

MINUTES

South Western Sydney Local Health District Board

Date: Monday 23 November 2015

Time: 3:30pm

Venue: Bowral & District Hospital

1. Present and Apologies

Members	Pres.	Apol.	Members	Pres.	Apol.
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 Anthony Frankel, Medical Staff Executive Council Representative	✓	
Mr Graeme Loy, Director Operations	✓		Ms Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes)	✓	

Agenda Item	Discussion/Decision/Recommendation	Responsible
In Camera Session	<ul style="list-style-type: none"> The Board met in-camera. 	
<i>Ms Larkin joined the meeting at 3.50pm</i>		
<i>Mr Loy, Dr Frankel & Ms Buttenshaw joined the meeting at 4.02pm</i>		
Arising - In Camera Session	<ul style="list-style-type: none"> The Board congratulated the Chief Executive for excellent performance, with significant achievements in financial management, research enhancement, executive team development and external relationships. The Board will recommend re-appointment of the Chief Executive for a further five years. 	<i>Prof Harris</i>
2. Declaration of Interests	<ul style="list-style-type: none"> The Chair invited declarations of interest. Nil were received. 	

<p>3. Confirmation of the previous minutes and action list</p>	<ul style="list-style-type: none"> • <u>MOTION:</u> A motion was moved by Ms Murphy and seconded by Prof Frankum that the Minutes of the Board meeting held on 26 October 2015 be accepted as a true and accurate record. • In response to the Chair’s invitation, Ms Larkin confirmed the Minute Item 7.2.1 – regarding Root Cause Analyses (RCAs). • The Motion was carried. 	
<p>4. Patient Story</p>	<ul style="list-style-type: none"> • Ms Larkin presented the story of an 82 year old male, “George”. • In April 2015, George presented to Campbelltown Hospital by ambulance with leg weakness, shortness of breath and decreased oxygen saturations. He was noted to have an extensive medical history. • On day four of his hospital admission, George was found by staff in bed with no signs of life and was unable to be resuscitated. • The Hospital’s Death Review Committee identified on review of George’s presentation, opportunities to improve the recognition of a deteriorating patient. • In May 2015, George’s wife was contacted and advised that an investigation would take place and a letter was also sent providing her with details of the investigation process. • A subsequent RCA, completed in July 2015, found missed opportunities for early recognition of George’s deteriorating condition which may have contributed to his outcome. • After each RCA the Hospital contacts the family and provides them with an opportunity to receive feedback on the RCA report findings. In this case, George’s family did not want to meet with the facility, opting for the report to be sent to them. • In October 2015, the Hospital received a touching letter from George’s wife confirming that she had received the RCA report and had given the report to her two sons to read, along with her General Practitioner. • The family expressed satisfaction for the treatment George had received and expressed appreciation for the research into sudden deaths. • In a letter George’s wife described the couple’s lifetime love for each other and enclosed a cheque for \$100 in appreciation for the Hospital’s research. • This feedback demonstrates that the RCA process can be a positive experience for those involved, including the clinicians and the family. 	

	<ul style="list-style-type: none"> The Chair clarified that the RCA process is ‘privileged’, but the outcome is not and that the Open Disclosure Policy involves apologising to the patient and family regardless of insurance / liability issues. The Board <u>NOTED</u> the patient story. 	
5. Business Arising		
<p>5.1 Service Reports [28/9/15; Item 6.2.2]</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note providing ED presentations per head of population, as circulated with the Agenda. Mr Loy highlighted: <ul style="list-style-type: none"> Bankstown-Lidcombe Hospital has the highest number of ED presentations from residents outside of SWSLHD LGAs, reflecting their geographic location, followed by Liverpool Hospital. Presentations to ED from outside SWSLHD LGAs have an adverse effect on funding, within the ABF Framework. 	
<p>5.2 ED Presentations – Campbelltown Hospital [28/9/15; Item 5.4]</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note regarding the reported Australasian College of Emergency Medicine (ACEM) Treatment Spaces (TS) guidelines deficit identified for SWSLHD facilities, as circulated with the Agenda. Mr Loy highlighted: <ul style="list-style-type: none"> The previous referral note on this topic reflected College Guidelines, however clinical service planning is based on the <i>NSW Health Activity Planning Guidelines for Emergency Department Services</i>. 	
<p>5.3 Risk Report [24/08/15; Item 7.4]</p>	<ul style="list-style-type: none"> Refer to Item 7.4. 	
<p>5.4 Excess Leave [28/09/15; Item 5.2]</p>	<ul style="list-style-type: none"> The SWSLHD Board <u>NOTED</u> the Referral Note regarding the comparison of excess leave on a State-wide basis. Ms Larkin highlighted: <ul style="list-style-type: none"> SWSLHD has 48.5% of staff with leave balances greater than 30 days (excess leave), in comparison to metro LHDs with 39.9% and rural and regional LHDs with 31.3% of staff respectively. 	

	<ul style="list-style-type: none"> • SWSLHD has less staff (33.9%) with a leave balance of less than 20 days in comparison to metro LHDs (40.9%) and rural and regional LHDs (48.3%). • A reduction of excess leave is expected over December / January. 	
<p>5.5 Oral Health [26/10/15; Item 7.2.5]</p>	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note regarding the use of SMS reminders for oral health appointments. 	
<p>6. Standing Items</p>		
<p>6.1 Chief Executive's Report</p>	<ul style="list-style-type: none"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • Starring Item – Taskforce and Mental Health & the Arts <p>NSW Health have committed to the establishment of a taskforce to explore new ways in which the arts can benefit health and wellbeing of people across NSW. A key deliverable of this taskforce will be to develop an Arts Framework which will identify ways that Health Services can achieve the beneficial effects of the arts across the system and in doing so, build a sense of community and enhance our individual and collective experience of health and wellbeing and cultural identity.</p> <p>The Framework is expected to be delivered by April 2016.</p> <p>The taskforce reports directly to the Minister for Health and will be required to provide expert advice, input to the project process and approach, and inform all project deliverables.</p> <p>Ms Larkin has been appointed to the Taskforce, chaired by Mr Chris Puplick AM.</p> <p>Throughout the consultation processes, Local Health Districts will be required to provide advice on existing arts and health initiatives, and to provide feedback on project deliverables.</p> • Update: A comprehensive Approach to Quality & Safety <p>During the 'comprehensive approach to quality and safety' workshops held in July 2015, support was given for an overarching strategy. The workshops identified the 'Patient Experience' to be the primary driver for change, with three key principles to address this goal: safe and quality care, workforce development, and knowledge and planning.</p>	

	<p>As an outcome from the workshops, a Steering Committee has been established, co-chaired by a senior clinician, Prof Les Bokey.</p> <p>The Committee is currently overseeing the process to appoint a consultant to work with the District over the next 12 months to develop the strategy.</p> <p>The Leadership Forum on 4 December 2015 provides a further platform to engage senior corporate and clinical staff in the transformational journey.</p> <p>Action: Clarify the membership of only one consumer representative on the Steering Group, rather than the usual two.</p> <ul style="list-style-type: none"> Reviewing the structure of and access to the Health Care Interpreter Service <p>SWSLHD operates a Health Language Service (HLS), with approximately 107 languages covered. The Service is also provided to Western Sydney LHD.</p> <p>In June 2015, a consulting group was engaged to undertake a review of District Interpreters Services to identify strategies required to improve access to health language services within SWSLHD.</p> <p>The majority of respondents spoke highly of the value of HLS and appreciated that the Service was flexible, accommodating and receptive to requests, cancellations and re-scheduling of appointments on most occasions.</p> <p>Key issues identified include:</p> <ul style="list-style-type: none"> - Lack of staff compliance with MoH policy in regard to the need for an interpreter and language required not being documented in medical records impacting on capacity to request and provide interpreters. - Delays in accessing HLS Call Centre. - Availability of interpreters in either high demand languages or some minority languages. - Lack of availability of speaker phones in clinical areas to allow for use of phone interpreters. - Patients spoke highly of the interpreters and expressed gratitude for their assistance and availability. - Recommendation of increased or improved use of other technologies such as telephone or video interpreting. <p>An update regarding the HLS Review was presented to the SWSLHD Clinical and Quality Council in November 2015 and the draft Report has been distributed to Clinical Directors for comment, following which an Action Plan is to be prepared.</p> 	<p>Ms Larkin</p>
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	<ul style="list-style-type: none"> <p>• Greater Sydney Commission</p> <p>The Commission, established in 2014, is responsible for metropolitan planning. Dr Peter Sainsbury, Director Population Health and Mr David Lawrence, Manager of Planning represent the SWSLHD at Commission initiatives.</p> <p>• GM Master Class</p> <p>On 16-17 October 2015, the inaugural General Manager’s Master Class was held. Participants included the Chief Executive, LHD Executive staff, Facility and Service Mangers.</p> <p>• NSW Quality Awards</p> <p>The 17th Annual NSW Health Awards were held on 2 November 2015.</p> <p>The project ‘Just PEACHY’ was the winner in the category ‘Patients as Partners’ and received the winning trophy form the Minster for Health.</p> <p>• Launch: SWSLHD Academic Units</p> <p>The ground-breaking work of staff and researchers in south west Sydney was recognised on 5 November 2015 with the establishment of the first three Academic Units announced by Minister for Research Pru Goward at Casula Powerhouse.</p> <p>• Bowral District Hospital Redevelopment</p> <p>An internal meeting with Health Infrastructure has been held to commence the process and discuss the scope.</p> <p>• ABF Framework - Potential Growth & Priorities 2016/17</p> <p>An ABF Framework – Potential Growth and Priorities workshop took place on 10 November 2015 to inform the LHD growth and priorities for 2016/17. The workshop provided an opportunity for the leadership teams from across the LHD to come together to discuss and agree priority setting and growth priorities for next financial year.</p> <p>• Oran Park Integrated Care Project</p> <p>Cerner met with Director of Operations and IM&TD in late October to progress the integrated electronic medical record for the Oran Park Integrated Care Centre. Cerner demonstrated the US based module available that could possibly be used to integrate with the GP practice software systems (Best Practice or Medical Director) for the Oran Park Centre.</p> 	
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	<p>The General Practitioner tender for the Centre has closed, with two submissions received. A recommendation is expected shortly.</p> <ul style="list-style-type: none"> • SWSLHD Fund Raising Strategy <p>The District Fundraising Strategy has been distributed to General Managers, Service Directors and Clinical Directors for feedback.</p> <p>A District Fundraising Steering Group has been convened to progress the strategy and develop the Fundraising Framework for the District. The first meeting of the Fundraising Steering Group was held on Thursday 12 November. The recruitment process for a Fund Raising Manager has commenced.</p> <ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> and commended the Chief Executive's Report. 	
<p>6.2 Performance – KPI Report</p>	<ul style="list-style-type: none"> • The KPI Report was circulated with the Agenda. 	
<p>6.2.1 – Safety & Quality</p>	<ul style="list-style-type: none"> • Ms Larkin highlighted the Report included new SAC 1 cases and causal statements arising from previously reported SAC 1 cases. • Prof Merrett clarified 'FAST' - a focused assessment with sonography for trauma scan. • The Board <u>NOTED</u> the Safety & Quality component of the KPI Report. 	
<p>6.2.2 – Service Access & Patient Flow</p>	<ul style="list-style-type: none"> • Mr Loy highlighted: <ul style="list-style-type: none"> • The implementation of key strategies, specifically at Campbelltown Hospital, is reducing the elective surgical wait list. • The status of the readmissions project; including the appointment of a District-wide project officer, the development of a nursing-based transfer of care 'passport'. • The Chair reported discussion at the last Council of Board Chairs meeting regarding the Premier determining Emergency Treatment Performance (ETP) as a priority. <ul style="list-style-type: none"> • Action: Provide a report regarding the plan to address Liverpool Hospital's deteriorating ETP. • Ms Larkin clarified the 'step down' unit at Bowral & District Hospital. 	<p>Mr Loy</p>

	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Service Access & Patient Flow component of the KPI Report. 	
6.2.3 – People & Culture	<ul style="list-style-type: none"> The Board <u>NOTED</u> 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 Net Cost of Service position YTD October was \$1.1M unfavourable. Expenditure YTD October was \$1.1M unfavourable, which includes \$1M in employee related expenses due to winter activity and surge bed utilisation. Negotiations have commenced with the NSW Ministry of Health regarding activity targets for 2016/17. The significant NWAU variances from target for sub-acute admitted and mental health were noted. 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 Service Reports were 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 Primary & Community Health Oral Health Office of Preventive Health Ms Larkin highlighted the following items from the Mental Health Service Report: <ul style="list-style-type: none"> NSW Premiers Award – Changing Minds On 17 November 2015 staff and patients at Liverpool Hospital’s Mental Health Service were rewarded for their participation in the ABC TV Series Changing Minds with a prestigious NSW Premier’s Award for public service. The first three-part documentary series which aired last year showed the individual journeys of mental health patients and their families and the care and treatment provided by staff on their road to recovery. 	

	<p>The award was presented by Premier Mike Baird in the category: <i>Providing better support and opportunities to the vulnerable.</i></p> <ul style="list-style-type: none"> • Average Length of Stay (ALOS) Clinical Redesign Project <p>An important project that has been discussed at Health Care Quality & Safety Committee. The proposed change project would use a redesign methodology to identify and implement potential solutions to ensure that ALOS in SWSLHD inpatient mental health units is as efficient as possible.</p> <ul style="list-style-type: none"> • Assertive Community Treatment Team Project <p>A business case has been approved to establish the Team at Campbelltown.</p> <ul style="list-style-type: none"> • Action: In relation to the following Dashboard KPIs clarify the targets and reported performance: <ul style="list-style-type: none"> ○ Tier 2 Mental Health: Acute Post-Discharge Community Care – follow up within 7 days (%) ○ Service Measure – Mental Health: EAP: patients admitted to a mental health inpatient bed within 4 hours of arrival in ED (%) • The name change for Primary & Community Care, arising from the Community Health Review was noted. • Action: Amend the reporting arrangement for the Oral Health Dashboard to include actual numbers (proportion of patients) rather than ‘months’. • The Board <u>NOTED</u> the Service Reports. 	<p>Mr Sinclair</p> <p>Mr Sinclair</p>
<p>6.3 Risk Management Report</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Risk Management Report, as circulated with the Agenda. • Mr Loy highlighted: <ul style="list-style-type: none"> • In response to the action arising from the August meeting, Risk ID 53 has been revised to list the Director, Women’s Health as the action officer. • Since the last report: <ul style="list-style-type: none"> • Three risks have been down-graded from high to medium ratings. 	

	<ul style="list-style-type: none"> • Three risks, relating to the roll-out of 'My Aged Care' have been added to the Risk Register, all rated as 'high'. • Ms Larkin reported commencement of the recruitment process for the District Risk Manager position. • Action: Provide the Risk Register as a separate excel document in Govdex. 	Mr Loy/Ms Buttenshaw
<p>6.4 Chairman's Report</p>	<ul style="list-style-type: none"> • <u>Combined Board Dinner</u> Dinner with the South Western Sydney Primary Health Network Board is to be held at Peppers Craigieburn, following the SWSLHD Board meeting. • <u>Update: Academic Health Science Partnership</u> A shadow Board meeting was convened on 11 November 2015. A draft constitution was circulated for discussion and has been submitted to the Legal Branch, NSW Ministry of Health for further advice. Action: Convene a special meeting of the SWSLHD Finance Committee to review the draft constitution. Include Mr Conroy, Prof Frankum and Prof Harris in the invitation. • <u>Public Sector Employment Act</u> At the Council of Board Chairs meeting it was noted that amendment legislation is being prepared that will effect Boards, for example, tenure period of appointment, number of members, etc. Further information will be provided in due course. • <u>2016 Meeting Schedule – Board Planning Workshops</u> The Board <u>APPROVED</u> the proposed dates for the 2016 Board Planning Workshops. <ul style="list-style-type: none"> - Friday 8 April 2016 - Friday 14 October 2016 <p>Actions: Publish the 2016 Board Calendar on Govdex.</p>	<p>Ms Buttenshaw</p> <p>Ms Buttenshaw</p>

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 & Safety Committee meeting held on 4 November 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted: <ul style="list-style-type: none"> • Item 4.1 – ANZICS Report- Liverpool ICU <ul style="list-style-type: none"> • For the last three consecutive quarters Liverpool Hospital lies within the 95% confidence interval for SMR and APACHE III score on the funnel plot. • Item 5.1.6 – Quarterly reporting of RCA recommendations to the Health Care Quality & Safety Committee <ul style="list-style-type: none"> • The Committee agreed to inform the Board that RCA recommendations for all investigations are presented to the Committee with the quarterly report. • Item 6.1 – Facility role delineation review for approval <ul style="list-style-type: none"> • Consultation with facility General Managers and Stream Directors identified a number of delineation levels that have changed since SWSLHD clinical services were last comprehensively reviewed. These changes have been endorsed by SWSLHD and the hospital Clinical Councils. • 16 changes have been proposed in Campbelltown Hospital. • The SWSLHD Board <u>ENDORSED</u> the Role Delineation document, as recommended by the Committee. 	
7.2 Finance		
7.2.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Finance Committee meeting held on 16 October 2015 were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon highlighted: <ul style="list-style-type: none"> • Item 6.1.3 – Write-Offs and Refunds <ul style="list-style-type: none"> • In reviewing this standing report the Committee has requested the removal of identifying information. 	

	<ul style="list-style-type: none"> • Action: Draft a Board protocol in relation to privacy matters. • Item 7.1 – Workforce Reporting • Arrangements are underway to submit workforce and information technology and information management reports to the Committee; demonstrating the evolving role of the Committee. 	Ms Buttenshaw
7.3 Audit & Risk Mgt		
7.3.1- Minutes	<ul style="list-style-type: none"> • The next meeting of the Audit & Risk Management Committee is scheduled for 24 November 2015. 	
7.3.2- ICAC Matters	<ul style="list-style-type: none"> • The Board NOTED the Referral Note, circulated with the Agenda, regarding ICAC matters during the period 12 October to 6 November 2015. • No matters were reported to the ICAC. • No matters were referred by ICAC. 	
7.4 Aboriginal Health		
7.5.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Aboriginal Health Committee meeting held on 15 October 2015 were circulated with the Agenda and NOTED by the Board. • Ms Carriage highlighted: <ul style="list-style-type: none"> • Item 5.4 – SWSLHD Aboriginal Child & Family Programs aligned with Gudaga research findings • Ms Larkin clarified the role of the Warinwarin service, operated in conjunction with Tharawal catering for clients referred by DoCs. • Item 6.3 – Risk Management • The Committee endorsed a number of risks relating to Aboriginal health for inclusion on the SWSLHD risk register. 	
7.5 Research & Teaching		
7.5.1- Minutes	<ul style="list-style-type: none"> • The next meeting of the Research & Teaching Committee is scheduled for 3 December 2015. 	
8. Consumer & Community Council		
8.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Consumer & Community Council meeting held on 2 October 2015, circulated with the Agenda were NOTED by the Board. 	

	<ul style="list-style-type: none"> • Ms Murphy highlighted: <ul style="list-style-type: none"> • The large number of staff in attendance at the Annual CCC Conference held on 6 November 2015 was noted by the community and consumers present. • Action: List “Dropping off the edge: the distribution of disadvantage in Australia” Report on Govdex and submit the Report to the Health Care Quality & Safety Committee (T Vinson). 	Ms Buttenshaw
9. New Business		
	<ul style="list-style-type: none"> • No new business items. 	
10. Items for Information		
10.1 Public Relations Report	<ul style="list-style-type: none"> • A Referral Note regarding public relations matters for October 2015 was circulated with the Agenda and NOTED by the Board. • The November 2015 District newsletter was circulated with the Agenda and NOTED by the Board. 	
11.2 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. 	
12. Other Business without Notice		
	<ul style="list-style-type: none"> • The Chair invited other business without notice. • Dr Slewa-Younan requested and was granted a leave of absence for the February 2016 Board meeting. • Dr Gray requested and was granted a leave of absence for the December 2015 Board meeting, due to the SWS primary Health Network’s Board meeting scheduled for the same date/time. • Action: Change the December 2016 Board meeting date • Ms Larkin advised that James Yeandel, the District’s Director of Media, Communication & Fund Raising has tendered his resignation, effective 4 December 2015 to take up a position at Northern Sydney LHD. • Action: Convey the Board’s acknowledgment and thanks to Mr Yeandel. 	<p style="text-align: center; margin-bottom: 10px;">Ms Buttenshaw</p> <p style="text-align: center;">Ms Buttenshaw</p>

<p>13. Close /Next Meeting</p>	<p>The meeting closed at 6.28pm.</p> <p>The next meeting is scheduled for Thursday 17 December 2015 3:30-6:30 The Hermitage, 5 Grange Road, Leumeah</p> <p>The meeting will be followed by Christmas dinner</p>	
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