

MINUTES

South Western Sydney Local Health District Board

Date: Monday 27 February 2017

Time: 3:30pm

Venue: Board Room, District Office

1. Present and Apologies

<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>	<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>
Prof Phillip Harris (Chair)	✓		Mr John Gordon	✓	
Dr David Abi-Hanna	✓		Dr Matthew Gray	✓	
Mrs Nina Berry	✓		Prof Neil Merrett	✓	
Mr Max Bosotti	✓		Ms Kerrie Murphy	✓	
Ms Carolyn Burlew	✓		Mr Gary Reidy	✓	
Ms Christine Carriage	✓		Dr Shameran Slewa-Younan	✓	
Prof Brad Frankum	✓				
<i>Other Attendees</i>					
Ms Amanda Larkin, Chief Executive	✓		Dr Karuna Keat, 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	✓		Ms Sonia Marshall, Director, Nursing & Midwifery Services	✓	
Ms Suzie Snook, A/Director Clinical Governance		✓	Ms Sally Whitten, Risk Governance Manager	✓	

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
Welcome	<ul style="list-style-type: none"> The Chair welcomed members to the first meeting for 2017, and introduced newly appointed Board members: <ul style="list-style-type: none"> Mr Max Bosotti Mr Gary Reidy Introductions were made. 	
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"> <u>MOTION</u>: A motion was moved by Mr Gordon and seconded by Prof Frankum that the Minutes of the Board meeting held on 12 December 2016 be accepted as a true and accurate record. <ul style="list-style-type: none"> The Motion was carried. 	

<p>4. Patient Story</p>	<ul style="list-style-type: none"> • Ms Larkin presented ‘Jack’s’ experience as a stroke patient at Liverpool Hospital. Ms Larkin read Jack’s statement, which provided a summary of his journey covering his initial pick up by an ambulance, emergency department, ward admission and rehabilitation. • ‘Jack’ was very complimentary of staff at each point in his journey, noting in particular their efficiency, cohesion and communication skills. ‘Jack’s’ only negative comment concerned the food. • Ms Marshall provided a summary of the rehabilitation wellness model at Liverpool Hospital, the benefits of which include: <ul style="list-style-type: none"> • Increased patient and carer engagement • Reduced risk of deconditioning patients • Culture change and promotion of wellness • The Board <u>NOTED</u> the patient story. 	
<p><i>Ms Larkin left the meeting at 3:50pm</i></p>		
<p>5. Business Arising</p>		
<p>5.1 Academic Health Science Partnership: [28.11.16; Item 9.2.2]</p>	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda, regarding the draft constitution of the Academic Health Science Partnership. • The Chair provided a summary background of the Partnership, including its membership and current governance arrangements. We are awaiting the outcome of the Partnership’s recent application to the National Health & Medical Research Council (NHMRC) for recognition as an Advanced Health Research Translational Centre. • Mr Gordon highlighted: <ul style="list-style-type: none"> • The Academic Health Science Partnership is now known as the Sydney Partnership for Health, Education, Research & Enterprise (SPHERE) – “Maridulu Budyari Gumat”. • In late 2016 the Board sought and received independent legal advice (Henry Davis York) in relation to the draft constitution of the SPHERE. In particular whether the draft adequately protected the interest of the SWSLHD in respect of reputation, financial and performance indicators to reflect the measure of achievement of objectives. • At the Board’s request, Ms Larkin and Mr Gordon, together with Prof Chow, met in late January 2017 to review the suggested amendments from Henry Davis York and take forward recommended amendments to the draft Constitution. 	

	<ul style="list-style-type: none"> As a result comments were made, detailed within the Referral Note relating to Clauses: 9.1 and 59.3 – special resolution; 23 and 25 – voting right of the chair; 48 – resolution to make rules; 41, 45, 46 and schedule 1 – financial contributions and working capital; no provision – performance indicators. Mr Gordon provided the following clarifications in relation to points raised by Board members: <ul style="list-style-type: none"> Each member needs to define the budget used to calculate their 0.05% contribution [Dr Abi-Hanna]. This will ensure fairness, transparency and the avoidance of a potential cause for future misunderstandings and disputes. The 0.05% contribution (approx. \$800,000) will occur annually, over 5 years under a ‘best endeavour’ type arrangement [Mr Bosotti]. SWSLHD, due to its requirement to provide funding for its contribution from Special Purposes and Trust Funds, cannot commit beyond a 12 month period. It is likely that other organisations will be in a similar position thus a request to amend the draft Constitution to mention a ‘best endeavours’ funding commitment if intent or similar. A special resolution would be required if the decision relates to a matter that is significant by nature or amount [Dr Gray]. The Chair advised that SWSLHD comments regarding the draft constitution have been provided to the Partnership. 	
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Ms Larkin re-joined the meeting at 4:00pm

<p>5.2 Mr T’s Notice [28.11.16: Item 8.3]</p>	<ul style="list-style-type: none"> The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda regarding Mr T’s notice. The Chair provided a summary background of the matter, noting Mr T’s concerns pre-date the establishment of the LHD Board. In late 2016 the Board requested and received independent legal advice (Henry Davis York) in respect of their obligation to respond to Mr T’s notice dated 5 October 2016. In summary the advice suggested that the Board does not need to respond to Mr T if the Board is satisfied that Mr T’s complaints have been adequately investigated in the past and that no new issues have been raised in the his latest correspondence. The Board resolved, in good faith, to provide a copy of Mr T’s notice to the Chief Executive for the provision of an opinion to ensure that no new matters had been raised. 	
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	<ul style="list-style-type: none"> Ms Larkin reported that following her analysis of Mr T’s notice it is difficult to determine and confidently state that no new matters had been raised. The Board <u>RESOLVED</u> not to provide a response to Mr T’s notice of 5 October 2016. 	
6. Standing Items		
<p>6.1 Chief Executive’s Report</p>	<ul style="list-style-type: none"> <u>Starring Item – Cold Chain Breach</u> <p>Ms Larkin provided a background and summary of events relating to the cold chain breaches that occurred at Bankstown-Lidcombe Hospital.</p> <p>On 13 February 2017 the Investigation Team handed down their Report, which was accepted and published on the web. The Report made 11 findings and six recommendations. The Report indicated that the periods of low temperate cycling was almost certainly caused by stock crowding.</p> <p>The NSW Ministry of Health have released a Safety Notice.</p> <p>A Steering Committee, chaired by the District’s Director, Nursing & Midwifery Services, has been established to oversee the implementation of the recommendations, within three months.</p> <p>Ms Marshall reported that the Steering Committee will consider audits, training, nursing practices/processes.</p> <p>The Board suggested that the performance of the back to base alarm should be raised with the manufacturer.</p> <ul style="list-style-type: none"> Action: Request Health Share to seek advice from the manufacturer regarding the back to base alarm function. <u>BHI Report – Patient Perspectives: Experiences of Maternity Care in NSW Public Hospitals</u> <p>The Maternity Care Survey was conducted in 2015 with 425 patients completing the Survey across five hospitals within the District.</p> <p>Bowral & District Hospital leads the way for SWSLHD, achieving above state averages in three categories.</p> <p>The Survey shows that women at Fairfield Hospital have had the least positive experience of maternity care. The Board’s Health Care Quality & Safety Committee is receiving reports regarding implementation of strategies at Fairfield Hospital to improve maternity care.</p>	<p>Ms Marshall</p>

	<ul style="list-style-type: none"> • <u>Transforming Your Experience</u> The Strategy, Leadership Strategy and Implementation Plan were approved in late 2016. A workshop was held in January 2017 to define how we will operationalise the Implementation Plan. The Chair noted that the Strategy aligns well with the state-wide safety and quality strategy. • <u>EQuIP Accreditation</u> All facilities and services (except for Drug Health) are members of the Australian Council on Healthcare Standards (ACHS). Each facility and service undertakes an individual accreditation process. To streamline the process, the LHD negotiated with ACHS to provide a presentation to demonstrate the District level processes. The presentations provided a sound understanding of the District wide approach to accreditation standards that can be applied at facility and service level. The single contract negotiation also resulted in financial savings. • <u>Australia Day Honours</u> Dr Terrance (Terry) Flynn was awarded an OAM for his services to medicine and medical administration. Dr Flynn is currently the Director of Medical Services at Bowral & District Hospital. Prof Hugh Dickson was awarded an OAM for his service to aged care and rehabilitation, and to medical education and administration. Prof Dickson has been a staff member at Liverpool Hospital since 1991 and currently serves as the Director of Ambulatory Care. Prof Dickson also chairs the Medical & Dental Appointments Advisory Committee. Congratulations have been conveyed in writing to Drs Flynn and Dickson. • <u>Senior Staff Recruitment Update</u> Ms Larkin provided an update on recruitment to the following positions: Director Population Health, Manager Planning, Chief Information Officer, Director Clinical Governance and the Director of Operations. • <u>Liverpool Academic Health Precinct</u> The first meeting of the Liverpool Health and Education Steering Committee was held, chaired by Mr David Borger from the Sydney Business Chamber in December 2016. The Steering Committee is an alliance of stakeholders seeking to engage an advisory firm/s to commission an economic and urban planning study of the Liverpool Health and Education Precinct. 	
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	<ul style="list-style-type: none"> • <u>Bowral & District Hospital Redevelopment</u> Provided a brief background of the project to date. Interactive planning workshops with Health Infrastructure, SWSLDH and Ramsay Health have commenced. The workshops are hosted by Health Infrastructure to ensure the consultations and negotiations are aligned with State objectives and ensure that the community have access to quality health services. Community lobbying has occurred against the proposed public private partnership arrangement. A series of community information sessions have occurred, with more planned. Briefings have been held with State and Federal MPs. • <u>Corporate Plan Refresh</u> The <i>SWSLHD Corporate Plan 2013-2017: Directions to Better Health</i> expires this year. The SWSLHD Board and Leadership Planning days were held in late 2016, the results of which will be incorporated in the review process. It is proposed to undertake a planning process to develop a new Corporate Plan for endorsement by the SWSLHD Board before December 2017, with a draft prepared by September 2017. A Steering Committee will be convened to oversight the process. • The Board <u>NOTED</u> the Chief Executive's Report. 	
<i>Ms Whitten joined the meeting at 5.00pm</i>		
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"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • Three new SAC 1 / 2 cases: <ul style="list-style-type: none"> • 2255877-20 – Campbelltown: Unexpected death of a 19 month old female child • 2258804-20 – Campbelltown: A 73 year old male patient found hanging in an inpatient medical ward. • 2275216-20 – Fairfield: 76 year old male client absconded found deceased. • Prof Frankum noted a previous Government commitment to enhance paediatric capacity at Campbelltown. • The Chair highlighted that the District's performance in relation to sentinel events as endorsed by the Australian Health Ministers in 2002 is also considered by the Board's Health Care Quality & Safety Committee. 	

	<ul style="list-style-type: none"> In relation to the unmet target for 'Hospital Acquired Pressure Injuries', Ms Marshall reported that a related project undertaken at Liverpool Hospital (Joanna Briggs Institute) is being rolled out to other facilities. The Board <u>NOTED</u> the Safety & Quality component of the KPI Report. 	
6.2.2 – Service Access & Patient Flow	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> <u>Emergency Treatment Performance</u> YTD January 2017 was 67.6% did not meet the 73.5% target. A range of strategies are being implemented to improve performance. <p>The Chair clarified the '4 hour rule' for the newly appointed Board members.</p> <u>Transfer of Care Performance</u> For the month of January 2017 the District's performance at 88.01% has slightly decreased in comparison to the same period last year (88.20%). All facilities achieved the 90% target except Liverpool (82.47%) and Campbelltown (86.71%). <u>Surgery</u> As at 31 January 2017 the District achieved, in comparison to the zero target for all categories: <ul style="list-style-type: none"> 0 – overdue clinical priority category 1 patients 6 – overdue clinical category priority 2 patients 25 – overdue clinical category priority 3 patients <p>An overview of the key strategies to support surgery performance at Bankstown-Lidcombe Hospital was noted.</p> 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"> Ms Dingwall highlighted: <ul style="list-style-type: none"> <u>Recruitment Improvement</u> <p>As at December 2016 the average time taken from request to recruit to decision to approve, decline, defer recruitment is 9 days; a significant improvement on the same time last year where the average time taken was 19 days. The target is 10 days. Related delegation of authority is considered appropriate.</p> 	

	<ul style="list-style-type: none"> • <u>Work Health & Safety Audits</u> <p>As part of the safety management system review process, WHS Audits commenced in January 2017. The aim of the audits is to identify the existence and assess the quality of WHS programs. Wherever possible audit teams involve an independent member.</p> <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"> • Mr Sinclair highlighted: <ul style="list-style-type: none"> • <u>Finance</u> <ul style="list-style-type: none"> • Performance to budget YTD January 2017 was unfavourable (1.8M). • Expenditure was favourable for the month by \$0.1M, but unfavourable YTD by \$1.9M. • Own source revenue was unfavourable for the month, but favourable YTD January. Own source revenue performance is improved over last year, key drivers are improved private patient strategy and improved single room fees. • Overall the Net Cost of Service (NCoS) unfavourability YTD September was \$1.8M. • Year end actuals are forecast to meet budget. • Small creditor performance in January was 99%. • <u>Activity</u> <p>At the time of reporting the most current available data expressed in National Weighted Activity Units (NWAU) is for YTD December. The activity results indicate that SWSLHD is at 99.7% of the YTD target.</p> • 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 • The Reports were taken as read with questions and / or commentary invited: 	

	<ul style="list-style-type: none"> • <u>Drug Health</u> General Manager, Tonina Harvey has returned from extended sick leave. Ms Kelly Walker has been thanked for acting in the position during this period. • <u>Oral Health</u> There is a high demand for episodic acute care appointments with great pressure meeting Code 3A and 3B benchmarks. Additional chairs, available due to renovations at community oral health clinics, comment of a new dental officer at Yagoona should support improved service delivery. • <u>Mental Health</u> Prof Frankum noted the stated medical staffing risk arising from a number of vacancies is a real issue. Dr Keat reported that Length of Stay is also increasing as a result. • The Board <u>NOTED</u> the Service Reports. 	
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Ms Marshall & Ms Dingwall left at 5:36pm.

<p>6.3 Risk Management Report</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the SWSLHD Enterprise Risk Management Framework proposal, as circulated with the Agenda. • Ms Whitten highlighted: <ul style="list-style-type: none"> • The proposed arrangements build on discussion at the 2016 Board Planning Day and have been reviewed by Mr Gordon and Ms Burlew. • The proposed reporting schedule: <ul style="list-style-type: none"> ○ Monthly <ul style="list-style-type: none"> ▪ new high and extreme LHD operational risks (reported within the CE's Report) ▪ risks referred to the Board from Board committees. All LHD risks are allocated a Board Committee for review and oversight. ○ Quarterly <ul style="list-style-type: none"> ▪ Summary of all existing Board reported risks plus components not covered from the WHS & Due Diligence Report. ○ The Quarterly Board Risk Report will continue to include summary information relation to the LHD Risk Register, including: 	
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	<ul style="list-style-type: none"> ○ New extreme and high LHD risks entered during the reporting period ○ LHD Risk Heat Map ○ Summary table of all LHD risks by risk rating and Corporate Area of Action. <ul style="list-style-type: none"> ● The Board <u>APPROVED</u> the proposed framework for risk reporting to the Board. ● Action: Update the Board’s Items Due Calendar accordingly. 	Ms Buttenshaw
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Ms Whitten left at 5:42pm.

<p>6.5 Chairman’s Report</p>	<ul style="list-style-type: none"> ● The Chairman reported: <ul style="list-style-type: none"> ● <u>Correspondence Received</u> The former Health Minister wrote in late November 2016 regarding the <i>Health Legislation Amendment Act 2016</i>, which passed parliament on 21 September 2016. <p>A number of amendments have been made to the <i>Health Services Act 1997</i> to enhance the alignment of governance arrangements and to simplify the process for making By-Laws.</p> <p>Amendments relating to the governance provisions for LHD Boards change the relationship between the Board and the Chief Executive. Further clarification is required regarding ‘...Boards of LHDs will be responsible for appointing the Chief Executive, with the concurrence of the Secretary of NSW Health...’</p> <p>Action: Clarify the deciding party in relation to appointment of a chief executive.</p> <p>Provisions relating to the by-laws have been amended. Under the changes a LHD can: adopt the model by-laws, as made by the Secretary, Modify the model by-laws with approval – as is currently the case or make additional by-laws in relation to matters not specified in the model by-laws provided that the additional by-laws are not inconsistent with the model by-laws. If such additional by-laws are made, the Secretary must be notified within 30 days.</p> ● <u>Correspondence Received</u> The Chief Executive, Health Education & Training Institute (HETI) wrote in early February 2017 offering to present to the Board and update on HETIs structure and programs of work. 	Ms Buttenshaw
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	<p>The Board <u>AGREED</u> to refer the offer to the SWSLHD Research & Teaching Committee.</p> <p>The Board <u>RESOLVED</u> to invite the Secretary, NSW Health to attend a Board meeting in 2017.</p> <p>Actions:</p> <ul style="list-style-type: none"> • Refer correspondence received from the HETI Chief Executive to the SWSLHD Research & Teaching Committee for consideration. • Invite the Secretary, NSW Health to attend a Board meeting. • <u>April 2017 Board Planning Workshop</u> The Board <u>NOTED</u> arrangements for the Planning Day: <ul style="list-style-type: none"> • Monday 8 May 2017 • 8.30am to 1.00pm • Ngarra Education Centre, Liverpool Hospital Eastern Campus • Facilitator – Ms Leanne Wallace, NOUS Group <p>The Board <u>APPROVED</u> the following topics for discussion:</p> <ul style="list-style-type: none"> • Risk Management • Stakeholder Engagement • Board Positions – In-camera session • <u>Annual Governance Check</u> The Board undertook the annual Governance Check, as follows: <ul style="list-style-type: none"> • <i>Review - Board Charter</i> <p>An update of the Charter is required to:</p> <ul style="list-style-type: none"> ▪ reflect recent amendments to legislation – in relation to the appointment of the Chief Executive. ▪ update the name of the Finance & Assets Committee ▪ include the Audit & Risk Management Committee’s recommended statement regarding risk <p>Action: Publish the updated Board Charter on Govdex.</p> <ul style="list-style-type: none"> • <i>Current Resource Library – Govdex</i> <p>The documents currently listed were confirmed as contemporary and appropriate.</p>	<p>Ms Buttenshaw</p> <p>Ms Buttenshaw</p>
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	<ul style="list-style-type: none"> • <i>Board Committee Membership</i> <p>Members confirmed their membership to current Board Committees.</p> <p>Mr Reidy has agreed to attend the SWSLHD Consumer & Clinical Council and Mr Bosotti has agreed to attend the SWSLHD Research & Teaching Committee.</p> <p>Actions:</p> <ul style="list-style-type: none"> • Update the Board Committee Membership Schedule on Govdex. • Coordinate new Board member attendance to nominated committees. 	Ms Buttenshaw
<i>Ms Larkin, Mr Sinclair, Dr Keat & Ms Buttenshaw left the meeting at 6.01pm</i>		
<p>6.5 In-camera Session</p>	<ul style="list-style-type: none"> • An in-camera session was held. 	
<i>Ms Larkin, Mr Sinclair, Dr Keat & Ms Buttenshaw re-joined the meeting at 6.20pm</i>		
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 December 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted: <ul style="list-style-type: none"> • <u>Item 4.2 – Governance matters: Fairfield Hospital</u> Arising from a number of SAC 1 incidents in maternity. • <u>Item 5.1.4 – ANZIC Report: ICU Performance</u> All ICUs within funnel plot. • The Minutes of the Health Care Quality & Safety Committee meeting held on 1 February 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted: <ul style="list-style-type: none"> • <u>Item 8 – Cold Chain Breach: Bankstown-Lidcombe Hospital</u> Discussed in detail within the Chief Executive’s Report, earlier in the Board meeting. 	
<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 16 December 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon clarified Item 5.2.2 – Maintenance Activity Report; specifically the reduction in outstanding BEIMs requests from 987 in August 2016 to 98 in December 2016 was due to a data clean up - duplicate requests, etc. 	

<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 22 November 2016 were circulated with the Agenda and <u>NOTED</u> by the Board. Ms Burlew highlighted: <ul style="list-style-type: none"> KPMG has been contracted to undertake the 2017/18 audit. The Audit Office of NSW representative, Mr Bola Oyetunji will continue to attend Committee meetings. Item 7.7.2 – Finalised Audits (Campbelltown Vascular Surgery Service) <p>Prof Frankum reported that the internal clinical infrastructure (including surgical sub-specialties) at Campbelltown Hospital is not developing in alignment with service development requirements to meet increasing demand.</p> <p>Ms Larkin advised that both Campbelltown and Liverpool Hospitals are currently undertaking a refresh of their clinical services plans.</p>	
<p>7.3.2- ICAC Matters</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 29 November 2016 to 16 February 2017. <ul style="list-style-type: none"> One matter was referred to the ICAC – (a staff member altered his medical certificate which was used to support a period of sick leave absence). No matters were referred by the ICAC. 	
<p>7.4 Research & Teaching</p>	<ul style="list-style-type: none"> The Minutes of the Research & Teaching Committee meeting held on 2 February 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. Prof Frankum highlighted: <ul style="list-style-type: none"> <u>Item 4.1b – Suicide of a BPT</u> Was the catalyst for discussion about support for junior doctors, particularly at Fairfield Hospital. <p>The Chief Executive has met with the UNSW Clinical Dean, Hospital General Manager, Director Medical Services regarding the broader issues.</p> <ul style="list-style-type: none"> <u>Item 5.1 – SPHERE</u> Discussed in detail within the Chief Executive’s Report, earlier in the Board meeting. 	

<p>7.5 Aboriginal Health</p> <p>8.5.1- Minutes</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> that the next meeting of the Aboriginal Health Committee is scheduled for 15 December 2016. Ms Carriage highlighted: <ul style="list-style-type: none"> <u>Item 5.5 – Aboriginal Transfer of Care Project</u> The project commenced in Feb 2016 delivers intensive case management, person centred care coordination and multidisciplinary follow up of Aboriginal people who are preparing for transfer of care from either Campbelltown or Camden Hospitals to a community based health care provider or Aboriginal medical service. The model targets Aboriginal patients with a chronic disease. <p>To evaluate the impact of the model on patient outcomes and determine the scope for application in other settings a Translation Research Grant application has been submitted by the SWSLJHD.</p> <u>Item 6.1 – Aboriginal Health Plan</u> The Board provided in principle support for the Plan, however require reconciliation between the series of stretch targets stated within the Referral Note against those stated with the Plan. <p>Action: Reconcile the stretch targets within the Plan.</p>	<p>Chief Executive's Unit</p>
<p>8. Consumer & Community Council</p>		
<p>8.1- Minutes</p>	<ul style="list-style-type: none"> The Minutes of the Consumer & Community Council (CCC) meeting held on 9 December 2016 and 3 February 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. Ms Murphy noted the absence of District Executive representation at meetings influences communication about issues. Action: Discuss further with Ms Murphy and arrange an Executive member to routinely attend Council meetings. 	<p>Ms Larkin</p>
<p>9. New Business</p>		
<p>9.1</p>	<ul style="list-style-type: none"> Nil items. 	
<p>10. Items for Information</p>		
<p>10.1 Board Schedules/ Dates</p>	<ul style="list-style-type: none"> The Board Calendar is available from the Govdex website. The 2017 Board meeting & events summary has been published on Govdex. 	

11. Other Business Without Notice		
	<ul style="list-style-type: none"> • The Chair invited other business without notice. • Nil items received. 	
12. Close /Next Meeting	<p>The meeting closed at 7.02pm.</p> <p>The next meeting is scheduled for Monday 27 March 2017 at Bankstown-Lidcombe Hospital:</p> <p>2:30 – 3:30pm Site Visit 3:30 – 6:30pm Board Meeting – District Office</p>	

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