

MINUTES

South Western Sydney Local Health District Board

Date: Monday 27 June 2016

Time: 3:30pm

Venue: Board Room, District Office, Eastern Campus, Liverpool Hospital

1. Present and Apologies

Members	Pres.	Apol.	Members	Pres.	Apol.
Prof Phillip Harris (Chair)	✓		Mr John Gordon	✓	
Ms Carolyn Burlew	✓		Prof Neil Merrett	✓	
Ms Christine Carriage		✓	Dr Matthew Gray	✓	
Prof Brad Frankum	✓		Mrs Nina Berry	✓	
Dr Shameran Slewa-Younan	✓		Ms Kerrie Murphy		✓
Dr David Abi-Hanna	✓				
Other Attendees					
Ms Amanda Larkin, Chief Executive	✓		Medical Staff Executive Council Representative		✓
Mr Chris Leahy, A/Director Operations		✓	Mr Ross Sinclair, Director Finance	✓	
Ms Karen Kenmir, A/g Director Nursing & Midwifery		✓	Mr Mark Zacka, Director Clinical Governance		✓
Ms Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes)	✓		Ms Glenda Dingwall, Director Workforce & Development	✓	

Agenda Item	Discussion/Decision/Recommendation	Responsible
2. Declaration of Interests	<ul style="list-style-type: none"> The 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 Ms Burlew and seconded by Dr Abi-Hanna that the Minutes of the Board meeting held on 23 May 2016 be accepted as a true and accurate record, subject to the following amendments: <ul style="list-style-type: none"> Item (1) - Ms Dingwall was present at the meeting Item (5.2) – correction of spelling - ‘ascitic’. The Motion was carried. 	
4. Patient Story	<ul style="list-style-type: none"> Ms Larkin presented Greta Smythe’s positive experience relating to her daughter Anjali’s (names changed) care and treatment in Liverpool Hospital’s Emergency Department (ED). 	

	<ul style="list-style-type: none"> • Greta expressed her appreciation formally via Liverpool Hospital's website and was happy for her story to be forwarded. The case has been presented at the SWSLHD Disability & Access Committee. • Greta is a consumer representative within SWSLHD and is also a clinical staff member. • Greta's daughter Anjali is 26 years old with severe intellectual disability and resistant epilepsy. She has frequent seizures (drop fits and generalised tonic clonic) every 10-12 days. • Anjali was brought to the ED by Ambulance and received treatment for a head wound, following a seizure. • Greta noted that the experience clearly highlighted the benefits that are gained when clinical staff communicate clearly with family and carers in the management of disabled patients. In this case: Anjali was not distressed; the family felt confident and less anxious with the ED team; and satisfactory and timely care was provided to Anjali. • The Board <u>NOTED</u> the patient story. 	
5. Business Arising		
5.1 KPI Report – Quality & Safety <small>[23.5.16; Item 5.2]</small>	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note regarding incident number 2042152-20, circulated with the Agenda. • The case was referred to the Coroner and the medical officer involved in the patients care was appropriately credentialed. 	
5.2 KPI Report – Service Access & Patient Flow <small>[23.5.16; Item 5.1]</small>	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note regarding current and projected performance - (elective) surgical wait list, circulated with the Agenda. • Ms Larkin highlighted: <ul style="list-style-type: none"> • Additional surgery sessions were implemented in May and June at all facilities. Negotiations are continuing with The San for orthopaedics. • The projected number of surgical cases admitted from the wait list for 2015/16 is 2.4% (526 cases) below target. • Additional activity has increased the full year projection of cases to 507 more than 2014/15. • Prof Merrett noted a reduction in (elective) surgical activity on a State-wide basis. 	

	<ul style="list-style-type: none"> • Actions: <ul style="list-style-type: none"> • Provide a YTD analysis of the surgical wait list including: <ul style="list-style-type: none"> • Volume and rate of cases added to the list • Volume and rate of cases removed / completed from the list • Waiting periods 	Director of Finance
5.3 Research & Teaching Committee [23.5.16; Item 6.25]	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note advising details of the feedback session for unsuccessful applicants of the academic unit initiative. • Ms Larkin noted that individual feedback was not provided. 	
5.4 Service Reports – Oral Health [23.5.16; Item 6.25]	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note regarding the addition of waiting list percentages to the Oral Health KPI Dashboard and the KPI review. 	
6. Standing Items		
6.1 Chief Executive's Report	<ul style="list-style-type: none"> • Ms Larkin highlighted: • <u>Transforming Your Experience</u> The Program is developing well. Activities during June included: <ul style="list-style-type: none"> • Implementation of consultative workshops across the LHD to help define and describe the current and future state of patient and staff experience in SWSLHD. • Development and submission of a poster for the APAC conference in September 2016. • Raising awareness of the initiative including; release of key messages, information for staff newsletters; and the development of a three minute video promoting the Program. • Development of the online leadership survey. • Consumer workshops are scheduled for late June. <p>The Chairman noted the use of language relating to the strategy, for example 'best' versus 'strengthen'.</p> <p><u>NSW Refugee Health Service</u> The settlement of 12,000 additional refugees of Syrian and Iraq backgrounds has commenced. In October 2015, a Business Case was submitted to the NSW Ministry of Health (MOH), at the request of the former Secretary, NSW Health. The Business Case proposed additional resources for the NSW Refugee Health Service, to effectively manage the impending increased demand.</p>	

	<ul style="list-style-type: none"> • <u>Asset Capital Development</u> An overview of the minor capital projects for locally funded expenditure was provided. • <u>Robotic Surgery</u> Liverpool Hospital is working towards a framework for SWSLHD to become an Asia-Pacific Centre for Research and Training in minimally invasive and robotic surgery. A presentation to the SWSLHD Clinical & Quality Council will occur in July. • <u>ICT Program</u> Implementation of eMR 2 at Bankstown-Lidcombe Hospital has required a re- baseline of the project plan due to issues that pertain to change management and site preparedness to go live. Additional resources have been supplied to the project team as well as assistance from eHealth. The go live date has been postponed. The approach to resourcing ICT projects is currently under review. • <u>SWSLHD Governance Framework</u> Action: Provide a briefing to the SWSLHD Board. • <u>Site Visit to Liverpool Hospital’s Emergency Department</u> On 8 June 2016, the Hon Jillian Skinner MP, Minister for Health conducted a site visit of the Liverpool Hospital ED, with the Department of Premier and Cabinet (DPC), and the MOH Systems Relationships Branch. The Minister for Health met with key SWSLHD and Liverpool Hospital representatives, with the Liverpool Hospital ED performance the focus of discussion. The site visit included a tour of the ED and presentations detailing patient access and winter strategies to address demand. 	Chief Executive
6.2 Performance – KPI Report	<ul style="list-style-type: none"> • The KPI Report was circulated with the Agenda. 	
6.2.1 – Safety & Quality	<ul style="list-style-type: none"> • The Chairman highlighted: <ul style="list-style-type: none"> • There have been six new serious incidents since the last report, which will undergo a root cause analysis (RCA). <ul style="list-style-type: none"> • In relation to Incident 2128724-20, Prof Merrett noted that the provision of pain relief prior to medical officer review will be considered within the RCA process. • Two causation statements from completed RCAs (cases reported to the Board in April). 	

	<ul style="list-style-type: none"> 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"> Ms Larkin highlighted: <ul style="list-style-type: none"> <u>Whole of Health Program Update</u> Liverpool Hospital have implemented 4 key strategies to address performance and recover ETP to meet and sustain performance to trajectory targets: <ul style="list-style-type: none"> Whole of Hospital Governance ED Discharge Stream Clinical Engagement Local Team, Specific Strategies Campbelltown Hospital has experienced a 4% growth in ED presentations YTD 2016, on top of a 6% increase 2015 year on year, translating on average to 100 more patient presentations per week, compared to 2015). Projects are underway to improve and sustain performance: <ul style="list-style-type: none"> Geriatric Outreach Model Neurology & Respiratory Outpatient Clinics Paediatric Bed Base Long Length of Stay Committee Medical Navigator The emergency treatment performance target is seasonalised. For the month of April 2016 Transfer of Care (ToC) performance at 94.5% has improved in comparison to the same period in 2014/15 (84.7%). Performance is above the 90% target, with all facilities achieving target in April. The role, size and performance of Liverpool Hospital was discussed, including: <ul style="list-style-type: none"> The Executive Team – appropriateness of the size and structure The role of the current (and future) Oran Park Integrated Primary Care Centre The need to further explore models of care / service delivery, for example moving some elective surgery (hips, hands and cosmetic) to Fairfield Hospital has worked well. A review of the Liverpool is required. The role delineation of Campbelltown Hospital and its impact on Liverpool Hospital. The Chairman noted that a paper is being developed, arising from a previous Board planning day that will inform strategy and the planning of services. He also suggested it would also be a topic for discussion at the next Board planning day. 	<p><i>Chief Executive</i></p>

	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Service Access & Patient Flow component of the KPI Report and the Peak Activity Performance Indicators by Local Health District (April 2016). 	
6.2.3 – People & Culture	<ul style="list-style-type: none"> Ms Dingwall highlighted: <ul style="list-style-type: none"> <u>Premium Staff usage</u> The current focus is on over-time, with management plans developed for staff that have > 500 hours of overtime in 12 months. <u>Excessive Annual Leave</u> Strategies to reduce excessive annual leave continue to be pursued. <u>Aboriginal Employment Initiatives</u> SWSLHD currently employs 238 Aboriginal staff members representing 1.96% of the total workforce. Since reporting the percentage has increased to 2.03% 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 Sinclair highlighted: <ul style="list-style-type: none"> <u>Finance</u> <ul style="list-style-type: none"> Since the reporting period, the May results have been made available. The average daily expenditure rate has increased, as expected during Winter. Year end actuals are forecast to meet budget. Own source revenue is on budget for the month and YTD. <u>Activity</u> <ul style="list-style-type: none"> The May results (behind by one month due to using coded data) is at 97.4% of YTD target. <u>Service Level Agreement Negotiations with NSW Ministry of Health</u> <ul style="list-style-type: none"> The 2016/17 Service Level Agreement has been received. A summary analysis will be prepared for presentation to the Board’s July meeting. The Board <u>NOTED</u> the Finance & Activity component of the KPI Report. 	Chief Executive

<p>6.2.5 – Service Reports</p>	<ul style="list-style-type: none"> • Service 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: <ul style="list-style-type: none"> • <u>Population Health</u> <ul style="list-style-type: none"> • The Australian Childhood Immunisation Register data for January to March 2016 quarter shows coverage of 96% for Aboriginal children at 1 year of age. This is above the target of 92%. • The Health Promotion Service continues to work in partnership with the Primary Health Network to increase GP referrals to the Get Healthy Information and Coaching Service. Information sessions to clinical staff across the District have been provided to raise awareness and referral pathways. • The Breastscreen participation rates remain below target. • Prof Peter Sainsbury’s final day with SWSLHD is Friday 1 July 2016. • Action: Convey the Board’s best wishes and thanks to Prof Sainsbury to mark his retirement. • The Board <u>NOTED</u> the Service Reports. 	<p>Chair / Secretariat</p>
<p>6.3 Work Health & Safety Report</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Work Health & Safety Report, circulated with the Agenda. • Ms Larkin highlighted that since the last report: <ul style="list-style-type: none"> • There were two critical infrastructure incidents reported for the January-March 2016 period (a fire event on 2 March and an oil leak on 10 March, both at Liverpool Hospital). • There were 126 Staff, Visitor & Contractor related incidents reported for April 2016, an increase of 5 (4%) from the previous month. Ms Dingwall provided an overview of the Violence Prevention Working Party. 	

	<ul style="list-style-type: none"> • The top 3 work health & safety areas for noting relate to manual handling, falls, trips & slips and aggression. • For the period 3-27 March the Loss Time Injury Rate was 25.5, a decrease of 6 for the February period. • Actions: <ul style="list-style-type: none"> • Provide an LTIR comparison with other LHDs (It was suggested that the insurer may be able to provide de-identified data). • Provide advice about the preventative strategies to reduce LTIR. • Review the Work Health & Safety Plan, specifically the due date, status and commentary. 	<p>Director, Workforce & Development</p>
<p><i>Ms Dingwall left the meeting at 5.15pm</i></p>		
<p>6.4 Chairman's Report</p>	<ul style="list-style-type: none"> • The Chairman highlighted: <ul style="list-style-type: none"> • <u>LHD Board & Specialty Network Conference</u> <p>Held on 20 June 2016, the theme of the conference was 'partnering'. Discussions included community participation, NDIS, public private partnerships, implementation of Premier's priorities, etc.</p> • <u>Chief Executive Performance Review</u> <p>The Board <u>ENDORSED</u> the process for the Chief Executive's annual performance review, as follows:</p> <ul style="list-style-type: none"> • In-camera session – July Board meeting • Review – with the Board Chair and Deputy Chair • In-camera session – August Board meeting 	<p><i>Secretariat</i></p>
<p>7. Committees of the Board</p>		
<p>7.1 Health Care Quality & Safety</p> <p>7.1.1- Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Health Care Quality & Safety Committee meeting held on 1 June 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted: <ul style="list-style-type: none"> • <u>Item 4.1 – Birthrate Plus</u> <p>The Committee noted the SWSLHD review in relation to the Birthrate Plus FTE requirements and the strategies being developed and implemented to fill the related vacancies.</p> 	

	<ul style="list-style-type: none"> • <u>Item 4.3 – Increasing rate of complaints at Campbelltown Hospital</u> <p>The Committee noted strategies implemented to address the increasing rate of complaints received.</p> <ul style="list-style-type: none"> • <u>Item 5.1.7.2 – Campbelltown Hospital’s Organisation-wide Survey</u> <p>The Committee noted the 3 recommendations (for completion within 90 days); checking patient identification at handover, compliance with correct patient policy and storage of sterile stock arising from the recent organisation-wide survey at Campbelltown Hospital.</p>	
<i>Prof Merrett left the meeting at 5.35pm</i>		
7.2 Finance		
7.2.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Finance Committee meeting held on 20 May 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon highlighted: <ul style="list-style-type: none"> • The projects reflect immediate priorities. Changes from the previous submission include: <ul style="list-style-type: none"> • Liverpool Hospital’s Comprehensive Cancer Care Centre has been included as an element of the Liverpool Stage 2.2 redevelopment proposal • Inclusion of the Prairiewood Health Campus redevelopment • Capital Insight has been engaged to identify critical assets or systems and their associated maintenance requirements and to prepare a submission to the MoH seeking appropriate maintenance funding. • The Board <u>APPROVED</u> the 2016 Asset Strategic Plan top five priority capital projects as follows, recommended by the Finance Committee: <p>Priority 1 – Campbelltown Hospital – Stage 2 and inpatient mental health redevelopment</p> <p>Priority 2 – Liverpool Stage 2.2 – including the Liverpool Comprehensive Cancer Care Centre</p> <p>Priority 3 – Bowral & District Hospital – Redevelopment</p> <p>Priority 4 – Bankstown-Lidcombe Hospital – Redevelopment</p> <p>Priority 5 – Prairiewood Health Campus - Redevelopment</p> • Action: Submit the approved top 5 priority capital projects to the NSW Ministry of Health. 	A/Director of Operations

- The Minutes of the Extraordinary Finance Committee meeting held on 20 May 2016 were circulated with the Agenda and NOTED by the Board.
- Mr Gordon highlighted:
 - The Committee undertook a review of the documentation to be executed to formally recognise the legal and commercial arrangements between SWSLHD and the Ingham Institute for Applied Medical Research (IIAMR).
 - Holman Webb have been the solicitors engaged throughout the process, with involvement of the Business and Assets Services Branch, NSW Ministry of Health.
 - In response to the request at the June Board meeting, Mr Gordon reported on the due diligence review of the IIAMR, using information publically available.

Financial Overview

- Land lease to be paid by Ingham Institute is based on a market rental of \$168,000 p.a. plus GST.
- Ministry approval has been given for SWSLHD to provide a Market Rental Assistance grant to Ingham Institute of \$168,000 p.a. plus GST for the term of the 40 year lease.
- SWSLHD will enter into a sublease to pay the Ingham Institute for accommodating its researchers. It will pay this sublease by funding the cost of services to the building. The current cost of these services is \$925,000 p.a.
- The maximum sublease to be paid by SWSLHD (in the form of services provided to the building) will be capped. The cap is determined by the market rental value of the entire building multiplied by SWSLHD's researchers Proportion of Occupancy (based on headcount).
- The current market rental value of the building is \$1,850,240 p.a. plus GST and the current proportion of occupancy is 93%
- Should the cost of building services provided by SWSLHD exceed the cap (Presently \$1,850,240 plus GST), SWSLHD can recover the excess by charging IIAMR for their proportionate share of the excess based on occupancy.
- The Board APPROVED the SWSLHD Chief Executive to execute the following documents on behalf of the SWSLHD, recommended by the Finance Committee:

	<ul style="list-style-type: none"> • Affiliation and Service Agreement • Deed of Licence and Agreement for Lease • SWSLHD Sub Lease • SWSLHD Service Agreement • Funding Deed • Deed of Agreement for Grant • Deed of First and Last Right Refusal • General Security Deed • Mortgage of Lease • IT Access Agreement <ul style="list-style-type: none"> • Action: SWSLHD Chief Executive to execute the document suite. 	Chief Executive
<p>7.3 Audit & Risk Mgt</p> <p>7.3.1- Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Audit & Risk Management Committee meeting held on 24 May 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • Ms Burlew highlighted that the Committee receives a presentation on two risks (corporate and clinical) at each meeting. Risks presented in May included: <ul style="list-style-type: none"> • Medication errors leading to serious harm • Inability to recruit Indigenous staff 	
7.3.2- ICAC Matters	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note, circulated with the Agenda, regarding ICAC matters during the period 5 May to 10 June 2016. • One matter was reported to the ICAC – fraud, resulting in the termination of a nurse. • No matters were referred by ICAC. 	
<p>7.4 Research & Teaching</p>	<ul style="list-style-type: none"> • The Minutes of the Research & Teaching Committee meeting held on 2 June 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Frankum highlighted: <ul style="list-style-type: none"> • <u>Item (6.1) – Annual Committee Self-Evaluation</u> <p>The Committee considered results of its self-evaluation, which included:</p> <ul style="list-style-type: none"> • Overall positive results • Significant achievements made, particularly in research initiatives • Need to consider a strategy for applying a ‘best teaching’ ethos • The proposed amendments to the Terms of Reference are administrative in nature <p>The Board <u>APPROVED</u> the proposed amendments to the terms of Reference.</p> 	

	<ul style="list-style-type: none"> • <u>Item (6.2) – Academic Health Science Partnership</u> • Prof Les Bokey has been appointed as the Interim Director, pending an international recruitment process. • Prof Ian Jacobs, President and Vice-Chancellor, UNSW has been appointed as Chair of the Governing Council. • SWSLHD is represented on the Governing Council by the Board Chair and Chief Executive. 	
7.5 Aboriginal Health 7.4.1- Minutes	<ul style="list-style-type: none"> • The next meeting of the Aboriginal Health Committee meeting will be held on 30 June 2016. 	
8. Consumer & Community Council		
8.1- Minutes	<ul style="list-style-type: none"> • The Minutes of the Consumer & Community Council meeting held on 6 May 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. 	
9. New Business		
9.1 – Correspondence received from RL	<ul style="list-style-type: none"> • The Board <u>APPROVED</u> the recommendation that the Chief Executive oversee management of Mr RLs correspondence on behalf of the Board, noting operational management will occur via the SWSLHD Mental Health Service and that the Health Care Complaints Commission are investigating the matter. • The Board were satisfied that an appropriate management plan is in place. 	
10. Items for Information		
10.1 Public Relations Report	<ul style="list-style-type: none"> • A Referral Note regarding public relations matters for May 2016 was circulated with the Agenda and <u>NOTED</u> by the Board. • The June 2016 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 2016 Board Calendar is available from the Govdex website. <ul style="list-style-type: none"> • The Board <u>NOTED</u> the meeting and events summary, circulated with the Agenda. • The 2016 Board Items Due Calendar is available from the Govdex website. 	
11. Other Business Without Notice		
	<ul style="list-style-type: none"> • The Chair invited other business without notice. • Nil matters were received. 	

<p>12. Close /Next Meeting</p>	<p>The meeting closed at 6.30pm.</p> <p>The next meeting is scheduled for Monday 25 July 2016, Campbelltown Hospital:</p> <p>2:30pm-3:30pm – Facility / Site Visit 3:30pm-6:30pm – Board Meeting</p> <p>The Board meeting will be followed by dinner with the South Western Sydney Primary Health Network – The Hermitage, Leumeah.</p>	
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