

# MINUTES

## South Western Sydney Local Health District Board

Date: Monday 22 August 2022

Time: 3:30pm

Venue: MS Teams

### 1. Present and Apologies

<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>	<i>Members</i>	<i>Pres.</i>	<i>Apol.</i>
Mr Sam Haddad (Chair)	✓		Ms Annette Houston	✓	
Dr David Abi-Hanna	✓		Dr Richard Matthews	✓	
Mr Max Bosotti	✓		Ms Kerrie Murphy	✓	
Prof Hugh Dickson	✓		Mr John Roach		✓
A/Prof Matthew Gray (Deputy Chair)		✓	A/Prof Shameran Slewa-Younan	✓	
Ms Teresa Harm	✓				
<i>Other Attendees</i>	<i>Pres.</i>	<i>Apol.</i>	<i>Other Attendees</i>	<i>Pres.</i>	<i>Apol.</i>
Ms Amanda Larkin, Chief Executive	✓		Ms Nel Buttenshaw, Director Corporate Governance	✓	
Dr Setthy Ung, SWSLHD Medical Staff Executive Council Chair	✓		Ms Jann Gardner, Chair Audit & Risk Management Committee	✓	

<b>Welcome</b>	<ul style="list-style-type: none"> <li>The Chair welcomed Board members and attendees, including guest, Jann Gardner to the meeting.</li> <li>A/Prof Slewa-Younan agreed to undertake the meeting evaluation.</li> </ul>	
<b>2. Acknowledgment of Country</b>	<ul style="list-style-type: none"> <li>The Chair opened the meeting by acknowledging the traditional owners of the land and paid respect to elders past and present.</li> </ul>	
<b>3. Confirmation of the previous minutes and action list</b>	<ul style="list-style-type: none"> <li><b>MOTION:</b> A motion was moved by Dr Abi-Hanna and seconded by Ms Murphy that the minutes of the Board meeting held on 25 July 2022 be accepted as a true and accurate record.               <ul style="list-style-type: none"> <li>The Motion was <u>CARRIED</u>.</li> </ul> </li> <li>No comments in response to the Action List.</li> </ul>	

<p><b>4. Declarations of Interest</b></p>	<ul style="list-style-type: none"> <li>• The Chair invited declarations of interest.</li> <li>• Ms Larkin reported her appointment to the Board of Trustees, Western Sydney University.</li> <li>• A/Prof Slewa-Younan reported that the author of the correspondence item circulated with the Agenda, is a colleague.</li> <li>• <b>Action:</b> Update the Declarations of Interest Register</li> </ul>	<p>Secretariat</p>
<p><b>5. Patient Story</b></p>	<ul style="list-style-type: none"> <li>• Ms Larkin presented the story of a COVID positive elderly female's end of life journey following transfer from a nursing home to Bowral Hospital's Emergency Department.</li> <li>• Despite the activity and acuity of other cases in the ED, the family formally acknowledged the empathy shown by and professionalism of staff.</li> </ul>	
<p><b>6. Audit &amp; Risk Management Committee (ARMC)</b></p> <p><b>6.1 Annual Report</b></p>	<ul style="list-style-type: none"> <li>• Ms Gardner presented the annual periodic report of the ARMC, as circulated with the Agenda, highlighting matters arising in 2021/22: <ul style="list-style-type: none"> <li>• The approach to Audit has changed as a result of the impact of COVID. Internal Audit staff were seconded to other areas of need in the District and, in addition, the usual access by Auditors to sections of the facilities was not available. Internal Audit therefore prepared an initial Internal Audit Plan covering a reduced period of 6 months.</li> <li>• Internal Audit concentrated on ensuring appropriate processes and procedures were adhered to despite the urgency for action, and focussed on areas where risks may have increased. Flexible Work Practices and Vaccination Clinics were reviewed as a result, and facility level audits recommenced when they were able to be undertaken. Some lower risk assurance audits were deferred. All required compliance audits were completed.</li> <li>• The ARMC was focussed on risks that could have increased as a result of the pressure placed on the District from COVID and the broad COVID response, for example, IT security, employee well-being.</li> <li>• The MoH introduced a new system-wide approach to reporting risk. Districts need only report risks where there is a potential for the risk to be system wide, or where the District might need significant support or information from the MOH to manage that risk. Strategic and operational risks are now managed locally with oversight from the ARMC, but can be escalated to MoH if thought necessary. The MoH has identified the following system level risks:</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>• Unauthorised Access to Data and Information;</li> <li>• Preparedness for a Cyber Security Event</li> <li>• Climate Change and Adaptation</li> </ul> <ul style="list-style-type: none"> <li>• Feedback has been received from MoH in relation to the first two risks. This has been at a high level but has allowed SWSLHD to benchmark itself against other LHDs on some aspects of the management of these risks. SWSLHD has provided detailed responses to MoH in relation to the third risk and is awaiting a reply from MoH.</li> <li>• The CAMMS Cycle system, covering Enterprise Risk, Planning, Performance, Internal Audit, and Legislative Compliance continues to be utilised to oversee and monitor risks and auditing. While this system has allowed a more consistent approach to managing risks, and has allowed the streamlined production of reports for both operational and assurance purposes, some of the modules available within the system are not as advanced as others. A state-wide system for risk management will be raised at the State ARMC Chairs meeting.</li> <li>• The LHD Manager Internal Audit, Ms Pronger, will be retiring in August 2022 and the recruitment process for obtaining a replacement is well advanced.</li> <li>• Independent member, Ms Abigail Goldberg retired from her position in August and has been replaced with Mr Arthur Diakos.</li> <li>• Looking forward to 2022/23 the ARMC will focus on workforce matters and Capital Works.</li> </ul>	
<p><b>6.2 ARMC meeting – 18.07.22</b></p>	<ul style="list-style-type: none"> <li>• Ms Gardner spoke to the highlights of the ARMC meeting held on 18 July 2022, as circulated with the Agenda: <ul style="list-style-type: none"> <li>• Item 7.3 – SWSLHD Financial Statements for FY ended 30.06.22</li> <li>• Item 8.1 – Self-assessment Check List</li> <li>• Item 8.2 – Internal Audit &amp; Risk Management Assessment Statement</li> <li>• Item 8.3 – Revised ARMC Charter (see 6.4 below)</li> <li>• Item 8.4 – Internal Audit Charter (see 6.3 below)</li> <li>• Item 9.1 – Corporate Governance Attestation Statement &amp; Compliance Spreadsheet (see 6.5 below)</li> </ul> </li> </ul>	
<p><b>6.3 Internal Audit Charter</b></p>	<ul style="list-style-type: none"> <li>• The SWSLHD Board <u>APPROVED</u> the revised Internal Audit Charter, as circulated with the Agenda.</li> <li>• <b>Action:</b> Convey the Board’s approval of the revised Charter to the Manager, Internal Audit.</li> </ul>	<p>Secretariat</p>

<p><b>6.4 Revised ARMC Charter</b></p>	<ul style="list-style-type: none"> <li>The SWSLHD Board <u>APPROVED</u> the revised ARMC Charter, as circulated with the Agenda.</li> <li><b>Action:</b> Convey the Board’s approval of the revised Charter to the Manager, Internal Audit to enable advice back to the Committee, publication on the website/Diligent.</li> </ul>	<p>Secretariat</p>
<p><b>6.5 Corporate Governance Attestation Statement</b></p>	<ul style="list-style-type: none"> <li>The SWSLHD Board <u>APPROVED</u> the Corporate Governance Attestation Statement for 2021/22, as circulated with the Agenda, noting two qualifications: <ul style="list-style-type: none"> <li>The Finance &amp; Assets Committee does not receive monthly reports on the financial performance of each major cost centre</li> <li>A number of strategic plans remain under development, due to the COVID outbreak/response and associated disruptions</li> </ul> </li> <li>The list of Board members as at 30 June within the worksheet requires correction: <ul style="list-style-type: none"> <li>Dr Matthews – include</li> <li>Prof Merrett - remove</li> </ul> </li> <li><b>Action:</b> Convey the Board’s approval of the Statement (subject to the above correction) to the Manager, Internal Audit to enable submission to the MoH and publication on the website/Diligent.</li> </ul>	<p>Secretariat</p>
	<ul style="list-style-type: none"> <li>On behalf of the Board, the Chair thanked Ms Gardner for her informative presentation and acknowledged the work and contribution of the ARMC.</li> </ul>	
<p><i>Ms Gardner left the meeting at 4.15pm.</i></p>		
<p><b>7. Business Arising</b></p> <p><b>7.1 Strategic Risk Management</b></p>	<ul style="list-style-type: none"> <li>The Board <u>NOTED</u> the referral note, circulated with the Agenda, providing an update on strategic risk management.</li> <li>Ms Larkin highlighted that a review of all strategic risks and the related process including timing is currently underway.</li> </ul>	
<p><b>7.2 Contractual Arrangements – mobile coverage</b></p>	<ul style="list-style-type: none"> <li>The Board <u>NOTED</u> the referral note, circulated with the Agenda, providing advice on the contractual arrangements relating to mobile coverage.</li> <li>Ms Larkin highlighted arrangements are different between a new build and a refurbishment.</li> </ul>	

<p><b>8. Chief Executive's Report</b></p> <p>8.1 Significant Issues</p>	<ul style="list-style-type: none"> <li>• The Chief Executive's Significant Issues Report, was circulated with the Agenda. Ms Larkin highlighted: <ul style="list-style-type: none"> <li>• <b>COVID update:</b> <ul style="list-style-type: none"> <li>○ Case numbers (inpatients and community)</li> <li>○ The impact of (rising) furloughed staff on service delivery</li> <li>○ Forward strategy <ul style="list-style-type: none"> <li>• Non-mandatory education and training programs</li> <li>• Increased capacity at alternative sites (residential aged care facilities)</li> </ul> </li> <li>○ Non-urgent elective surgery</li> <li>○ Release of mortality report</li> </ul> </li> <li>• <b>Performance:</b> <ul style="list-style-type: none"> <li>○ League Table: Selected Tier 1 KPIs (excluding services)</li> <li>○ Safety &amp; Quality</li> <li>○ Access and meeting demand, with an emphasis on strategies to improve access to surgery</li> <li>○ Finance</li> <li>○ Activity with an emphasis on activity related to specific initiatives specified in the Service Level Agreement</li> </ul> </li> <li>• <b>Other matters:</b> <ul style="list-style-type: none"> <li>○ NSW Parliamentary Inquiry into the impact that Ambulance ramping and access block is having on the operation of hospital emergency departments in NSW</li> <li>○ Liverpool Hospital car park opening</li> <li>○ NSW Health Excellence in Nursing &amp; Midwifery Awards</li> </ul> </li> </ul> </li> </ul>	
<p>8.2 Media &amp; Marketing Report</p>	<ul style="list-style-type: none"> <li>• The Media &amp; Marketing Report was circulated with the Agenda.</li> </ul>	
<p>8.3 Work Health &amp; Safety Report</p>	<ul style="list-style-type: none"> <li>• The Board <b>NOTED</b> the Workers Compensation &amp; Work Health and Safety Report (Apr-Jun 2022), circulated with the Agenda.</li> <li>• Ms Larkin highlighted an improvement in claims closed this quarter.</li> <li>• Ms Larkin advised that lifts are included within a comprehensive maintenance program and replacements are undertaken through ARP funding.</li> </ul>	

8.4	Strategy, Risk, Performance Integrated Report	<ul style="list-style-type: none"> <li>The next Report is due in October.</li> </ul>	
<i>Dr Abi-Hanna left the meeting at 5.18pm and re-joined at 5.25pm</i>			
9. Chairman's Report	9.1 Board Effectiveness & Climate Evaluation Report	<ul style="list-style-type: none"> <li>The Board Effectiveness &amp; Climate Evaluation Report, was circulated with the Agenda.</li> <li>The Chair highlighted the three actions arising: <ul style="list-style-type: none"> <li>Board effectiveness and culture <ul style="list-style-type: none"> <li>Considering the significant changes to Board membership, a dedicated board effectiveness workshop to be held in early 2023</li> <li>The practice of meeting evaluations, conduct and participation to be discussed at the October in-camera session</li> </ul> </li> <li>Structure and nature of committees <ul style="list-style-type: none"> <li>Committee chairs have met; emerging issues of workforce, culture and sustainability to be further considered</li> </ul> </li> <li>Stakeholder and community engagement <ul style="list-style-type: none"> <li>Implement the Implementation Plan (endorsed in July)</li> </ul> </li> </ul> </li> <li><b>Actions:</b> <ul style="list-style-type: none"> <li>Publish the Report to Diligent and include actions in the Action List.</li> <li>Arrange for the Chair and Dr Matthews to meet regarding the role of the Board in equity   resource distribution</li> <li>Schedule a further meeting of Committee Chairs and the Chief Executive regarding the structure and nature of committees</li> </ul> </li> </ul>	Secretariat
9.2	Board Work Plan (Aug-Dec)	<ul style="list-style-type: none"> <li>The Board <b>ENDORSED</b> the updated Work Plan for the Aug-Dec 2022 period, as circulated with the Agenda.</li> <li><b>Action:</b> Publish the updated Work Plan to Diligent</li> </ul>	Secretariat
9.3	Bankstown-Lidcombe Hospital	<ul style="list-style-type: none"> <li>The Chair advised that the site selection process remains with government.</li> </ul>	
10. New Business	10.1 NSW Health Performance Framework	<ul style="list-style-type: none"> <li>The Board <b>NOTED</b> the revised NSW Health Performance Framework, as circulated with the Agenda.</li> <li>Ms Larkin highlighted the SWSLHD remains on performance level zero, following the most recent quarterly meeting.</li> </ul>	



<p><b>11. Committees of the Board</b></p> <p>11.1 Health Care Quality &amp; Safety</p>	<ul style="list-style-type: none"> <li>Prof Dickson spoke to the highlights of the Health Care Quality &amp; Safety Committee meeting held on 6 July 2022, as circulated with the Agenda: <ul style="list-style-type: none"> <li>Item 9.3 – SWSLHD Aboriginal Oral Health Pathways</li> <li>Item 12.2 – MoH Quarterly Board Report (Jan-Mar 2022)</li> </ul> </li> </ul>	
<p>SWSLHD Quality Awards</p>	<ul style="list-style-type: none"> <li>The Board <b>ENDORSED</b> the Committees recommended project – Rapid COVID-19 Disaster Communications to CALD communities - for the Board Award.</li> <li><b>Action:</b> Convey the Board’s decision to the Director, Clinical Governance for progression.</li> </ul>	<p>Secretariat</p>
<p>11.2 Aboriginal Health</p>	<ul style="list-style-type: none"> <li>The next meeting of the Aboriginal Health Committee will be held on 25.08.22.</li> </ul>	
<p>11.3 Audit &amp; Risk Management</p>	<ul style="list-style-type: none"> <li><i>Refer Item 6 above.</i></li> </ul>	
<p>11.4 Finance &amp; Assets</p>	<ul style="list-style-type: none"> <li>Dr Abi-Hanna spoke to the highlights of the Finance &amp; Assets Committee meeting held on 15.07 2022 as circulated with the Agenda: <ul style="list-style-type: none"> <li>Updated NSW Health Policy – membership: Audit &amp; Risk Management Committee and Finance &amp; Assets Committee</li> <li>Item 6.1.1 – Full year results</li> <li>Item 6.1.2 – Full year purchased activity</li> <li>Item 7.1 – Service Agreement 2022/23 (approved at the July Board meeting)</li> </ul> </li> <li><b>Action:</b> Arrange for the Chair and Mr Bosotti to meet regarding committee membership.</li> </ul>	<p>Secretariat</p>
<p>11.5 Research &amp; Teaching</p>	<ul style="list-style-type: none"> <li>Dr Abi-Hanna spoke to the highlights of the Research &amp; Teaching Committee meeting held on 04.08 2022 as circulated with the Agenda: <ul style="list-style-type: none"> <li>Item 6.2 – Partner presentation – HETI</li> <li>Item 8.3.2 – Research Report</li> </ul> </li> </ul>	
<p><b>12. Other Committees</b></p> <p>12.1 Consumer &amp; Community Council</p>	<ul style="list-style-type: none"> <li>The August 2022 meeting of the Consumer &amp; Community Council was cancelled.</li> </ul>	



12.2	Medical Staff Executive Council	<ul style="list-style-type: none"> <li>The Minutes of the Medical Staff Executive Council meeting held on 18 August 2022 were not available.</li> </ul>	
<b>13. Items for Information</b>			
13.1	Correspondence	<ul style="list-style-type: none"> <li>Correspondence from Ms CA was circulated with the Agenda.</li> </ul>	
13.2	Summary Work Plan	<ul style="list-style-type: none"> <li><i>Refer item 9.2 above.</i></li> </ul>	
<b>14. Business Without Notice</b>		<ul style="list-style-type: none"> <li>The Chair invited other business without notice.</li> <li>Nil items.</li> </ul>	
<b>15. Evaluation</b>		<ul style="list-style-type: none"> <li>A/Prof Slewa-Younan evaluated the meeting, highlighting: <ul style="list-style-type: none"> <li>The impact of COVID was reflected throughout the meeting; ARMC Report, Patient Story, etc</li> <li>Need to consider how the Board will effectively undertake its activities in the COVID environment, i.e. Site Visits</li> <li>Members interacted well</li> <li>The meeting started on time, and at one point was ahead, then fell behind.</li> </ul> </li> </ul>	
<b>16. Close / Next Meeting</b>		<ul style="list-style-type: none"> <li>The meeting closed at 6.10pm.</li> <li>The next meeting will be held on 26 September 2022: <ul style="list-style-type: none"> <li>2.30 – 3.30pm Site Visit – Triple I Hub, Campbelltown</li> <li>3.30 – 6.30pm Board Meeting</li> </ul> </li> </ul>	