



**Health**

Illawarra Shoalhaven  
Local Health District

**MINUTES  
ILLAWARRA SHOALHAVEN LOCAL HEALTH DISTRICT  
BOARD MEETING**

**Date: Monday 4 February 2013**

**4.00pm – 6.00pm**

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

**ITEM 1: Presentation**

Ms Anne Cookson, Manager Workforce Strategy, Culture and Wellness was invited to present to the Board the ISLHD Culture Change Strategy. The proposed strategy aims to build upon the existing work, and provide more rigour and accountability around embedding behaviour and systems based culture change. The Strategy will combine two District wide initiatives; target values development of senior executive, and continue middle management skill development and monthly on site support for site leadership teams.

The presentation focussed on two overarching culture change initiatives: the Just Culture framework, and the development of a Respect Equity and Diversity (RED) contact officer network. Board member's attention was drawn to aspects of the initiatives including the ability of a Just Culture framework to ensure transparency in the processes, to clearly state acceptable and unacceptable behaviour rules that will apply to all staff, and to create an atmosphere of trust where staff are treated equally.

Measuring behaviour against a rule as opposed to measuring against the organisation's values was raised and discussed by the Board.

**ACTION ITEM:** The need to develop a Just Culture principle recognising the District as a values based organisation.

The Board was informed the RED Contact Officer network promotes behaviours congruent with the District's values including, but not limited to, the elimination of instances of bullying and harassment. The system creates a network of educated support persons across the District thus increasing staff access to information and support from the current system, including that of their manager.

The undertone of the colour red, and the acronym RED (Respect Equity and Diversity) was raised as a possible issue.

The presentation concluded at 4.50pm.

**ITEM 2: Attendance of members**

Clinical Professor Denis King, Ms Sue Baker-Finch, Ms Marisa Mastroianni, Dr William Pratt, Professor Kathy Eagar, Ms Jill Boehm, Assoc Professor Rod McMahon, Clinical Professor Jan Potter, Mr Roger Downs, Professor Gerard Sutton, Mr Paul Knight

**Apology**

Mr Geoff O'Donnell

**In Attendance**

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

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

Assoc Professor Rod McMahon declared a conflict of interest in matters related to the Illawarra Shoalhaven Medicare Local (ISML). Assoc Professor McMahon expressed a desire to participate in conversation regarding the ISML, and stated he would abstain if and when a motion related to the ISML was called.

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

**ITEM 4: Confirmation of Minutes of meeting held 3 December 2012**

The minutes were accepted as a true and correct record.

**ITEM 5: Action List**

Action list received and noted by the Board.

**5.1 Contact to be made with the Head of Justice Health in relation to a possible role for Justice Health in the management of the Sobering Up Centres**

The Chair informed the Board he had made contact with Mr Chris Puplick and discussed this initiative.

The District has written to the Ministry of Health addressing a number of clinical and safety concerns. The District is yet to receive a response. A role for Justice Health in this type of model of care was again raised and discussed.

**ACTION ITEM:** The Chair to raise the District's concerns with the Ministry of Health.

## **5.2 Request for information on how the Clinical Governance Unit supports learning and improvement from clinical incidents within the ISLHD**

Report received and noted by the Board.

The Board commented on the high calibre of this report.

The Board was informed the District has an audit schedule for key organisational processes, and an audit procedure for the implementation of RCA recommendations in place.

## **ITEM 6: Reports**

### **6.1 Chief Executive**

Report received and noted by the Board.

#### **Workload over Christmas period**

The Board noted the high demand over the holiday period at Milton Ulladulla Hospital. A medical practice in Milton Ulladulla was staffed to provide assistance during the high season influx of holiday makers however received nil referrals over the period.

#### **ISLHD Director of Post Graduate Medical Training (.2 fractional staff specialist appointment)**

Appointing to this position may prove problematic. The Chief Executive informed the Board of a proposed strategy to ensure the District meets post graduate medical training obligations.

#### **Director of the Illawarra Shoalhaven Health Education Centre (.2FTE position in accordance with relevant award)**

There has been some interest shown in this position.

### **6.2 ISLHD Board Executive Summaries**

#### **6.2.1 Finance and Performance Committee – Overview Report for period ending 31 December 2012**

Report received and noted by the Board.

The Director of Finance informed the Board the current ISLHD budget situation is relatively stable with all KPIs heading in the right direction.

The District is 736 NWAU (2.6%) above acute target and 469 (8.9%) above ED target as at 30 November 2012. The average acuity has increased by 1.1% with District emergency presentations 5.6% above the same period last year.

### **6.2.1.1 Readmission Rate**

The Board noted the District's unplanned readmissions YTD November 2012 as 9.1 as compared to New South Wales 6.6.

The Board was informed the accuracy of this selected performance indicator by LHD data is questionable. This statement is validated by the fact there is no State definition of an unplanned readmission. A definition would support LHDs in the collection and reporting on the KPI. The Chief Executive informed the Board of her repeated requests to the Ministry of Health to be provided with a definition.

- ACTION ITEMS:**
- i The Chief Executive to provide the Chair with information regarding the District's requests to ascertain a definition of an unplanned admission.
  - ii The Chair to raise this issue at the next Council of Chairs forum to be held in March 2013.

The Chief Executive stated a review of the month's readmissions to ascertain the cause of this rate identified there are issues related to patient stays being classified as readmissions when there is evidence in the medical records they are planned admissions or transfers of care. The issue of admitting and discharging patients from ED and classifying the episode as an inpatient admission is also contributing to this artificially high rate.

The District will be addressing a number of issues in an attempt to bring the District's readmission rate down to more acceptable levels.

### **6.2.1.2 Connecting Care Programme**

The data provided in relation to the District's performance of the Connecting Care programme, provided on page 30 of the business papers, is incomplete and does not reflect the actual performance of the programme.

Updates have been provided to the Ministry of Health and were re-sent in early January 2013.

## **6.2.2 Health Care Quality – meeting held 28 November 2012**

Report received and noted by the Board.

### **6.2.3 Planning Committee – meeting held 3 December 2012**

Minutes received and noted by the Board.

Verbal report on meeting held prior to the Board meeting was provided by the Chair.

The Chair informed the Board two presentations were made to the Committee. Mr Keith McDonald presented The Illawarra Shoalhaven Medicare Local After Hours GP Service Plan, and Mr Robert Rust, Chief Executive, Health Infrastructure presented the District's Asset Strategic Plan.

#### **6.2.3.1 Health Precinct on SDMH site**

The Chair informed the Board a draft lease between the Illawarra Shoalhaven Medicare Local (ISML) and the Illawarra Shoalhaven Local Health District was with the respective legal representatives of ISML and Health Infrastructure. The Chair stated the District should be informed of any delay in signing off on the lease.

**ACTION ITEM:** Chief Executive to ascertain the progress of signing off on the lease.

#### **6.2.3.2 Clinical Division Plans**

The level of consultation with external agencies in the development of the eight Clinical Division Plans was raised and discussed.

#### **6.2.3.3 Wollongong Hospital Greenfield Site proposal**

The Board was referred to the *Illawarra Regional Strategy for the Illawarra and Shoalhaven region over the coming 20 years* presentation by Mr Brett Whitworth, NSW Department of Planning at the Board Planning Committee meeting of 2 April 2012. The presentation endorsed the current location of Wollongong Hospital as the preferred option for the District's major health care facility.

### **6.2.4 Health Care Quality – meeting held 28 November 2012**

Report received and noted by the Board.

### **6.2.5 Aboriginal Health – meeting held 10 December 2012**

Report received and noted by the Board.

**6.2.6 Audit and Risk Management Committee – meeting held**

Report received and noted by the Board.

**6.2.7 Illawarra Clinical Council – meeting held 12 December 2012**

Report received and noted by the Board.

**6.2.8 Medical and Dental Advisory Appointment Committee (MDAAC) – meeting held 17 December 2012**

Executive summary received and noted by the Board.

**ITEM 7: Business Arising:**

**7.1 Progress report on SDMH financial performance 2012-2013 (related to the SDMH Recovery Plan)**

Shoalhaven District Memorial Hospital's financial result as at 31 December 2012 was \$1.6m unfavourable. This is a \$.6m improvement to same period last year. This result needs to be discounted by \$.4m budget allocated in August 2012 for above target acute activity that was not achieved thus reducing the improvement to \$.2m. The result is slightly disappointing considering the activity target was not reached, and 12 beds were closed for four months.

The Director of Finance stated some of the Turnaround Plan strategies show optimistic trends, with FTE control and greater purchasing controls adding positivity to attaining a favourable result. By 30 June 2013 the Director of Finance would be anticipating a financial performance improvement of \$1m. The Board discussed the likelihood of the District achieving this target and requested to be provided with an update at the next Board meeting.

**ACTION ITEM:** Progress report to be prepared by Director of Finance for tabling at 8 April 2013 Board meeting.

The Board raised and discussed the impact of organisational culture on financial performance.

**7.2 Executive Management structure**

This Item was held over for discussion in camera.

**7.3 Progress report on the implementation of the external Mental Health Review recommendations**

Report received and noted by the Board.

The Chief Executive reported the three working parties established to implement the recommendations of the external Mental Health Review have each been in place for six months and will now present their recommendations. A forum for mental health staff will be held on 15

February 2013 where the formal transition of the recommendations and implementation to the Mental Health Service will be announced. Following this presentation an action plan for monitoring the implementation of the recommendations will be developed.

**ACTION ITEM:** The Chief Executive to provide the Board with the action plan for monitoring the implementation of the recommendations.

**ITEM 8: New Business:**

**8.1 Feasibility of co-locating a private hospital on the Wollongong Hospital campus**

Item held over for discussion in camera.

**8.2 Recurrent funding requirements for new projects**

Report received and noted by the Board.

The Director of Finance informed the Board that at a state level, the introduction of activity based funding reforms will impact on the recurrent funding requirements of a number of the District major capital works projects coming on line in 2014-2015. Correspondence has been forwarded to the Ministry of Health requesting clarification and advice in relation to this issue.

The Board was also informed the Federal Government will not be renewing national partnerships from next year. From 1 July 2014 the Federal Government will step up to pay 45 percent of growth in hospital services in 2014-2015. Public hospitals will need to ensure growth is matched by activity to guarantee future funding requirements are achieved.

The Chief Executive stated this change in funding model will impact on District COAG programmes. The District will be examining the funding effected programmes in light of the national health reforms.

**ITEM 9: Confidential Item:**

**9.1 Confidential Item One**

Board members are referred to the confidential minutes for further information related to this item.

**ITEM 10: Information:**

**10.1 Tobacco Legislation Amendment Act 2012**

Report received and noted by the Board.

## **10.2 2013 newly graduated clinician intake**

Report received and noted by the Board.

## **10.3 Staffing Freeze Exemptions-Delegations to Chief Executive**

Report received and noted by the Board.

### **ITEM 11: Business Without Notice**

#### **11.1 Meeting with Bulli Emergency Primary Health Care Centre staff**

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The Chair reported he and the Chief Executive attended a meeting with staff of the Bulli Emergency Primary Health Care Centre. The meeting was organised following receipt of a letter from the Bulli Branch Executive, NSWNMA regarding staff concern and disappointment at the manner in which proposed changes to the Bulli emergency service had been managed.

Two staff members, together with the Site Manager and Deputy Director of Nursing attended the meeting held on Monday 14 January 2013. This was a disappointing attendance as three weeks notice of the meeting had been provided to the staff.

At the meeting staff reported they were being exposed to abuse from the public as a result of the "down grading" of services. The Chief Executive reassured that such behaviour would not be tolerated and any such instances were to be reported. To date the Chief Executive has not been provided with this information.

The other issue of concern to staff was their intended redeployment to other wards in the hospital when the Emergency Department was closed. Staff had been afforded the opportunity to transfer to other emergency departments or to remain at Bulli Hospital and work in one of the wards between 10.00pm and 7.00am. past and present.

**Meeting closed at: 7.10pm**

**Next meeting:** Monday 4 March 2013  
4.00pm – 6.00pm  
Conference Rooms 1 & 2,  
Level 8, Block C  
Wollongong Hospital



**CERTIFIED A CORRECT RECORD**

**Clinical Professor Denis King**



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**Signature**

4. 3. 13

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**Date**