

MINUTES

South Western Sydney Local Health District Board

Date: Monday 26 March 2018

Time: 3:30pm

Venue: Board Room, Level 4, Bankstown-Lidcombe 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	✓	
Ms Karen Edwards, General Manager, Bankstown-Lidcombe Hospital	✓				

Agenda Item	Discussion/Decision/Recommendation	Responsible
In-camera	<ul style="list-style-type: none"> The Board held an in-camera session and agreed a set of actions for implementation by the Chief Executive, to be referred to the Nominations Committee for ongoing monitoring. Action: Submit the actions and notes from the in-camera session to the Nominations Committee. 	Secretariat
<i>Ms Ramsden, Dr Frankel, Ms Edwards joined the meeting at 4.12pm</i>		
Welcome	<ul style="list-style-type: none"> The Chair welcomed Bankstown-Lidcombe Hospital's General Manager, Ms Karen Edwards to the meeting. 	
2. Acknowledgment to Country	<ul style="list-style-type: none"> The Chair commenced the meeting by acknowledging the traditional owners of the land and paid respect to elders past and present. 	

3. Declaration of Interests	<ul style="list-style-type: none"> The Chair invited declarations of interest. The Chair declared a conflict of interest in relation to Minute Item 8.2.1. 	
4. Confirmation of the previous minutes and action list	<ul style="list-style-type: none"> <u>MOTION</u>: A motion was moved by Ms Murphy and seconded by Mr Bosotti that the Minutes of the Board meeting held on 26 February 2018 be accepted as a true and accurate record. The Board confirmed that Minute Item 6.4 was correct. <ul style="list-style-type: none"> The Motion was carried. 	
5. Patient Story	<ul style="list-style-type: none"> Ms Edwards presented the story of family A, who brought their 4 month old (f) daughter to the Emergency Department of Bankstown-Lidcombe Hospital, by car. Tragically the baby subsequently passed away following NETS retrieval. Ms Edwards provided an overview of the Root Cause Analysis (RCA) process (conducted jointly with the NSW Ambulance Service) and contact with the family throughout the investigation process. Family A have indicated that the ongoing contact was very much appreciated, although suggested interim contact between pre and post RCA meetings may be useful. Family A considered that the change to protocol (NSW Ambulance) is a positive legacy. 	
6. Business Arising		
6.1 KPI Report – Quality & Safety [26.02.18: Item 8.1.5]	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note relating to the Quality & Safety section of the KPI Report submitted to the February 2018 Board meeting, as circulated with the Agenda. Ms Larkin highlighted that the three ‘new’ cases referred to within that Report, were described within the completed RCA section of the Report. This anomaly arose due to the extended reporting period (i.e. from the November 2017 Board meeting to the February 2018 Board meeting). The three cases were discussed at the Health Care Quality & Safety Committee (one in Dec-17 and two in Feb-18). 	
6.2 Service Report – Drug Health [26.02.18: Item 8.1.5]	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Referral Note clarifying the Drug Health KPI <i>Incidence of Neonatal Abstinence Syndrome (NAS) requiring medication (non-Aboriginal)</i>, as circulated with the Agenda. 	

	<ul style="list-style-type: none"> • Ms Larkin highlighted that the KPI percentage is the proportion of babies given medication out of the total number of babies born with NAS. • The KPI is separated for 'Aboriginal' and 'Non-Aboriginal' babies due to the small number. 	
<p>6.3 Board Correspondence [26.02.18: Item 8.2.2]</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note providing further information about the receipt of funds from licensed premises, including the NSW Health position, as circulated with the Agenda. • Ms Larkin highlighted: <ul style="list-style-type: none"> • That the donation referred to in the Board correspondence was not accepted, and therefore not reported within the Note. • The State-wide position articulated in Policy Directive 2009_067 – Fundraising policy, which includes the receipt of donations as a form of fundraising (any such mention of fundraising includes donations). The principles prescribed in the policy outline that a donation should not be accepted if it could be deemed to impact the public goodwill. Further the NSW Health media response to a related article published in the Sydney Morning Herald: <p>“Liquor & Gaming NSW is responsible for regulation of gaming machines within licensed premises and administering Local Impact Assessments (LIA). This has been a longstanding regulatory arrangement, dating back to 2009.</p> <p>Licensed pubs and clubs support a wide range of community groups and organisations, including hospitals. These donations support activities across hospitals, and make a difference to the health and wellbeing of our patients and their families.</p> <p>The donations also contribute to offsetting some of the costs to the health system of physical and mental health problems associated with problem gambling.”</p> • The Board discussed options in relation to the receipt of funds from licensed premises, including: not accepting funds due to the potential health impact; using the funds received to support gambling type programs; central management of such funds but recognised that donations are 'locally' based. • Action: Provide an options paper to the Board for further consideration. 	<p>Director of Finance</p>

	<ul style="list-style-type: none"> • Action: Advise the Board of current services offered relating to gambling, etc. 	Director of Operations
6.4 ICAC Matters [26.02.18: Item 9.3]	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note providing additional information about the allegation that cites the SWSLHD Board, as circulated with the Agenda. 	
7. New Business		
7.1. Nomination to MDAAC	<ul style="list-style-type: none"> • The Board considered the request from the Chief Executive, as circulated with the Agenda, to appoint Dr Stephen Conaty, Director Population Health to the Medical and Dental Appointments Advisory Committee (MDAAC) and resolved to <u>ENDORSE</u> the request. • Action: Convey the Board’s decision to the MDAAC. 	Secretariat
8. Standing Items		
8.1. Chief Executive’s Report		
8.1.1 – Current Significant Matters	<ul style="list-style-type: none"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • <u>Coronial Inquest</u> Prof Frankum queried if the increase in staffing to Fairfield Hospital’s Maternity Service was in alignment with an increase in births. <p>The Chief Executive reported her recent presentation to the Clinical Incident Review Action Group (CRAG) regarding the Fairfield Hospitals’ Maternity Service focussed on leadership and culture.</p> • <u>Transforming Your Experience</u> Action: Replace the patient story, due to the April Board meeting, with a demonstration of the ‘My experience matters’ application. • <u>Reimagine Campbelltown</u> The <i>Re-imagine Campbelltown Forum</i> was held on 14 March 2018 at NSW Parliament House. The Chief Executive participated in a Panel discussion which explored views on the future of health, education and employment in south western Sydney and how they will intersect. • <u>Western Sydney City Deal</u> The Western Sydney City Deal will result in economic and investment opportunities; a benefit to the Liverpool LGA. 	Director, Nursing & Midwifery

	<p>The deal included the establishment of an independent Western Sydney Development Authority, which will ensure a coordinated approach in delivering the aerotropolis</p> <ul style="list-style-type: none"> • <u>eMR 2</u> On 27-28 February 2018 all Campbelltown and Camden Hospital inpatient wards and hospital wide services went live with eMR2 • <u>Research Initiatives</u> Professor Les Bokey has been appointed as the SWSLHD Research Director, effective 28 February 2018. <p>An Expression of Interest was advertised (from 1 Mar-18, closing on 3 Apr-18) for existing units to be recognised as a SWSLHD Academic Unit.</p> <ul style="list-style-type: none"> • <u>Australian Governance Summit</u> The Chief Executive attended the AICD’s Annual Governance Summit in Melbourne on 1 and 2 March 2018. The spotlight of the Summit was on Trust, Innovation and Sustainability. A precis of sessions presented was provided. <p>Action: Circulate the Opening Address delivered by the AICD Chair Elizabeth Proust.</p> <ul style="list-style-type: none"> • <u>Safe Work Australia</u> Further to information provided to the Special Board meeting held in August 2016. SWSLHD received, in late 2017, a Section 155 (2) – in effect a notice to give information to Safe Work NSW. The Notice consists of 314 questions (Questions 28-45 relate to the SWSLHD Board). Upon receipt of the Notice, through the LHD, a legal firm specialising in work place relations and safety were engaged to ensure that the questions are answered in a satisfactory manner. SWSLHD sought an extension of time to respond and SWA agreed to 31 March 2018. <p>Action: Circulate the draft (legally reviewed) responses to Questions 28-45 to the Board for review. Board members to provide comment to the Secretariat by 10.00 am, 28 March 2018.</p> <p>Action: Clarify the Board’s legal obligation in relation to monthly reporting of WHS matters.</p> <ul style="list-style-type: none"> • The Board <u>NOTED</u> the Chief Executive’s Report, as circulated with the Agenda. 	<p>Secretariat</p> <p>Secretariat / Board members</p> <p>Director, Workforce & Development</p>
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8.1.2 - Regulatory Environment	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Regulatory Environment Report, as circulated with the Agenda. Ms Larkin highlighted: <ul style="list-style-type: none"> As at 31 Jan-18 there were 247 District-level policy documents. Of these 32% are past their due date. Work is ongoing to notify authors when policy documents are due for review ahead of time. Action: Remove acronyms in the key of the graph The SWSLHD Legislative Compliance Summary Register has been developed; with 258 pieces of legislation, which have been categorised into 49 compliance topics. The first quarterly report will be available for Finance for the period end 31 Mar-18. The Report will be submitted to the Finance & Assets and Audit & Risk Management Committees. 	Manager Risk Governance
8.1.3 - Risk Management	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Risk Management Report, as circulated with the Agenda. 	
8.1.4 – Work Health & Safety	<ul style="list-style-type: none"> Nil. 	
8.1.5 - KPI Report		
Safety & Quality	<ul style="list-style-type: none"> Ms Larkin highlighted: <ul style="list-style-type: none"> <u>SAC 1 Incidents and completed RCAs</u> <ul style="list-style-type: none"> There were four new serious incidents since the last report, which will undergo an RCA. There were three RCA reports completed between 1 January and 28 February 2018. The incident ‘description’ is replicated from the IIMs system Dates that the incident was submitted to the Board as a new incident will be re-instated in the completed RCA report. <u>Sentinel Events</u> One sentinel event occurred in the January-February 2018 reporting period. A further sentinel event occurred in March 2018, which will be reported to the April Board meeting. Action: Report sentinel events to the Health Care Quality & Safety Committee. The Board <u>NOTED</u> the Safety & Quality component of the KPI Report. 	Director, Clinical Governance

<p>People & Culture</p>	<ul style="list-style-type: none"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • A number of initiatives are progressing within the Work Health and Safety and Staff Wellbeing strategy, including: Fitness Passport; 'Live Life, Get Active'; Resilience, Emotional Intelligence Training, Mindfulness & Meditation; and, a pre-employment assessment program. • Reducing the excessive leave liability remains a focus, with eligible staff being offered a 'cashing-out' arrangement, which is subject to criteria. This option is being offered to priority categories of staff such as those who have excess leave and haven't taken leave in the last 12 months. Funded backfill arrangements are being implemented. • Performance development review (PDR) compliance rates are being actively monitored and reports are issued. Liverpool Hospital's recent accreditation resulted in an AC90 recommendation relating to PDR compliance. • Action: Clarify the term '...continuous average duration...' within the Dashboard for KPIs – Improvement Measures: Workplace Injuries. • The Board <u>NOTED</u> the People & Culture component of the KPI Report. 	<p>Director, Workforce & Development</p>
<p><i>Ms Edwards left the meeting at 6.05pm.</i></p>		
<p>Finance & Activity</p>	<ul style="list-style-type: none"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • <u>Activity</u> <ul style="list-style-type: none"> • As at Jan-18 the District is at 101.9% of its activity target. • <u>Admissions from Surgical Waitlist Target Variance</u> <ul style="list-style-type: none"> • As at Feb-18 the District is at 49 below target • The Board <u>NOTED</u> the Finance & Activity component of the KPI Report. 	
<p>Services</p>	<ul style="list-style-type: none"> • The following Service Reports were circulated with the Agenda. The Chair invited comment / questions: <ul style="list-style-type: none"> • <u>Mental Health</u> <ul style="list-style-type: none"> • Ms Murphy noted: <ul style="list-style-type: none"> • that seclusion episodes in Gna Ka Lun involve adolescents • a previous Board commitment to reduce episodes of seclusion • the language in the Report reflected an inappropriate attitude 	

	<ul style="list-style-type: none"> • Action: Revisit the language used in future reports. • <u>Primary & Community Health</u> <ul style="list-style-type: none"> • Nil comment. • <u>Drug Health Services</u> <ul style="list-style-type: none"> • Nil comment. • <u>Population Health</u> Ms Larkin requested that members review the Report, specifically the BreastScreen section. • <u>Oral Health</u> Action: Check Dashboard performance data for Adult Treatment Waiting Lists KPIs. • The Board <u>NOTED</u> the Service Reports component of the KPI Report. 	Director, Mental Health Director of Operations
8.1.6 – Media & Marketing Report	<ul style="list-style-type: none"> • Ms Larkin tabled the latest edition of <i>Thrive</i>. • The Board <u>NOTED</u> the Media & Marketing Report, as circulated with the Agenda. 	
8.1.7 – Strategic Plan Update	<ul style="list-style-type: none"> • Nil. 	
8.2 Chairman’s Report		
8.2.1 – Correspondence Received	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the correspondence received by way of carbon copy from Dr CN, as circulated with the Agenda. • <i>Refer also Minute Item 3.</i> 	
8.2.2 – Correspondence Received	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the correspondence sent to Mrs LW in relation to her husband, as circulated with the Agenda. 	
8.2.3 – Correspondence Received	<ul style="list-style-type: none"> • The Board <u>NOTED</u> correspondence sent to Mrs BM from the General Manager, Liverpool Hospital to advise the resolution of issues previously expressed to the Board, as circulated with the Agenda. 	
8.2.2 – Council of Board Chairs	<ul style="list-style-type: none"> • The Council of Board Chairs Forum was held on 19 March 2018. • The Chair highlighted the following presentations received: <ul style="list-style-type: none"> • ‘Tuning’ Governance & Accountability – Phil Minns, Deputy Secretary, People & Culture 	

	<ul style="list-style-type: none"> • Digital Innovation in Health – Tim Kelsey, Chief Executive, Australian Digital Health Agency • Session: Digital Innovation <ul style="list-style-type: none"> - Change Management & Digitisation - Zoran Bolevich, Chief Executive, eHealth - Case Study: Digitised Health & Analytics – Kathy Eager, Director, Australian Health Services Research Institute 	
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 7 March 2018 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Merrett highlighted: <ul style="list-style-type: none"> • <u>Item 7.3 – Mental Health Seclusion Rate</u> The Committee received an update report (at Unit level) regarding the seclusion rate, including issues and compliance with the policy. The Committee expressed concern regarding the low compliance rate for post seclusion reviews and carer notifications. The Committee has requested modifications to the next report and the inclusion of comparative data with other (comparable) HDUs. • <u>Item 6.1 – Clinical Documentation Audit</u> The current clinical information reviews focus on compliance with policy and do not include quality of content. Pilot projects to explore aspects of content quality are progressing but the challenges were noted by the committee, i.e. potential medico-legal implications. The Committee has recommended exploring the opportunity combine policy compliance and quality of content audits. 	
9.2 Finance & Assets Minutes	<ul style="list-style-type: none"> • The Minutes of the Finance & Assets Committee meeting held on 16 February 2018 were circulated with the Agenda and <u>NOTED</u> by the Board. • Mr Gordon highlighted: <ul style="list-style-type: none"> • <u>Item 5.3 – Capital Funded Projects – Power Issues</u> The Committee received an update on electricity issues at Bankstown-Lidcombe and Fairfield Hospitals. <p>Prof Merrett reported that due to the existing power supply at Bankstown-Lidcombe Hospital being unable to increase the load to support the further development of interventional radiology services, cases are being transferred from Bankstown-Lidcombe Hospital to Liverpool Hospital.</p> 	

<p>9.3 Audit & Risk Management</p> <p>Minutes</p>	<ul style="list-style-type: none"> The Minutes of the Audit & Risk Management Committee meeting held on 19 February 2018 were circulated with the Agenda and <u>NOTED</u> by the Board. Ms Burlew highlighted: <ul style="list-style-type: none"> <u>Item 7.6.1 – Summary of Audit Results</u> The Committee noted the trend with repeated failure of controls in the ‘Safe Custody of Patient Valuables’ audits and requested the inclusion of a question in the annual <i>certifying the effectiveness of internal controls over financial information</i> questionnaire that is signed by the facility general managers. <u>Item 7.6.4 – Statistics & Status on Internal Audit Recommendations</u> The Committee have requested a presentation on the implementation of (access cards) Audit Report recommendations from Fairfield Hospital. <u>Item 7.5.2 – Workers Compensation Report</u> The Committee have requested financial and statistical TMF comparative data relating to WHS performance. 	
<p>ICAC Matters</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the notifications to (nil) and received from (nil) the ICAC for the period 9 February 2018 to 9 March, as circulated with the Agenda. 	
<p>9.4 Research & Teaching</p> <p>Minutes</p>	<ul style="list-style-type: none"> The next meeting of the Research & Teaching Committee is scheduled for 5 April 2018. 	
<p>9.5 Aboriginal Health</p> <p>Minutes</p>	<ul style="list-style-type: none"> Minutes of the Aboriginal Health Committee meeting held on 22 March 2018 were not available for distribution with the Board Agenda. 	
<p>SHHV Program</p>	<ul style="list-style-type: none"> The Board <u>APPROVED</u> the establishment of 1 FTE Child & Family Health Nurse and 1 FTE Aboriginal Health Worker to support a Sustained Health Home Visiting model for Aboriginal families in the Wingecarribee area, as described in the Referral Note circulated with the Agenda. 	

<p>9.6 Nominations</p> <p>Minutes</p>	<ul style="list-style-type: none"> The next meeting of the Nominations Committee is scheduled for 23 April 2018. 	
<p>10 Consumer & Community Council</p>	<ul style="list-style-type: none"> The Minutes of the Consumer and Community Council meeting held on 2 March 2018 were circulated with the Agenda and <u>NOTED</u> by the Board. Mr Reidy / Ms Murphy highlighted: <ul style="list-style-type: none"> A presentation on 'Care in the Community – Clinical Services Plan' was well received. The Council reflects the philosophy of the Transforming Your Experience strategy. 	
<p>11 Items for Information</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the 2018 Board meeting & events summary. The Chair highlighted upcoming events as follows: <ul style="list-style-type: none"> 30 April 2018 – Board Planning Workshop 17 July 2018 – Joint Board meeting with Western Sydney Local Health District. The Secretary, NSW MoH will also be in attendance. <ul style="list-style-type: none"> <i>Board members were encouraged to attend.</i> 	
<p>12 Other Business Without Notice</p>	<ul style="list-style-type: none"> The Chair invited other business without notice. Nil received. 	
<p>13 MSEC Feedback</p>	<ul style="list-style-type: none"> The Chair invited feedback/issues from the Medical Staff Executive Council. Dr Frankel highlighted: <ul style="list-style-type: none"> <u>eMR</u> Concern expressed about patient safety as a result of unplanned down-time. While down-time procedures (including training) exist other issues have been identified. Action: HCQSC to receive information to reassure the Board about patient safety during unplanned eMR outages. <u>eMeds</u> Issues with pathology forms not being accepted through outpatient arrangements. 	<p>Director, ICT & Director Clinical Governance</p>

14 Close / Next Meeting	<ul style="list-style-type: none">• The meeting closed at 6.48pm. The next meeting will be held:<ul style="list-style-type: none">• Monday 23 April 2018• 3.30pm – Board meeting• District Office, Eastern Campus, Liverpool Hospital	
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