

MINUTES

South Western Sydney Local Health District Board

Date: Monday 22 May 2017

Time: 3:30pm

Venue: Seminar Rooms 5 & 6, T & R Moore Education Centre, Liverpool Hospital

1. Present and Apologies

Members	Pres.	Apol.	Members	Pres.	Apol.
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	✓				
Other Attendees					
Ms Amanda Larkin, Chief Executive	✓		Dr Anthony Frankel, Medical Staff Executive Council Representative	✓	
Ms Nel Buttenshaw, Manager Executive & Board Secretariat (minutes)	✓		Mr Ross Sinclair, Director of Finance	✓	
Ms Glenda Dingwall, Director Workforce & Development	✓		Ms Sonia Marshall, Director Nursing & Midwifery Service	✓	
Ms Simone Proft, Manager Planning	✓		Ms Marjorie Wong, CNC, Primary & Community Health	✓	
Ms Suzie Snook, A/Director, Clinical Governance		✓			

Agenda Item	Discussion/Decision/Recommendation	Responsible
In-camera Session	<ul style="list-style-type: none"> The Board agreed to establish a nominations committee to, when appropriate, consider matters including: <ul style="list-style-type: none"> The appointment of a chief executive Succession planning for the chief executive Annual performance review of the chief executive Succession planning for the Board In relation to Committee membership it was agreed to issue an expression of interest to Board members, including clarification regarding the eligibility of LHD employees. The Board agreed to request draft related Terms of Reference for consideration. 	<p>Secretariat / Chair</p> <p>Secretariat / Chair</p>

Ms Larkin, Ms Buttenshaw, Mr Sinclair, Ms Dingwall, Ms Marshall, Ms Wong & Dr Frankel joined the meeting at 3.45pm

<p>2. Declaration of Interests</p>	<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"> MOTION: A motion was moved by Mr Gordon and seconded by Ms Burlew that the Minutes of the Board meeting held on 24 April 2017 be accepted as a true and accurate record, subject to the following amendment: <ul style="list-style-type: none"> Item 7.2 – The report to the Board regarding the March Finance & Assets Committee meeting was made by Ms Burlew, not Mr Gordon as stated. Mr Gordon was an apology to the meeting. The Motion was carried. MOTION: A motion was moved by Mr Gordon and seconded by Ms Burlew that the Report of the Board Planning Workshop held on 8 May 2017 be accepted as a true and accurate record of proceedings. <ul style="list-style-type: none"> The Motion was carried. Action: Update the Board’s Action List to reflect requirements arising from the Planning Workshop. Action: Circulate to the Chair and Mr Gordon minutes published for other LHD Board meetings. 	<p>Secretariat</p> <p>Secretariat</p>
<p>4. Patient Story</p>	<ul style="list-style-type: none"> The Chair introduced Ms Marjorie Wong, Wound Care Clinical Nurse Consultant, Primary & Community Health to present – ‘The new wound model of care in Primary & Community Health’, noting her presentation of the initiative at the recent Nursing Show Case. Ms Wong highlighted: <p><u>Background</u></p> <ul style="list-style-type: none"> Initiative arose from the 2014 Community Health Review. Large portion of wound care patients are treated in the community The Community Wound Assessment Team, ‘ComWAT’ was established in July 2015 <p><u>Aim of the Model</u></p> <ul style="list-style-type: none"> Assist and foster integrated care planning for clients Promote patient self-management practices Encourage collaborative integrated care pathways between 	

acute, community, primary care and other external providers

- Assists in a multidisciplinary approach involving the clients clinical governance in the community health setting
- To promote capacity in our service for patients being discharged from acute facilities a lot sooner

The Model Flowchart

- New referrals are triaged by NUMs to either ComWAT or Community Nursing

Community Health Nursing Team

- Short term service – up to 12 wks
- Triage of all new wound care referrals
- E-orders
- Weekly case reviews
- Education of CHNs
- Support

GPs and Practice Nurses

- Consultative service
- Assist in preventing hospital admissions
- Education
- Transitioned patients from community nursing
- Stock

Residential Aged Care Facilities

- Consultative service
- Assist in preventing hospital admissions
- Link patients with Hospital in the Home Team
- Communicates and works collaboratively with multi-disciplinary teams, i.e. Geriatric Outreach Service

Hurdles

- Clinics at capacity
- Change management
- Different demographics in SWSLHD

Case Studies

- 1 x 82 year old male
- 1 x 46 year old male
- Outcomes – improved patient outcomes and significant cost savings
- The Chair invited comment / discussion on the presentation:
 - Excellent model / initiative – providing a specialist approach to wound care

	<ul style="list-style-type: none"> • Integration with general practice is working well; education sessions are being hosted in collaboration with the SWS Primary Health Network • Clinical governance includes opportunity for escalation to a Nurse Practitioner or patient's GP • Currently exploring a brokerage service for patients that can be transitioned to general practice (i.e. barriers - transport, age, bed bound, etc.) • Awards and events such as the Nursing Show Case provide Board members with the opportunity to hear more about initiatives and the excellent work being done across the District. • Action: Discuss using the 'patient story' section of the Board meeting agenda with a view to also receive presentations such as that regarding the ComWAT. • On behalf of the Board, the Chair thanked Ms Wong for her time and effort and the excellent presentation. • The Board NOTED the patient story. 	Chief Executive / Chair
<i>Ms Wong left and Ms Proft joined the meeting at 4.20pm</i>		
5. Business Arising		
5.1 Role of Camden Hospital Emergency Department <small>[27.03.17; Item 7.1]</small>	<ul style="list-style-type: none"> • The SWSLHD Board NOTED the Referral Note, circulated with the Agenda. • Ms Proft highlighted that the Discussion Paper was authored in collaboration with the General Manager and Director of Emergency, Campbelltown & Camden Hospitals. • Action: Clarify the staffing enhancement referred to in Strategy One – interim option. • Ms Larkin provided the background to the current service model arrangement (Ambulance by-pass). • Prof Frankum highlighted current arrangements. • In line with the Clinical Services Plan, the Board to progress Strategy 2 – Future Directions. 	General Manager, Campbelltown & Camden Hospitals Manager Planning / Chief Executive
5.2 Clinical Service Plan: Campbelltown	<ul style="list-style-type: none"> • The SWSLHD Board NOTED the Referral Note, circulated with the Agenda. 	

<p>n Hospital [24.07.17; Item 6.1.1]</p>	<ul style="list-style-type: none"> Ms Proft highlighted that in late 2016 the NSW MoH requested a revised, abridged, Clinical Services Plan for Macarthur – extending the time frame to 2031. The revised Plan will inform the Stage 2 redevelopment of Campbelltown Hospital. The Board <u>ENDORSED</u> the Abridged Clinical Services Plan for Macarthur 2031 for submission to the NSW MoH. 	<p>Manager, Planning</p>
<p><i>Ms Proft left the meeting at 4.55pm</i></p>		
<p>5.3 Executive Clinical Director, Fairfield Hospital [28.11.16; Item 9.1.1]</p>	<ul style="list-style-type: none"> Ms Larkin advised that due to a medical staffing matter the position is currently unfilled. Upon resolution of the matter an expression of interest will be issued. In the interim advice is being sought via the Hospital's Director Medical Service. 	<p>General Manager, Fairfield Hospital</p>
<p>5.4 Privacy of Medical Correspondence [24.04.17; Item 11]</p>	<ul style="list-style-type: none"> The SWSLHD Board <u>NOTED</u> the Referral Note, circulated with the Agenda. Mr Sinclair highlighted that the: <ul style="list-style-type: none"> LHD intends to review existing agreements and the use of transcriptions services. The Enterprise-wide Risk Management Committee will explore expanding Risk ID 50 which currently centres on corporate records to include clinical records. Mr Sinclair took on notice suggestions about moving to a digital environment for these record types. 	<p>Director of Finance</p> <p>Risk Governance Manager via Secretariat</p>
<p>6. Standing Items</p>		
<p>6.1 Chief Executive's Report</p>		
<p>6.1.1 - Significant Issues</p>	<ul style="list-style-type: none"> Ms Larkin provided a summary of significant issues including: <ul style="list-style-type: none"> Duress Alarms <p>The mandatory requirements for all staff working in emergency departments to have and wear personal duress alarms. Follow up audits will be undertaken to ensure compliance with policy.</p> Mortuary Management <p>A working party has been established to develop a Mortuary Management policy for the District, which will be submitted to the SWSLHD Clinical & Quality Council in June</p>	

	<p>2017 for endorsement.</p> <ul style="list-style-type: none"> • ICAC Public Hearing – Immigrant Women’s Health Service <p>The ICAC advised that the matter would proceed to public inquiry. LHD staff have been called as witnesses. The LHD has applied appropriate due diligence to the management of NGOs. An overview of the immediate management / responses was provided.</p> <ul style="list-style-type: none"> • Senior Staff Recruitment: Update <p>A preferred applicant for the Director of Operations position has been offered the position. The preferred applicant has advised an early July start date.</p> <p>Applications for the Director, Clinical Governance position close on 26 May 2017, with the formal recruitment process to occur during June.</p> <p>Derwent Executive has been engaged in relation to the General Manager, Bankstown-Lidcombe Hospital position.</p> <p>Ms Larkin commended the Executive Leadership Team for their support during this period.</p> <ul style="list-style-type: none"> • Bowral & District Hospital Redevelopment: Update <p>Following a recent update to the Board’s Finance & Asset Committee a note will be submitted to the Expenditure Review Committee recommending progression of the partnership.</p>	
6.1.2 - Regulatory Environment	<ul style="list-style-type: none"> • The Board <u>NOTED</u> that the next update regarding the Regulatory Environment would be provided to the June 2017 meeting. 	
6.1.3 - Risk Management	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Risk Management section of the Report, as circulated with the Agenda. • Ms Larkin highlighted a new risk added to the Register ‘Management of Refrigerated Medications’, which relates to the cold chain breach incident. 	

6.1.4 - KPI Report	<ul style="list-style-type: none"> The KPI Report was circulated with the Agenda. 	
Safety & Quality	<ul style="list-style-type: none"> The Chair drew members attention to: <ul style="list-style-type: none"> The six new incidents since the last report, which will undergo a RCA. The five RCA reports completed since the last report. The term and context of 'high risk foot clinic' was clarified. In relation to 'Australian Sentinel Events', previous actions were noted as follows, remain on the action list: <ul style="list-style-type: none"> insert a nil or zero, rather than a blank space Clarify years – financial or calendar Data availability from January 2017 Action: Consider an LHD target, if a MoH target doesn't apply for the KPIs within the Dashboard. The Board NOTED the Safety & Quality component of the KPI Report. 	<p>A/Director, Clinical Governance</p> <p>A/Director, Clinical Governance</p>
Service Access & Patient Flow	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> The impact of strategies reported to improve ETP will be included in the June report. An increase of ambulance attendances to Fairfield Hospital has been seen. Prof Merrett noted Bankstown-Lidcombe Hospital's successful ETP, despite approximately 56,000 ED presentations annually. All facilities achieved the 90% Transfer of Care target for the month of April 2017. The District is forecast to meet elective surgery targets as at 30 June 2017. Strategies to support this performance include extra operating theatre lists at Liverpool Hospital and the use of private hospitals. The Board NOTED the Service Access & Patient Flow component of the KPI Report. 	<p>A/Director of Operations</p>
People & Culture	<ul style="list-style-type: none"> Ms Dingwall highlighted: <ul style="list-style-type: none"> A draft Workforce Safety and Wellbeing Strategy to 2020 will be submitted to the June Workforce Committee meeting for endorsement. During April 2017 the District met with our insurers. An 	

	<p>improvement plan has been developed to encourage a stronger focus on our 'return to work' approach.</p> <ul style="list-style-type: none"> • Leave liability was discussed at the May Finance & Assets Committee meeting. • The Board NOTED the People & Culture component of the KPI Report. 	
Finance & Activity	<ul style="list-style-type: none"> • Mr Sinclair highlighted: <ul style="list-style-type: none"> • The District is favourable to budget YTD April. • Revenue performance remains strong year on year. • Small creditor payment performance in April achieved the 100% target. • YTD March 2017 results indicate that the District is at 99.7% of its activity YTD target. • The Board NOTED the Finance & Activity component of the KPI Report. 	
Service Reports	<ul style="list-style-type: none"> • Service Reports for the following services were circulated with the Agenda. The Reports were taken as read with questions and / or commentary invited: <ul style="list-style-type: none"> • Mental Health • Drug Health • Population Health • Primary & Community Health • Oral Health • Ms Larkin highlighted in relation to mental health: <ul style="list-style-type: none"> • Medical staffing remains a significant issue. <ul style="list-style-type: none"> ○ A VMO model is being progressed. ○ An invitation to the Chief Psychiatrist, NSW MoH will be extended to visit SWSLHD to discuss the situation. ○ Discussions with the private hospitals Clinical Director about a medical staffing model have commenced. • Ms Larkin commended Dr Jones' service to mental health and the SWSLHD. 	
<i>Ms Carriage left the meeting at 5.30pm</i>		
	<ul style="list-style-type: none"> • Ms Dingwall highlighted the recruitment campaign efforts 	

	<p>relating to mental health.</p> <ul style="list-style-type: none"> Ms Larkin reported a recent visit to Gna Ka Lun by Minister Davies. The Board NOTED the Service Reports. 	
6.1.5 - Media & Marketing	<ul style="list-style-type: none"> The Board NOTED the Media & Marketing Report. 	
<i>Ms Dingwall left the meeting at 5.43pm</i>		
6.2 Chairman's Report		
6.2.1 – Correspondence received	<ul style="list-style-type: none"> The Chairman reported correspondence received during the month pursuant to practice. Copies of the correspondence and related responses were circulated with the Agenda. <ul style="list-style-type: none"> Complaint from a son regarding the treatment and care his father received whilst an inpatient at Liverpool Hospital. <ul style="list-style-type: none"> Ms Larkin provided an overview of the case, including contact with the complainant and his father and the current status of the investigation. Ms Marshall reported the related HR process. The Board requested that, following further contact with the complainant scheduled for 23 May 2017, the Chairman make contact with the complainant to indicate their serious consideration of the matters raised, which were considered unacceptable. Action: Provide feedback to the June Board meeting of the contact with the complainant. Complaint from parents of an adult male receiving mental health treatment. <ul style="list-style-type: none"> The Chief Executive and senior staff of the service met with the parents and son. An action plan has been agreed and a further meeting planned. One of the issues raised related to the use of seclusion rooms. Ms Murphy provided an overview regarding seclusion rooms. Ms Larkin noted that a policy compliance audit relating to the use of seclusion rooms is underway. The Board noted that the rates and numbers of seclusions are monitored by the Health Care Quality & Safety Committee. It was suggested that staff are asked 'what' is needed to move toward a 'no seclusion' environment, noting 	Chair

	<p>that staff safety and patient outcomes must be balanced. Ms Murphy highlighted a number of factors that contribute to a no seclusion environment, i.e. staff skill levels, space, acuity of patients.</p> <ul style="list-style-type: none"> ▪ A Board tour of Waratah House or Banks House was suggested. ▪ Action: Provide a further report to the June Board meeting (including monthly audit reporting to the Health Care Quality & Safety Committee and seeking advice about the requirements to reduce use of seclusion rooms).. 	Chief Executive
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Ms Marshall left the meeting at 6.32pm

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 3 May 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted: <ul style="list-style-type: none"> Item 5.1.4 – SWSLHD Crude Death Rate Item 5.1.5 – SWSLHD Risk Register Item 5.2.2 – Insight Series: 30 Day Mortality, BHI Report 	
<p>7.2 Finance & Assets</p> <p>7.2.1- Minutes</p> <p>7.2.2- Asset Strategic Plan [27.3.17; Item 7.1]</p> <p>7.2.3- Asset Strategic Plan</p>	<ul style="list-style-type: none"> • The Minutes of the Finance & Assets Committee meeting held on 17 March 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. • The Board <u>NOTED</u> the Referral Note circulated with the Agenda describing the process of developing the Asset Strategic Plan and its linkage with State priorities and clinical service plans. • Following an overview by Ms Larkin, the Board <u>APPROVED</u> the Top 5 priority capital projects, the detail of which was circulated with the Agenda, for submission to the NSW Ministry of Health as follows: <ul style="list-style-type: none"> • Priority 1 – Campbelltown Hospital Stage 2, Phase 1, Enhanced Paediatric Services and Research Centre • Priority 2 – Liverpool Hospital Health & Education Precinct • Priority 3 – Bowral & District Hospital Stage 2 Redevelopment • Priority 4 – Bankstown-Lidcombe Hospital Redevelopment 	Director, Capital Works and Infrastructure

		<ul style="list-style-type: none"> Supporting Growth in SWS Priority Growth Areas 	
7.3 Audit & Risk Mgt 9.3.1- Minutes	<ul style="list-style-type: none"> The Minutes of the Audit & Risk Management Committee meeting held on 13 April 2017 were circulated with the Agenda and NOTED by the Board. Ms Burlew highlighted that the meeting focussed on the early close of the financial accounts. 		
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 10 April to 9 May 2017. Ms Larkin highlighted: <ul style="list-style-type: none"> No matters were referred to the ICAC No matters were referred by the ICAC. The current ICAC public inquiry into allegations concerning the former CEO of the Immigrant Women’s Health Service was previously discussed in the Chief Executive’s Report, earlier in the meeting. 		
7.4 Research & Teaching 7.4.1- Minutes	<ul style="list-style-type: none"> The Board NOTED that the next meeting of the Research & Teaching Committee is scheduled for 1 June 2017. 		
7.5 Aboriginal Health 7.5.1- Minutes	<ul style="list-style-type: none"> The Board NOTED that the next meeting of the Aboriginal Health Committee is scheduled for 22 June 2017. 		
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 May 2017 were circulated with the Agenda and NOTED by the Board. Mr Reidy highlighted: <ul style="list-style-type: none"> The Council appreciated the attendance of the District Director of Nursing & Midwifery Services who was able to answer questions / address issues. Many of the issues raised to the Council reflect the <i>Transforming Your Experience</i> objectives. 		

9. New Business		
9.1		<ul style="list-style-type: none"> • Nil items.
10. Items for Information		
10.1	Board Schedules/ Dates	<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. • The Chair highlighted the LHD & Specialty Network Conference being held on Monday 19 June 2017.
10.2	Federal 2017/18 Budget	<ul style="list-style-type: none"> • The Board <u>NOTED</u>, as circulated with the Agenda: <ul style="list-style-type: none"> • Summary provided by the Western Sydney Leadership Dialogue. • Summaries released by the Secretary, NSW MoH.
11. Other Business Without Notice		
		<ul style="list-style-type: none"> • The Chair invited other business without notice. • Nil items were received.
12.	Close /Next Meeting	<p>The meeting closed 6.50pm.</p> <p>The next meeting is scheduled for Monday 26 June 2017 – District Office (3.30pm-6.30pm).</p>