

MINUTES

South Western Sydney Local Health District Board

Date: Monday 27 November 2017

Time: 3:30pm

Venue: Conference Room, Campbelltown 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 (Deputy Chair)	✓		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 Clair Ramsden, Director Operations	✓		Ms Nel Buttenshaw, Manager Executive & Board Secretariat	✓	
Mr Ross Sinclair, Director Finance	✓				

Agenda Item	Discussion/Decision/Recommendation	Responsible
In-camera	<ul style="list-style-type: none"> The Board held an in-camera session to discuss a letter received from the Liverpool Hospital Medical Staff Council. 	
<i>Dr Abi-Hanna, Prof Merrett, Ms Buttenshaw & Mr Sinclair joined the meeting at 4.20pm.</i>		
2. Declaration of Interests	<ul style="list-style-type: none"> The Deputy Chair invited declarations of interest. Nil were received. 	
3. Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> MOTION: A motion was moved by Mrs Berry and seconded by Dr Gray that the Minutes of the Board meeting held on 23 October 2017 be accepted as a true and accurate record. The Motion was carried. 	

4. Business Arising		
4.1 Performance Development Review Rates [25.09.17: Item 6.1.5]	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note providing the performance development review (PDR) compliance rate at SWSLHD compared to other LHDs, as circulated with the Agenda. The Deputy Chair highlighted that SWSLHD is currently the 3rd most compliant LHD in the State (15 LHDs). Mr Sinclair reported that compliance rates tend to correlate with accreditation cycles. 	
4.2 Oran Park Family Health [23.10.17: Item 8.1.5]	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note clarifying access to pathology results at Oran Park Family Health, as circulated with the Agenda. Pathology results are not currently available in Cerner's Powerchart. This functionality may be available in future iterations of 'My Health Record'; however eHealth are negotiating this function with private providers. 	
<i>Ms Ramsden joined the meeting at 4.31pm</i>		
	<ul style="list-style-type: none"> Dr Gray noted that SWSLHD and the SWS Primary Health Network have commenced defining the requirements of an ICT interoperability exchange and in this venture the accessibility of pathology results via Powerchart will be included as a requirement. Dr Abi-Hanna suggested that this matter be referred to the SWSLHD Finance & Assets Committee at which routine reports from ICT are received. Action: Request the SWSLHD Finance & Assets Committee to focus on/monitor the accessibility of pathology results at Oran Park Family Health. 	Secretariat
<i>Prof Harris & Ms Larkin joined the meeting at 4.36pm</i>		
Acknowledgment to Country	<ul style="list-style-type: none"> The Board <u>AGREED</u> to acknowledge country at all meetings of the Board and Board Committees. Action: List 'Acknowledgement to Country' on Board and Board Committee agendas. 	Committee Secretariats

<p>4.3 Bowral & District Hospital: Clinical Service Plan [23.10.17: Item 12.4]</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note regarding the Bowral & District Hospital Clinical Services Plan (Plan), as circulated with the Agenda. • Ms Larkin highlighted: <ul style="list-style-type: none"> • The Plan and Addendum have been released publicly. • The Addendum has been updated to reflect the corrected population growth rate. 	
<p>5. Patient Story</p>	<ul style="list-style-type: none"> • Ms Larkin presented the story of Mr X, a 78 year old male patient of the community health palliative care team. • Mr X lived in a remote location, difficult to access and without mobile reception. • After a home care visit in excess of 4 hours Mr X died at home as was his wish with the comfort measures available as put in place by the palliative care team in collaboration with his GP, pharmacist and his family. • The story demonstrates commitment to consumer centred care. • The SWSLHD Board <u>NOTED</u> the patient story. 	
<p>6. New Business 6.1. Model By-laws</p>	<ul style="list-style-type: none"> • The SWSLHD Board discussed, as circulated with the Agenda: <ul style="list-style-type: none"> - New Model By-laws - Summary of changes to the new Model By-laws in light of the existing Model By-laws and issues for consideration • The SWSLHD Board <u>AGREED</u> that further discussion regarding the new Model By-laws would occur at the December meeting, at which time a compliance audit (describing current practice against the new model by-laws) would be received. • Action: List the Model By-laws for discussion at the December meeting, together with the compliance audit and include Board procedures. 	<p>Secretariat</p>

<p>7. Standing Items</p> <p>7.1. Chief Executive's Report</p>		
<p>7.1.1 – Current Significant Matters</p>	<ul style="list-style-type: none"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • Ernst & Young (EY) Review: Medical Gases Incident EY was commissioned to undertake an independent review to assess the progress made over the 12 months implementing recommendations arising from the two RCAs and the Chief Health Officer Report. <p>The review identified rapid and substantial progress on the implementation of all recommendations. There were no additional issues highlighted in the report. In parallel with the EY Report an internal review process was undertaken by SWSLHD. The results of the internal review are aligned with the progress reported in the EY Review.</p> <p>The LHD plans to re-audit implementation of the recommendations to ensure that they have been sustained.</p> <p>The report was further reviewed by the Deputy Secretary System Purchasing and Performance who has advised an adjustment to the Performance Level of the SWSLHD to Level 1. This adjustment reflects operational performance.</p> • Transforming Your Experience Executive teams at all facilities and services have now implemented Executive Leader Rounding. District Services have commenced or are commencing Leader Rounding as their initial strategy. <p>The Leadership Forum held on 10 November 2017 workshopped the successes, challenges and enablers of rounding for leaders.</p> • Liverpool Health & Academic Precinct: Update Since January 2017 the Steering Committee has been meeting monthly to plan activities associated with the Precinct development including the development of a report by a selected consultant. In July 2017, Price Waterhouse Coopers (PWC) completed a report on a strategy named "Reimagining the Liverpool Health, Education and Innovation Precinct". In August 2017, "Reimagining Liverpool Health and Education Precinct" was launched. 	

	<p>In October 2017, the Steering Committee met to discuss implementation of the above report, including governance and function, ongoing budget and project management.</p> <p>Events will be held in 2018 which include Capital Infrastructure Forum with Health Infrastructure in March 2018 and a Collaborative Conference re precinct development in late 2018.</p> <ul style="list-style-type: none"> • Ms Larkin undertook to provide a summary report on her trip to the UK to the December Board meeting. • The Board <u>NOTED</u> the Current Significant Issues section of the Chief Executive’s Report, as circulated with the Agenda. 	<i>Ms Larkin</i>
7.1.2 - Regulatory Environment	<ul style="list-style-type: none"> • Nil. 	
7.1.3 - Risk Management	<ul style="list-style-type: none"> • The Board <u>NOTED</u> that: <ul style="list-style-type: none"> • There are no LHD risks referred to the Board from Board Committees for this month. • There were no new Extreme or High risks approved for entry on the LHD Risk Register at the Enterprise Risk Management Committee meeting held on 13 November 2017. 	
7.1.4 – Work Health & Safety	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Work Health & Safety (WHS) and Workers Compensation Report for the April – June 2017 quarter, as circulated with the Agenda. • Ms Larkin highlighted: <ul style="list-style-type: none"> • <u>Deposit Contributions 2017/18</u> SWSLHD experienced a funding shortfall of \$5.2M, an increase of \$1.8M from the previous year. The shortfall was due to an increase in wages and claims experience. • <u>Deposit Contribution Improvement Strategies</u> The District is focussing on prevention and return to work strategies. • The number of new health liability claims (22) in this period compared to same time last year (10) was noted. • Action: Provide advice about capping of claims. 	<i>Ms Dingwall</i>

8.1.5 - KPI Report	<ul style="list-style-type: none"> The KPI Report was circulated with the Agenda. 	
Safety & Quality	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> The increase in rates, compared to the same period last year of hospital acquired pressure injuries and surgical site infections. One new serious incident since the last report, which will undergo an RCA. Explanations were provided in relating to 2417036-20 (Liverpool Hospital) – causation statement from a completed RCA (focussed on medical review of diagnostic results). The Board NOTED the Safety & Quality component of the KPI Report. 	
Access & Patient Flow	<ul style="list-style-type: none"> Ms Ramsden highlighted: <ul style="list-style-type: none"> As at October 2017, activity has reduced following the winter period, however the District's full year performance for ETP and TOC remains below target. The number of projects across the LHD to improve ETP performance was noted. It was suggested to focus on admissions, rather than discharges. <p>Action: Provide emergency department data to the December Board meeting, specifically: presentations (include triage categories) and admissions.</p> The Board NOTED the Access & Patient Flow component of the KPI Report. 	Ms Ramsden
People & Culture	<ul style="list-style-type: none"> The Board NOTED the People & Culture component of the KPI Report. Ms Larkin highlighted: <ul style="list-style-type: none"> Reducing leave liability remains a focus. As at October 2017 there were 4968 employees with excessive leave (38.14% have submitted a leave plan). The number of these staff who had not taken leave in the last 12 mths has decreased (by 22) since the last month to 196. The overall performance development review participation rate increased this month from 56.5% to 58.4%. Ongoing work is continuing to review the tool and develop a more effective way to manage compliance. 	

	<ul style="list-style-type: none"> • Action: Correct the PSC People Matter Survey (%) – Engagement index on the Dashboard. • The Board <u>NOTED</u> the People & Culture component of the KPI Report. 	Ms Dingwall
Finance & Activity	<ul style="list-style-type: none"> • Mr Sinclair highlighted: Budget Result Performance to budget was slightly favourable for the month (\$0.2M) and unfavourable YTD (\$2.2M). Expenditure is unfavourable YTD (\$1.9M) primarily due to: <ul style="list-style-type: none"> - Surge bed activity was high during the winter period of July-September - TMF workers compensation premium over budget (1.8) due to the total premium being booked in the YTD result. Own-source revenue was unfavourable for the month and YTD. Patient fee income improvement needs to be sustained in order to meet the increased revenue budget this year. Small creditor performance in October achieved 100% target. Activity Performance The results YTD September indicate that SWSLHD is at 100.5% of the YTD target. The October YTD target variance for the surgical wait list is 395 below. Additional lists are planned for December / January. • 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"> • Drug Health • Population Health • Primary & Community Health • Oral Health • Mental Health • Ms Larkin noted that Ms Tonina Harvey, General Manager Drug Health is retiring and acknowledged her contribution to the Service and the District. Recruitment to the position is currently underway. 	
Mr Bosotti left the meeting at 5.40pm.		

<p>8.1.6 - Media & Marketing</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Media & Marketing Report. • Ms Larkin highlighted: <ul style="list-style-type: none"> • The Cancer Services Annual Public Meeting held on 24 November 2017, in particular the patient stories presented. • The launch of the National Stroke Audit Acute Services Report held on 23 November 2017. 	
<p>8.1.7 – Strategic Plan Update</p>	<ul style="list-style-type: none"> • Nil. 	
<p>8.2 Chairman’s Report</p>		
<p>8.2.1 – Report: Board Planning Workshop</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the NOUS Group report, capturing the key discussion points, insights and actions arising from the Board Planning Workshop held on 9 October 2017: • Actions: <ul style="list-style-type: none"> • Improving Population Health <ul style="list-style-type: none"> • To agree on the priorities and level of investment for the 0-5 proposal at the December Board meeting considering a 5-year investment plan, the use of technology and better links to the SPHERE and overall State strategy. • The Health Care Quality & Safety Committee is to receive quarterly reports evaluating the performance of population health programs. • Extending the provision of refugee health services through partnerships and enhanced collaborations with other Government partners. • Strengthening Mental Health Services <ul style="list-style-type: none"> • The SWSLHD Board will support the mental health leadership team by promoting non-hospital community mental health options. <ul style="list-style-type: none"> ○ Action: Request that the Report be amended to reflect the Board’s commitment to invest in community-based services. • The Board will address the challenges around workforce through introducing greater incentives for students and registrars. 	

	<ul style="list-style-type: none"> The Mental Health Service will provide the Board with an update on the proposed actions for the December Board meeting and a full action plan for consideration at the February Board meeting addressing the aforementioned issues. 	
8.2.2 - Correspondence Received	<ul style="list-style-type: none"> The Board NOTED the correspondence exchange with Mrs TR regarding the care and treatment her husband received at the Liverpool Hospitals Emergency Department. Despite Mrs TR declining a resolution meeting with representatives of Liverpool Hospital, the Board requested that the Chief Executive attempt to contact Mrs TR in relation to her concerns. Action: The Chief Executive to attempt to contact Mrs TR and advise 	Ms Larkin
8.2.3 - Advisory Panel	<ul style="list-style-type: none"> The Chair reported that the inaugural SWS Advisory Panel meeting was held on 20 November 2017, hosted by PWC. An overview of membership was provided. Participants were very engaged and interested in the current and future work of the LHD and emphasised the potential need for a new hospital as a result of the planned airport at Badgerys Creek. The Panel will meet 2 or 3 times in 2018, with dates yet to be determined. 	
9. Committees of the Board		
9.1 Health Care Quality & Safety Minutes	<ul style="list-style-type: none"> The Minutes of the Health Care Quality & Safety Committee meeting held on 1 November 2017 were circulated with the Agenda and NOTED by the Board. Prof Merrett highlighted: <ul style="list-style-type: none"> Item 5.2 – Fairfield Hospital: Accreditation Update The Committee received a progress report on preparation for the upcoming organisational-wide survey. The mock survey did not identify any significant issues. Item 5.3 – Fairfield Hospital: Review of Maternity & Neonatal Service The Committee received the Report (review team led by Prof Michael Nicholls, Snr Advisor Obstetrics, NSW MoH) which included 20 recommendations. An action plan is being developed to monitor progress and a further update to the Committee is planned for the December meeting. 	

	<ul style="list-style-type: none"> Item 6.1.6 – Crude Death Rate (six-mthly report) <p>The Committee noted the review of crude death rate and case weight data over the past 5 years. On a year on year basis the rate remains stable.</p>	
Safety & Quality Account	<ul style="list-style-type: none"> The Board <u>APPROVED</u> the Safety & Quality Account 2016/17 for submission to the NSW MoH, following amendment through the Chief Executive. A copy of the final Account submitted to the NSW MoH is to be resubmitted to the Health Care Quality & Safety Committee. Action: Submit the Safety & Quality Account 2016/17 with amendments by the Chief Executive to the NSW MoH, with a copy to the Health Care Quality & Safety Committee. 	Mr Hampson
9.2 Finance & Assets	<ul style="list-style-type: none"> The Minutes of the Finance & Assets Committee meeting held on 20 October 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. 	
Minutes		
Delegations Manual	<ul style="list-style-type: none"> The Board <u>APPROVED</u> the proposed amendments to the Delegations Manual (V14), as circulated with the Agenda. Action: Publish the revised Delegations Manual and issue the related communique. 	Secretariat
10.3 Audit & Risk Management	<ul style="list-style-type: none"> The Minutes of the Audit & Risk Management Committee meeting held on 1 September 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. 	
Minutes		
Independent Member	<ul style="list-style-type: none"> Minutes of the Audit & Risk Management Committee meeting held on 1 September 2017 were circulated with the Agenda and <u>NOTED</u> by the Board, specifically the Committee's recommendations, which were attended at the October Board meeting: <ul style="list-style-type: none"> The Financial Statements for the South Western Sydney Local Health District for the year ended 30 June 2017 be referred to the SWSLHD Board and signed by the Chief Executive and the Director of Finance. The Financial Statements for the South Western Sydney Local Health District Special Purpose Service Entity for the year ended 30 June 2017 be referred to the SWSLHD Board and signed by the Chief Executive and the Director of Finance. The Audit and Risk Management Committee Charter be referred to the SWSLHD Board and signed by the Chief Executive and the Chair of the Board. The Internal Audit Charter be signed by the Chief Executive and the Chair of the Audit and Risk Management Committee 	

ICAC Matters	<ul style="list-style-type: none"> The Board <u>NOTED</u> nil notifications to and received from the ICAC for the period 9 October to 9 November 2017, as circulated with the Agenda. 	
10.4 Research & Teaching Minutes	<ul style="list-style-type: none"> The Minutes of the Research & Teaching Committee held on 12 October 2017 2017 were circulated with the Agenda and <u>NOTED</u> by the Board. Dr Abi-Hanna highlighted: <ul style="list-style-type: none"> Item 3 – Presentation by Dr Tony Penna, Executive Director, Office for Health & Medical Research, NSW MoH. Item 6.3 – Ingham Institute Report <p>The Committee wrote to Prof Ian Harris congratulating him on receiving the Research Australia Health Services Award.</p> 	
10.5 Aboriginal Health Minutes	<ul style="list-style-type: none"> The next meeting of the Aboriginal Health Committee will be held on 14 December 2017. 	
10.6 Nominations Minutes	<ul style="list-style-type: none"> The next meeting of the Nominations Committee is yet to be scheduled. 	
10 Consumer & Community Council		
Minutes	<ul style="list-style-type: none"> The Minutes of the Consumer and Community Council meeting held on 3 November 2017, as circulated with the Agenda were <u>NOTED</u> by the Board. 	
11 Items for Information		
13.1 Board Schedules	<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. 	
12 Other Business Without Notice		
	<ul style="list-style-type: none"> The Chair invited other business without notice. Nil items were received. 	
13 MSEC Feedback	<ul style="list-style-type: none"> The Chair invited feedback/issues from the Medical Staff Executive Council. 	

	<ul style="list-style-type: none"> • Dr Frankel reported the impact of the activity increase over the winter period on staff. • The Board is conscious of the extra effort over this period and noted that a 'thank you' message had been issued. 	
14 Close/Next Meeting	<ul style="list-style-type: none"> • The meeting closed at 6.32pm. The next meeting will be held: • Monday 11 December 2017, Education Centre, Liverpool Hospital. 3.30pm – Board meeting 	