

# MINUTES

## South Western Sydney Local Health District Board

Date: Monday 22 October 2018

Time: 3:30pm

Venue: Board Room, District Office, Eastern Campus Liverpool Hospital

### 1. Present and Apologies

<b>Members</b>	<b>Pres.</b>	<b>Apol.</b>	<b>Members</b>	<b>Pres.</b>	<b>Apol.</b>
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	✓				
<b>Other Attendees</b>					
Ms Amanda Larkin, Chief Executive	✓		Medical Staff Executive Council Representative		✓
Ms Clair Ramsden, Director of Operations	✓		Ms Nel Buttenshaw, Manager Executive & Board Secretariat	✓	
Mr Dimi Palamidis, A/g Director of Finance	✓		Ms Suzie Snook, A/g Director Clinical Governance	✓	
Ms Rebecca Leon, A/g Director Workforce & Development	✓		Ms Sonia Marshall, Director Nursing & Midwifery Services	✓	
Ms Christine Feldmanis, Chair Audit & Risk Management Committee		✓			

<b>Agenda Item</b>	<b>Discussion/Decision/Recommendation</b>	<b>Responsible</b>
<b>In-camera Session</b>	<ul style="list-style-type: none"> <li>The Board and Ms Larkin held an in-camera session to discuss the realignment of the LHD leadership structure.</li> </ul>	
<i>Ms Buttenshaw, Mr Palamidis, Ms Ramsden, Ms Marshall, Ms Leon &amp; Ms Snook joined the meeting at 4.14pm</i>		
<b>2. Acknowledgment to Country</b>	<ul style="list-style-type: none"> <li>The Chair commenced the meeting by acknowledging the traditional owners of the land and paid respect to elders past and present.</li> </ul>	
<b>3. Declaration of Interests</b>	<ul style="list-style-type: none"> <li>The Chair invited declarations of interest.</li> <li>Nil were received.</li> </ul>	

<p><b>4. Confirmation of the previous minutes and action list</b></p>	<ul style="list-style-type: none"> <li>• <u>MOTION</u>: A motion was moved by Prof Frankum and seconded by Mr Gordon that the Minutes of the Board meeting held on 24 September 2018 be accepted as a true and accurate record.</li> <li>• The Motion was carried.</li> </ul>	
<p><b>5. Patient Story</b></p>	<ul style="list-style-type: none"> <li>• Ms Snook presented the story of the late Mrs P, a 96 yo community palliative care patient.</li> <li>• Mrs P's daughter wrote to the service, highlighting the gaps in experience: <ul style="list-style-type: none"> <li>• Availability of medication</li> <li>• GP prescribing</li> </ul> </li> <li>• Ms Snook advised that since May 2018 training with nursing staff has occurred regarding certification of death and to be more proactive in advising families about the availability of medication.</li> <li>• Dr Gray spoke to the training available for GPs regarding end of life care and the relationship with the PEACH Program.</li> <li>• Ms Marshall confirmed that a Palliative Care Health Pathways is established, and is available to GPs</li> <li>• <u>Actions</u> <ul style="list-style-type: none"> <li>• Refer the case to the SWSPHN Clinical Council</li> <li>• Provide advice about the adequacy of PEACH packages.</li> </ul> </li> </ul>	<p>A/g Director Clinical Governance</p>
<p><b>6. Business Arising</b></p>		
<p><b>6.1 Psychological Stress Report</b></p>	<ul style="list-style-type: none"> <li>• (Arising from Board meeting - 27.8.18; Item 8.1.4)</li> <li>• The Board discussed the information provided regarding psychological claims for July 2017 – June 2018 and <u>APPROVED</u> for the data to form part of the WHS and Workers Compensation (quarterly) Report on an ongoing basis.</li> </ul>	<p>A/g Director, Workforce &amp; Development</p>
<p><b>6.2 Patient Tracking System</b></p>	<ul style="list-style-type: none"> <li>• (Arising from Board meeting - 24.09.18; Item 6)</li> <li>• The Board <u>CONSIDERED</u> the Referral Note providing further information about patient tracking systems used within the LHD.</li> </ul>	

	<ul style="list-style-type: none"> <li>In response, Ms Larkin confirmed the capacity for remote access to patient lists and highlighted the actions to be taken which include further training opportunities.</li> </ul>	
<b>6.3 Rename Liverpool Hospital</b>	<ul style="list-style-type: none"> <li>(Arising from Board meeting - 23.07.18; Item 7.2)</li> <li>Ms Larkin advised that the concept will be further explored in line with the Redevelopment Project.</li> </ul>	
<b>7. New Business</b>		
<b>7.1. Prudential Inquiry into the CBA</b>	<ul style="list-style-type: none"> <li>Ms Larkin spoke to the Referral Note, circulated with the Agenda, regarding the APRA Final Report into the Prudential Inquiry into the CBA, highlighting a gap analysis is being prepared for the November Board meeting.</li> <li><b>Action:</b> List the Gap Analysis on the November Board meeting Agenda.</li> </ul>	Secretariat
<b>7.2 Annual Board Awards</b>	<ul style="list-style-type: none"> <li>The SWSLHD Board <u>APPROVED</u> the following awards to be presented at the 2018 annual public meeting: <ul style="list-style-type: none"> <li>Community Award - Vietnamese community - to acknowledge the contribution and support of Fairfield and Bankstown-Lidcombe Hospitals</li> <li>Transforming Your Experience: Excellence in Safe and Quality Healthcare Award - Ms Denise Burns, Nurse Unit Manager of Macarthur Cancer Therapy Centre</li> <li>Board Acknowledgement - Bankstown Hospital Volunteer Group</li> </ul> </li> <li><b>Action:</b> Convey the Board's approval to the Director, Strategic Communications &amp; Media.</li> </ul>	Secretariat
<b>7.3 Safety &amp; Quality Account</b>	<ul style="list-style-type: none"> <li>Ms Snook spoke to the Referral Note, circulated with the Agenda, regarding the draft Safety and Quality Account 2017/18 and highlighted: <ul style="list-style-type: none"> <li>The Account has been prepared in line with MoH guidelines and with District-wide input.</li> <li>The draft Account has been considered at both the District's Clinical &amp; Quality Council and the Health Care Quality &amp; Safety (Board) Committee.</li> </ul> </li> <li>In response, Ms Snook advised that the sepsis data (Sepsis Kills Program) is drawn from the CEC's data base (which is subject to manual entry) and will be tabled / discussed at the Health Care</li> </ul>	

	<p>Quality &amp; Safety Committee.</p> <ul style="list-style-type: none"> <li>• Prof Merrett confirmed that the Health Care Quality &amp; Safety Committee has a watching brief on the Program.</li> <li>• The Board <u>APPROVED</u> the draft Safety &amp; Quality Account 2017/18 for submission to the MoH, subject to the rectification of minor typographical errors.</li> </ul>	A/g Director, Clinical Governance
<b>8 Standing Items</b>		
<b>8.1 Chief Executive's Report</b>		
8.1.1 – Current Significant Matters	<ul style="list-style-type: none"> <li>• Ms Larkin spoke to the Significant Issues Section of the CE Report as circulated with the Agenda and highlighted: <ul style="list-style-type: none"> <li>• <u>Safe Work Australia</u></li> </ul> <p>A teleconference with NSW MoH and senior Counsel has been held to discuss the risks and benefits of the three available options:</p> <ul style="list-style-type: none"> <li>• Plead not guilty and litigate</li> <li>• Plead guilty and negotiate a fine</li> <li>• Plead guilty and negotiate an Enforceable Undertaking (EU)</li> </ul> <p>It is likely that the recommended Option will be – to plead guilty and negotiate an Enforceable Undertaking. A summary is being prepared for the Board and will be circulated upon receipt.</p> <li>• <u>Medicare Billing</u></li> </li></ul> <p>Affected SWSLH clinicians have been issued an apology letter and personally contacted. The LHD is conducting a review of all outpatient clinic administrative and billing processes to ensure best practice and maximise revenue opportunities. The matter was extensively discussed at the most recent medical Staff Executive Council meeting.</p>	
8.1.2 – Risk Management	<ul style="list-style-type: none"> <li>• Ms Larkin spoke to the Risk Management Report, circulated with the Agenda and highlighted: <ul style="list-style-type: none"> <li>• No new LHD risks referred to the Board from Board Committees this month.</li> <li>• The Board discussed the referral process of risks from Board Committees to the Register.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>• There were no new Extreme / High Risks approved for entry on the LHD Risk Register at the Enterprise Risk Management Committee meeting held on 18 September 2018.</li> <li>• Risk ID 512 was reviewed at the Enterprise Risk Management Committee meeting held on 18 September 2018. In line with the SWSLHD risk matrix the Committee agreed the clinical risk is High K (Moderate/ Likely) and the WHS risk is Medium M (Moderate/ Possible). The current risk rating has been updated in the LHD Enterprise Risk Register from Medium M (Moderate/ Possible) to High K (Moderate/ Likely).</li> </ul>	
8.1.3 - Regulatory Environment	<ul style="list-style-type: none"> <li>• The next Regulatory Environment Report is due to the November meeting.</li> </ul>	
8.1.4 - KPI Report		
Safety & Quality	<ul style="list-style-type: none"> <li>• The Board considered the Safety &amp; Quality component of the KPI Report, as circulated with the Agenda.</li> <li>• The Chair invited comments / questions regarding: <ul style="list-style-type: none"> <li>• <u>KPIs</u> Nil comment / questions.</li> <li>• <u>SAC 1 / 2 New Cases</u> 2694408-20 - In response, Ms Snook reported that the patient survived.</li> <li>• <u>Causation Statements from completed RCA Reports</u> Improvement in language and content of 'recommendations'.</li> <li>• <u>Sentinel Events</u> No incidents since the last Report.</li> </ul> </li> </ul>	
Access & Patient Flow	<ul style="list-style-type: none"> <li>• Ms Ramsden spoke to the Access &amp; Patient Flow component of the KPI Report, as circulated with the Agenda and highlighted: <ul style="list-style-type: none"> <li>• <u>Emergency Treatment Performance</u> For September 2018 ETP was 62.62% and TOC was 84.20%. These results are a slight improvement on the previous</li> </ul> </li> </ul>	

	<p>year (53.92% and 80.55% respectively).</p> <p>Although ED presentations in September decreased by approximately 6 patients per day in 2018 compared to 2017. SWSLHD has had the highest number YTD ED presentations (approx. 22,000) state-wide and improved ETP by 4.69% for the same period.</p> <ul style="list-style-type: none"> <li>• <u>Unplanned Readmissions</u></li> </ul> <p>Performance for the month of September 2018 at 6.41% is slightly below the same period last year (6.45%) and below the 7% target.</p> <ul style="list-style-type: none"> <li>• <u>Surgery</u></li> </ul> <p>The overdue Category 2 patients (14) are predominately at Liverpool Hospital (head &amp; neck, ENT and plastics). The wait list is being challenged by the number of long Category 1 cancer patients that are being added to the list. Lists that used to accommodate 4 patients are now accommodating 1.</p> <ul style="list-style-type: none"> <li>• <u>Selected KPIs by LHD (YTD Aug-18)</u></li> </ul> <p>The SWSLHD ETP result (and in a State-wide context) was discussed. In particular the ETP at Liverpool Hospital is not improving despite continual reassurance being provided.</p> <p>In response, Ms Ramsden advised that there is good clinical engagement but performance is driven by activity and acuity of patients. Length of Stay has slightly increased and surgical case types are impacting the wait list.</p> <p>Ms Larkin advised that improvement strategies have been agreed with the clinicians. The issue has been implementing the strategies. The Hospital General Manager is providing advice about the support required to implement the strategies.</p> <p><b>Action:</b> Invite the Liverpool Hospital General Manager to present to the Board the ETP improvement strategies and the implementation plan.</p>	Secretariat
People & Culture	<ul style="list-style-type: none"> <li>• Ms Leon spoke to the People &amp; Culture component of the KPI Report, as circulated with the Agenda and highlighted:</li> <li>• Significant effort and progress is being made in the key KPI</li> </ul>	

	<p>areas of:</p> <ul style="list-style-type: none"> <li>• Workers compensation</li> <li>• (Reduce) Excessive Leave Liability</li> <li>• (Improve) Performance Development Review rates</li> <li>• (Increase) Aboriginal Workforce</li> </ul> <ul style="list-style-type: none"> <li>• Ms Leon clarified that Aboriginal employment is a contract condition for capital projects.</li> <li>• <b>Action:</b> The Chair asked Ms Leon to convey the Board's appreciation of the progress made with reducing excessive leave and improving the annual PDR compliance rate.</li> </ul>	<p>A/g Director, Workforce &amp; Development</p>
<p>Finance &amp; Activity</p>	<ul style="list-style-type: none"> <li>• Mr Palamidis spoke to the Finance &amp; Activity component of the KPI Report, as circulated with the Agenda and highlighted: <ul style="list-style-type: none"> <li>• <u>Budget</u></li> </ul> <p>The LHD had a Net Cost of Service unfavourability of \$0.5M for the month of September (YTD unfavourability of \$3M). The main items in expense for noting were:</p> <ul style="list-style-type: none"> <li>• High surge bed activity particularly at Liverpool Hospital as a result of winter activity</li> <li>• Overtime expenditure year on year has decreased as a result of a less severe influenza season to date</li> <li>• Employee related expense pressure resulting from the Nursing Hours Per Patient Day strategy</li> </ul> <p>The main items for Own Source Revenue for noting were:</p> <ul style="list-style-type: none"> <li>• A decline in private patient conversion attributed to the ongoing increases in private health insurance premiums and/or patients only holding ancillary cover.</li> </ul> <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"> <li>• <u>Activity</u></li> </ul> <p>Results indicate that the LHD is 103.3% of YTD target – August 2018 (the most current available data).</p> <p>Acute admitted activity for each Hospital is above target.</p> <p>The LHD is 238 admissions above the YTD target for admissions from the surgical waitlist.</p> </li> </ul>	





	<ul style="list-style-type: none"> <li>• <b>Action:</b> Refine future reports relating to: <ul style="list-style-type: none"> <li>• Status Update</li> <li>• Provision of a context for those strategies categorised as 'at risk'.</li> </ul> </li> </ul>	Manager, Planning
<b>8.2 Chairman's Report</b>		
8.2.1 – Board Conference	<ul style="list-style-type: none"> <li>• The Chair invited feedback on the recent LHD &amp; Specialty Network Board Conference.</li> </ul>	
<b>9 Committees of the Board</b>		
<b>9.1 Health Care Quality &amp; Safety</b>  Minutes	<ul style="list-style-type: none"> <li>• The Minutes of the Health Care Quality &amp; Safety Committee meeting held on 3 October 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board.</li> <li>• Dr Gray highlighted: <ul style="list-style-type: none"> <li>• <u>Item 5 – TYE: People Matter Survey results</u>  The LHD improved in all key measurement areas and results were above the State average.</li> <li>• <u>Item 6.1 – Unplanned Readmission Rate</u>  <i>Discussed earlier in the Board meeting.</i></li> <li>• <u>Item 6.2 – Liverpool Hospital – O&amp;G</u>  The Committee noted that the working group (established in response to a critical incident) continues to meet to progress an agreed implementation plan to address the multi-factorial issues identified (i.e. increase in volume, supervision of junior staff, etc). The General Manager continues to meet with the Head of Department and the LHD has an oversight role. A further update has been requested (due to the December meeting).</li> <li>• <u>Item 7.2.3 – Cancer Institute Report</u>  The summary of the Cancer Control in NSW State-wide Report 2017 highlighted positive changes for SWSLHD in breast cancer treatment, reduction in smoking prevalence of pregnant women, etc. Oesophageal cancer rates may be incorrect and the Institute has been made aware.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>• <u>Item 8.1 – Safety &amp; Quality Account</u></li> </ul> <p><i>Discussed earlier in the Board meeting.</i></p>	
<p><b>9.2 Finance &amp; Assets</b></p> <p>Minutes</p>	<ul style="list-style-type: none"> <li>• The Minutes of the Finance &amp; Assets Committee meeting held on 21 September 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board.</li> <li>• Mr Gordon highlighted: <ul style="list-style-type: none"> <li>• <u>Item 5.1 – Qlik Application</u></li> </ul> <p>The Business Intelligence Unit continues to provide a reporting capability across both corporate and clinical data sets using a range of data and visualisation tools. The Committee recommends that the Application be demonstrated to the Board.</p> <p><b>Action:</b> Schedule a presentation to the Board to showcase the Qlik Application.</p> <li>• <u>Item 7.2 – Funding for Power</u></li> </li></ul> <p>The Committee received advice at the September meeting that the business case and plans submitted to upgrade the mains power at Bankstown-Lidcombe and Fairfield Hospital’s under the Asset Replacement Funding Project had not been approved by the MoH. Management is continuing to identify other sources of funds to mitigate this significant risk (SP&amp;T internally, Health Infrastructure and NSW MoH).</p>	<p>Secretariat</p>
<p><b>9.3 Research &amp; Teaching</b></p> <p>Minutes</p>	<ul style="list-style-type: none"> <li>• The Minutes of the Research &amp; Teaching Committee meeting held on 4 October 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board.</li> <li>• Prof Frankum highlighted: <ul style="list-style-type: none"> <li>• <u>Item 4.2 – GP Academic Unit</u></li> </ul> <p>The GP Academic Unit (operates in partnership between SWSLHD and UNSW) is transitioning to provide a (staged) targeted service. The first stage incorporates the establishment of the Unit and the transition of GP unit patients to alternate providers.</p> <p>The Unit will no longer operate exclusively from the Fairfield Hospital campus, it will be replaced with a District-wide service targeting mental health patients with chronic</p> </li> </ul>	

	<p>and or complex health conditions and complex refugee and asylum seeking patient cohorts, delivering interventions in collaboration with Mental Health and Refugee Health Services.</p> <ul style="list-style-type: none"> <li>• <u>Item 4.3 – Decrease in Ethics Applications</u></li> </ul> <p>The Committee received the results of a Survey conducted to understand the reasons for a decrease in the number of ethics applications received. The Committee noted that the Survey covered a period of time that the Office was not fully staffed.</p> <ul style="list-style-type: none"> <li>• <u>Item 4.1 – Medical Deans Media Release</u></li> </ul> <p>The Committee considered a Media Release issued by the Medical Deans (on 3.7.18) – <i>Increasing our understanding of medical students’ contribution to hospital services</i>, which reiterated the importance placed on students as part of the multi-disciplinary team.</p> <ul style="list-style-type: none"> <li>• <u>Item 6.2 – IIAMR Report</u></li> </ul> <p>Following the appointment of the new CEO, the IIAMR Report to the Committee has been significantly revised and includes information on key research projects.</p> <ul style="list-style-type: none"> <li>• <u>Item 7.5 – Renewal of RTO status to 2025</u></li> </ul> <p>The NSW Health Registered Training Authority Organisation has had its registration with the Australian Skills Quality Authority renewed for five years.</p> <ul style="list-style-type: none"> <li>• In response, Prof Frankum clarified that the concerns raised relating to College accreditation have been brought to the Chief Executive’s attention – predominately relating to Bankstown-Lidcombe and Campbelltown Hospitals and include issues such as rosters, equipment, etc.</li> <li>• Prof Frankum reported that he and Dr Abi-Hanna will be apologies for the December meeting. Prof Merrett, Mrs Berry, Mr Gordon indicated their availability.</li> <li>• <b>Action</b> – Confirm the Chair arrangements for the December meeting.</li> </ul>	Prof Frankum & Secretariat
<p><b>9.4 Aboriginal Health</b></p> <p>Minutes</p>	<ul style="list-style-type: none"> <li>• The Minutes of the Aboriginal Health Committee meeting held on 27 September 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board.</li> <li>• Prof Frankum highlighted:</li> </ul>	

	<ul style="list-style-type: none"> <li>• <u>Item 5.1 – Redevelopment Projects</u></li> </ul> <p>The Committee discussed the key principles for incorporation into SWSLHD redevelopment projects, arising from Aboriginal community &amp; stakeholder engagement.</p> <ul style="list-style-type: none"> <li>• <u>Item 6.6 – Key achievements - Aboriginal Health – Service Development Priorities</u> <ul style="list-style-type: none"> <li>- Sexual Assault Counselling Service</li> <li>- Palliative Care</li> <li>- Ophthalmology Surgery Pathway</li> <li>- Bankstown Aboriginal Community Health Centre</li> </ul> </li> <li>• Prof Frankum confirmed that the KPI relating to ‘discharge against medical advice’ for Aboriginal persons is monitored through the Aboriginal Health Committee.</li> </ul>	
<p><b>9.5 Audit &amp; Risk Management</b></p> <p>Minutes</p>	<ul style="list-style-type: none"> <li>• The next meeting of the Audit &amp; Risk Management Committee is scheduled for 20 November 2018.</li> </ul>	
<p>Periodic Report</p>	<ul style="list-style-type: none"> <li>• Ms Burlew spoke to the Periodic Report – 1 April to 30 September 2018, as circulated with the Agenda and invited comment and / or questions.</li> <li>• Mr Gordon highlighted an error in the Committee composition section. The requirement will be to seek one new Board representative (from the pre-qualified list). [Ms Burlew is retiring, Mr Gordon is not].</li> </ul>	
<p>ICAC Matters</p>	<ul style="list-style-type: none"> <li>• The Board <u>CONSIDERED</u> the (one) notification to and received from (one) the ICAC for the period of 10 September to 8 October 2018, as circulated with the Agenda.</li> </ul>	
<p><b>9.6 Nominations</b></p> <p>Minutes</p>	<ul style="list-style-type: none"> <li>• The next meeting of the Nominations Committee meeting is scheduled for 16 November August 2018.</li> </ul>	
<p><b>10 Consumer &amp; Community Council</b></p>	<ul style="list-style-type: none"> <li>• The Minutes of the Consumer and Community Council meeting held on 5 October 2018 were circulated with the Agenda and <u>CONSIDERED</u> by the Board.</li> <li>• Ms Murphy and Mr Reidy were in attendance at the meeting. Ms Murphy highlighted: <ul style="list-style-type: none"> <li>• An excellent presentation received from Nathan Jones,</li> </ul> </li> </ul>	

	<p>Director Aboriginal Health.</p> <ul style="list-style-type: none"> <li>• Feedback from Ms Marshall, as the LHD Executive attendees on matters conveyed to the September Board meeting will be welcomed.</li> <li>• The role of the Council relating to consumer &amp; community and staff representatives.</li> </ul>	
<b>11 MSEC Feedback</b>	<ul style="list-style-type: none"> <li>• No report.</li> </ul>	
<b>12 Items for Information</b>	<ul style="list-style-type: none"> <li>• The Chair spoke to the 2018 Board meeting &amp; events summary, as circulated with the Agenda and highlighted: <ul style="list-style-type: none"> <li>• The Ministerial visit to launch the schematic design of the Campbelltown Hospital Redevelopment, Stage 2 has been deferred to 29.10.18 – between 10am-2pm. <ul style="list-style-type: none"> <li>○ Prof Frankum, Ms Murphy, Prof Merrett, Dr Gray, Mrs Berry &amp; Mr Gordon indicated their ability to attend the event. <b>Action:</b> Prof Harris &amp; Mr Reidy undertook to advise the Secretariat.</li> </ul> </li> <li>• 05.11.18 NSW Health Awards Dinner</li> <li>• 07.11.18 Ministerial Visit – Liverpool Hospital – Official opening of the Cardiac Cath Lab</li> <li>• 16.11.18 Ingham Institute of Applied Medical Research – 6<sup>th</sup> Annual Awards Dinner</li> <li>• 23.11.18 SWSLHD Annual Public Meeting</li> <li>• 12.12.18 SWSLHD Leadership Forum</li> </ul> </li> </ul>	
<b>13 Other Business Without Notice</b>	<ul style="list-style-type: none"> <li>• The Chair invited other business without notice.</li> <li>• On behalf the Board the Chair extended best wishes to Ms Ramsden for her future endeavours and thanked her hard work and presentations to the Board.</li> </ul>	
<b>14 Close / Next Meeting</b>	<ul style="list-style-type: none"> <li>• The meeting closed at 7.10 pm. The next meeting will be held: <ul style="list-style-type: none"> <li>• Monday 26 November 2018 – Bowral &amp; District Hospital</li> <li>• 2.30pm – Site / Facility Visit</li> <li>• 3.30 pm – Board meeting</li> </ul> </li> </ul>	