of appropriate case coordination and linking services. 	
5. Business Arising		
<p>5.1 KPI Report – Safety & Quality [24/8/15; Item 7.2.1]</p>	<ul style="list-style-type: none"> • Clarify the target for the new Tier 1 Indicator: Hospital Acquired Pressure Injuries, i.e. a decrease or a number. • The Board <u>NOTED</u> the Referral Note clarifying information regarding the target for the new tier 2 indicator- hospital acquired pressure injuries. • Ms Larkin highlighted: 	

	<ul style="list-style-type: none"> • The indicator is a tier 2 indicator and was inadvertently noted as tier 1 in the previous report. • The performance target is 'Reduction from the previous financial year's rate of hospital acquired pressure injuries'. 	
<p>5.2 Report – People & Culture [24/8/15; Item 7.2.3]</p>	<ul style="list-style-type: none"> • Provide a break-down of employment classifications related to excessive leave. • Provide and excess leave report relating to Executive Team Staff. • The Board NOTED the Referral Note regarding excess leave. • Ms Larkin highlighted: <ul style="list-style-type: none"> • The break-down of employment classifications of staff with excessive leave, including hours, days and financial liability. • SWSLHD has the highest number of excess leave days in the State. • Excess leave is apparent in all staffing categories, with the highest proportion in nursing staff. • Plans are in place to monitor total excess leave on a monthly basis and a leave plan is required for all staff with excess leave. • The December / January period traditionally sees a reduction in leave balances, although excess leave rates are trending up. • Action: Provide a comparison of excess leave on a State-wide basis. 	Ms Dingwall
<p>5.3 KPI Report – Mental Health [24/8/15; Item 7.3]</p>	<ul style="list-style-type: none"> • Clarify June performance for mental health readmissions. The Mental Health Dashboard states 7.2% and the Safety and Quality Dashboard states 8.88%. • The Board NOTED the Referral Note and the clarification regarding the two different rates provided in the August Board meeting papers. • Ms Larkin highlighted: <ul style="list-style-type: none"> • Results for the KPI related to the re-admission of mental health patients within 28 days are reported within the Quality and Safety KPIs and the Mental Health KPIs sections of the service report. • The results reported for the KPI in these sections were different due to the data sources and counting method. 	

	<ul style="list-style-type: none"> • The Mental Health KPI data is sourced from Cerner, and excludes readmissions where the presenting problem is not related to mental health and includes Braeside admissions within the calculation. • The Safety and Quality KPI is sourced from the Health Information Exchange (HIE), includes all presenting problems and does not include admissions from Braeside Hospital. • For future reports the data will be aligned. 	
<p>5.4 KPI Report- Service Access & Patient Flow [25/5/15; Item 5.1]</p>	<ul style="list-style-type: none"> • Provide a further comparison of Campbelltown Hospital, to both Peer Group A and B hospitals, for staffing ratios and performance activity. • The SWSLHD Board NOTED the comparison provided of ED presentations of Campbelltown Hospital to SWSLHD Peer Group A and B facilities. • Ms Larkin highlighted: <ul style="list-style-type: none"> • A further comparison of Campbelltown Hospital to both Peer Group A and B hospitals for staffing ratios (junior and senior staff) and performance activity was requested by the Board in May 2015. • The current network arrangement. <ul style="list-style-type: none"> • Staffing classifications have been based on three groups: <ul style="list-style-type: none"> • Consultant • Middle (Career Medical Officer, registrar and Senior Resident Medical Officer) • Junior (Intern and Resident Medical Officer) • Acknowledging that both staff and bed allocations can vary the most robust comparison relates the total staff numbers to the total treatment spaces. This eliminates some of the rostering variations. The best measure of overall workload relates total staffing to presentations. • In the internal comparison, overall Bankstown has the best patient to staff ratio for consultants and JMO's and they are also in a good position for the MMO's. • Liverpool has the highest patient to staff ratio at the Middle grade (registrar) level (i.e. greater workload). • Campbelltown and Fairfield have similar large workloads at both the Consultant and JMO level - this is true both midweek and also on the weekends where Fairfield has no Consultant cover. 	

	<ul style="list-style-type: none"> • The patients per treatment spaces is spread from Fairfield (5 per treatments space per day) to Bankstown (3.3). Further breakdown shows that Campbelltown has the lowest number of acute beds for their presentations. • Action: Clarify the reported ACEM TS Guidelines Deficit • Liverpool, Bankstown and Fairfield have established Short Stay Units and Campbelltown has an ESSU built which is being recruited to currently. These units have not been considered in the analysis. • Prof Frankum noted that Campbelltown Hospital data should include Camden Hospital, given the role of Camden’s Emergency Department. • Action: The role of Camden Hospital’s Emergency Department could be explored further. • Prof Merrett advised that ED presentations are not criteria relating to role delineation, the next review of which is scheduled for 2018. 	<p>Mr Loy</p> <p>Ms Larkin</p>
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6. Standing Items

<p>6.1.1 Chief Executive’s Report – Starring Item: Aboriginal Health</p>	<ul style="list-style-type: none"> • The Chief Executive’s Report – Starring Item – Aboriginal Health Initiatives, was circulated with the Agenda. • Ms Larkin reported: <ul style="list-style-type: none"> • SWSLHD has one of the largest Aboriginal populations in NSW. • To ensure Aboriginal Health is a priority across the organisation SWSLHD has established a comprehensive governance structure that oversees and supports the continued development of our Aboriginal health services and needs of our Aboriginal communities. • Central to the governance model is the SWSLHD Aboriginal Health (Board) Committee, which has a strategic role in monitoring and expanding our Aboriginal Health initiatives. • Formalised working groups/forums that complement the Aboriginal Health (Board) Committee include: <ul style="list-style-type: none"> • Aboriginal Workforce Steering Committee • Hospital Aboriginal Health Committees (Bankstown, Liverpool, Campbelltown) • Aboriginal Child and Family Steering Committee • Aboriginal Mental Health Leadership Group • Aboriginal Health/ Drug Health Committee 	
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	<ul style="list-style-type: none"> • Community Health/ Aboriginal Health Executive Meeting • In the last two years SWSLHD has significantly expanded the range of services it provides specifically to our Aboriginal communities. This has improved access to a range of SWSLHD services that have typically had low uptake by the Aboriginal community and improved the cultural competence of the clinicians delivering the services. • SWSLHD has also developed a number of innovative service models designed to improve access to essential health services and health outcomes. The following Service Models were highlighted: <ul style="list-style-type: none"> • Tharawal ENT Surgery Lists • Waranwaran Multidisciplinary Service Model • Aboriginal Frequent User Review Groups • Shared Clients Review Structures • GP Initiatives • The Board congratulated Mr Jones and Ms Larkin on their leadership and support of the SWSLHD Aboriginal Health Program. • The SWSLHD Board <u>NOTED</u> the information presented on Aboriginal Health Initiatives in SWSLHD. 	
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Mr Jones left the meeting at 4.40pm

<p>6.1.2 Chief Executive's Report</p>	<ul style="list-style-type: none"> • The Chief Executive's Report for August 2015 was circulated with the Agenda. • Ms Larkin highlighted the following items: <ul style="list-style-type: none"> • <u>Senior Staff Appointments</u> Ms Elizabeth Koff, former Chief Executive of the Sydney Children's Hospital Network, has been appointed to the NSW Ministry of Health position - Deputy-Secretary, Strategy & Resources. Ms Koff has requested to attend a future SWSLHD Board meeting. • <u>2015 NSW Health Excellence in Nursing & Midwifery Awards</u> The 2015 NSW Health Excellence in Nursing & Midwifery Awards was held on Wednesday 9 September 2015 at Parliament House. Three nursing staff members from South Western Sydney Local Health District were finalists in their category. • <u>Prairiewood Health Campus- Master Planning Update</u> The existing ED at Fairfield Hospital requires refurbishment and expansion to improve the function of providing emergency care to the local population. The current configuration poses challenges in meeting growing demand. 	
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	<ul style="list-style-type: none"> • <u>Warragamba Baby Clinic</u> The transition of Warragamba Baby Clinic clients to clinic services at The Oaks, Narellan and Oran Park has been delayed (to December 2015) as a result of a local community meeting, with Clinic utilisation to be monitored. Currently the Clinic operates by appointment and the most recent review indicated very low numbers – on average 3 per week. • <u>Budget Estimates</u> On 1 September 2015 the Parliamentary Estimates Hearings were held for both the Minister for Health and the Minister for Mental Health, Minister for Medical Research, Assistant Minister for Health, Minister for Women, and Minister for the Prevention of Domestic Violence and Sexual Assault. As a result of the Parliamentary Estimates Hearings, SWSLHD has provided responses to questions raised regarding the market sounding of women’s health services. • <u>Integrated Health Update Committee</u> <u>Forum</u> A program for awareness and consultation is being planned to work with and engage clinicians in broadening their understanding of integrated care in South Western Sydney and for us to understand the needs and priorities for clinicians. This program of work commenced with an introductory forum on 16 September to target senior staff across the District with an aim to: <ul style="list-style-type: none"> • Increase awareness of Integrated Health Care in relation to state, national and international developments. • Improve awareness of the principles of integrated care as adopted by the south western Sydney Integrated Health Committee. Following the forum, a number of other engagement avenues will be explored with GPs, consumers and SWSLHD staff to inform the development of a plan for future involvement. • <u>Study Tour</u> Travel included a tour of Counties Manukau Health from 21-22 September 2015 and attendance at the 4th annual APAC Forum from 23-25 September 2015. A further report will be provided in due course. 	
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	<ul style="list-style-type: none"> • <u>Your Say Survey</u> The 2015 Your Say Survey results were released on 28 September 2015. For SWSLHD: <ul style="list-style-type: none"> • The response rate has increased significantly from 21% to 56%. • The employee engagement index has improved by 5 points from 65% to 70% (above State average). • The Workplace culture index has improved by 4 points from 52% to 56%. <p>A range of communication strategies to share the results have been implemented. Each facility and service will implement one strategy to address the feedback received, with a focus on middle management.</p> • <u>Expansion of eMR Modules</u> The following projects continue: <ul style="list-style-type: none"> • Electronic Medications Management – eMM • Powerchart Cardiovascular • eMaternity • Community Health Electronic Medical Record (CHOC) • Intensive Care Information System – eRIC- 2018 implementation • CBORD – New Patient Menu and use of mobile devices • Electronic Patient Journey Boards (EPJB) in clinical areas. • GE PACS/RIS Upgrade • Liverpool Trauma Data Base Redevelopment <p>Dr Abi-Hanna suggested a further update relating to ICT be presented at a Board Planning Workshop.</p> • <u>Update: UNSW Proposal</u> A meeting with senior clinicians and researchers on 8 September 2015 resolved to support SWSLHDs involvement in the partnership. • <u>Award- Prof Barton</u> SWSLHD Director of Research, Professor Michael Barton will be presented with a Gold Medal by the Royal Australasian and New Zealand College of Radiologists at their annual meeting in late October. • Prof Frankum <u>NOTED</u> that Ms Carriage was present at the Official Opening of the Acute Services Building of Campbelltown Hospital. • The Board <u>NOTED</u> the Chief Executive’s August 2015 Report. 	<p><i>Chair</i></p>
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<p>6.2 Performance – KPI Report</p>	<ul style="list-style-type: none"> The August 2015 KPI Report was circulated with the Agenda. 	
<p>6.2.1 – Safety & Quality</p>	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> SAC 1 Incidents & Completed RCAs - One incident involved a retained suture needle requiring re-operation for its removal, which meets the NSW Health Incident Management Policy definition for a SAC 1 sentinel event. Ms Larkin clarified: <ul style="list-style-type: none"> 1943478-20 – classified as a SAC 1/2, due to meeting the definition relating a death post fall. The Board NOTED the Safety & Quality component of the KPI Report. 	
<p>6.2.2 – Service Access & Patient Flow</p>	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> <u>Whole of Health Program Update</u> In January 2015 the NSW Health Minister endorsed the retention of the 81% Emergency Treatment Performance benchmark, as articulated in the Premier’s Plan. Action: List the Premier’s Plan on Govdex. <u>Peak Activity Team Meeting</u> Daily teleconferences were initiated, now occurring twice weekly, by the Ministry of Health with all LHDs to discuss activity and performance strategies. A cold bed strategy has been implemented at Liverpool Hospital. <u>Surgery</u> Collaboration with key stakeholders continues to finalise the proposal for the enhancement of Campbelltown Hospital’s staff establishment to provide a night shift for the provision of emergency surgery. There has been a 4% increase in the number of emergency surgery cases undertaken at Campbelltown Hospital over the past year. This increase has resulted in planned surgery cancellations due to Operating Suite availability and after hours call backs. The Board NOTED the Service Access & Patient Flow component of the KPI Report. 	<p>Ms Buttenshaw</p>
<p>6.2.3 – People & Culture</p>	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> <u>Nursing – Premium Staff Usage</u> <ul style="list-style-type: none"> The increase by 2.6% in utilisation of nursing staff in August is attributed to winter. The Board NOTED the People & Culture component of the KPI Report. 	

6.2.4 – Finance & Activity	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> The YTD Net Cost of Service result was \$2.2M unfavourable. Facility budget results. The Board <u>NOTED</u> the Finance & Activity component of the KPI Report. 	
6.2.5 – Service Reports	<ul style="list-style-type: none"> The August 2015 Service Reports were circulated with the Agenda. <ul style="list-style-type: none"> Reports for the following services were circulated with the Agenda: <ul style="list-style-type: none"> Mental Health Drug Health Population Health Primary & Community Health Oral Health Ms Larkin highlighted the following items from the Population Health Service Report: <ul style="list-style-type: none"> Targeted Family Eating and Physical Activity Program. NSW Multicultural Health Communication Awards 2015. Further comments and/or questions relating to the Service and KPI Reports were invited: Action: Provide ED presentations per head of population (by LGA) Ms Larkin provided an overview of the Ligature Project – developed to eliminate or mitigate the risks identified through the ligature audit process. Action: provide an update regarding the Ligature Project. 	<p>Mr Loy</p> <p>Mr Loy</p>
<i>The meeting broke at 5:05pm and reconvened at 5:12pm.</i>		
6.3 Work Health & Safety Report	<ul style="list-style-type: none"> The Board <u>NOTED</u> the quarterly update regarding the SWSLHD Work Health & Safety Report. <ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> <u>Critical Infrastructure Incidents</u> <ul style="list-style-type: none"> There were four critical infrastructure incidents reported for the April to June 2015 period, all relating to a ‘fire’ event. 	

	<p><u>Staff, Visitor and Contractor related Incidents (SVC Incidents)</u></p> <ul style="list-style-type: none"> • There were a total of 138 SVC incidents reported in July 2015, which is a decrease of 24 incidents compared for the same period in July 2014. Liverpool Hospital and Mental Health recorded the most SVC incidents with 33% and 17% respectively. <p><u>Treasury Managed Fund: Workers Compensation Dashboard</u></p> <ul style="list-style-type: none"> • Total claim notifications have remained steady from the last quarter at 20% with a marginal increase of 3.8% compared to the same period last year. • Weekly payments costs have marginally increased by 2.4% since the last quarter compared to an increase of 18.3% during the same period last year. <p><u>Due Diligence Action Plan</u></p> <ul style="list-style-type: none"> • WHS Due Diligence Training for the Board has been scheduled for 26 October 2015. • A Safety Cultural Survey is scheduled for 30 November 2015 • WHS & Incident Management Profile Audits which are scheduled for every two years in accordance with Ministry of Health policy have been delayed as training material for profilers is required to be developed before audits are commenced. • Training in the completion of the new WHS and IM (Injury Management Tool) for assessors is scheduled for 19 and 20 November 2015. <ul style="list-style-type: none"> • Contractors working with SWSLHD complete on-line WHS training. 	
<p>6.4 Risk Management Report</p>	<ul style="list-style-type: none"> • Item not due 	
<p>6.5 A/g Chair's Report</p>	<ul style="list-style-type: none"> • <u>Combined Board Dinner- SWSLHD & SWSPHN</u> Ms Burlew reported that arrangements are progressing for the combined Board dinner with the South Western Sydney Primary Health Network, following the November Board meeting. The dinner will be held at Craigieburn, Bowral. <p>Board members who require accommodation are invited to contact the Secretariat.</p> <p>Action: Distribute information relating to the Dinner, including guest profiles (and photographs).</p>	<p>Ms Buttenshaw</p>

	<ul style="list-style-type: none"> • <u>Board Planning Day</u> The theme for the November Board Planning Day will be 'Healthier Communities' – in line with the SWSLHD Vision, 'Leading Care, Healthier Communities'. <p>Action: Confirm arrangements for the Board Planning Day, i.e. venue and times.</p>	Ms Buttenshaw
7. Committees of the Board		
7.1 Health Care Quality & Safety		
7.1.1 - Minutes	<ul style="list-style-type: none"> • The Minutes of the Health Care Quality and Safety Committee meeting held on 2 September 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 (4.1) – Unplanned Readmissions <ul style="list-style-type: none"> • A review tool was developed to identify risks and issues that could contribute to readmissions. The tool was used to review readmissions of Liverpool, Campbelltown and Bankstown hospitals. • The Committee recommended the project to work in collaboration with Transfer of Care Working Party. The Committee also suggested to consider concept of 'My Passport of care' for frequently presenting conditions, strengthening process of follow up phone calls with use staff on light and suitable duties, and education of clinicians in appropriately selecting the urgency of admissions. • Item (6.1) – SWSLHD Patient Safety Seminar and Quality Awards <ul style="list-style-type: none"> • The seminar was held on 13 August 2015. 55 projects were submitted by facilities and services of SWSLHD under ten award categories for this year's Quality Awards. • Ten Winners and five Highly Commended certificates were presented. <p>Action: Convey the Board's congratulations to award recipients.</p>	Mr Zacka via Ms Buttenshaw

7.2 Finance		
7.2.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Finance Committee meeting held on 10 September 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon reported that the meeting noted: <ul style="list-style-type: none"> • The resolution of the Audit & Risk Management Committee that the 2014/15 financial statements be signed by the Chief Executive and Director of Finance. • The external auditors will sign an unmodified audit report. • Documents to be circulated to the SWSLHD Board prior to submission to the NSW Ministry of Health. 	
7.2.2- Minutes	<ul style="list-style-type: none"> • The Minutes of the Finance Committee meeting held on 21 August 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon highlighted the following items: <ul style="list-style-type: none"> • Item (6.1) – Proposed Bankstown-Lidcombe Hospital Offsite Car Park <ul style="list-style-type: none"> • Management investigated the option for an offsite staff car park at Bankstown Trotting Club, located approximately 1.3kms from the Hospital. • The Committee recommended that staff members continue to pay the current staff car park fee and would be required to utilise the proposed offsite car park arrangement, including use of the shuttle service. • The Board <u>AGREED</u> to support the proposed Bankstown-Lidcombe Hospital Offsite Car Park option. <ul style="list-style-type: none"> ▪ Prof Frankum dissented. • The Board <u>APPROVED</u> the proposed amendments to the SWSLHD Delegations Manual V9, without amendment, as circulated with the Agenda. • Ms Larkin highlighted the proposed amendments return delegated authority for (some) recruitment matters, within an agreed budget and staff profile to facility managers and service directors. The changes primarily relate to: 	

	<ul style="list-style-type: none"> • Consolidation and consistency • Workforce related- changes to delegation • Clarifying categories of delegation- administrative 	
<i>Ms Murphy left the meeting at 6:00pm</i>		
7.3 Audit & Risk Mgt		
7.3.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Audit & Risk Management Committee meeting held on 26 August 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. • Ms Burlew highlighted: <ul style="list-style-type: none"> • Item (6.5) – The Committee endorsed the Audit and Risk Management Charter. • Item (6.6) – The Committee endorsed the Internal Audit Charter. • Item (6.7) – Treasury Policy tpp15-03 <p>The Committee noted the requirement for all ARMC members to be selected from the panel of pre-qualified chairs and members maintained by the Department of Finance, Services and Innovation.</p>	
	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note, circulated with the Agenda, regarding ICAC matters during the period 7 August to 14 September 2015. • No matters were reported to the ICAC. • No matters were referred by ICAC. 	
7.4 Research & Teaching		
7.4.1- Minutes	<ul style="list-style-type: none"> • The next meeting of the Research & Teaching Committee meeting is scheduled for 1 October 2015. 	
7.5 Aboriginal Health		
7.5.1- Minutes	<ul style="list-style-type: none"> • The next meeting of the Aboriginal Health Committee is scheduled for 15 October 2015. 	
8. Consumer & Community Council		
8.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Consumer & Community Council meeting held on 7 August 2015, circulated with the Agenda were <u>NOTED</u> by the Board. 	

9. New Business		
9.1 MDAAC Appointment	<ul style="list-style-type: none"> The Board considered the request from the Chief Executive to nominate Associate Professor Clara Shek Ka Lai as the UWS School of Medicine representative on the Medical & Dental Appointments Advisory Committee (MDAAC), and resolved to <u>ENDORSE</u> the request. Ms Larkin highlighted: <ul style="list-style-type: none"> Professor Iain Gosbell has tendered his resignation from the committee and the Western Sydney University has nominated Associate Professor Clara Shek Ka Lai to replace him. 	
10. Items for Information		
10.1 Public Relations Report	<ul style="list-style-type: none"> A Referral Note regarding public relations matters for August 2015 was circulated with the Agenda and <u>NOTED</u> by the Board. Ms Larkin highlighted: <ul style="list-style-type: none"> As of August 2015 the number of staff contributing to the workplace giving program (\$1 per pay) was 18.59%. A workplace ambassador program has commenced to boost the numbers further. There are no administrative costs associated with the Program. Changing Minds 2 will be launched during Mental Health Week, commencing on 4 October 2015. The September 2015 District newsletter was circulated with the Agenda and <u>NOTED</u> by the Board. 	
10.2 Board Schedules/ Dates	<ul style="list-style-type: none"> The 2015 Board Calendar is available from the Govdex website. The 2015 Board Items Due Calendar is available from the Govdex website. 	
11. Other Business without Notice		
	<ul style="list-style-type: none"> The A/g Chair invited other business without notice. Ms Larkin thanked Ms Carriage for her coordination of the meeting venue. Action: Convey the Board's thanks to Tharawal for hosting the September 2015 SWSLHD Board meeting. 	Ms Buttenshaw

<p>12. Close /Next Meeting</p>	<p>The meeting closed at 6:10 pm.</p> <p>The next meeting is scheduled for Monday 26 October 2015 3:30-6:30 Board Meeting. District Office</p> <p>The meeting will be preceded by Work Health & Safety Training, commencing at 2:30pm.</p>	
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