South Western Sydney Local Health District Board

Date: Monday 24 August 2020
Time: 3:30pm
Venue: Board Room, District Office / Skype

1. Present and Apologies

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<td>Mr Sam Haddad (Chair)</td>
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<td>Dr Matthew Gray (Deputy Chair)</td>
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<td>Dr David Abi-Hanna</td>
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<td>Prof Neil Merrett</td>
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<td>Mrs Nina Berry</td>
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<td>Ms Kerrie Murphy</td>
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<td>Mr Max Bosotti</td>
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<td>Mr Gary Reidy</td>
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<td>Ms Christine Carriage</td>
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<td>Mr John Roach</td>
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<td>Prof Hugh Dickson</td>
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<td>A/Prof Shameran Slewa-Younan</td>
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<td>Mr John Gordon</td>
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<tr>
<td>Ms Amanda Larkin, Chief Executive</td>
<td>✔</td>
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<td>Ms Nel Buttenshaw, Director Corporate Governance</td>
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<td>Dr Anthony Frankel, Chair, Medical Staff Executive Council</td>
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<td>Mr Dimi Palamidas, Director of Finance</td>
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<td>Ms Sonia Marshall, Director Nursing, Midwifery &amp; Performance</td>
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0. In-camera Session

- Annual Performance Review – Chief Executive
  
  An in-camera session was held to discuss the outcome of the Chief Executive’s annual performance review meeting, held on 13 August 2020.

Ms Larkin, Dr Frankel, Dr Abi-Hanna, Prof Merrett, Prof Dickson & Ms Buttenshaw joined the meeting at 4.00pm

2. Welcome

- The Chair:
  
  welcomed Board members and executive staff to the meeting
  
  reiterated meeting procedures (Skype for business)
  
  highlighted the following agenda items of importance:
  
  - Strategic Focus Area presentation – Performance & Meeting Demand
  - Chief Executive’s Report – COVID-19 Update
  - Consumer & Community Participation Framework
  - Southern Highlands Health Neighbourhood Clinical Services Plan to 2031
  - Update - Interim Service Level Agreement
  
  Ms Murphy agreed to undertake the meeting evaluation.
3. Acknowledgment of Country
- The Chair opened the meeting by acknowledging the traditional owners of the land and paid respect to elders past and present.

4. Confirmation of the previous minutes and action list
- **MOTION**: A motion was moved by Mr Gordon and seconded by Mr Bosotti the Minutes of the Board meeting held on 27 July 2020 be accepted as a true and accurate record, subject to corrections, as follows:
  - **Item 0 – Board Succession Planning**
    Mr Gordon – appointed to 30 Jun 2021 (not 2022 as stated)
  - **Item 8.6 – Chairman’s Report**
    Health Care Quality & Safety and Finance & Assets Committees will continue to meet monthly.
  - The Chair invited comments on the Action List, specifically the items closed and not due.
  - Nil comments were received.

5. Declaration of Interests
- The Chair invited declarations of interest.
- Nil declarations were received.

6. Patient Story
- Ms Larkin presented the story of ‘Joan’, a 95yo female admitted through the emergency department with abdominal pain.
- A RCA was conducted into Joan’s care which highlighted that there were multiple missed opportunities for end of life care planning (EOLCP) discussions and documenting a resuscitation plan.
- The facility is convening an EOLCP Communication Working Group that incorporates how documentation of end of life care discussions are occurring.
- A (State funded) project officer has been appointed for 12 months to build capacity across the LHD for recognising patients for advance care planning, documenting plans and making them available in the eMR.
- The Working Party is being invigorated with the appointment of a medical chair and the addition of senior leading clinicians from each of the sites to the membership.
- Clinician Board members supported the strategies underway, noting that COVID-19 has further highlighted the importance of advanced care planning.
Ms Marshall joined the meeting at 4.15pm

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<th>7. Key Strategic Focus Area</th>
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| 7.1 Performance & Meeting Demand | • Performance & meeting demand is one the Board’s key strategic focus areas.  
• Ms Marshall highlighted:  

**Current Performance**  
• *ED Demand* - Since Apr-20 every facility has experienced a decrease in ED presentations  
• *Ambulance Demand* - The proportion of presentations by Ambulance to ED has remained stable/increased.  
• *Presentations and Admissions by Triage Category – 2019/20 FY* data reflects less acutely unwell patients presenting (during peak COVID-19 period) and stability in presentations for acutely unwell patients. The decrease (-5.18%) in admissions for triage category 2 patients is being further examined (the NSW MoH advised it is a State-wide trend).  
• **Action**: Advise ED presentations – total compared to budgeted (Mar-20) and bed occupancy for 2019/20.  

Emergency Treatment Performance (ETP) and Transfer of Care (TOC) performance, whilst improved did not meet target, despite the decrease in activity over the last quarter. Changes in patient flow pathways in Emergency Departments in response to COVID-19, was a significant contributing factor.  

• *Surgical Demand* – The 2019/20 FY results reflect the March Federal decision to cease all non-urgent elective surgery. All facilities are now implementing strategies aimed at reducing the number of overdue elective surgery patients, including:  
  o Weekend lists  
  o Additional weekday lists  
  o Additional paediatric specific lists  
  o Outsourcing to private hospitals  

Additions to the wait list have reduced over March-May, due to people not visiting specialists over this time.  
Surgical work undertaken in private facilities:  
  o Is included within the LHD activity data.  
  o Prof Dickson noted that any shift in surgery may affect training for registrars and fellows  
  o most cases are being negotiated at the State price |
### Mitigation Strategies

A number of refreshed strategies are being implemented, including:

- **Community Geriatric Outreach Service (COGS)**
  
The accelerated strengthening and expansion of COGS (rapid access to medical and nursing care for older people experiencing rapid decline or acute changes in their condition whilst remaining in their Residential Aged Care Facility (RACF), has resulted in a significant decrease in Ambulance arrivals from RACFs (a 403 decrease when comparing Jun-20 at 249 to Jun-19 at 652).

- **Capacity Generating Strategies**
  
  Discharge or Transfer to Discharge Transit Lounge for inpatient units by 9am – creating early capacity
  
  Discharge Transit Unit use (Utilising the Unit instead of keeping patients that are flagged for discharge/transfer on inpatient units – freeing up inpatient capacity early)
  
  Care Coordination (Length of Stay Monitoring and Management)

- **Short Term Escalation Plans (STEP)**
  
  STEPs facilitate escalation and de-escalation of the facility’s status with targeted actions designed to decrease the escalation level and remove/reduce pinch points
  
  Ambulance Offload communication/escalation pathway

- **Action**: Provide a report, in six months, on the results of implementing the mitigation strategies.

### Emerging Issues

- COVID-19 hotspot – ongoing and maintaining focus on business as usual
- Elective Surgery catch-up
- Access to Older Person’s Mental Health and High Dependency Mental Health beds
- Increase in proportion of ED presentations arriving via NSW Ambulance
- On behalf of the Board, the Chair thanked Ms Marshall for her informative presentation and ongoing work.

*Ms Marshall left the meeting at 5.00pm*
## 8. Reports

### 8.1 Chief Executive’s Report

#### Significant Issues

- Ms Larkin spoke to the Chief Executive’s Report, circulated with the Agenda and highlighted:
  
  - **COVID-19 Update**

    **Health advice**
    
    COVID-19 statistics as at 5pm, Sunday 23 August 2020 for SWSLHD:
    
    - 218 people have been diagnosed
    - 70 in home isolation
    - 4 in accommodation
    - 6 people admitted in hospital
      - 2 – Liverpool (1 in ICU)
      - 3 – RPA – (1 in ICU)
      - 1 – Nepean
    - 137 people have recovered
    - 1 death (5 deaths in total)

    **COVID-19 testing locations**
    
    Testing at LHD facilities and services continue, with 921 swabs taken on Sunday 23 August. A number of pop up clinics have been established / planned across the LHD in response to contact tracing results.

    The NSW Premier highlighted the importance of testing at the media conference held on 24 August 2020 (within SWSLHD).

    **Residential Aged Care Facilities (RACF)**
    
    The LHD has engaged with over 50 RACF within south western Sydney and has a comprehensive engagement strategy in preparation for an outbreak of COVID-19 in residential aged care.

    SWSLHD has also developed a RACF outbreak management plan to guide SWSLHD following a confirmed case of COVID-19 in a SWS RACF.

    **Staff members**
    
    Three staff members at Liverpool Hospital have confirmed COVID-19. The staff members were placed in isolation and all close contacts of the staff members have been identified and advised to isolate.

    Proactive testing for staff across the LHD has commenced.
Transforming Your Experience

The Chairman noted that achievements are not quite as expected and more impact is needed. A closer examination via a Strategic Focus Area presentation was suggested.

Integrated Reporting via Sycle – Update

Implementation of the integrated board reporting project continues, with presentations to each Board Committee occurring over August. Each Committee is undertaking a review of reports they currently receive to ensure alignment with the integrated reporting approach and strategic oversight requirements.

The project remains ‘on-track’ for a presentation to the September Board meeting and go-live in October.

NSW Auditor-General

The NSW Auditor-General’s Office is undertaking an audit - Support for nurses and junior doctors in high-pressure, high-demand hospital environments – due for reporting in 2020. Upon receipt the Report will be considered, with findings and LHD-centric analysis presented to the Finance & Assets Committee.

Action: Advise the Board which LHDs were the subject of the Audit and if excessive leave was considered.

Upper House Inquiry: To inquire into the current and future provision of health services in the South-West Sydney Growth Region

Following the hearing on 14 & 15 July 2020, the District received a number of Questions on Notice and Supplementary questions.

Action: Circulate to Board members a copy of the responses issued.

Inquiry into the NSW Government’s management of COVID-19

The Public Accountability Committee’s Inquiry (self-referred in March 2020) into the NSW Government’s management of the COVID-19 pandemic continues.

Update – Critical Incidents

Ward 2D

In June 2020, a critical incident occurred in Ward 2D, Bankstown-Lidcombe Hospital. As a result of the critical incident, a preliminary review of the Ward was undertaken (29 Jun – 2 Jul 20). The review resulted in 10 recommendations; one of which relates to the model of care.
On 8 July 2020, the Ward 2D working party convened to finalise and endorse the action plan to progress the final report recommendations and respond to identified patient safety and management concerns. The Ward 2D working party now convenes on a weekly basis.

**Maternity Capability Review**

A review has been undertaken at Fairfield Hospital; and the Report received on 8 August 2020, which identified a number of improvement areas, including:

- Medical governance
- Service capability
- More effective use of benchmarking data

The LHD has established a Maternity Services Governance Working Group (meeting weekly) to oversee implementation of the recommendations of the Report, following an initial fact check.

Routine reports will be submitted to the Health Care Quality & Safety Committee, with aspects escalated to the Board as appropriate.

**Bowral & District Hospital**

The LHD was aware of media interest in the two cases (ED presentations in 2018 and 2019).

**Action:** Advise the triage categories of the presentations and if medico-legal claims were referred.

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<th>8.2</th>
<th>Risk Management Report</th>
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<td>The Board <strong>NOTED</strong> the Media &amp; Marketing Report, as circulated with the Agenda.</td>
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<th>8.4</th>
<th>Strategic Plan Progress Report</th>
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<td>The next report is due October.</td>
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<th>Work Health &amp; Safety</th>
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<td>The Board <strong>NOTED</strong> the Work Health &amp; Safety Report, as circulated with the Agenda.</td>
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<th>8.6</th>
<th>Chairman’s Report</th>
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<td><strong>Proposed amendments to the Board’s Work Plan</strong></td>
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<td>To progress the Board’s agreement for Committees to report on an expanded basis the Chair undertook to circulate a summary paper out of session, to Board members for consideration, which will propose to synchronise Committee reports with the agreed strategic focus areas.</td>
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- **Action**: Circulate summary proposal to Board members to enable expanded Committee reporting to the Board.

**SWS Advisory Panel Meeting**

The SWS Advisory Panel met on 29 July 2020 with a reconstituted membership. The interface between the Board and the Advisory Panel could be strengthened by including the summary actions within the Chief Executive’s Report post each Panel meeting.

- **Action**: Include the summary actions of Panel meetings within the Chief Executive’s Report.

**Medical Staff Executive Council (MSEC)**

The Chair reported his attendance at the August Medical Staff Executive Council meeting (Statement of Cooperation between the Board and MSEC).

**Bankstown City Council**

The Chair reported that he and the Chief Executive met (7 August 2020) with the Mayor and General Manager, Bankstown City Council regarding Council’s planning and direction.

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**9. Business Arising**

**9.1 Activity Report**

- [27/07/20; Item 11.2]
  - Percentage variance – sub-acute: Bowral Hospital
  - Inclusion of dental NWAU in total

- The Board NOTED the Referral Note, providing advice regarding the June Activity Report, as circulated with the Agenda.

**9.2 Interim SLA**

- [27/07/20; Item 7.1]
  - Reconciliation of 2020/21 NSW Health priorities & SWSLHD Strategic Plan
  - Provide analysis of KPI changes

- Mr Palamidas spoke to the Referral Note and attachments, as circulated with the Agenda, and highlighted:

  **Service Agreement process**

  Historically the Service Agreement & ‘Purchasing’ process has involved 3 rounds of negotiation (Feb – May).

  **Summary of changes in the strategic objectives of the NSW State Health Plan and the impact and alignment with SWSLHD Strategic Plan**

  The Strategic Priorities in the NSW Health Plan 2020/21 have not changed, however on an annual basis the more detailed strategic

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Chair

Ms Larkin

Mr Palamidas joined the meeting at 5.40pm
objectives under the ‘Priorities’ do change. Overall the Strategic
Priorities and objectives are closely aligned to SWSLHD’s Strategic
Plan and hence are monitored through Board reporting. The
following 3 strategic objectives were identified as not having a
direct alignment with the SWSLHD Strategic Plan and will be
further considered in the next refresh.

- Achieve a ‘fit for purpose’ work place for now and in the
  future
- Deliver financial control in day to day operations
- Strengthen asset management capability

- A summary of the changes in the KPIs in the Service Agreement
  and the impact/risks of those changes to SWSLHD

2 New KPIs
10 KPIs that were previously an Improvement Measure
18 Existing KPIs that have changes
6 No longer KPIs

The changes in KPIs have no major impact in the sense that they
are already measured and aligned to SWSLHD’s Strategic Plan and
Board Committees.

The new KPIs, Mental Health KPI target changes and changes from
Improvement Measures are to support and align with the NSW
Premiers Priorities and the NSW Health Strategic Priorities
2020/21.

The changes to the targets in Hospital Acquired Complications
(HACs) are to bring NSW in alignment with the Australian
Commission on Safety and Quality in Health Care (ACSQHC HAC
V3.0 definitions).

There are several KPIs however that constitute a risk in terms of
achieving the performance target.

Confirmed that ‘non-admitted’ is now an Improvement Measure
(not a KPI) and the changes to Triage 2 and 3 targets will not
present a challenge in 2020/21, but may in future.

- **Action:** Advise if the new / changed KPIs impact on risk rating /
  register.  

**Ms Whitten**

Mr Palamidas left the meeting at 6.00pm

9.3 Patient Engagement Score

- [27/07/20; Item 10.1]

- Ms Larkin spoke to the Referral Note clarifying the patient
  engagement score, as circulated with agenda and highlighted:
|  | The patient experience index and engagement score is calculated on the basis of selected questions from the Bureau of Health Information (BHI) State wide Survey  
|  | Over the last three calendar years the Patient Engagement Score has been trending upwards. Although the increments are small. Area for improvement remains the patient discharge processes.  
|  | Review of recent survey data and engagement index highlights that Transforming Your Experience (TYE) continues to be a suitable approach for addressing identified issues.  

| 9.4 Access to Renal Services |  
|  | [22/06/20; Item 8.2]  
|  | Ms Larkin spoke to the Referral Note regarding access to renal services, as circulated with the agenda, and highlighted:  
|  | The capacity of haemodialysis renal services across the District is a current focus area and has resulted in concern from local clinicians, the public, media and members of Parliament.  
|  | The District is working to address short, intermediate and long term solutions for the provision of dialysis services and resources that meet the demand in south western Sydney, including: private partnerships; management strategies; and, planning and service development  
|  | The Chief Executive and General Manager, Liverpool Hospital met with renal physicians at Liverpool Hospital on 30 June 2020 to discuss their concerns. The efforts and abovementioned strategies have been communicated back to the physicians and Head of Department in writing. The current governance of renal services in south western Sydney will be reviewed, including network arrangements.  
|  | Establishing a renal transplantation service is subject to further planning and negotiations with the NSW MoH.  

### 10. New Business

#### 10.1 Consumer & Community Participation Framework

- Ms Larkin spoke to the draft South Western Sydney Consumer and Community Participation Framework to 2024, as circulated with the agenda, and highlighted:
  - Consumer and Community Participation (CCP) has a 15 year history in SWSLHD. CCP has a key role in reaching out to, and consulting with consumers who are clients of our services and who are health advocates.
  - The draft CCP Framework (6th Version) will cover the period from 2020 to 2024 and has been approved by the SWSLHD Executive Leadership Team in July 2020, following extensive consultation.
  - The new CCP Framework to 2024 builds and honours the history of consumer involvement, with respect to the saying ‘nothing about us without us’.
  - The inclusion of the “plan on a page’ or “at a glance” (Page 5) provides a summary of the 6 priority areas and related development activities for the period 2020-2024.
  - Mr Reidy and Prof Dickson commended the Plan to the Board and recognised the contribution of the Council and community participants.
  - Mr Gordon noted the previous Board commitment for community representation on Board Committees has waned over time and should be reinvigorated.
  - It was suggested that resourcing the group should be explored in the context of the new ways of working.
  - The SWSLHD Board APPROVED the final draft of the South Western Sydney Consumer and Community Participation Framework to 2024, subject to:
    - Correction to the Board Committee structure, depicted on pg. 8 of the plan – Finance & Assets Committee.
    - **Action:** Convey the Board’s endorsement of the Framework to the Consumer & Community Participation Unit & request details of the related launch.

| Action: Convey the Board’s endorsement of the Framework to the Consumer & Community Participation Unit & request details of the related launch. | Secretariat |
10.2 Southern Highlands Health Neighbourhood Clinical Services Plan to 2031

- Ms Larkin spoke to the Southern Highlands Health Neighbourhood Clinical Services Plan (CSP) to 2031, as circulated with Agenda and highlighted:
  - The CSP has been developed to support the Bowral & District Hospital stage 2 redevelopment as part of the wider Southern Highlands Health Neighbourhood.
  - The CSP builds on previous planning including the Bowral & District Hospital Clinical Services Plan to 2026 and the Addendum Clinical Services Plan to 2031, developed in 2015 and 2017 respectively to support Stage 1 of the Bowral and District Hospital redevelopment.
  - Key aspects of the Stage 2 redevelopment include: a new pharmacy; mortuary; CSSC; and, link ways and connections between Stage 2 and the wider hospital.
  - The redevelopment will also include demolition of outdated infrastructure – the Old Hospital will remain, as will trees of heritage significance.
  - The SWSLHD Board APPROVED the Southern Highlands Health Neighbourhood Clinical Services Plan to 2031, subject to:
    - Prof Dickson to advise:
      - Corrections (spelling and formatting)
      - Strengthening of Section 8 – Service Enablers
      - Inclusion of Bankstown-Lidcombe Hospital into Section 7.1 – Networked Services
    - Action: Convey the Board’s endorsement of the Plan to the Manager, Planning

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<th>11. Committees of the Board</th>
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<td>11.1 Audit &amp; Risk Management Minutes</td>
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- The minutes of the Audit & Risk Management Committee meeting held on 14 July 2020 were circulated with the Agenda.
  - Mr Gordon highlighted:
    - Observer Attendance
      - Mr Sam Haddad, SWSLHD Board Chair, attended the meeting as an Observer.
    - Item 7.2 – SWSLHD Financial Statements for the year ended 30 June 2020
      - The Committee endorsed the SWSLHD financial statements and recommended the statements are to be submitted to the Ministry of Health and the Audit Office of NSW subject to minor corrections as noted.
### Corporate Governance Attestation Statement

- **Item 9.1 – Corporate Governance Attestation Statement and Compliance Spreadsheet**
  - The Board APPROVED the Corporate Governance Attestation Statement, for submission to the NSW Ministry of Health, as recommended by the Committee and circulated with the Agenda, subject to the following update:
    - Standard 4 – Include the number of times the Finance & Assets Committee met in the period.
  - **Action:** Convey the Board’s decision to the Manager, Internal Audit.

### 11.2 Health Care Quality & Safety

- The minutes of the Health Care Quality & Safety Committee meeting held on 5 August were circulated with the Agenda.
  - Prof Merrett highlighted:
    - **Item 6.2 - Revised Reporting Matrix**
      - The Committee noted the proposed changes to the standing reports. A review identified overlapping reports and information, operational information reports and reports that require discussion at the SWSLHD Clinical and Quality Council.

      The Committee agreed that the reporting matrix has changed over the years and that a number of reports do not require submission to the committee. The committee will revisit the reporting matrix and ensure the proposed reports are mapped to the strategic directions and accreditation standards.

    - **Item 7.2 - Registration and licensing information of non-clinicians in Stafflink**
      - The Committee considered the update regarding registration and licencing information of non-clinicians in Stafflink.

      A review of licence requirements identified anomalies in the process, including reporting of driver’s licence details in Stafflink regardless of whether a driver’s licence is required for the position and production of non-compliance flags for staff with multiple positions.

      The Committee emphasised that identified positions such as radiation therapy, security and electricians should be 100% and requested clarification on the processes that would ensure that staff with expired licences or registrations are not working in their roles.
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<th>Item 8.1 - Chief Executive’s update - Recent serious incidents</th>
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<td>The Committee received a briefing on recent incidents, as</td>
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<td>outlined by the Chief Executive in her report.</td>
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<th>Item 8.3.9 - SWSLHD Quality Awards 2020 – Recommendation for the Board Award</th>
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<td>The Board APPROVED the Committee’s recommendation for the SWSLHD Board Award.</td>
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<td>- Bankstown Hospital’s project ‘Eliminating eMeds ‘TopBoxing’: The bottom standard workaround of eMedication Best Practice’.</td>
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<td>- <strong>Action:</strong> Convey the Board’s decision to the Clinical Governance Unit.</td>
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<th>11.3 Finance &amp; Assets</th>
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<td>- The minutes of the Finance &amp; Assets Committee meeting held on 21 July 2020 were not yet available.</td>
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<td>- Mr Gordon provided highlights from the meeting and noted circulation with the Agenda of the July Finance &amp; Activity Report:</td>
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<td>- Committee members are meeting on 28 August 2020 to discuss the reporting matrix in relation to the integrated reporting project.</td>
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<td>- The revenue budget remains a risk.</td>
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<td>- <strong>Action:</strong> Clarify if 48% (as advised to the Board) or 49% (as advised to the Committee meeting) of the budget had been received.</td>
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<th>11.4 Research &amp; Teaching</th>
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<td>- The minutes of the Research &amp; Teaching Committee meeting held on 6 August were circulated with the Agenda.</td>
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<td>- Dr Abi-Hanna highlighted:</td>
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<td>- <strong>Item 6.0 - Integrated Board Reporting</strong></td>
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<td>- The Committee commended the effort and input into establishing the integrated reporting framework and system, noting their support of the approach.</td>
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<td>- <strong>Item 7.1 – Report: LHD Director Research and Ethics Office, Robotics and Cyclotron</strong></td>
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<td>- A detailed plan is under development for Robotics and Health Technologies which will be presented to the Committee at the next meeting. This will be done in partnership with Ingham Institute, SWSLHD, Universities and Industry partners. Several projects are underway.</td>
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The planning for the Molecular Science Cyclotron Facility has commenced. This will be a state-of-art facility comprising of the latest technology and production laboratories. A Governance Committee has been developed. Prof Chow and Prof Bokey are working on the development of a research plan for a Cyclotron centre at Liverpool Hospital.

- **Item 4.1 – Committee ToRs**

  The Committee noted the Board’s approval of the updated Terms of Reference pending the Committee’s concurrence with the addition of ‘other reports may be sought from partners as required’ to the Facility & Teaching Report; and concurred with the addition.

| 11.5 Aboriginal Health | • The next meeting of the Aboriginal Health Committee will be held on 27 August 2020. |

### 12. Other Committees

| 12.1 Consumer & Community Council | • The minutes of the Consumer & Community Council (CCC) meeting held on 7 August 2020 were circulated with the Agenda. |
| | • Mr Reidy/Prof Dickson highlighted: |
| | • **Item 3.3 – Research Sub-Committee** |
| | Consultation on the draft terms of reference has concluded; with many responses received. Next steps include an expression of interest to seek and confirm initial membership, then plan the inaugural meeting. |
| | • **Item 4 – Guest Speaker: Chief Executive** |
| | A “question and answer’ session with the Chief Executive, covered a wide range of matters, including: contradictory information on the LHD website regarding visitation guidelines – which have since been corrected, following a discussion between the CCC Chair and Chief Executive. |
| | • **Item 6.2 – Committees: State & Federal** |
| | A Macarthur based CCC member (with a special interest in palliative care) that sits on a range of MoH and ACI committees will be featured in a podcast by the ACI, which will made available on their website once complete. |
| | • CCC members extended sincere thanks to staff for the excellent job they are doing in “standing back up” services, re-deployments and managing the testing, tracing and clinical work associated with COVID-19. |
12.2 Medical Staff Executive Council

- The minutes of the Medical Staff Executive Council meeting held on 13 August 2020 were circulated with the Agenda.
- Dr Frankel highlighted:
  - **COVID-19**

    Board Chair, Sam Haddad attended the meeting and provided feedback from the Secretary’s briefings to Board Chairs regarding the NSW government response to the COVID-19 pandemic.

    Ms Larkin highlighted the District’s approach to the COVID-19 pandemic, including recovery – which includes increased funding to reduce the endoscopy and surgical waiting lists

    Poor compliance with social distancing in public areas - raising the possibility of facilities having COVID-19 safety marshals.

    Members considered that shared office space at hospitals is a barrier to social distancing requirements.

- **Item 4.3 – Fair Health matters – Equity Framework 2025**

    The Council noted the Framework (endorsed by the Board) is foundational in nature and correlates to the delivery of health services in south western Sydney. Members were encouraged to submit the Framework to local Medical Staff Council meetings.

- **Item 5.4 – Fairfield Hospital**

    The Geriatric Flying Squad (GFS) is a geriatrician-led community service at Fairfield Hospital which aims to reduce hospital presentations by supporting general practitioners and residential aged care facilities. The GFS has had a significant positive impact.

    The Chair invited Dr Frankel to explore further interfacing opportunities with the MSEC (Statement of Cooperation) in the context of deep dives and committee objectives.

13. Items for Information

13.1 Correspondence

- Nil items

13.2 Items Due Calendar

- The Board NOTED the 2020 Items Due Calendar, circulated with the Agenda and published on Diligent.

13.3 Meeting & Events Summary

- The SWSLHD Board NOTED the 2020 Meeting & Events Summary – circulated with the Agenda and published on Diligent.
| 14. Business Without Notice | • The Chair invited other business without notice.  
  
  • Mrs Berry noted a report to the Finance & Assets Committee meeting indicated a donation from a licensed premise for beautification works at Banks House and sought clarity of a previous Board decision on the use of donations from licensed premises.  
  
  • **Action:** Submit the related previous Board decision to the Finance & Assets Committee. | Secretariat |
|---|---|---|
| 15. Meeting Evaluation | • The Chair invited the meeting evaluation. Ms Murphy highlighted the following summary observations:  
  
  • Agenda and timing of the meeting differed from the meeting schedule (Diligent)  
  
  • Commended timing and content of meeting paperwork  
  
  • Ambitious agenda; long meeting  
  
  • Meeting preparation was evident by lines of questioning | |
| 16. Close / Next Meeting | • The meeting closed at 7.08pm.  
 3.30-6.30pm – Board Meeting  
Monday 28 September 2020  
*The meeting will be conducted by Skype for Business.* | |