

MINUTES

South Western Sydney Local Health District Board

Date: Monday 23 July 2018

Time: 3:30pm

Venue: Board Room, Fairfield 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	✓		Medical Staff Executive Council Representative		✓
Ms Clair Ramsden, Director Operations	✓		Ms Nel Buttenshaw, Manager Executive & Board Secretariat	✓	
Mr Ross Sinclair, Director of Finance	✓		Mr Ken Hampson, A/g General Manager, Fairfield Hospital	✓	

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 time-frame and process relating to the Chief Executive's Annual Performance Review. 	
<i>Ms Larkin, Ms Buttenshaw, Ms Ramsden, Mr Hampson & Mr Sinclair joined the meeting at 3.35pm.</i>		
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. Nil were received. 	

<p>4. Confirmation of the previous minutes and action list</p>	<ul style="list-style-type: none"> • <u>MOTION</u>: A motion was moved by Prof Merrett and seconded by Prof Frankum that the Minutes of the Board meeting held on 25 June 2018 be accepted as a true and accurate record. • The Motion was carried. 	
<p>5. Patient Story</p>	<ul style="list-style-type: none"> • Mr Hampson presented the story of 'Alex' in the context of NDIS, highlighting: <ul style="list-style-type: none"> • <u>Background</u> <p>Alex was initially admitted on 31 December 2017 to Liverpool Hospital for ischemic forefoot gangrene, which resulted in an amputation (below the right knee).</p> <p>Due to the unsuitability of his current accommodation an application for Housing Relocation was submitted.</p> <p>2 February 2018 – NDIS application submitted.</p> <p>4 February 2018 – Transferred to Fairfield Hospital for ongoing discharge planning</p> • <u>Patient Journey – Fairfield Hospital</u> <p>Allied Health were involved in Alex's case from the first week of admission.</p> <p>NDIS agreed to 'fast track' (not prioritise) the application – Alex was in an acute bed.</p> <p>On 20 June Alex was discharged home.</p> <ul style="list-style-type: none"> • <u>Issues, Delays & Gaps</u> <p>Alex waited 138 days in the Hospital from the date of application until discharge.</p> <p>Lack of communication between the NDIS Planner and Support Coordinator about Alex's discharge plan.</p> <p>Equipment was ultimately provide by Fairfield Hospital's Equipment Loan Pool, instead of NDIS</p> <p>Extensive involvement from Allied Health, Fairfield Hospital was required (99 occasions of service between OT and Social Work)</p> <p>ComPacks package utilised instead of external service to avoid further delay of discharge.</p>	

	<ul style="list-style-type: none"> • Discussion included: <ul style="list-style-type: none"> • Escalation for LHDs is via the NSW MoH • NDIS is a potential discussion topic for the Council of Board Chairs forum • Mr Bosotti undertook to circulate to Board members a blog – which includes an informative related article • The SWSLHD has approximately 45 patients in hospital awaiting NDIS support • The Board <u>NOTED</u> the patient story. 	
6. Business Arising		
6.1 Literature Review [28.05.18: Item 8.1.5]	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the findings of a literature review in relation to adverse medical events and excessive staff leave, as circulated with the Agenda. • The review did not find a correlation between medical events and staff leave, however a common feature of the articles was fatigue and staff well-being. 	
6.2 Surgical Procedures Completed at Private Hospitals [28.05.18: Item 8.1.5]	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the report regarding surgical procedures completed at private hospitals during 2017/18, as circulated with the Agenda. • Mr Sinclair confirmed that the cost is higher; AMA rates are paid. Admission of SWSLHD elective waiting list procedures to private facilities has resulted in a reduction of waiting times for patients. 	
6.3 Integrated Care [28.05.18: Item 8.1.5]	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the report providing detail on the key integrated care initiatives currently being implemented, as circulated with the Agenda. 	
6.4 Use of funds from licensed premises [25.06.18: Item 6.4]	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the results of the out of session voting on the Motion about the use of funds from licensed premises, as circulated with the Agenda. • Given the result was against the Motion, the Board invited management to submit a proposal about ensuring that a proportion of donations are used to further assist people with gambling or alcohol addiction. • <u>Action:</u> Submit a proposal to the Board. 	Director of Operations

<p>6.5 Fairfield Hospital – Unplanned Readmissions [25.06.18: Item 8.1.5]</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the key factors that contribute to the sustained low re-admission rate at Fairfield Hospital, as circulated with the Agenda. • Ms Larkin confirmed that telephone contact post discharge forms part of the ‘discharge passport’ initiative, currently being implemented and monitored through the Health Care Quality & Safety Committee. 	
<p>6.6 Mental Health Service Report [25.06.18: Item 8.1.5]</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> that there were zero seclusion episodes in the Mental Health East Unit between January and March 2018, as circulated with the Agenda. 	
7. New Business		
<p>7.1. 2018/19 Service Level Agreement</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the following documents, circulated with the Agenda: <ul style="list-style-type: none"> ○ Referral Note - providing an overview ○ Review of changes ○ Draft 2018/19 Service Level Agreement (SLA) • Ms Larkin & Mr Sinclair presented the 2018/19 Service Level Agreement (SLA), highlighting: • <u>Overview</u> The 2018/19 SLA sets out the strategic, policy and legislative framework together with a series of schedules outlining: <ul style="list-style-type: none"> • Strategies and Priorities • Services & Networks • Budget • Purchased Volumes • Performance against Strategies & Objectives • <u>Strategic Priorities</u> Strategic Priorities listed in the 2018/19 SLA are contained within the following strategic frameworks: <ul style="list-style-type: none"> • NSW Making it Happened, including the Premier and State Priorities • NSW Strategic Priorities 2018/19 • NSW Government election commitments • Minister’s Priorities 	

- Services Budget

Schedules C and D of the 2018/19 SLA specify:

- Services expenditure
- Service revenue
- Services volume

- Services Budget - Expenditure

The expense budget is \$1,896.3M. This is an increase of \$85.8M (4.7%) on the 2017/18 budget. \$42.4M of this increase is within the activity based funded component of Schedule C. The increase in the expense budget is made up of:

- Funding for activity growth
- Funding for specified service developments
- Price and salary escalation

- Services Budget - Revenue

- The revenue budget is \$1,854.1M, an increase of \$93.8M (5.3%) on the 2017/18 annualised budget.

- The revenue budget is made up of Government Contributions totalling \$1,12M and 'own source' revenue totalling \$233.1M

- General fund 'own source' revenue has increased from \$211.4M in 2017/18 to \$214.3M in 2018/19. This is an increase of \$2.9M (1.4%).

- Services Volume

- Total 2018/19 activity volume for SWSLHD is 338,059 NWAU. These are expressed in Schedule C as:

A	Acute Admitted	}	290,617 NWAU
	Emergency Department		
	Non-admitted (incl. dental)		
B	Sub-acute Services		18,433 NWAU
C	Mental Health Services		29,009 NWAU

- This is an increase of 11,230 NWAU over the 2017/18 baseline, an increase of 3.4%. The increase in activity volume is made up of:

○	Activity Growth	9,736	NWAU
○	Specified Services	897	NWAU
○	State-wide Services	597	NWAU

- Service Development

- The allocation for specified services (897 NWAU) comprises:

Paediatrics	507 NWAU	CTN
Child Weight Mgt	106 NWAU	CDN
Neuro-Radiology	218 NWAU	LPOOL
Diabetes Services	66 NWAU	LPOOL BTN

- The allocation for state-wide services (597 NWAU) comprises:

ICU Bed	298 NWAU	LPOOL
NICU Bed	299 NWAU	LPOOL

- Services - Volume

- The allocation of total target increase (11,230 NWAU) to service streams is as follows:

Acute Admitted	7,073 NWAU	3.7% ↑
Emergency	961 NWAU	2.4% ↑
Sub-Acute	409 NWAU	2.4% ↑
Non-Admitted	1,649 NWAU	3.5% ↑
Mental Health (Admitted)	0 NWAU	0.0% ↑
Mental Health (Non-Admitted)	605 NWAU	6.4% ↑
Dental Health (Non-Admitted)	532 NWAU	12.3% ↑

- Allocation of total activity (338,059 NWAU – includes Braeside) is as follows:

Liverpool	133,435 NWAU	3.7% ↑
Campbelltown	60,199 NWAU	4.7% ↑
Bankstown	53,169 NWAU	1.6% ↑
Fairfield	29,181 NWAU	1.4% ↑
Bowral	9,539 NWAU	0.6% ↑
Camden	5,744 NWAU	2.3% ↑
Mental Health	29,009 NWAU	2.1% ↑

Primary & Cty	10,620 NWAU	1.4% ↑
Dental	4,872 NWAU	12.3% ↑

- **Budget - Risks**
 - Increasing 'own source revenue'
 - Achieving activity growth within budget
 - Greater than projected demand for services
- **Next Steps**
 - Facility and Service Budgets
 - Board endorsement of SLA (23 July)
 - Facility / Service Budgets distributed (24 July)
 - Facility / Service budgets published (31 July)
 - Implementation of Service Developments
- The Chair invited questions / comments:
 - Retail precincts provide an opportunity in relation to the revenue target increasing at a higher rate than the allocation
 - Schedule C, Part 2 – expenditure is forecast to exceed income; this will be offset by the capital program
 - Schedule B – Supra LHD Services – a strategy is needed to improve access to the Mental Health Intensive Care Beds.
 - Financial penalties are still in place for some KPIs, i.e. readmissions
 - Research Governance Targets (KS5304) – appear to be incorrect, i.e. time-frames have been increased
- The Board **ENDORSED** the 2018/19 Service Level Agreement.
- **Actions:**
 - Chairman and Chief Executive to sign the SLA
 - When submitting to the NSW Ministry of Health note the emerging issues of:
 - Revenue targets are problematic
 - Research Governance KPI targets (clarify)
 - Access to mental health intensive care beds remain challenging
 - Publication of the SLA on the Internet.

Chair / CE

Director,
Finance

Director,
Finance

<p>7.2. Proposed Name Change – Liverpool Hospital</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the suggestion about renaming Liverpool Hospital, as circulated with the Agenda • The Board did not support the initial proposal and requested management seek NSW MoH advice prior to the development of an inclusive (District-wide) concept for resubmission. • Action: Further develop the concept, including seeking NSW MoH advice and resubmit to the Board. 	<p>Ms Larkin</p>
<p>7.3. Revised Asset Strategic Plan</p>	<ul style="list-style-type: none"> • The Board <u>APPROVED</u> the revised 2018 Asset Strategic Plan (ASP) top 5 capital projects for submission to the NSW MoH. • Ms Larkin highlighted: <ul style="list-style-type: none"> • The budget announcement in June 2018 confirming funds for the Liverpool Health & Academic Precinct and the Emergency Department, Bowral & District Hospital provided an opportunity for SWSLHD to revise the 2018 top 5 capital priorities. • Given the related time-frames, the revision was verbally presented to the 15 June 2018 Finance & Assets Committee. • The recommended revised projects: <ol style="list-style-type: none"> 1. Bankstown-Lidcombe Hospital & Community Health Centre Redevelopment - \$1,300B (excl. land) 2. Supporting growth in the south west Sydney priority growth areas: <ul style="list-style-type: none"> - Glenfield - \$96M - Oran Park (Stage 3) - \$53M - Leppington - \$56M - Bringelly - \$96M 3. Bowral & District Hospital Redevelopment - \$55M 4. Campbelltown Health & Education Precinct Stage 3 - \$600M 5. Liverpool Health & Academic Precinct Stage 2 - \$200M • The top 5 capital priorities have been reordered in the ASP Report, to reflect the District's priority and will require a preliminary Cost Benefit Analysis. • Actions: <ul style="list-style-type: none"> • Submit the top 5 capital projects to the NSW MoH. • Work with Fairfield Hospital to progress minor capital work projects, for example upgrade front entrance. 	<p>Ms Larkin</p>

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>Safe Work Australia</u> <p>Via the Department of Finance, Safe Work Australia has advised their intent to prosecute SWSLHD (not individuals) for an offence under section 32 of the <i>Work Health & Safety Act 2011</i>.</p> <p>Pursuant to the guidelines contained in the Premier's Memorandum No. 1997-26 regarding 'Litigation Involving Government Authorities', a meeting between the parties was held on 11 July 2018. The conference provided an opportunity for SWSLHD to make submissions and including any reason why in the public interest the prosecution should not proceed.</p> <p>SWSLHD is currently considering a range of initiatives under the enforceable undertakings arrangement to discuss further with Safe Work Australia.</p> <p>The summons is awaited.</p> • <u>PICU - Campbelltown</u> <p>There has been a suggestion that there should be a PICU at Campbelltown Hospital included in the redevelopment project. This suggestion has not been supported by medical experts or the Hospital's Clinical & Quality Council. Liaison with the NSW MoH continues.</p> <ul style="list-style-type: none"> • <u>WILMA</u> <p>WILMA is a funded NGO providing women's health services in Campbelltown. WILMA occupies a property owned by the SWSLHD which is being considered for sale. Ongoing discussions are being held with WILMA.</p> <p>A social media campaign is being undertaken about a potential relocation. A meeting with the local MP is planned for 30 July 2018.</p> <ul style="list-style-type: none"> • The Board <u>NOTED</u> the Chief Executive's Report, as circulated with the Agenda. 	
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. 	

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. • There was on new High LHD risk approved for entry on the HD Risk Register at the SWSLHD Enterprise-wide Risk Management Committee meeting held on 19 June 2018. <ul style="list-style-type: none"> ○ Leader and senior clinician engagement in the Transforming your Experience strategy. Current Risk Rating: [Major/Possible] HIGH (J). 	
8.1.4 – Work Health & Safety	<ul style="list-style-type: none"> • The next Work Health & Safety Report is due to the August 2018 Board meeting. 	
8.1.5 - KPI Report		
Safety & Quality	<ul style="list-style-type: none"> • The Chair invited comment / questions: <ul style="list-style-type: none"> • One new sentinel event has occurred since the last report. • The Board <u>NOTED</u> 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"> • <u>Emergency Treatment Performance (ETP)</u> Performance for June 2018 at 66.17%, is an improvement on the previous month (65.93%), but below the $\geq 81\%$ target. It is expected that July performance may decrease. Participation in the NSW MoH initiative – Patient Flow Collaborative is a performance watch arrangement. An overview of the key strategies (for Liverpool & Campbelltown Hospitals) was provided. • The Board <u>NOTED</u> the Access & Patient Flow component of the KPI Report. 	

<p>People & Culture</p>	<ul style="list-style-type: none"> • Ms Larkin highlighted: <ul style="list-style-type: none"> • <u>Performance Development Review (PDR) Rates</u> <p>The District's overall compliance rate is a focus area for the Finance & Assets Committee.</p> <p>Action: Provide the PDR compliance rate report by employment classification.</p> • <u>People Matter Employee Survey</u> <p>The Survey closed on 2 July 2018. The SWSLHD response rate of 40%, was lower than the State-wide response rate of 46%.</p> <ul style="list-style-type: none"> • The Board <u>NOTED</u> the People & Culture component of the KPI Report. 	<p>Ms Leon</p>
<p>Finance & Activity</p>	<ul style="list-style-type: none"> • Mr Sinclair highlighted: <ul style="list-style-type: none"> • <u>Finance</u> <p>The LHD met budget as at YTD June 2018. The LHD met both the expenditure and revenue performance levels in the Service Level Agreement for 2017/18 with a Net Cost of Service position \$0.8M favourable to budget.</p> <p>Expenditure highlights in the YTD result included:</p> <ul style="list-style-type: none"> • VMoney back pay accruals in fee for service doctors. • The workers compensation hindsight deficit adjustment of \$3.6M recognised in February 2018 was unfunded. • The total TMF workers compensation premium of \$16M booked in the YTD result. <p>Small vendor payments performance achieved the target of 100% paid within 30 days and all trade creditors were paid within 45 days.</p> • <u>Activity</u> <p>Results (for YTD May 2018) indicate that SWSLHD is 101% of the YTD target.</p> <p>Mental Health Admitted remains challenging, particularly at Liverpool Hospital (-28.7%) due to patients remaining in the ED as a result of access to limited mental health acute beds.</p>	

	<ul style="list-style-type: none"> • Action: Present the strategic financial risks for 2017/18 to the Finance & Assets Committee. • The Board NOTED the Finance & Activity component of the KPI Report. 	Mr Sinclair
Services	<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> The improvements in seclusion and restraint were noted. • <u>Primary & Community Health</u> No items were highlighted. • <u>Drug Health Services</u> Ms Ramsden reported the appointment of Ms Stephanie Hocking to the General Manager position. • <u>Population Health</u> No items were highlighted. • <u>Oral Health</u> Ms Larkin noted an increase in funding for oral health services. • The Board NOTED the Service Reports component of the KPI Report. 	
8.1.6 – Media & Marketing Report	<ul style="list-style-type: none"> • The Board NOTED the Media & Marketing Report, as circulated with the Agenda. • Ms Larkin confirmed that surveillance of social media platforms continues. 	
8.1.7 – Strategic Plan Update	<ul style="list-style-type: none"> • Nil. 	
8.2 Chairman’s Report		
8.2.1 – Model By-laws	<ul style="list-style-type: none"> • The Board NOTED the update regarding their proposed amendments to the Model By-laws, as circulated with the Agenda. 	

	<ul style="list-style-type: none"> • The Chair reported his conversation with the A/Director, Legal & Regulatory Services, NSW MoH to clarify the Board's rationale for proposing amendments relating to: <ul style="list-style-type: none"> • Committee quorums • Committee membership • A formal response will be issued by the NSW MoH. 	
8.2.2 – Board Planning Workshop	<ul style="list-style-type: none"> • The Board <u>AGREED</u> the following discussion topics for the Board Planning Workshop to be held 20 August 2018: <ul style="list-style-type: none"> • Revisit the Board reported risks • WHS Refresher Training (as agreed at the April 2018 Board meeting) • Where is SWSLHD positioned in the context of State-wide services? (need to be leaders) • Cancer Services • <u>Action:</u> Progress arrangements for the Planning Workshop. 	Ms Buttenshaw
8.2.3 – Correspondence Received	<ul style="list-style-type: none"> • The Board <u>NOTED</u> further correspondence to/from Mr CS, as circulated with the Agenda. Ms Larkin advised that Mr Hampson remains Mr CS's point of contact. • The Board <u>NOTED</u> correspondence to/from the Secretary, NSW MoH regarding an attestation of compliance with the clinical engagement aspects of the Model By-Laws, as circulated with the Agenda. Ms Burlew noted an error in the SWSLHD response – a clinician Board member is a member of the Finance & Assets Committee. • The Board <u>NOTED</u> correspondence to/from the Camden Region Economic Taskforce. 	
8.2.4 – Feedback Joint Board Meeting	<ul style="list-style-type: none"> • The Chair invited reflection on the joint meeting with Western Sydney LHD held on 17 July 2018. • Discussion included: <ul style="list-style-type: none"> ○ The meeting provided a positive platform from which to progress collaborative effort ○ The invitation for a reciprocal arrangement to attend Board meetings / planning workshops was considered worthy, although it may be too early in the collaboration to formally extend the invitation 	

	<ul style="list-style-type: none"> ○ The presentation highlighting population growth could be complemented at the next joint meeting by overlaying medical infrastructure needs 	
8.2.5 – Update: Board Climate Survey	<ul style="list-style-type: none"> ● The Board NOTED the update regarding the 2018 Board Climate Survey, as circulated with the Agenda. ● The Chairman reported receipt of the interim report; to be reviewed. 	
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 4 July 2018 were circulated with the Agenda and NOTED by the Board. ● Prof Merrett highlighted: <ul style="list-style-type: none"> ● <u>Item 6.1 – Testicular Torsion</u> The Committee noted summary data regarding presentation of testicular torsions and the initiatives being undertaken, i.e. awareness sessions, senior clinician review in the ED, referral processes. ● <u>Item 7.1.2 – Sentinel Event</u> The Committee noted a sentinel event had occurred since the last report. ● <u>Item 7.2.1 – BHI Report</u> The BHI Report – ED patient satisfaction survey results (2016-17) was noted by the Committee. Results reflected the age of facilities; the survey period was prior to the ED renovations at Fairfield and the budget announcement relating to the ED at Bankstown-Lidcombe Hospital. Gaps identified by the survey results will be addressed through the broader TYE framework. 	
9.2 Finance & Assets Minutes	<ul style="list-style-type: none"> ● The Minutes of the Finance & Assets Committee meeting held on 15 June 2018 were circulated with the Agenda and NOTED by the Board. ● Ms Burlew highlighted: <ul style="list-style-type: none"> ● <u>Item 5.2 – Power Issues at Fairfield & Bankstown-Lidcombe Hospitals</u> The power supply at both hospitals is safe, but limited to provide new services. The current status was described as a critical issue in a stable environment. 	

	<ul style="list-style-type: none"> • <u>Item 5.4 – Delegations Manual</u> Previously considered by the Board. 	
<p>9.3 Research & Teaching</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Research & Teaching Committee meeting held on 21 June 2018 were circulated with the Agenda and <u>NOTED</u> by the Board. • Prof Frankum highlighted: <ul style="list-style-type: none"> • <u>Item 2 – Integrated Care Presentation</u> Dr Knight has been appointed (in a part-time capacity) as Research Director, Integrated Care and presented an update on progress at a State and District level. • <u>Item 7.1 – Research Ethics & Governance Metrics Program: Update Report (OHMR)</u> The Committee noted a significant improvement in performance measures for SWSLHD. • <u>Announcement - Academic Units</u> The Academic Unit announcement, as included in the Chief Executive’s Report has created a positive energy and enthusiasm to promote research. • The Board <u>AGREED</u> for Dr Abi-Hanna to Chair the December meeting, due to Prof Frankum’s apology. 	
<p>9.4 Aboriginal Health</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Aboriginal Health Committee held on 28 June 2018 were circulated with the Agenda and <u>NOTED</u> by the Board. • Ms Carriage highlighted: <ul style="list-style-type: none"> • <u>Item 7.1 – Aboriginal Health Plan: Cultural Safety</u> The next steps / priorities include a further tier of training, post Respecting the Difference. A framework is being developed to assess the District’s strategies to address cultural safety. 	
<p>Committee Self-Assessment</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the summary report arising from the annual committee self-assessment. • The Board <u>ENDORSED</u> the proposed amendments to the Terms of Reference, as circulated with the Agenda. • Actions: <ul style="list-style-type: none"> • Advise the Aboriginal Health Committee of the Board’s endorsement. • Update (and re-publish) the Terms of Reference 	<p>Ms Buttenshaw</p>

<p>9.5 Audit & Risk Management</p> <p>Minutes</p>	<ul style="list-style-type: none"> The Minutes of the Audit & Risk Management Committee meeting held on 12 July 2018 were not yet available. 	
<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 13 June to 9 July 2018, as circulated with the Agenda. The Referral Note included clarification that the ICAC referral noted at Item 7.2.2 of the Minutes (15.5.18) had been reported to the Board. 	
<p>Corporate Governance Attestation Statement</p>	<ul style="list-style-type: none"> The Board <u>APPROVED</u> the Corporate Governance Attestation Statement for 2017-18, as circulated with the Agenda. Action: Chairman and Chief Executive to sign the Corporate Governance Attestation Statement for submission to NSW MoH and publication on the website. 	<p>Chair / CE</p>
<p>Audit & Risk Management Attestation Statement</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the Internal Audit & Risk Management Attestation Statement for 2017-18, as circulated with the Agenda. 	
<p>9.6 Nominations</p> <p>Minutes</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> that the Minutes of the Nominations Committee meeting held on 16 July 2018 will be published on Govdex. 	
<p>Demonstrating Board Leadership</p>	<ul style="list-style-type: none"> The Board <u>ENDORSED</u> the proposed strategies to demonstrate leadership of the Transforming Your Experience strategy, as circulated with the Agenda. 	
<p>10 Consumer & Community Council</p>	<ul style="list-style-type: none"> The Minutes of the Consumer and Community Council meeting held on 6 July 2018 were circulated with the Agenda and <u>NOTED</u> by the Board. Mr Reidy encouraged Board members to attend the Annual Conference on 14 September 2018. 	
<p>11 Items for Information</p>	<ul style="list-style-type: none"> The Board <u>NOTED</u> the 2018 Board meeting & events summary. Action: Include the Consumer & Community Council Annual Conference on the Calendar. The Chair noted that the MoH have advised a change of date for the LHD & Specialty Network Board Conference to 8 October 2018. 	<p>Ms Buttenshaw</p>

<p>12 Other Business Without Notice</p>	<ul style="list-style-type: none"> • The Chair invited other business without notice. • Prof Merrett & Prof Frankum provided apologies for being unable to attend the joint Board meeting with Western Sydney LHD (held 17 July 2018). 	
<p>13 MSEC Feedback</p>	<ul style="list-style-type: none"> • Nil items. 	
<p>14 Close / Next Meeting</p>	<ul style="list-style-type: none"> • The meeting closed at 6.36pm. The next meeting will be held: <ul style="list-style-type: none"> • Monday 27 August 2018 – District Office • 3.30pm – Board meeting 	