

MINUTES

South Western Sydney Local Health District Board

Date: Monday 26 September 2016

Time: 3:30pm

Venue: Board Room, Fairfield 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	✓		Dr Anthony Frankel, Medical Staff Executive Council Representative	✓	
Ms Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes)	✓		Mr Ross Sinclair, Director of Finance	✓	
Ms Glenda Dingwall, Director Workforce & Development	✓		Mr Mark Zacka, Director Clinical Governance, Director of Finance	✓	
Ms Nel Buttenshaw, A/Manager Executive & Board Secretariat (minutes)	✓				

Agenda Item	Discussion/Decision/Recommendation	Responsible
2. Declaration of Interests	<ul style="list-style-type: none"> The Chair invited declarations of interest. Mr Gordon reported his recent appointment to the Georges River Council and the Northern Beaches Council as the Audit Committee Chair. 	
3. Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> MOTION: A motion was moved by Dr Abi-Hanna and seconded by Mr Gordon that the Minutes of the Board meeting held on 22 August 2016 be accepted as a true and accurate record, subject to the following corrections: <ul style="list-style-type: none"> Item 5.3 - Surgical Wait List Analysis The Board noted that the ophthalmology wait list at Bankstown-Lidcombe Hospital remains high <i>with at 68 patients recorded as 'not ready for care'</i>. 	

	<ul style="list-style-type: none"> Item 6.2.1 – Safety & Quality Dr Gray noted that the HCQSC have requested further information about the increasing rate of pressure injuries <i>misinterpretation of CTGs</i>. The Motion was carried. 	
4. Patient Story	<ul style="list-style-type: none"> Mr Zacka introduced the patient story, being conveyed by way of video. The video features Kemisha, a 23 year old Ngarrindjeri woman, who provides a testimony about the ‘New Directions Program’. The video was used to open the recent SWSLHD Patient Safety & Quality Awards, at which Kemisha was present. The New Directions: Mothers and Babies Services program is funded by the Australian Government and aims to increase access to, and use of, child and maternal healthcare services for Aboriginal and Torres Strait Islander families. The Program has supported Kemisha to ‘turn her life around’ and demonstrates the impact ‘health’ can have in closing the gap. Kemisha is now completing an Aboriginal Traineeship at Liverpool Hospital. The Board <u>NOTED</u> the patient story. 	
5. Business Arising		
5.1 Board Stakeholder & Engagement Plan [25.07.16; Item 3]	<ul style="list-style-type: none"> The SWSLHD Board <u>APPROVED</u> the Stakeholder & Engagement Plan, subject to affiliated health organisations being specified as a stakeholder. In support of the Plan, Ms Larkin reported recent networking undertaken with the Western Sydney Leadership Dialogue. The Dialogue has submitted a proposal to enable the District to enhance its profile in the business community by way of a leadership and engagement strategy. Action: Convene a Board working party (Mrs Murphy, Mr Gordon, Mrs Berry & Prof Merrett) to make recommendations to the Board about the Western Sydney Leadership Dialogue’s proposal and implementation strategies for the Plan. 	Chief Executive
5.2 Culture in Medicine [27.06.16; Item 6.1]	<ul style="list-style-type: none"> The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda, providing details about the process to capture information about the experience of JMOs at their end of term placements. Ms Dingwall highlighted: 	

	<ul style="list-style-type: none"> • The Health Education & Training Institute (HET) provides a structured process to capture and action information about the JMO experience. A mid-term and end-of term review is undertaken. SWSLHD is working with HETI to receive this information, which is currently not received. • There are a number of avenues for JMOs to provide feedback including with their DPET, clinical supervisor, department head or director of medical services. • A range of other (formal and informal) strategies are being developed. • The Board noted that Liverpool Hospital’s Basic Physician Training (BPT) Network received a lower pass rate this year compared to previous years. • Action: Provide a report regarding the results of the 3 BPT Networks (State-wide). 	Director, Workforce & Development
<p>5.3 Paediatrics [04/05/15: Item 1]</p>	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda, regarding enhanced paediatric services in south western Sydney. • Ms Larkin highlighted: <ul style="list-style-type: none"> • The action arose from the May 2015 Board Planning Workshop. • The SWSLHD Health Improvement for Children, Young People and Families Plan 2016-2025 (launched in July 2016) includes a specific strategy to enhance paediatric services in SWS. • A scoping paper (circulated with the Agenda) has been developed, in consultation with the NSW Ministry of Health, to plan for enhanced paediatric services in SWS to 2026. • Action: Suggest local MPs and surgical representation is included within the Scope’s ‘potential list of stakeholders’. 	Chief Executive
<p>5.4 Organ & Tissue Donation [22/08/16: Item 4]</p>	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda, describing the criteria for organ and tissue donation. • Ms Larkin highlighted donations of organs and tissue can occur either after brain death has been determined or after circulatory death. 	

	<ul style="list-style-type: none"> • Action: Provide advice about the type of donations following circulatory death directly to Dr Abi-Hanna. 	Chief Executive
<p>5.5 Comparative Data [22/08/16: Item 6.2.1]</p>	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda, providing comparative data and analysis for SAC 1 incidents, stillbirths and suicides. • Mr Zacka highlighted: <ul style="list-style-type: none"> <u>SAC 1 Incidents</u> <ul style="list-style-type: none"> • Comparison of LHD IIMs rates with the State average is conducted by the Clinical Governance Unit. • The SWSLHD rate for SAC 1s has been comparable with NSW, with an increase in the Jul-Dec 15 period (latest available data) with SWSLHD at 0.10, compared to the NSW average of 0.06. • Comparative data of SWSLHD to other LHDs (de-identified) is not routinely available from the CEC, however can be produced locally. • Compared to other LHDs (de-identified) for SAC 1 and 2 incidents over 2014-2015, SWSLHD performance is within the range. • The HCQSC receives reports and will continue to monitor performance. <u>Suicides</u> <ul style="list-style-type: none"> • As of August 2016, the SWSLHD suicide mortality rate per 100,000 population was 66.7 suicides per 100,000 population. The NSW average is 63.5. • Of the four comparative Sydney LHDs, SWSLHD has the second lowest suicide mortality rate. • Prof Frankum reported 2 recent suicides of Campbelltown Hospital staff members. <u>Stillbirths</u> <ul style="list-style-type: none"> • The stillbirth rates for 2014, comparing SWSLHD with other NSW LHD's is stated in the snapshot from the 2014 NSW Mothers and Babies report (Figure 1), showing that as a large LHD with a tertiary referral unit, the rates were within an acceptable range (i.e. SWSLHD 0.6 / LHD range 0.4-2.2). • Stillbirth rates for other LHD's for 2015/2016 are not yet published by NSW Health. 	

<p>5.6 Aboriginal Health [22/08/16: Item 5.2]</p>	<ul style="list-style-type: none"> The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda, clarifying strategies to reduce smoking rates in the Aboriginal community. Action: Provide advice about the continuation of the Smoking Cessation Advisor position and related strategies. 	<p>Aboriginal Health Committee</p>
<p>5.7 Mental Health [22/08/16: Item 6.2.5]</p>	<ul style="list-style-type: none"> The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda, data collected (time of day, day of the week/year) in the audit of absconding related incidents. 	
<p>5.8 Risk Management [22/08/16: Item 6.3]</p>	<ul style="list-style-type: none"> The SWSLHD Board <u>APPROVED</u> the formalisation of risk management roles & responsibilities in the: <ul style="list-style-type: none"> Board Charter Aboriginal Health Committee Terms of Reference Health Care Quality & Safety Committee Terms of Reference Action: Publish the revised Board Charter & Terms of Reference The SWSLHD Board <u>NOTED</u> the information circulated with the Agenda, clarifying Board Committee responsibilities relating to risk management. Mr Gordon provided a summary overview of risk 'appetite' and 'tolerance'. Action: Discuss risk management at the Board Planning Day. 	<p>Chief Executive</p> <p>Chief Executive</p>
<p>6. Standing Items</p>		
<p>6.1 Chief Executive's Report</p>	<ul style="list-style-type: none"> Mr Zacka presented (circulated with the Agenda) the RCA feedback arising from the medical gases incidents at Bankstown-Lidcombe Hospital, highlighting: <ul style="list-style-type: none"> Three incidents recorded One RCA Team, led by Prof Michael Nicholl Two RCA reports produced The Chief Health Officer also released a Report One case has been referred to the Coroner Other investigations have/are occurring, for example Safe Work Australia, NSW Ministry of Health (MoH) A summary of findings of both cases Recommendations and issues arising 	

	<ul style="list-style-type: none"> As a result of the findings the SWSLHD has been escalated to Level 2 within the Performance Framework. In conjunction with the escalation the MoH will meet with the SWSLHD on a monthly basis with the purpose of ensuring that recommendations arising from the Reports and any other issues raised relating to the incidents, are addressed and implemented in full. Work has commenced on implementing the recommendations and system improvements arising from the reports. A key issue relates to the review of the engineering services. 	
<i>Ms Larkin, Mr Sinclair, Mr Zacka, Dr Frankel, Ms Dingwall & Ms Buttenshaw left the meeting at 5.20pm</i>		
	<ul style="list-style-type: none"> The Board held an in-camera session to discuss the MoH investigation process. The Board will meet via teleconference to discuss subsequent action following receipt of correspondence expected from the Secretary, NSW MoH. 	<i>Chairman</i>
<i>Ms Larkin, Mr Sinclair, Mr Zacka, Dr Frankel, Ms Dingwall & Ms Buttenshaw re-joined the meeting at 5.35pm</i>		
	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> <u>Bowral & District Hospital Redevelopment</u> The NSW Government announced (15 September 2016, during parliamentary question time) an invitation for experienced hospital operators to submit Expressions of Interest (EOIs) in the provision of clinical services to public patients under a fully funded, long term contractual commitment with the NSW Government at five Initial locations: Bowral; Goulburn; Maitland; Wyong; and Shellharbour. As a result of the announcement Union meetings were held at Bowral on 23 September 2016, arising from which was a resolution for the Minister of Health to respond in writing within 7 days. The Chief Executive and Health Infrastructure representatives have planned to meet with staff at Bowral on 29 September 2016. <u>IT Virus – Mosaiq System</u> An IIMS entry was made and a SAC 2 investigation will occur. The Board <u>NOTED</u> the Chief Executive’s Report for August/September 2016. 	

<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"> Mr Zacka highlighted: <ul style="list-style-type: none"> Mental health incident – 2179309-20 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"> Liverpool Hospital has been nominated to participate in the Ministry of Health’s 90 day challenge. For July, SWSLHD Transfer of Care performance (91.5%) improved in comparison to the same period last year (73.5%). Performance is above the 90% target, with all facilities achieving target in July 2016. Negotiations with the Sydney Adventist Hospital in relation to the transfer of orthopaedic cases continue to be progressed, which will decrease the wait list at Campbelltown Hospital. The Board <u>NOTED</u> the Service Access & Patient Flow component of the KPI Report. The Board <u>NOTED</u> the Selected Performance Indicators by LHD (YTD June 2016) Report. 	
<p>6.2.3 – People & Culture</p>	<ul style="list-style-type: none"> Ms Dingwall highlighted: <ul style="list-style-type: none"> In July 2016 65.1% of staff had a performance review conducted in the past 12 months, a significant improvement on the same period last year (47.3%). Workforce & Development continue to work with facilities and services to develop strategies and processes to sustain the improvement. As at July 2016 the average time taken from request to recruit to decision is 17 days; an increase on the same period last year (14 days). The Board <u>NOTED</u> the People & Culture component of the KPI Report. 	
<p>6.2.4 – Finance & Activity</p>	<ul style="list-style-type: none"> Mr Sinclair highlighted: <ul style="list-style-type: none"> The August and YTD financial results, noting the favourability of own source revenue for the Month (at \$1.9M). Year end actuals are forecast to meet budget. 	

	<ul style="list-style-type: none"> • The July 2016 activity results indicate that SWSLHD is at 99.8% of the YTD target. • Prof Frankum noted the 7.5% increase in emergency department presentations and the significant increase (21.4%) in sub-acute admissions at Campbelltown Hospital. • The Board <u>NOTED</u> the Finance & Activity component of the KPI Report. 	
6.2.5 – Service Reports	<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: <p><u>Primary & Community Health</u></p> <ul style="list-style-type: none"> • The proportion of families receiving a Universal Health Home Visit within 2 weeks was well below the 75% target at 65%. This is attributed to high levels of unproductive leave and unexpected staffing issues over the month. • The Child Protection Counselling Service continues to trial a SMS application, sent from a web-based system, in order to increase attendance rates by confirming client appointments. • The My Health Medical Group has continued to show growth in activity whilst operating under Oran Park Family Health with 2 new GP Registrars commencing in August. • Action: Review Dash Board indicators <ul style="list-style-type: none"> • The Mental Health Narrative Report doesn't reflect the Dashboard KPIs • Some KPIs are reported as achieved by the use of 'green', which doesn't reflect the data. • Consider outcomes orientated narrative information. • The Board <u>NOTED</u> the Service Reports. 	Director of Finance
6.3 Work Health & Safety Report	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Work Health & Safety Quarterly Report, circulated with the Agenda, which included: <ul style="list-style-type: none"> • Critical infrastructure incidents • Dashboard KPI performance (April – June, 2016) • Summary of work health & safety priority areas 	

	<ul style="list-style-type: none"> • Work Health & Safety Strategic Plan 2015-2017 • Ms Dingwall highlighted the work of the safety and security working party. • The Board <u>NOTED</u> the Referral Note regarding LTIR Preventative Strategies, circulated with the Agenda. • The following strategies have been implemented to reduce lost time injuries: <ul style="list-style-type: none"> • Work Health and Safety Policy and Procedure Framework • Induction and Training • Incident Reporting and Investigations • Aggression Management • Provision of Manual Handling Equipment • Hazard identification (Inspections) and risk assessment processes • Safe Patient Handling • Monitoring Safety Performance • The Board <u>NOTED</u> the Workers Compensation Quarterly Report, including performance and claims statistics, circulated with the Agenda. • Ms Larkin highlighted that open claims have decreased and total notifications have increased. • The Board <u>NOTED</u> the Referral Note regarding the new <i>PD2016_017 WHS Audits, updated Guidelines for Boards: WHS and Due Diligence Information Sheet</i> (and reporting template). 	
<p><i>Mr Zacka, Mr Sinclair & Ms Dingwall left the meeting at 6.15pm.</i></p>		
<p>6.4 Chairman's Report</p>	<ul style="list-style-type: none"> • The Chairman reported: <ul style="list-style-type: none"> • Ministerial correspondence received regarding the recent launch of the NSW Health and the Arts Framework, as circulated with the Agenda. • The Council of Board Chairs meeting (held 5.09.16) received an address from the Secretary. • Action: Circulate to the Board a copy of the paper prepared to inform the Secretary's recent visit to SWSLHD. • Correspondence received from the NSW Ministry of Health escalating the SWSLHD from Level '0' to '2' within the NSW Health Performance Framework, as a result of the recent medical gases incident. Escalation includes monthly meetings between the District and the MoH; Board members who wish to participate in these meetings should advise the Secretariat in advance. 	<p>Secretariat</p> <p><i>Board Members</i></p>

	<ul style="list-style-type: none"> • Action: Circulate to the Board details of the monthly meetings. • Correspondence received from the Bankstown-Lidcombe Hospital, Medical Staff Council, providing support to staff in relation to the medical gases incident, to which a response will be issued. • Attendance (on 22.9.16) at the 2017/18 Service Agreements - Safety and Quality Measures and Activity Adjustors Workshop. The Workshop suggested an increased orientation towards funding outcomes, rather than activity. 	<p>Secretariat</p> <p>Chairman</p>
7. Committees of the Board		
<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 7 September 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted the following Minute extracts: <ul style="list-style-type: none"> • Item 4.1 – Critical incidents regarding neonatal resuscitaires Previously discussed within the Chief Executive’s Report. • Item 4.2 – Update regarding BirthRate Plus • Item 4.3 – Report regarding recent incidents related to CTG monitoring and actions taken to address the issues • Item 5.1.6 – Clinician attendance at Facility Clinical Council meetings • Item 6.1 – Inquiry under S 122 of the Health Services Act: Off-protocol prescribing of chemotherapy • Ms Larkin reported that the number of outstanding death reviews at Liverpool Hospital was a recent parliamentary matter. Liverpool Hospital has addressed this matter and will appoint additional resources to maintain. 	
<p>7.2 Finance & Assets</p> <p>7.2.1- Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Finance & Assets Committee meeting held on 19 August 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • The Minutes of the Finance & Assets Committee meeting held on 30 August 2016 relating specifically to the financial statements were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon reported that a further extraordinary meeting of the Finance & Assets Committee had been convened, which included the Board Chairman, relating to the draft constitution of the Academic Health Science Partnership (AHSP). 	

	<ul style="list-style-type: none"> Action: Schedule a further meeting, via teleconference about the AHSP draft constitution and invite Prof Harris, Prof Frankum, Prof Merrett, Dr Abi-Hanna, Dr Gray and Mr Gordon. 	Secretariat
7.3 Audit & Risk Mgt 7.3.1- Minutes	<ul style="list-style-type: none"> The Board AGREED to defer the following items to the October 2016 Board meeting: <ul style="list-style-type: none"> Minutes of the Audit & Risk Management Committee meetings held on 19 and 30 August 2016. Proposed revision to the Committee Charter. The Board NOTED the recent unexpected passing of Mr Barrie Martin. (Mr Gordon attended his funeral). 	Secretariat
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 8 August to 12 September 2016. <ul style="list-style-type: none"> No matters were referred to the ICAC. No matters were referred by ICAC. 	
7.4 Research & Teaching	<ul style="list-style-type: none"> The next meeting of the Research & Teaching Committee is scheduled for 13 October 2016. 	
7.5 Aboriginal Health 7.4.1- Minutes	<ul style="list-style-type: none"> Minutes arising from the Aboriginal Health Committee meeting held on 22 September 2016 were not yet available. 	
8. Consumer & Community Council		
8.1- Minutes	<ul style="list-style-type: none"> The Minutes of the Consumer & Community Council (CCC) meeting held on 5 August 2016 were circulated with the Agenda and NOTED by the Board. 	
9. New Business		
9.1 Approval of the 2016/17 Service Agreements between SWSLHD & AHOs	<ul style="list-style-type: none"> The Board APPROVED the 2016/17 Service Level Agreements between SWSLHD and the following Affiliated Health Organisations: <ul style="list-style-type: none"> Benevolent Society (SCARBA) Hammond Health Care (Braeside Hospital) Karitane Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS) Action: The Chairman and Chief Executive to sign the 2016 Services Agreements with AHOs. 	Chairman & Chief Executive

9.2 MDAAC Nomination	<ul style="list-style-type: none"> The Board <u>APPROVED</u> the nomination of Ms Dingwall as the Chief Executive's representative on the Medical & Dental Appointments Advisory Committee (MDAAC). Action: Advise the MDAAC of the Board's decision. 	Secretariat
10. Items for Information		
10.1 Public Relations Report	<ul style="list-style-type: none"> A Referral Note regarding public relations matters for August 2016 was circulated with the Agenda and <u>NOTED</u> by the Board. The September 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. The Board <u>NOTED</u> the meeting and events summary, circulated with the Agenda. Ms Buttenshaw highlighted upcoming events: <ul style="list-style-type: none"> Friday 14 October – Board Planning Workshop Tuesday 18 & Wednesday 19 October – Beyond Research & Innovation Show Case, Liverpool Catholic Club 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 received. 	
12. Close /Next Meeting	<p>The meeting closed at 6.45pm.</p> <p>The next meeting is scheduled for 3.30pm on Monday 24 October 2016 – District Office.</p>	