

MINUTES ILLAWARRA SHOALHAVEN LOCAL HEALTH DISTRICT BOARD MEETING

Date: Monday 2 September 2013

4.00pm - 6.00pm

Venue: Conference Rooms 1 and 2, Level 8, Block C

Wollongong Hospital

ITEM 1: Presentations

1.1 Chartbook

Mr Andre Jenkins, Director Information Management and Information Communication Technology, Clinical Excellence Commission presented an overview of Chartbook to the Board.

The Board was informed the Clinical Excellence Commission resolved to move away from paper publications of the Chartbook on Safety and Quality in Healthcare in NSW following the release of Chartbook 2010 in 2012 in favour of a web publication.

The presentation addressed the value of the change and provided a brief demonstration of the new Chartbook.

Board members had the opportunity to ask questions related to the presentation.

1.2 2013-2014 budget

Report received and noted by the Board.

Members are referred to item 7.7 for further information related to this item.

ITEM 2: Meeting Opening

2.1 Attendance of members

Ms Sue Baker-Finch, Dr William Pratt, Professor Kathy Eagar, Ms Jill Boehm, Associate Professor Rod McMahon, Mr Roger Downs, Professor Gerard Sutton, Mr Geoff O'Donnell, Clinical Professor Jan Potter (via teleconference), Mr Paul Knight

2.2 Apologies

Clinical Professor Denis King, Ms Marisa Mastroianni, Professor Gerard Sutton

2.3 In Attendance

Mrs Susan Browbank, Mr Henry Kornacki, Mrs Rosemary Croke (secretariat)

2.4 Declaration of Pecuniary Interest, Conflict of Interest

There were no other conflicts of interest, gifts, or benefits declared.

2.5 Confirmation of Minutes of meeting held 5 August 2013

The minutes were accepted as a true and correct record.

2.6 Action List

Action list received and noted by the Board.

2.6.1 SDMH budget recovery strategy

It was noted SDMH budget recovery strategy reports now make reference to VMO over award payments.

2.6.2 Bulli Hospital kiosk

Verbal report received and noted by the Board.

The Board is referred to Item 4.2 for further information in relation to this issue.

2.6.3 Attestation Statement

The Board noted action in relation to this item.

2.6.4 Food Production Unit, Port Kembla District Hospital

Report received and noted by the Board.

Board members are referred to the Confidential Minute for further information related to this item.

ITEM 3: Report

3.1 Chief Executive

Report received and noted by the Board.

The Board noted the revised layout of the report, and acknowledged that further refinement was required.

ACTION ITEM: Board members Sue Baker-Finch, Jill Boehm, and

Geoff O'Donnell meet again with the Chief Executive

to progress this issue.

3.1.1 Reporting format for operational key performance indicators

The Chief Executive is attempting to improve the format in which information is provided, and is seeking feedback from Board members on the draft presented to this meeting.

ACTION ITEM: Board members to provide comment and

feedback on the content and presentation format of the Chief Executive report to the

Deputy Chair.

3.1.2 Overview

Noted by the Board.

The Board requested a letter of congratulations on behalf of the Board be forwarded to Yvonne Medina, the Australian College of Midwives and Johnsons' Baby NSW Midwife of the Year.

ACTION ITEM: The Chief Executive to action this request.

The Board was informed there has been progress in the recruitment to the positions of Director Clinical Services, SDMH, the General Manager at Shellharbour Hospital, and also the General Manager, at SDMH.

The Board was also informed a three month temporary contract has been offered and accepted to the position of General Manager, Shoalhaven District Memorial Hospital (SDMH). The temporary incumbent will take up the position on 14 October 2013.

The Chief Executive provided members with a progress report on recruitment to the position of Director, Workforce Strategy and Development.

Various issues related to the Shoalhaven sub-acute Mental Health Unit were raised and discussed, including the yet to be determined model of care, and involvement of NGOs in service provision.

3.1.3 Balanced Scorecard

Report received and noted by the Board.

The factors reported were selected by the Chief Executive to provide the Board with a snap shot of key performance indicators critical to the success of the District. The Board noted the list is not definitive, and further work will be undertaken to ensure the information provided is relevant and complete.

The Board discussed at length aspects of this high level operational report. Members queried the aggregation of particular outcomes in light of the Board's governance role, and the challenges confronting the District. Aspects of this discussion, and member comments emailed to the Deputy Chair, will form the agenda for the proposed meeting with the Chief Executive.

The Board was informed the District is organising a visitation to Royal North Shore Hospital and Prince Alfred Hospital to discuss the measuring of the Time of First Case in Theatre indicator to ensure LHDs are recording the same information.

3.1.4 June 2012-2013 Fourth Quarter Performance Review

Noted by the Board.

3.1.5 Finance report for period ending 31 July 2013

Noted by the Board.

3.1.6 Activity report for period ending 31 July 2013

Noted by the Board.

ITEM 4: Business Arising:

4.1 SDMH budget recovery strategy report

Report received and noted by the Board.

The Chief Executive informed the Board there are a number of strategies that require further clarification.

The Board noted work has commenced on a number of activities at SDMH including the auditing of VMO timesheets. An initial audit indicator suggests an experienced obstetric medical administrator or auditor will be required to undertake this assignment due to the complexities of the Rural Doctors Determination.

Another audit due to commence at the hospital shortly is the aligning of the staff profile to activity and the budget. The activity of aligning resources with service demand in a programmed manner is critical in achieving resource and cost benefits. Ward closure during periods of low activity, and review and reallocation

of operating theatre sessions are examples of tasks that can positively influence funding and budget compliance.

The Board noted the next SDMH budget recovery strategy update will be tabled at 4 November 2013 meeting.

4.2 Bulli Hospital kiosk

The Chief Executive has met with Bulli Hospital employees and arranged a follow up meeting in four weeks. In the meantime staff will be organising working parties to explore kiosk type viability/feasibility options.

The hospital employees are aware Health Share will be closing the Bulli Hospital kiosk shortly due to concerns regarding the ability of the facility to meet the Food Standards Code.

ITEM 5: New Business:

5.1 Publications posted on Board website

Report received and noted by the Board.

RESOLUTION (2013/19):

The Board resolved to endorse documents larger than ten pages be published on the Board website and referenced in Board business papers.

5.2 Activity Based Funding Transition Grant Plan 2013-2014

Report received and noted by the Board.

5.3 2013-2014 Operational Plan

Report received and noted by the Board.

The Chief Executive informed members the service lead in the majority of operational deliverables are the Tier 2s or service directors.

The Board requested estimation of completion/due dates be included in the plan.

ACTION ITEM: Estimation of completion/due dates to be incorporated in the plan.

The Board noted the plan is under review.

ITEM 6: Confidential Items:

6.1 Confidential Item One

Board members are referred to the Confidential Minute for further information related to this item.

6.2 Confidential Item Two

Board members are referred to the Confidential Minute for further information related to this item.

6.3 Confidential Item Three

Board members are referred to the Confidential Minute for further information related to this item.

6.4 Confidential Item Four

Board members are referred to the Confidential Minute for further information related to this item.

ITEM 7: Information

7.1 Planning Committee – draft minutes of meeting held 5 August 2013

Draft minutes received and noted by the Board.

7.2 Media and Community Engagement Activity – July 2013 and August 2013

Report received and noted by the Board.

7.2.1 Hospital video security leak

The Board raised, sought, and received additional information from the Chief Executive regarding this Wollongong Hospital media clip.

7.3 Shoalhaven Clinical Council—meeting held 15 July 2013

Minutes received and noted by the Board.

7.4 Illawarra Clinical Council – draft minutes of meeting held 14 August 2013

Draft minutes received and noted by the Board.

7.5 Medical and Dental Advisory Appointment Committee (MDAAC) – executive summary - meeting held 22 July 2013

Executive summary received and noted by the Board.

7.6 Bulli Hospital Capital Planning Processes

Report received and noted by the Board.

Board members are referred to the Confidential Minute for further information related to this item.

7.7 2013-2014 budget

The Director of Finance presented to the distribution of the budget to the hospitals and services across the District. The director informed the Board the 2013-2014 allocation process has been robust and transparent.

The Board was provided with a detailed presentation of the District's approach to the ABF model methodology this year. Due to the integrity of the data available for sub acute, non admitted, and Mental Health programmes, the funding allocation to these services was based on the historical level. The strategy of shadow funding against the model and transitional funding was initiated in order to strengthen next year's allocation process.

Members noted the timeframe round the framing and budget dissemination to the Tier 2's, and the Board meeting cycle during this time. The Board raised and discussed at length Board endorsement of the budget prior to distribution. In conclusion the Chair stated the Service Agreement does not moderate the Board in exercising that duty.

ITEM 8: Business Without Notice

8.1 Annual financial statements

The need for the Board to examine the District's annual financial statements prior to sign off was raised and discussed at the Audit and Risk Management Committee meeting held 2 September 2013. The signed statements are required to be submitted to Treasury prior to 30 September 2013.

This issue was brought to the Board's attention by the Chair, and also the offer of the Committee's Chair to provide the Board with a special briefing of the accounts post sign off.

RESOLUTION (2013/20):

The Board endorsed to resolve the signed annual financial statements be received and reviewed by members, and an invitation be extended to the Chair of the Audit and Risk Management Committee to brief the Board if deemed necessary.

8.2 Chief Executive Annual Performance Review

The Board's attention was drawn to the Chief Executive's annual performance review that will commence shortly.

ACTION ITEM: Members to email the Deputy Chair any issues they consider relevant to the review.

8.3 Leave of Absence

The Chief Executive informed members she will be on annual leave from 30 September 2013 to 27 October 2013 inclusive.

Meeting closed at: 6.30pm

Next meeting:

Monday 14 October 2013

4.00pm – 6.00pm Conference Rooms

Lower Level

Shoalhaven District Memorial Hospital

CERTIFIED A CORRECT RECORD

Ms Sue Baker-Finch

S/Beturline).

14.10.13

TRIM Ref: DT13/57627