

MINUTES

South Western Sydney Local Health District Board

Date: Monday 27 August 2018

Time: 3:30pm

Venue: Board Room, District Office

1. Present and Apologies

<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>	<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>
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 Karuna Keat, Medical Staff Executive Council Representative	✓	
Ms Clair Ramsden, Director of Operations	✓		Ms Nel Buttenshaw, Manager Executive & Board Secretariat	✓	
Mr Ross Sinclair, Director of Finance	✓		Ms Suzie Snook, A/Director Clinical Governance	✓	
Ms Sonia Marshall, Director of Nursing & Midwifery		✓	Ms Rebecca Leon, A/Director, Workforce & Development	✓	
Ms Sally Whitten, Manager Risk Governance	✓				

<i>Agenda Item</i>	<i>Discussion/Decision/Recommendation</i>	<i>Responsible</i>
In-camera Session	<ul style="list-style-type: none"> The Board held an in-camera session to discuss the Chief Executive's Annual Performance Review. 	
<i>Ms Larkin joined the meeting at 3.40pm</i>		
<i>Ms Buttenshaw, Ms Ramsden, Ms Snook, Ms Leon, Mr Sinclair & Dr Keat joined the meeting at 3.47pm</i>		
	<ul style="list-style-type: none"> The Board congratulated the Chief Executive for the excellent performance of the LHD during 2017/18 and commended the Chief Executive for her excellent leadership. 	

<p>2. Acknowledgment to Country</p>	<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. 	
<p>3. Declaration of Interests</p>	<ul style="list-style-type: none"> The Chair invited declarations of interest. Mr Bosotti reported that he has been named in an advocacy role in ministerial correspondence relating to a spinal patient (NDIS) at Bankstown-Lidcombe Hospital. 	
<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 Ms Burlew and seconded by Prof Merrett that the Minutes of the Board meeting held on 23 July 2018 be accepted as a true and accurate record, subject to the following correction: <ul style="list-style-type: none"> Item 7.1 – “...NSW Making it Happened..” The Motion was carried. Item 9.3 - Dr Abi-Hanna to discuss with Prof Frankum his inability to Chair the December Research & Teaching Committee meeting. An alternate Chair needs to be identified. 	<p><i>Dr Abi-Hanna & Prof Frankum</i></p>
<p>5. Patient Story</p>	<ul style="list-style-type: none"> Ms Snook presented a story that arose from a telephone complaint received from a patient’s daughter. <p><u>Case Overview</u></p> <p>The patient, an 83 year old female, was initially admitted to Fairfield Hospital with appendicitis and was transferred to Liverpool Hospital where she underwent bowel resection surgery. During her admission to Liverpool Hospital the patient had a fall which required hip surgery. The patient was transferred back to Fairfield Hospital for rehabilitation.</p> <p><u>Concerns Raised</u></p> <p>The daughter raised a number of concerns that included her mother sustaining an injury following a fall while in hospital (that required surgery), not being advised that her mother had fallen, inadequate information regarding the whereabouts of her mother following surgery.</p> <p><u>Follow Up</u></p> <p>The Liverpool Hospital Patient Liaison Officer (PLO) met with the patient’s daughter about the concerns she had raised and to advise that a SAC 2 clinical investigation in relation to her mother’s fall was completed. A copy of the Report was subsequently provided.</p>	

	<p>The PLO reported that the daughter was satisfied with the follow up received.</p> <p>Ms Snook reported that the Nurse Unit Manager had provided feedback to staff highlighting the importance of communication.</p> <p>Actions:</p> <ul style="list-style-type: none"> • Review the investigation into how /why the patient could not be located. • As a result of discussion it was agreed that the September patient story be replaced with advice relating to patient tracking systems, specifically: <ul style="list-style-type: none"> • What patient tracking systems are available • What systems are used by other LHDs • The system in place for tracking paediatric patients • The Chair and Chief Executive to discuss Mr Bosotti's renewed suggestion that the patient story be reported in an alternate arrangement (with a research achievement). It was noted that Mr Bosotti's suggestion was previously not supported. • The Board <u>CONSIDERED & DISCUSSED</u> the patient story. 	<p>A/Director, Clinical Governance</p> <p>Director, ICT</p> <p>Chair & Chief Executive</p>
6. Business Arising		
<p>6.1 Future of Healthcare Delivery [30.04.18]</p>	<ul style="list-style-type: none"> • The Board <u>NOTED</u> the Referral Note in response to the two actions arising from the presentation by Ernst & Young - <i>Future of Healthcare Delivery</i> to the Board Planning Workshop, as circulated with the Agenda. • Ms Larkin highlighted: <ul style="list-style-type: none"> • <u>Eight implications SWSLHD should consider</u> <p>The presentation suggested eight 'implications' the SWSLHD should consider:</p> <ul style="list-style-type: none"> • The consumer must be at the centre of all strategic planning • Investment in quality saves money • Close relationships with PHNs are essential longer term • Build care pathways with primary care providers to improve hospital utilisation • Research priorities should be focused on national global needs • Efficiencies can be driven through automation and use of technology 	

	<ul style="list-style-type: none"> • Build connectedness through eHealth to provide a better consumer experience • Use analytics to plan and coordinate services to meet consumer personal needs <p>A gap analysis was undertaken, as requested, and circulated with the Agenda. It is considered that the themes arising are picked up in the Strategic Plan.</p> <ul style="list-style-type: none"> • <u>Planning future health services – is future thinking sufficiently built into design?</u> <p>The planning and design of new facilities is governed by relevant Australian Standards and considers:</p> <ul style="list-style-type: none"> • Clinical need <ul style="list-style-type: none"> ▪ The 'grid' format supports re-purposing of space to accommodate service demands and evolving models of care. • Efficient and sustainable design • Digital health and technology <ul style="list-style-type: none"> ▪ The LHD are working with Deloitte to develop a virtual care strategy for the District. The aim of the strategy is to support the design and build efficient and future focused health care. ▪ The need to embrace, accelerate progress in this area was discussed. The rapidly changing technology environment requires an agile organisation. <ul style="list-style-type: none"> • The Board agreed the importance of this strategic issue and requested the issue be re-visited every six-months or annually. • Action: Include the matter on the Items Due Calendar. 	Secretariat
<i>Prof Merrett left the meeting at 4.30pm</i>		
7. New Business		
7.1. Nil Items		

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>In line with the guidelines contained in a Premier's Memorandum (No. 1997-26 regarding 'Litigation Involving Government Authorities'), a meeting with Safe Work Australia was held on 16 August 2018. The purpose of the meeting was to discuss the process and eligibility criteria for an enforceable undertaking.</p> <p>The matter was listed for a mention at Court today (28 August 2018). An adjournment was being sought (6 – 8 weeks).</p> <p>The LHD can continue to progress an enforceable undertaking (i.e. undertake agreed actions to an agreed dollar limit over an agreed period of time or defend the matter that could, if the case is lost result in a fine). Senior Counsel advice is being sought.</p> <p><u>Actions:</u></p> <ul style="list-style-type: none"> • Circulate the Summons to the Board. • Seek advice – could the judgment be an enforceable undertaking. • <u>Clinical Incident</u> <p>The Chief Executive and General Manager, Liverpool Hospital met with the Hon Brad Hazzard MP, Minister for Health and Minister for Medical Research on 15 August 2018 to discuss a clinical incident.</p> <ul style="list-style-type: none"> • <u>NSW Legislative Council – Inquiry into the Implementation of the NDIS and the provision of Disability Services in NSW</u> <p>On 22 June 2018 the Government announced an Upper House (Portfolio Committee No 2) inquiry into the Implementation of the NDIS and the provision of Disability Services in NSW.</p> <p>The closing date for submissions is mid-August with public hearings to take place in September and October. The District intends to make a submission, through the NSW MoH.</p>	Chief Executive

	<ul style="list-style-type: none"> <p><u>Bankstown-Lidcombe Hospital Redevelopment</u></p> <p>The Secretary, NSW Ministry of Health has written to SWSLHD and Sydney Local Health District requesting LHDs consider planning for future services within Canterbury-Bankstown Local Government Area (LGA) using a whole of population approach and develop common approaches to patient flows within the LGA. This will be undertaken subsequent to the development of the draft Bankstown-Lidcombe Hospital Clinical Services Plan in early 2019.</p> <p><u>People Matter Employee Survey Results 2018</u></p> <p>The 2018 People Matter Employee survey, conducted by the Public Service Commission was open from 1 June to 2 July 2018. The 2018 results were released on 9 August 2018.</p> <p>SWSLHD scored above the <u>NSW Health average</u> in all key areas for 2018, and improved in all key areas compared to 2017 SWSLHD results.</p> <p>The TYE Team will meet with each Executive Leadership Team to discuss results, define a plan and define how each Facility and Service will provide feedback to all staff.</p> <p>Data will be released by the NSW Ministry of Health to the public from 9 September 2018.</p> <p><u>Senior Staff Appointments</u></p> <p><i>General Manager, Bankstown-Lidcombe Hospital</i></p> <p>Mr Peter Rophail commences on 10 September 2018. Mr Rophail brings invaluable experience from his previous role as Operations Director for Critical Care and Medicine, Western Sydney Local Health District including the successful management of the Blacktown and Mount Drutt Hospitals' expansion. An overview of the Panel and decision making rationale was provided.</p> <p>Action: Draft a letter for the Chairman's signature, on behalf of the Board, to recognise the work and commitment demonstrated by Ms Linda Campbell over the past 2 ½ years.</p> <p><i>NSW Health Deputy Secretary, Finance and Asset Management and Chief Financial Officer</i></p> <p>Mr Dan Hunter commences on 3 September 2018. Mr Hunter is the current Chief Executive, HealthShare NSW.</p> <p>The Board <u>CONSIDERED</u> the Chief Executive's Report, as circulated with the Agenda.</p> 	<p>Secretariat / Chair</p>
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8.1.2 – Risk Management	<ul style="list-style-type: none"> • The Board <u>CONSIDERED</u> the Risk Management Report, as circulated with the Agenda. • Ms Whitten highlighted: <ul style="list-style-type: none"> • The LHD Risk Register was reviewed by the Audit & Risk Management Committee on 21 August 2018 and the Enterprise Risk Management Committee on 21 August 2018. As a result: <ul style="list-style-type: none"> • Six new risks were approved for inclusion on the LHD Risk Register. • Two risks were de-escalated from high (to medium and low). • The current risk profile includes 62 risks (12 high, 47 medium, 3 now and 0 extreme risks). The increasing number of risks was discussed at the August 2018 meeting of the Enterprise Risk Management Committee. The profile includes risks from District-wide services. • Ms Whitten clarified that IIMs data is used to inform Risk ID 512 – Patient aggression / behavioural disturbance in acute care settings. The risk is currently rated Medium. • Action: Review the risk rating for Risk ID 512. 	Risk Governance Manager
<i>Ms Whitten & Ms Burlew left the meeting at 5.25pm.</i>		
8.1.3 - Regulatory Environment	<ul style="list-style-type: none"> • The next Regulatory Environment Report was not due for submission. 	
8.1.4 – Work Health & Safety	<ul style="list-style-type: none"> • The Board <u>CONSIDERED</u> the Work Health & Safety Report, as circulated with the Agenda. • Ms Leon highlighted: <ul style="list-style-type: none"> • The Report has been revised, in response to the feedback received at the May Board meeting. The Report now includes: <ul style="list-style-type: none"> • Performance to key indicators, by quarter and YTD for workers compensation and work health & safety 	

	<ul style="list-style-type: none"> • Workers Compensation <ul style="list-style-type: none"> ○ Improvement areas <ul style="list-style-type: none"> ▪ Implementation of a quarterly meeting and monitoring tools between the LHD, EML and the NSW MoH. ▪ Development of a Workers Compensation Performance Improvement Plan for 2018/19. ▪ Implementation of a monthly KPI Reporting Tool for return to work/injury management staff. ▪ Re-launch of PGAP, a 10-wk activity mobilisation program to reduce psychosocial risk factors, promote reintegration into life role activities and facilitate return to work. • Work Health & Safety <ul style="list-style-type: none"> ○ Areas to note and current strategies <ul style="list-style-type: none"> ▪ Top 3 incident causes ▪ Body Stressing ▪ Falls/Trips/Slips ▪ Being hit by moving objects • Safe Work NSW <ul style="list-style-type: none"> ○ Improvement Notices – received and status <ul style="list-style-type: none"> ▪ October 2017 – Mental Health Unit East ▪ August 2017 – Mental Health Unit East ▪ August 2017 – Mental Health Unit East • The Board noted the importance of understanding the indicators of psychological stress and suggested the use of EAP, excessive sick leave and open workers compensation claims as potential areas to explore. • Action: Provide a report to the Board regarding psychological stress, using appropriate data source/s. • The Board agreed to the revised reporting arrangement. 	A/g Director, Workforce & Development
8.1.5 - KPI Report		
Safety & Quality	<ul style="list-style-type: none"> • The Chair invited comment / questions: <ul style="list-style-type: none"> • Clarification and / or explanation was provided relating to: <ul style="list-style-type: none"> • 2658718-20 – Bankstown-Lidcombe Hospital • 2659636-20 – Liverpool Hospital • 2612186-20 – Liverpool Hospital • 2620766-20 – Mental Health 	

	<ul style="list-style-type: none"> In relation to 2611811-20 – Liverpool Hospital: “...brevity...” should be replaced with “...severity...” Ms Snook advised that the Health Care Quality & Safety Committee is reviewing a suggestion to remove the medication error sentinel event, previously reported, as a result of the completed RCA. The Board <u>CONSIDERED & DISCUSSED</u> the Safety & Quality component of the KPI Report. 	A/Director Clinical Governance
Access & Patient Flow	<ul style="list-style-type: none"> Ms Ramsden highlighted: <ul style="list-style-type: none"> <u>Emergency Treatment Performance (ETP)</u> <p>Performance for July 2018 was 62.2%. The average ETP at July 2018 is 4.68 hrs, a significant improvement to the same time last year (5.46 hrs).</p> <p>An overview of the key strategies (for Liverpool & Campbelltown Hospitals) was provided.</p> The Board <u>CONSIDERED & DISCUSSED</u> the Access & Patient Flow component of the KPI Report. 	
State-wide Selected Performance Indicator Report	<ul style="list-style-type: none"> The Board <u>NOTED</u> the State-wide Selected Performance Indicator Report by LHD (YTD June 2018), as circulated with the Agenda. Ms Larkin highlighted that SWSLHD experienced the highest increase in FTE (at 5.1%), which is consistent with opening of new beds and nursing hours per patient day. 	
People & Culture	<ul style="list-style-type: none"> Ms Leon highlighted: <ul style="list-style-type: none"> <u>Excess Annual Leave Liability</u> <p>Further work is occurring relating to this KPI, including letters being issued to appropriate staff requesting a leave application rather than a leave plan. The Finance & Assets Committee maintains an oversight of this KPI. Reasons for staff not taking leave are multiple.</p> 	

	<ul style="list-style-type: none"> • <u>Performance Development Review (PDR) Rates</u> <p>The District's overall compliance rate remains a focus area for the Finance & Assets Committee. The overall compliance rate for the reporting month is at 80.4%, an increase on the previous month (79.3%).</p> <ul style="list-style-type: none"> • Ms Leon noted that other KPIs such as People Matters Employee Survey and Workers Compensation have previously been discussed. • The Board <u>CONSIDERED & DISCUSSED</u> the People & Culture component of the KPI Report. 	
<p>Finance & Activity</p>	<ul style="list-style-type: none"> • Mr Sinclair highlighted: <ul style="list-style-type: none"> • <u>Budget</u> <p>The LHD had a Net Cost of Service unfavourability of \$1.5M for the month of July. The main items in expense for noting were:</p> <ul style="list-style-type: none"> • High surge activity particularly at Liverpool Hospital as a result of winter activity • Increase in VMO Fee for Service expenditure as a result of back dated award increases effective 1 January 2017. <p>The main items for Own Source Revenue for noting were:</p> <ul style="list-style-type: none"> • A decline in private patient conversion attributed to the ongoing increases in private health insurance premiums and/or patients only holding ancillary cover. • Other revenue is performing well due to the commercial retail rentals at Liverpool Hospital. <p>Other key areas noted for July included:</p> <ul style="list-style-type: none"> • The 2.5% award increase on salary & wages was processed during July; in previous years the increase was processed in August. <p>Small vendor payments performance achieved the target of 100% paid within 30 days and all trade creditors were paid within 45 days.</p> <ul style="list-style-type: none"> • <u>Activity</u> <p>Results indicate that the LHD is 101% of YTD target – June 2018 (the most current available data).</p> • The Board <u>CONSIDERED & DISCUSSED</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> No items were highlighted. • <u>Primary & Community Health</u> No items were highlighted. • <u>Drug Health Services</u> No items were highlighted. • <u>Population Health</u> No items were highlighted. • <u>Oral Health</u> No items were highlighted. • The Board <u>CONSIDERED</u> the Service Reports component of the KPI Report. 	
<p>8.1.6 – Media & Marketing Report</p>	<ul style="list-style-type: none"> • The Board <u>CONSIDERED</u> the Media & Marketing Report, as circulated with the Agenda. • The Chief Executive reported the impending publication of the <i>Thrive</i> Spring Edition. <i>Thrive</i> has received very positive feedback. 	
<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 – Correspondence Received</p>	<ul style="list-style-type: none"> • The Board <u>CONSIDERED</u> correspondence received (either directly or by way of cc) from Mr CS, as circulated with the Agenda. Ms Larkin advised that Mr Hampson remains Mr CS’s point of contact. • The Board <u>CONSIDERED</u> correspondence received from the Secretary, NSW Ministry of Health regarding ‘reporting on the implementation plan to reduce the use of seclusion and restraint’, as circulated with the Agenda. The letter indicated that a separate letter had been sent to LHDs, which requires a response. 	

<p>8.2.2 – Joint Board Meeting - WSLHD</p>	<ul style="list-style-type: none"> • The Board ENDORSED the Record of Proceedings arising from the Joint Board meeting (with Western Sydney LHD) held on 17 July 2018, as circulated with the Agenda. • The Board AGREED to consider the 2019 joint meeting date when planning the 2019 Board Calendar (at the October 2018 meeting). <ul style="list-style-type: none"> • Action: Include the proposed dates for the Joint Board meeting in the draft 2019 Calendar for consideration at the October Board meeting. • The Board CONSIDERED & DISCUSSED correspondence received from the WSLHD Board Chair, as circulated with the Agenda. • It was agreed that a response letter be sent to the WSLHD Board Chair reciprocating the invitation to commence Board interaction at the Committee level and Planning Workshops. <ul style="list-style-type: none"> • Action: Draft correspondence for the Chair to sign, on behalf of the Board. 	<p>Secretariat</p> <p>Secretariat</p>
<p>9 Committees of the Board</p>		
<p>9.1 Health Care Quality & Safety Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Health Care Quality & Safety Committee meeting held on 1 August 2018 were circulated with the Agenda and CONSIDERED by the Board. • Dr Gray highlighted: <ul style="list-style-type: none"> • <u>Item 6.1 – Fairfield Hospital: Review of Maternity and Neonatal Service</u> <p>The Committee received an update on the action plan developed to address the recommendations from the review of Maternity and Neonatal Services Fairfield Hospital. 17 of the 20 recommendation have been completed.</p> <p>Two recommendations that involve multidisciplinary education and aligning policies are progressing and will be completed by December 2018.</p> <p>A key recommendation of the review involves transfer of women of 34 – 36+6 week gestation to Liverpool Hospital for planned birth has now been documented and agreed to.</p> 	

	<p>The governance for the Action Plan is with the Fairfield Hospital Maternity Risk Management Committee. A final update will be presented to the SWSLHD Clinical & Quality Council.</p>	
<p>9.2 Finance & Assets</p> <p>Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Finance & Assets Committee meeting held on 20 July 2018 were circulated with the Agenda and <u>CONSIDERED & DISCUSSED</u> by the Board. • The Board noted that the Finance & Assets Committee received a presentation to their June meeting relating to power supply issues at Fairfield and Bankstown-Lidcombe Hospitals. This matter was an item of note to the Board’s July meeting. • Mr Sinclair confirmed that the current power supply is considered ‘critical but stable’. This means that the power supply is safe for existing services (generator capacity and load shedding are in place), however no new service may be added, for example eMR cannot be implemented at Fairfield Hospital. • Mr Sinclair advised that an upgrade of the electrical mains power is needed to bring on new services. Plans and a business case have been submitted to support Asset and Replacement Project (AARP) funding to undertake the upgrades (feedback is expected in September 2018). 	
<p>Committee Self-Assessment</p>	<ul style="list-style-type: none"> • The Board <u>CONSIDERED & DISCUSSED</u> the Summary Report arising from the annual committee self-assessment. • Mr Gordon highlighted: <ul style="list-style-type: none"> • Results are consistent with previous years. • Concerns were raised regarding succession planning, pending Ms Burlew’s impending retirement. 	
<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 2 August 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board. • Prof Frankum highlighted: <ul style="list-style-type: none"> • <u>Item 4 – Research Strategy 2023</u> <p>The Committee received a presentation from the Planning Unit regarding the Research Strategy 2023. The Plan’s refresh is necessary as a result of the accelerated progress of the current Research Strategy. It is proposed to design the Strategy around the framework of the ‘Australian Medical Research & Innovation Strategy 2016-2021’, amended to suit our local need.</p> 	

	<p>The consultation process will be undertaken over the next 3 months, with a first draft by year end. It is suggested that the Strategy be launched at the 2019 Research Show Case.</p> <p>The Committee will receive an update to its February 2019 meeting.</p> <ul style="list-style-type: none"> • <u>Item 4 – IIAMR Report – Commercialisation</u> <p>The IIAMR has commenced work on developing IP protection and commercialisation capabilities and principles.</p>	
<p>Committee Self-Assessment</p>	<ul style="list-style-type: none"> • The Board <u>CONSIDERED & DISCUSSED</u> the summary report arising from the annual committee self-assessment. • Prof Frankum highlighted: <ul style="list-style-type: none"> • Overall, positive responses were received. • Concerns were raised that the Committee may be too 'medically' and 'research' focussed. The LHD has a Director of Research but does not have a Director of Teaching. • The Board <u>ENDORSED</u> the proposed amendments to the Terms of Reference, as circulated with the Agenda. • Action: Advise the Research & Teaching Committee of the Board's endorsement. 	<p>Secretariat</p>
<p>9.4 Aboriginal Health Minutes</p>	<ul style="list-style-type: none"> • The next meeting of the Aboriginal Health Committee will be held on 27 September 2018. 	
<p>9.5 Audit & Risk Management Minutes</p>	<ul style="list-style-type: none"> • The Minutes of the Audit & Risk Management Committee meeting held on 12 July 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board. • Items of note for the Board were dealt with at the July Board meeting: <ul style="list-style-type: none"> • The SWSLHD financial statements for the year ended 30 June 2018 were recommended for submission to the Ministry of Health and the Audit Office of NSW subject to minor corrections. • The Special Purpose Service Entity financial statements for the year ended 30 June 2018 were recommended for submission to the Ministry of Health and the Audit Office of NSW subject to minor corrections. 	

	<ul style="list-style-type: none"> • The Internal Audit and Risk Management Attestation Statement was endorsed for submission to the Ministry of Health and referral to the Board for noting. • The Audit and Risk Management Committee Self-Assessment Checklist was endorsed for submission to the Ministry of Health. • The Corporate Governance Attestation Statement was recommended for submission to the SWSLHD Board for signing. 	
ICAC Matters	<ul style="list-style-type: none"> • The Board <u>CONSIDERED</u> the (four) notifications to and received from (nil) the ICAC for the period of 9 July to 13 August 2018, as circulated with the Agenda. 	
9.6 Nominations Minutes	<ul style="list-style-type: none"> • The Board <u>NOTED</u> that the Minutes of the Nominations Committee meeting held on 22 August 2018 will be published on Govdex. 	
10 Consumer & Community Council	<ul style="list-style-type: none"> • The Minutes of the Consumer and Community Council meeting held on 3 August 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board. • The Chair and Chief Executive were in attendance. 	
11 MSEC Feedback	<ul style="list-style-type: none"> • Dr Keat reported two issues arising from the recent Medical Staff Executive Council meeting for the Board's attention: <ul style="list-style-type: none"> • A presentation was received from the Director, ICT about issues and concerns raised with the eMR. • The ability to attract and retain senior medical staff in mental health remains problematic. The LHD has met with the Chief Psychiatrist and Deputy Secretary, Strategy & Resources about the issue. A VMO model is being explored. 	
12 Items for Information	<ul style="list-style-type: none"> • The Board <u>CONSIDERED & DISCUSSED</u> the 2018 Board meeting & events summary. • The Chair highlighted: <ul style="list-style-type: none"> • 14.09.18 Annual Conference – Consumer & Community Council • 20.09.18 SWSLHD Patient Safety Seminar • 08.10.18 LHD & Specialty Network Board Conference 	

<p>13 Other Business Without Notice</p>	<ul style="list-style-type: none"> • The Chair invited other business without notice. • Mr Bosotti noted his leave over September and October 2018. 	
<p>14 Close / Next Meeting</p>	<ul style="list-style-type: none"> • The meeting closed at 6.35 pm. The next meeting will be held: <ul style="list-style-type: none"> • Monday 24 September 2018 – Campbelltown Hospital • 2.30pm – Site Visit • 3.30 pm – Board meeting 	