

MINUTES

South Western Sydney Local Health District Board

Date: Monday 28 August 2017

Time: 3:30pm

Venue: Drug Health

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 (Teleconference)	✓		Mr Gary Reidy		✓
Ms Christine Carriage		✓	Dr Shameran Slewa-Younan	✓	
Prof Brad Frankum	✓				
Other Attendees					
Ms Amanda Larkin, Chief Executive	✓		Dr Karuna Keat, Medical Staff Executive Council Representative	✓	
Ms Clair Ramsden, Director Operations	✓		Ms Nel Buttenshaw, Manager Executive & Board Secretariat	✓	

Agenda Item	Discussion/Decision/Recommendation	Responsible
In-camera Session	<ul style="list-style-type: none"> The Board held an in-camera session to discuss the annual performance review of the Chief Executive. The clinician members withdrew prior to the Board's deliberations. 	
<i>Ms Larkin, Ms Buttenshaw, Ms Ramsden & Mr Sinclair joined and Prof Frankum & Dr Abi-Hanna re-joined the meeting at 4.07pm</i>		
	<ul style="list-style-type: none"> The Board NOTED the Referral Note from the Nominations Committee regarding the time-line and process for the Chief Executive's annual performance review. The Board NOTED that the notice of meeting for the Nominations Committee to be held on 6 September 2017, by teleconference had been issued. 	
2. Declaration of Interests	<ul style="list-style-type: none"> The Chair invited declarations of interest. Nil were received. 	

<p>3. Confirmation of the previous minutes and action list</p>	<ul style="list-style-type: none"> • <u>MOTION</u>: A motion was moved by Mrs Berry and seconded by Dr Gray that the Minutes of the Board meeting held on 24 July 2017 be accepted as a true and accurate record. • The Motion was carried. 	
<p>4. Patient Story</p>	<ul style="list-style-type: none"> • The Board viewed a video about robotic surgery, launched at Liverpool Hospital in April 2017. • The video highlighted that in an Australian first, Liverpool Hospital took an extra step towards robotic surgery with a Robot Simulation Training Mimic System and a Dual Console da Vinci Xi Clinical Robot. Up until now, doctors wanting to learn robotic surgery have had to travel to the United States of America, South Korea or China. • <u>Patient Story</u> Ms Ramsden reported a compliment received from a parent whose son was treated at Campbelltown Hospital's Emergency Department. The compliment was shared District-wide with staff by way of email as an example of Transforming Your Experience – "staff stopped to listen, and provided personalised, individual care". • The Board <u>NOTED</u> the patient story and the video. 	
<p>5. Business Arising</p>		
<p>5.1 eMR 2 Implementation [24.07.17: Item 8.1.1]</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note regarding the implementation plan for the Electronic Medical Record Project (eMR2), as circulated with the Agenda. 	
<p>5.2 Flu Vaccination Rates [24.07.17: Item 8.1.5]</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note regarding the staff vaccination rates across SWSLHD, as circulated with the Agenda. • Ms Larkin clarified: <ul style="list-style-type: none"> • Staff vaccinations are not mandatory. • The difficulty with correlating vaccination rates to sick leave rates due to the flu strains experienced this year. 	

<p>5.3 Excessive Leave – Clinical Staff [24.07.17: Item 8.1.5]</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note regarding clinical staff with excessive leave, as circulated with the Agenda. 	
<p>5.4 Clarify Requirement – Seclusion Report [24.07.17: Item 8.1.5]</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note, clarifying the requirement arising from the May meeting regarding mental health seclusion and restraint , as circulated with the Agenda. Ms Larkin highlighted: <ul style="list-style-type: none"> The Action Plan being implemented by Mental Health relates to the policy compliance audit undertaken. As per the action arising from the May Board meeting, a report, about the requirements to reduce seclusion episodes, will be resubmitted to the Board. 	
<p>5.5 Role of Camden Hospitals Emergency Department [26.06.17: Item 6.1]</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note, detailing the proposed staffing enhancement for Camden Hospitals Emergency Department in Stage 2 enhancements, as circulated with the Agenda. Ms Larkin confirmed that Stage One enhancements relate to Campbelltown Hospital, to meet demand. 	
<p>5.6 Privacy Arrangements – Safety Action Meeting [26.06.17: Item 6.3]</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note confirming that the record types considered at the Safety Action Meetings include clients considered ‘at risk’, as circulated with the Agenda. 	
<p>5.7 Outstanding BEIMS requests [24.04.17: Item 7.2]</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note, regarding outstanding BEIMs requests, as circulated with the Agenda. Mr Sinclair summarised the definition of statutory maintenance as to meet the requirements of building codes and standards. A presentation to the Finance & Assets Committee on this matter has occurred in the interim. 	

<p>6. Standing Items</p> <p>6.1. Chief Executive's Report</p>		
<p>6.1.1 – Current Significant Matters</p>	<ul style="list-style-type: none"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • The NSW MoH have commissioned Ernst & Young to undertake an external review relating to the implementation of recommendations arising from the Root Cause Analysis and Chief Health Officer's Report relating to the medical gases incident at Bankstown-Lidcombe Hospital. SWSLHD is participating in weekly meetings to discuss progress and any issues. • To enhance monitoring and reporting of safety and quality indicators a Framework has been developed by the NSW MoH. The Framework is embedded within the service level agreement from 2017/18 and includes the annual submission of a Safety & Quality Account. The purpose of the Safety & Quality Account is to support an ongoing cycle of safety and quality improvement, aligned to and reflective of strategic priorities and local need. The Safety & Quality Account is to be submitted annually, following endorsement by the LHD Board. • On 24 August a presentation was made to the Bankstown / Canterbury Council & Greater Sydney Commission on the issues facing and development opportunities for Bankstown-Lidcombe Hospital. The proposal in conjunction with the Western Sydney University is to relocate the Hospital to the Bankstown CBD. Further discussion is required to develop the proposal. • The Board <u>ENDORSED</u> the establishment of an Advisory Panel to support strategic stakeholder engagement. The Board agreed that current work with Taylor Street Advisory should incorporate its Working Party's previous recommendations arising from the Board Stakeholder Engagement Plan (NOUS). • Campbelltown City Council is conducting a review of its engagement with relevant partners, opinion leaders and influencers in the region. On behalf of the Chairman the Chief Executive participated in a stakeholder audit. A recent meeting was held with Camden Council. The Population Health Directorate is commencing work to formalise partnership agreement with all local councils across the LHD. • The Board <u>NOTED</u> the Current Significant Issues section of the Chief Executive's Report, as circulated with the Agenda. 	

6.1.2 - Regulatory Environment	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Regulatory Environment section of the Chief Executive's Report, as circulated with the Agenda. 	
6.1.3 - Risk Management	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Risk Management section of the Chief Executive's Report, as circulated with the Agenda. 	
6.1.4 – Work Health & Safety	<ul style="list-style-type: none"> Nil. 	
6.1.5 - KPI Report	<ul style="list-style-type: none"> The KPI Report was circulated with the Agenda. Ms Larkin reported that the KPI Report reflects indicators arising from the 2017/18 Service Level Agreement (SLA). The Report is currently being revised, including formatting and content / commentary. 	
Safety & Quality	<ul style="list-style-type: none"> The Chair invited questions / comment. <ul style="list-style-type: none"> 2395117-20 - Ms Larkin clarified that the sentence 'Patient remains an inpatient' to be at the time that the report was written. 2405285-20 – Ms Larkin clarified that the descriptor of the incident is a summary and therefore may not clearly indicate the rationale of the related SAC score. Action: Provide further details. 2341332-20 – Ms Larkin discussed the causation statement. Action: Provide further clarification. 	Ms Snook Ms Snook
Access & Patient Flow	<ul style="list-style-type: none"> Ms Ramsden highlighted: <ul style="list-style-type: none"> SWSLHD has received the highest number of Ambulance presentations across the State over this Winter period. ETP and TOC targets have not been met. Action: Provide evidence that validates the ETP target. Prof Frankum suggested that performance in relation to patients waiting > 24 hours in ED is of greater concern. Action: Draft a letter to Facility Managers for the Chairman's signature thanking staff for their effort over the Winter period. The Board <u>NOTED</u> the State-wide Performance Report, circulated with the Agenda. 	Ms Ramsden Ms Buttenshaw

	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Access & Patient Flow component of the KPI Report. 	
People & Culture	<ul style="list-style-type: none"> The Board <u>NOTED</u> 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"> Budget (as at July 2017) <ul style="list-style-type: none"> Budgets were distributed during July 2017. <ul style="list-style-type: none"> Continued budget realignment will occur in the first quarter to align with strategy requirements. Own source revenue was on budget for the month. Small creditor performance in July achieved target. Overall the net cost of service was \$0.9M unfavourable Activity (as at June 2017) <ul style="list-style-type: none"> SWSLHD is at 100.3% of YTD target. <ul style="list-style-type: none"> Emergency - Prof Frankum highlighted the 7.9% above target result for Campbelltown Hospital Sub-acute admitted – the above target results for Liverpool and Campbelltown arise from an unchanged (to last year) target, changed models of care and more data being captured. The Board <u>NOTED</u> the Finance & Activity component of the KPI Report. 	
Service Reports	<ul style="list-style-type: none"> The Board <u>NOTED</u> Reports for the following services as circulated with the Agenda. <ul style="list-style-type: none"> Mental Health Drug Health Population Health Primary & Community Health Oral Health Ms Larkin highlighted a visit by the Secretary, NSW MoH to Bankstown Hospital & Banks House before the July 2017 Board meeting. Action: Draft a letter for the Chairman’s signature thanking the General Manager and Drug Health team for an informative site visit and presentation. 	Ms Buttenshaw
6.1.6 - Media & Marketing	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Media & Marketing Report. 	

6.1.7 – Strategic Plan Update	<ul style="list-style-type: none"> • Nil. 	
6.2. Chairman’s Report		
6.2.1 – Correspondence received – SWS Primary Health Network	<ul style="list-style-type: none"> • The Board <u>NOTED</u> correspondence received from the South Western Sydney Primary Health Network Board Chairman, advising the resignation of Rene Pennock, Chief Executive, effective 4 August 2017. 	
6.2.1 - Correspondence received – Dr N	<ul style="list-style-type: none"> • The Board <u>NOTED</u> correspondence received from and the response sent to Dr N in relation to his father’s recent admission at Liverpool Hospital. 	
6.2.1 - Correspondence received – Mr L	<ul style="list-style-type: none"> • The SWSLHD Board <u>NOTED</u> the update provided regarding the two business arising items and further correspondence received from Mr RL . 	
6.2.2 – Board Evaluation Report [24.04.17: Item 8.2.4]	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the ‘Board Effectiveness and Climate Evaluation Report’, prepared by the NOUS Group, as circulated with the Agenda. • The Chair invited comment: <ul style="list-style-type: none"> • Overall the results may have been affected by a change in Board membership and a lower response rate (compared to last year). • The focus relating to succession planning for the Board, will be addressed by the Board Nominations Committee. • Action: Arrange a meeting between the Board Chair, Chief Executive & MSEC representative to further discuss the comment received – <i>“the MSEC could further improve its assistance to the Board by including minutes or formal feedback on issues affecting the facilities”</i>. 	Ms Buttenshaw
6.2.3 – Proposed amendments to Model By-laws	<ul style="list-style-type: none"> • The Board <u>NOTED</u> correspondence received from the NSW MoH inviting comment on proposed amendments to the model by-laws, as circulated with the Agenda. • The Chair noted that upon release of the new By-laws the Board will examine its operations to ensure compliance. 	
6.2.4 – Board Planning Workshop	<ul style="list-style-type: none"> • In relation to the Board Planning Workshop scheduled for 9 October 2017 the Chair invited discussion topics for the Agenda. The following were received: <ul style="list-style-type: none"> • Population Health – follow up session (and include 	

	<p>Refugee Health)</p> <ul style="list-style-type: none"> • Interface between primary care and acute facilities • Medical futurist • Mental health • Strategic view: capital and service planning <ul style="list-style-type: none"> ▪ Update/overview, risks etc 	
7. Committees of the Board		
<p>7.1. Health Care Quality & Safety</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Health Care Quality & Safety Committee meeting held on 2 August 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. • Dr Gray highlighted: <ul style="list-style-type: none"> • Item 7.2 – Refugee Health Services • Item 7.3 – Safety and Quality Account Discussed with CE’s Report. 	
<p>Board Award – Annual Patient Safety & Quality Seminar</p>	<ul style="list-style-type: none"> • The SWSLHD Board <u>ENDORSED</u> the recommendation, made by an out of session Health Care Quality and Safety Committee to present a Board Award at the SWSLHD Quality Awards to the: <ul style="list-style-type: none"> • PROMPT-Care: eHealth supporting patient-centred care project submitted by Cancer Services. 	
<p>7.2. Finance & Assets</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Finance & Assets Committee meeting held on 24 July 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. 	
<p>7.3. Audit & Risk Mgt</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Audit and Risk Management Committee held on 13 July 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. • The following items were highlighted: <ul style="list-style-type: none"> • The Committee endorsed the SWSLHD financial statements for the year ended 30 June 2017 and recommended the financial statements be submitted to the Ministry of Health and the Audit Office of NSW Subject to minor corrections as noted. • The Committee endorsed the Special Purpose Service Entity financial statements for the year ended 30 June 2017 and recommended the financial statements be submitted the Ministry of Health and the Audit Office of NSW Subject to minor corrections as noted. • The Committee noted the Internal Audit and Risk Management Attestation statement and endorsed the financial statement prior to submitting to the Ministry of 	

	<p>Health.</p> <ul style="list-style-type: none"> • The Board <u>NOTED</u> receipt of the Statement at the July meeting. • The Committee noted the Audit and Risk Management Committee Self-Assessment Checklist and endorsed the checklist prior to submitting to the Ministry of Health. • The Committee noted the Corporate Governance Attestation Statement and recommended that the statement be forwarded to the SWSLHD Board for signing. <ul style="list-style-type: none"> • The Board <u>NOTED</u> approval of the Statement at the July meeting. • Mr Sinclair provided advice regarding Medicare ineligible patients occupying renal chairs. 	
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 from 12 July to 14 August 2017 • No matters were referred to the ICAC • No matters were referred by the ICAC 	
<p>7.4. Research & Teaching</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Research & Teaching Committee held on 3 August 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Frankum highlighted: <ul style="list-style-type: none"> • Prof Les Bokey has been temporarily appointed as the SWSLHD Research Director. Prof Bokey attended the meeting and highlighted work to date which is focussed on fostering collaboration. • The Committee have requested a presentation from Bankstown-Lidcombe Hospital as the metrics presented through their Report do not reflect the activity of research and teaching expected from an academic institution. • Dr Antonio (Tony) Penna, Executive Director, Office for Health and Medical Research will be attending the October Meeting. 	
<p>7.5. Aboriginal Health</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Aboriginal Health Committee meeting held on 22 June 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. 	

	<ul style="list-style-type: none"> • Prof Frankum highlighted that the Committee reviews a strategic priority at each of its meetings and the priority for the June meeting was mental health. • Aboriginal people are hospitalised for mental health issues at twice the rate of non-Aboriginal people in south west Sydney. • Approx 6% of all registered consumers with community mental health services are Aboriginal people; this is significant given Aboriginal people account for less than 2% of the total population in south west Sydney. • SWSLHD has a comparatively large Aboriginal mental health team, that includes 12 identified positions. 	
<p>7.6. Nominations Committee</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Nominations Committee meeting held on 24 July 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. • The Board <u>ENDORSED</u> the Terms of Reference, recommended by the Committee. 	
8. Consumer & Community Council		
Minutes	<ul style="list-style-type: none"> • The Board <u>NOTED</u> that the August Consumer and Community Council meeting was replaced by a Respecting the Difference Training Session and therefore no minutes are for submission. 	
9. New Business		
<p>9.1. MDAAC Nomination for approval</p>	<ul style="list-style-type: none"> • The Board <u>APPROVED</u> the request from the Chief Executive to appoint Dr Gary Flynn, A/Director of Medical Services, Mental Health, and Dr Michelle Harris, Director of Medical Services, Liverpool Hospital, to the Medical & Dental Appointments Advisory Committee. 	
10. Items for Information		
<p>10.1. Board Schedules</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the availability on Govdex of the: <ul style="list-style-type: none"> • Board Calendar. • 2017 Board meeting & events summary. 	
11. Other Business Without Notice		
	<ul style="list-style-type: none"> • The Chair invited other business without notice. • The following leaves of absence were noted: <ul style="list-style-type: none"> • Dr Abi-Hanna – October Board meeting and Annual Public Meeting 	

	<ul style="list-style-type: none"> • Dr Shameran Slewa-Younan – September Board meeting • Ms Kerrie Murphy – Annual Public Meeting • Mr Max Bosotti – September Board meeting • Prof Frankum highlighted the recent BPT exams – 15/18 from the Liverpool Network passed – due to a concerted effort of Dr Nanderkoban, his team and Liverpool Hospital clinicians. The pass rate for the St Vincents/Campbelltown and Bankstown/RPA Networks remained steady, 	
<p>12. Close/Next Meeting</p>	<ul style="list-style-type: none"> • The meeting closed at 6.47pm. The next meeting will be held: • Monday 25 September 2017, Bowral & District Hospital <ul style="list-style-type: none"> 2.30pm – Facility Visit 3.30pm – Board meeting 	