

## South Western Sydney Local Health District Board

Date:Monday 2 May 2022Time:3:30pmVenue:Board Room, District Office \ MS Teams

## 1. Present and Apologies

Members	Pres.	Apol.	Members	Pres.	Apol.
Mr Sam Haddad (Chair)	$\checkmark$		Ms Annette Houston (via MS Teams)	$\checkmark$	
Dr David Abi-Hanna	$\checkmark$		Dr Richard Matthews	$\checkmark$	
Mr Max Bosotti	$\checkmark$		Prof Neil Merrett	$\checkmark$	
Prof Hugh Dickson	$\checkmark$		Ms Kerrie Murphy	$\checkmark$	
A/Prof Matthew Gray (Deputy Chair)	$\checkmark$		Mr John Roach	$\checkmark$	
Ms Teresa Harm	$\checkmark$		A/Prof Shameran Slewa-Younan	$\checkmark$	
Other Attendees	Pres.	Apol.	Other Attendees	Pres.	Apol.
Ms Amanda Larkin, Chief Executive		$\checkmark$	Ms Nel Buttenshaw, Director Corporate	$\checkmark$	
			Governance		
Dr Setthy Ung, SWSLHD Medical Staff Executive Council Chair	~				

2.	Welcome	<ul> <li>The Chair welcomed Board members, specifically Dr Matthews, Ms Harm and Ms Houston (new Board members) and attendees to the meeting. Introductions were made.</li> <li>The Chair highlighted the Agenda item of importance as performance reporting (Item 7.1) and proposed to defer Item 6.4, given the Chief Executive's apology to the meeting.</li> <li>Dr Abi-Hanna agreed to undertake the meeting evaluation.</li> </ul>	
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	<ul> <li><u>MOTION</u>: A motion was moved by Mr Bosotti and seconded by Mr Roach that the minutes of the Board meeting held on 28 March 2022 be accepted as a true and accurate record.</li> <li>The Motion was <u>CARRIED</u>.</li> </ul>	

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5.	Declarations of Interest	The Chair invited declarations of interest.
		Nil were received.
6.	Patient Story	<ul> <li>Prof Merrett presented the story of a family cared for initially at Liverpool Hospital and then Bankstown-Lidcombe Hospital.</li> </ul>
		• The woman (who was 27 weeks pregnant) and her husband both had COVID-19 as did their entire extended family. The parents had brought their three year old daughter with them as they had no one to look after her.
		<ul> <li>Both parents had the severe COVID-19 complication of pneumonitis and required hospitalization. The male was admitted to the intensive care unit and the woman to the respiratory ward. The child, although well, was admitted to the paediatric ward for welfare reasons.</li> </ul>
		• The story highlighted the benefits of the multi-disciplinary team and a common sense approach for a very complex and lengthy case, resulting in a positive outcome.
7.	Key Strategic Focus Areas	• Nil
8.	Chief Executive's Report	
	8.1 Significant Issues	• The Chief Executive's Significant Issues Report, was circulated with the Agenda, to update the Board on:
		<ul> <li>COVID-19</li> <li>Performance</li> </ul>
		o Other matters
		COVID update:
		<ul> <li>Furloughed staff and the impact on service delivery</li> </ul>
		<ul> <li>Case numbers (inpatients and community)</li> </ul>
		<ul> <li>Forward strategy</li> </ul>
		Performance:
		<ul> <li>League Table: Selected Tier 1 KPIs (excluding services)</li> </ul>
		o Safety & Quality
		<ul> <li>Access and meeting demand</li> </ul>
		o Finance
		o Activity

The Chair invited questions / comments:	
Safety & Quality	
<ul> <li><u>Action</u>: Clarify the incident of concern</li> <li>SAER events reflect two months (February and March).</li> <li>The impact of furloughed staff on care delivery was discussed</li> </ul>	Chief Executive
Performance and Meeting Demand	
• Reporting should reflect a strategic, rather than operational approach. COVID-19 has emphasised the need to review current models, which are not sustainable.	
<ul> <li>Prof Merrett provided an overview of strategies regarding elective surgeries.</li> </ul>	
<ul> <li><u>Action:</u> The <i>Performance and Meeting Demand</i> Strategic Focus Area presentation in May to provide a strategic perspective, including:         <ul> <li>Hospital avoidance programs</li> <li>Links with new Strategic Plan</li> <li>Workforce reform</li> <li>Models of Care review</li> <li>Areas for Board influence</li> </ul> </li> <li>League Table</li> <li>Workforce</li> <li>Additional FTE may be attributed to furloughed staff</li> <li>Excessive leave remains a challenge</li> </ul>	Director, Nursing Midwifery & Performance and Chair, HCQSC
<ul> <li><u>Actions:</u></li> <li>Update the League Table – FTE is not a Tier 1 SLA indicator</li> <li>Finance &amp; Assets Committee to consider Locum usage – plan and associated risks</li> </ul>	Secretariat Director, People & Culture
Inquiry: Improving crisis communication to CALD communities	
• NSW Health is considering a submission to the Inquiry.	
• If LHDs are invited to contribute to a NSW Health submission to the Inquiry, SWSLHD should consider highlighting the difference (increased) in the costs of care delivery to CALD communities.	

	8.2	Media & Marketing Report	<ul> <li>The Media &amp; Marketing Report was circulated with the Agenda.</li> <li>The Chair noted that the Minister's visit to Liverpool Hospital to turn the sod on the Liverpool Health and Academic Precinct (LHAP) attracted positive media coverage across all major television networks.</li> </ul>	
	8.3	Work Health & Safety Report	• The next Work Health & Safety Report is due to the 23 May 2022 meeting.	
	8.4	Strategy, Risk, Performance Integrated Report	• The Board agreed to defer the Integrated Report – Strategy, Risk & Performance (SLA) Report, as circulated with the Agenda to the May meeting.	
			• <u>Action</u> : List the Integrated Report for discussion at the May meeting.	Secretariat
9.	Chairr	nan's Report		
	9.1	Performance Reporting [28.3.22; Item 9.1]	<ul> <li>The Chair spoke to the Referral Note, circulated with the Agenda, highlighting: <ul> <li>Integrated Reporting (to be discussed further at the May meeting) will continue and include trend data/analysis</li> <li>Committees will continue to submit their minutes and highlight items, as appropriate</li> <li>The inclusion of the performance section in the Chief Executive's Report is good. The Section will include facility level data and trends</li> </ul> </li> <li>Mr Roach noted that other information and KPIs (outside of the SLA, Strategic Plan and Risk Register) is important and considered by the committees (defined within each committee reporting matrix, appended to the committee ToRs)</li> </ul>	
	9.2	Draft Work Program 2022	<ul> <li>The Board <u>NOTED</u> their work program for 2022, as circulated with the Agenda (also available from Diligent).</li> <li>The Chair highlighted: <ul> <li>The 23 May Board meeting will be held at Tharawal and will include a Site visit</li> <li>The Research &amp; Teaching Committee is scheduled to present to the Board in December</li> <li>Site visits may be changed, pending the Stakeholder Working Group recommendations to be presented in August</li> </ul> </li> </ul>	

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d Chair	Board Cha	<ul> <li>The recent tour of Campbelltown Hospital was very informative. Arrangements have been made to repeat the tour in June, to enable full Board member attendance</li> <li><u>Action:</u> Allocate <i>sustainability</i> and <i>innovation</i> to a Board Committee, notwithstanding their inclusion in the new Strategic Plan</li> <li>The Secretariat reported that the date for the Annual Public meeting has been set for 4 November 2022, with the venue to be determined.</li> <li>Mr Roach reiterated his previous suggestion to establish a people and culture board committee to stream-line current reporting (i.e. well-being, training, recruitment, planning, sustainability etc)</li> </ul>		
		<ul> <li>A/Prof Gray spoke to the Conference Agenda, circulated with the Agenda.</li> </ul>	Annual Board Conference	9.3
etariat	Secretari	<ul> <li>It was noted that the Sustainability discussion was a highlight. The Chair advised that arrangements to invite Dr Charlesworth to a future Board meeting are in progress.</li> </ul>		
		5.09pm	on left the meeting a	Ms Housto
		<ul> <li>A/Prof Gray provided an update, highlighting:</li> <li>The evaluation is being conducted in two phases – initially</li> </ul>	Board Evaluation	9.4
		internal for the Board and later to include stakeholders		
		'new' board members are relieved from participation		
		• The survey to be issued today and due on Wednesday 11 May; members were encouraged to complete the survey on time		
		Interviews with each member will be arranged during May		
		• A feedback session, of the Report, will be scheduled in June		
	Deputy Ch & Secretar	Action: Confirm feedback session arrangements		
			ess Arising	10. Busin
		<ul> <li>The Chair spoke to the Referral Note regarding the future of the SWS Advisory Panel, as circulated with the Agenda, and highlighted:</li> </ul>	SWS Advisory Panel [13.11.21; Item 7.2]	10.1
		• Panel membership and meetings have been rationalised for 2022, with a view to ceasing the arrangements, pending consideration by the Stakeholder Engagement Working Group.		
_		<ul> <li>SWS Advisory Panel, as circulated with the Agenda, and highlighted:</li> <li>Panel membership and meetings have been rationalised for 2022, with a view to ceasing the arrangements, pending consideration by the Stakeholder Engagement Working</li> </ul>		

				• <u>Action</u> : Invite other Board members to the (three) 2022 meetings.	Chair & Chief Executive
11.	New B	usiness	•	Nil items	
12.	Comm Board	ittees of the			
	12.1	Health Care Quality & Safety	•	A/Prof Gray spoke to the highlights of the Health Care Quality & Safety Committee meeting held on 6 April 2022, as circulated with the Agenda:	
				• Item 7 - Transforming Your Experience (TYE) Plan 2022	
				Item 9.3 - Aboriginal Chronic Care Program	
				• Item 8.1.2 - Overdue elective surgeries	
			•	Prof Merrett advised that BHI data/reports indicate that the TYE Strategy is delivering the required (improved) outcomes for patient experience.	
	12.2	Aboriginal Health	•	Ms Murphy spoke to the highlights of the Aboriginal Health Committee meeting held on 24 March 2022, as circulated with the Agenda:	
				Item 8 - Anti-racism Strategy	
				<ul> <li>Item 6.1 &amp; 6.2 - Aboriginal Workforce Strategy – the need to consider opportunities to regrow the SWSLHD Aboriginal workforce is critical</li> </ul>	
	12.3	Audit & Risk Management	•	Ms Murphy spoke to the highlights the Audit & Risk Management Committee meeting held on 14 April 2022 as circulated with the Agenda:	
				• Item 4.1 - Climate Adaption Strategies Risk Report	
				Item 7.4 - Interim Financial Statements	
	12.4	Finance & Assets	•	Mr Roach spoke to the highlights the Finance & Assets Committee meeting held on 18 March 2022 as circulated with the Agenda:	
				Item 6.1.1 - Restricted Financial Assets	
				Item 6.1.2 - Surgical waiting lists	
				<ul> <li>Item 6.1.5 - People &amp; Culture – Staff Bank Pool &amp; Wellbeing of Staff Annual Report</li> </ul>	

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12.5	Research & Teaching	<ul> <li>Dr Abi-Hanna spoke to the highlights of the Research &amp; Teaching Committee held on 7 April 2022, as circulated with the Agenda.</li> <li>Item 6.1 - Partner presentation – Sydney University</li> <li>Item 7.1 - Education &amp; Training Review Report – the related presentation to the Board has been deferred to May meeting</li> <li>Item 8.3.2 - New model of funding for clinical trials unit</li> <li>Item 9 - Acknowledged A/Prof Naylor, nominated as Allied Health Researcher – Allied Health Awards</li> </ul>	
13. Other	Committees		
13.1	Consumer & Community Council	<ul> <li>Prof Dickson spoke to the highlights of the Consumer &amp; Community Council (CCC) meeting held on 1 April 2022, as circulated with the Agenda:</li> <li>Item 7.1 - REACH Program refresh at Fairfield</li> <li><u>Action:</u> Provide feedback to the Council regarding sustainability of Programs</li> <li>Item 7.1 - Seclusion &amp; restraint rephrased to therapeutic practices.</li> <li>Item 7.1 - Acknowledged Oral Health Accreditation</li> </ul>	Prof Dickson & Chief Executive
13.2	Medical Staff Executive Council	<ul> <li>Dr Ung spoke to the Minutes of the Medical Staff Executive Council (MSEC) meeting held on 14 April 2022, as circulated with the Agenda, highlighting:         <ul> <li>The need to prioritise services that will support hospital / ED avoidance programs</li> <li><u>Action:</u> Schedule a focussed discussion for hospital / ED avoidance strategies at the Council meeting the Board Chair is attending and consider inviting the Deputy Chair regarding the relationship with the Primary Health Network</li> </ul> </li> </ul>	MSEC Chair
14. Items	for Information		
14.1	Correspondence	<ul> <li>Correspondence were circulated with the Agenda:</li> <li>Dr JS &amp; Dr SA</li> </ul>	
14.2	Work Program	<ul> <li>The 2022 Work Program – circulated with the Agenda and available from Diligent.</li> </ul>	

14.3 Meeting & Events Summary	<ul> <li>The 2022 Meeting &amp; Events Summary – circulated with the Agenda and available from Diligent, now includes the Annual Public Meeting date.</li> </ul>
15. Business Without Notice	<ul> <li>The Chair invited other business without notice.</li> <li>Nil items.</li> </ul>
16. Evaluation	<ul> <li>Dr Abi-Hanna evaluated the meeting, highlighting:         <ul> <li>Room temperature - too warm</li> <li>Initial introductions were well received – welcome to new Board members</li> <li>The discussion around ETP was respectful, strategic and encouraged active participation from members</li> <li>Deferring the Integrated Report was appropriate</li> <li>Inclusion of minutes with committee reports is useful</li> <li>Pleasing to consider sustainability</li> <li>It is important for the MSEC Chair to be aware of topics being considered</li> <li>Break in meeting at Chair's discretion</li> <li>Overall, a good meeting</li> </ul> </li> <li>Ms Houston noted that the mix of face-to-face and remote is challenging; remember to check in with those on line</li> </ul>
17. Close / Next Meeting	<ul> <li>The meeting closed at 5.50 pm.</li> <li>The next meeting will be held on 23 May 2022 at Tharawal.</li> </ul>