

## MINUTES ILLAWARRA SHOALHAVEN LOCAL HEALTH DISTRICT BOARD MEETING Date: Monday 5 March 2012 4.00pm – 6.00pm Venue: Conference Rooms 1 and 2, Level 8, Block C, Wollongong Hospital

## **ITEM 1:** Presentation

Mr Anthony Manning, Director Planning and Technical and Mr Troy Harvey, Project Director, Health Infrastructure presented an overview of the District's current capital projects.

Board members had the opportunity to ask questions related to the projects. Issues surrounding the Wollongong Hospital redevelopment including the complexity of the work, financial commitment, work time frames, risk and disaster management plan, and public submissions to the project were raised and discussed. The Board was informed the Shoalhaven Cancer Care Centre project is progressing on schedule.

Separate to the current projects, the District and Health Infrastructure have been pursuing this matter via preparation and submission of a business case seeking capital funding to expand the car park.

## ACTION ITEM:

Need to explore media opportunities in relation to the capital projects and business case supporting additional car parking spaces at Wollongong Hospital.

## **ITEM 2:** Attendance of members

Clinical Professor Denis King, Ms Sue Baker-Finch, Mr Roger Downs, Mr Paul Knight, Mr Geoff O'Donnell, Professor Jan Potter, Dr William Pratt, Ms Marissa Mastroianni, Professor Gerard Sutton, Ms Kathy Eagar, Ms Jill Boehm

#### In Attendance

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

## ITEM 3: Declaration of Pecuniary Interest, Conflict of Interest

No pecuniary interest declared, nor a conflict of interest.

## **ITEM 4:** Confirmation of Minutes of meeting held 5 December 2011

Minutes accepted as a true and correct record.

## ITEM 5: Reports

## 5.1 Chief Executive

Report received and noted by the Board.

Aspects of the Health Services Performance Report were raised and discussed. The Chief Executive stated that, as there is no state or national data definition for an Emergency Department admission based on specific criteria, the District has elected to admit and discharge from Emergency Departments. This practice will continue until 1 July 2012 when the New South Wales Activity Based Funding policy determines the appropriate Emergency Department admission and discharge process.

The Chief Executive spoke to the report and informed the Board the District's performance rating by the Ministry of Health that was on Level 1 for a short period of time has been set at zero. The Chair informed the Board this is an excellent result as other Districts struggle with not many achieving Level 1 or below.

## 5.2 ISLHD Board Executive Summaries

## 5.2.1 Finance and Performance Committee – Performance Overview Report for the period ending 31 January 2012

Report received and noted by the Board.

The Board is to note there may be an under estimate of the District's expenditure between now and the end of the financial year due to a number of invoices not processed by Health Support Services. A meeting has been scheduled for the District to discuss this issue with Health Support Services.

Budget supplementation of \$1M was received from the Ministry of Health for the leap year day in February 2012. The Board's attention is drawn to a budget shortfall of \$400K in relation to this cost.

## **ACTION ITEMS:**

*i* Director of Finance to provide the Board Finance and Performance Committee with a report regarding the issue of unprocessed invoices. *ii* Director of Finance to provide the Chair with information related to the issue of unprocessed invoices, and the budget shortfall related to the leap year day in February 2012 for tabling at the next Council of Chairs forum scheduled for 16 March 2012.

## 5.2.2 Audit and Risk Management Committee – meeting held 27 February 2012

Report received and noted by the Board.

Marisa Mastroianni reported District Extreme Risk Reports are submitted to the Ministry of Health on a quarterly basis. It is to be noted copies of these reports will be included in Board business papers.

An extreme risk relates to Health Support Service's ability to maintain service delivery and business continuity as per the District's Service Agreement with Health Support Services. The Service provides information technology support via one server with no back up.

## ACTION ITEM:

The Chair will raise this issue at the next Council of Chairs meeting.

Marisa Mastroianni also reported on the ongoing auditing of salary packaging and meal entertainment. Audits have highlighted the guidelines surrounding meal entertainment could be described as broad and as a result lend themselves to interpretation. It is felt that clearer guidelines would assist in ensuring staff comply with the initiative, as non-compliance is subject to disciplinary action that, in some cases, may lead to staff having their employment terminated.

The Chief Executive stated occurrences where there is reasonable suspicion of corrupt conduct are reported to ICAC.

## 5.2.4 Planning Committee – meeting held 6 February 2012

Report received and noted by the Board.

The Chair referred to the Health Services Plan and informed the Board six organisations had been approached and provided with a Request for Quote with four quotes received. The Tender Review Committee met and resolved to invite four of the applicants to revisit the quote via a face to face presentation. The companies are to ensure their presentations have a focus on service planning.

The Chair provided the Board with a report on the District's progress towards acquiring the necessary land for the possible expansion of Shoalhaven District Memorial Hospital, and location of the Medicare Local. The Chair has written to the Minister for Health seeking her support.

Discussion ensued on the After Hours Radio Doctor's Service and the impact the introduction of Medicare Locals will have on the Service. The Board was informed that work with Medicare Locals in developing a plan to provide after hours medical services has commenced.

## 5.3 Executive Management Committee Executive Summaries

## 5.3.1 Northern Clinical Council – meeting held 8 February 2012

Draft minutes received and noted by the Board.

# 5.3.2 Southern Clinical Council–meeting held 20 February 2012

Draft minutes received and noted by the Board.

#### 5.3.3 MDAAC – meeting held 30 January 2012

Draft minutes received and noted by the Board.

## ITEM 6: Action List

## 6.1 Pre-employment Health Risk Assessment

**RESOLVED (2012/9):** The Board resolved to endorse the Preemployment Health Risk Assessment.

#### **ITEM 7:** Confidential Items

## 7.1 Confidential Minute One

Item received and noted by the Board.

#### 7.2 Confidential Minute Two

Item and update received and noted by the Board.

## 7.3 Confidential Minute Three

Item and update received and noted by the Board.

## 7.4 Confidential Minute Four

Item and update received and noted by the Board.

## 7.5 Confidential Minute Five

Item received and noted by the Board.

## 7.6 Confidential Minute Six

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

## ITEM 8: Business Arising

## 8.1 Payments for private patients in public hospitals, 2011

Professor Kathy Eagar provided the Board Secretariat with a copy of the current fee structure.

#### 8.2 ISLHD By-Laws

The draft ISLHD By-Laws was received and noted by the Board.

Discussion took place on the LHD By-Laws. There was conversation surrounding the various clinical councils and medical staff councils required by the By-Laws.

## **ACTION ITEMS:**

- *i* Board members to receive an electronic copy of the draft District By-Laws and provide the Chief Executive with suggested changes and comments by 12 March 2012.
- *ii* Proposed amendments to the draft ISLHD By-Laws to be tabled at the next Board meeting prior to endorsement.

RESOLVED (2012/10):	The Board endorsed the District Clinical
	Councils to be known as the Illawarra
	Clinical Council and the Shoalhaven
	Clinical Council.

## ITEM 9: New Business

## 9.1 PET Scanner at Wollongong Hospital

The Board received and noted the report.

**RESOLVED (2012/11):** The Board endorsed the preparation of a formal business case detailing the establishment of a PET service at Wollongong Hospital via a Public

Private Partnership for submission to the Ministry of Health.

## 9.2 Composition of Audit and Risk Management Committee

The Board received and noted the report.

**RESOLVED (2012/12):** The Board endorsed the removal of the Chief Executive as a member of the ISLHD Audit and Risk Management Committee and for the Chief Executive to continue to attend in an ex officio capacity.

## ACTION ITEM:

Call for a Board member to replace the Chief Executive on the District Audit and Risk Management Committee.

## 9.3 Relocation of Wollongong Community Health Centre

The Board received and noted the report.

The Board was informed Wollongong Community Health Centre occupied four units of the 30 unit Piccadilly Centre until the recent heavy rains when the units were flooded requiring relocation of services and staff. The four units were purchased 20 years ago and the 40 year old building is in need of extensive maintenance work estimated to cost in the vicinity of \$10M.

The District is investigating options in relation to the Body Corporate Fees and selling the Strata Units acknowledging this would be difficult considering the current state of the Units and the building generally.

## 9.4ISLHD Strategic Priorities Report

The Board received and noted the report.

The Chief Executive stated this report details information requested by the Ministry of Health on a template provided by the Ministry and submitted to the Ministry on a quarterly basis. Future reports will be incorporated in the Chief Executive Reports to the Board.

## ITEM 10: Information

## 10.1 Lead the Change: An Executive Challenge Workshop

The Board received and noted the workshop.

**RESOLVED (2012/13):** The Board resolved to endorse Mr Paul Knight as the ISLHD Board representative at this workshop.

#### ITEM 11: Business Without Notice

#### **11.1 ISLHD Coding Audit**

The Chief Executive responded on the Pavilion Coding Audit recently undertaken across SDMH, Shellharbour Hospital, and Wollongong Hospital. Estimates of additional funding indicated the possibility of attracting a further \$16M annually if coding quality and documentation could be improved. While it was thought this was an over estimation, there is clearly significant work to be undertaken.

An action plan has been developed to address the recommendations.

The limits of the audit findings are that whilst the report says funding could be increased, the reality is that the District health budget is not based entirely on activity.

Meeting closed at: 6.50pm

Next meeting:	Monday 2 April 2012
	4.00pm – 6.00pm
	Conference Rooms 1 & 2,
	Level 8, Block C,
	Wollongong Hospital

**CERTIFIED A CORRECT RECORD** 

## **Clinical Professor Denis King**

Signature

2.4.12

Date

TRIM Ref: D12/15095