MINUTES BOARD MEETING



Date: 4.00pm-6.00pm, Monday 4 April 2016 Gov Venue: Conference Rooms, District Executive Office, Warrawong

ITEM 1: MEETING OPENING

The meeting opened with a video presentation from the Chief Executive of the new Orientation video, first presented to new employees of the District.

1.1 Attendance of members

Clinical Professor Denis King OAM, Ms Jill Boehm OAM, Associate Professor Stephen Andersen OAM, Professor Kathy Eagar, Mr Roger Downs, Mr Paul Knight, Ms Marisa Mastroianni, Associate Professor Rod McMahon, Mr Geoff O'Donnell, Clinical Professor Jan Potter, Dr William Pratt, Ms Carrie Schulman, Professor Gerard Sutton AO.

In Attendance

Ms Margot Mains, Chief Executive; Ms Jasmina Jonceski, Board Secretary; Ms Carolyn Cooper, Executive Director Clinical Operations; Ms Helen Freeland, Executive Support, Integrated Care, Planning and Performance.

Apologies

Mr Brent Wiseman, Executive Director Finance and Corporate Services.

1.2 Declaration of Pecuniary Interest, Conflict of Interest

Dr Andersen noted his conflict of interest in relation to Confidential Item 10.2. Further information is provided in the Confidential Minutes.

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

1.3 Register of Board Resolutions

Members received the Board resolutions of the previous 12 months, and the progress to date.

1.4 Confirmation of Minutes of meeting held 7 March 2016

The minutes were accepted as a true and accurate record.

ITEM 2: ACTION LIST / BUSINESS ARISING

The Board noted progress/completion of actions.

The Board Chair advised that in relation to Action 23 concerning the Low Volume Cancer Care Project he has recently received informal feedback that the program is on track.

ITEM 3: REPORTS

3.1 Board Chair Report

The Board received the information provided.

The Board Chair congratulated Kathy Eagar on her recent achievement receiving the Health Services Research Association of Australia and New Zealand Professional Award, which was highlighted in the District's latest issue of Health in Focus.

The Board Chair noted recent discussions concerning governance of the Board and subcommittees, noted that the Board is keen to be involved, and noted the contribution of some Board members to date in assisting to review the District's governance, particularly Kathy Eagar, Marisa Mastroianni and Roger Downs. He noted that a draft paper has been developed by the Board Secretary concerning the Board's governance and reporting and that it is an opportune time to debate how the Board should function, including the sub-committees.

The Board Chair noted that he would ask the Chief Executive to engage the Australian Institute of Company Directors concerning the Board's governance, particularly concerning how the Board should function, including the Committee structure, to ensure the Board is able to fulfil its functions. Any such discussions would take place around July/August.

The Board Chair noted the passing of Professor Don Iverson and noted that he was a pivotal character for the development of the Graduate School of Medicine. A copy of the letter sent to his wife expressing the District's condolence will be circulated to Board members.

ACTION ITEM: Circulate letter expressing condolence on the passing of Don Iverson.

3.2 Chief Executive Report

The Board received the information provided.

The Chief Executive noted the District is facing major financial challenges and that it is important that the Hindsight premium adjustment not hide the actual situation, and that the District continues to develop productivity and efficiency plans to meet these challenges. She noted that the District has contacted the Ministry of Health concerning the leap day loss and whether it is unique to the District or experienced across all LHDs.

The Chief Executive noted that the Emergency Treatment Performance has become the Premier's top priority focus, and noted that overall the District has experienced a 21 per cent increase in ambulance presentations, which is impacting the District's performance.

The Chief Executive noted the progress on the Illawarra Health Information Platform (IHIP) that that the first set of data from IHIP has been made available and was circulated to the Board. Ms Eagar spoke to the document, noting that it outlines that:

- Admissions have increased and that admissions per patient have increased over the years
- Some of the 'myths', such as the increasing admissions at Shoalhaven Hospital are not reflected in the data, Shoalhaven Hospitals admissions have been stable for the past six years
- Wollongong Hospital has experienced an increase from 33,000 admission to 50,000 admissions; many services peaked in 2010-11.
- Emergency Department attendances are not increasing per capita against perception that more people are presenting to Emergency Departments.

Ms Eagar noted that further work will be undertaken based on speciality group and co-hort registries. The Board discussed the potential for IHIP to provide data on the social determinants of health should it include education and justice data and that as the analyses matures, it is expected to be able to contribute to policy debate and development of service plans.

The Board congratulated the work of Kathy Eagar in pursing the IHIP project.

The Chief Executive noted that at the recent Rural and Regional Chief Executives Meeting, there was discussion on standardisation of risk management frameworks and that other LHDs have expressed an interest in the framework that ISLHD has in place.

The Chief Executive advised the Board that she received the non-admitted patients review earlier that day and expected it to be reviewed by the Strategic Executive in April, and for it to be submitted to the Board Planning Committee and Board in May.

The Chief Executive thanks Ms Mastroianni for her feedback on the draft Delegations Manual.

The Chief Executive advised the Board that she would look to organising a joint meeting between the Board and the Board of Coordinaire, the Primary Health Network, around July/August.

The Board discussed the impact of Wollongong Private Hospital, noting that advice has been received that 56 per cent of the LHD population has private health insurance, which may include those with extras cover only. The Chief Executive noted that the Ministry of Health has moved from the target set for next year for private health insurance billings. The Board requested information be provided on private health insurance levels in the District and usage levels, focusing on the 'real' rate of usage of private cover in the public system with in the District and why the rate may be so low.

ACTION ITEM: Provide advice on private health insurance levels in the District and usage levels, focusing on the 'real' rate of usage of private cover in the public system with in the District and why the rate may be so low.

The Board noted the proposed invitation for Mr Shane Solomon, Managing Director Telstra Health, and discussed whether it was appropriate that this be discussed at Board-level and whether it would be more suitable that he meet with management. The Board asked that the Chief Executive meet with him in the first instance. The Chief Executive advised that she would invite him to present to the Strategic Executive.

The Board discussed whether there would be any impact on the District through the upcoming local council amalgamations and noted that, other than certain business units, such as the Public Health Unit having regular liaison with council staff, there was little involvement at strategic levels.

The Board noted and acknowledged the achievement of Ms Kerry Watts receiving the Pharmaceutical Society of Australia (PSA) MIMS Intern Pharmacist of the Year for NSW. The Board asked the Chair to write to Ms Watts acknowledging her achievement.

ACTION ITEM: Write to Ms Kerry Watts congratulating her on receipt of the Intern Pharmacist of the Year for NSW Award.

The Chief Executive advised that she has recently commenced Executive Monthly Recognition Luncheons recognising the achievements of staff. Future reports will include details of staff recognised at the luncheons.

ITEM 4: NEW BUSINESS

4.1 Enterprise Risk Profile Update

The Board endorsed the updated Enterprise Risk Profile, noting that timeframes for risk mitigation strategies will be added to the next revision of the document.

RESOLUTION (2016/03): The Board endorsed the updated Enterprise Risk Profile, noting that timeframes for risk mitigation strategies will be added to the next revision of the document.

4.2 National Disability Insurance Scheme

The Board received the information provided.

The Board discussed the report on the National Disability Insurance Scheme (NDIS), noting:

• The National Injury Insurance Scheme implementation is near completion, to be completed 1 July 2016, and has received little public concern

- There are a number of grey areas and potential contradictions over what is included and what is excluded from the NDIS; District needs to develop clear advice for staff making determinations in these areas
- The Commonwealth and state pooled all psychiatrist disability funds; resulting in a significant decline in the number of patients receiving the care they need.

The Chief Executive advised that the Strategic Executive would consider the report and a paper would be put forward on the implementation of the NDIS within the District. The paper would be presented to the Planning Committee, followed by the Board.

The Strategic Exec will consider the report; expected to put a paper forward on the District's plan to address the implementation of the NDIS; will be presented to the Planning Committee followed by the Board. The Chief Executive asked that any Board members with feedback on the report provide to her directly.

4.3 2016/17 Asset Strategic Plan

The Chair of the Board Planning Committee advised the Board that this item has been deferred following discussion at the Planning Committee earlier that day and that it will be returned in May 2016.

ITEM 5: BUSINESS WITHOUT NOTICE

5.1 Inclusion of safety on Board agendas

The Board agreed that the meeting agenda should be reordered such that Safety is the first business item on the agenda .The rationale was that given ISLHD's deteriorating safety performance, and its importance both financially and operationally, that it should receive more emphasis/focus.

The Finance and Performance Committee Chair advised that this was discussed at the last Committee meeting, and that it was a practice that he was used to seeing included in all senior meetings to bring visibility and importance to the issue, with matters to be reported/discussed under the agenda item to include incidents, learnings, and so on.

The Committee chair also suggested that Safety be first priority on all meeting/meeting agenda's throughout the organisation for reasons stated above. The Chief Executive indicated that she would consider the suggestion.

ITEM 6: INFORMATION

6.1 Finance and Performance Committee – Minutes of 29 February 2016

The Board received the minutes.

The Committee Chair advised that at its last meeting, the Committee considered:

- Safety feedback
- Financial position and associated challenges, including risks related to activity levels and funding levels, noting the productivity and efficiency work being undertaken and the need for consistent methodology for continuous improvement
- ICT accountability across the health system.

The Committee Chair advised the Board that the People, Change and Governance Report against business plan deliverables, including as part of the Workforce Report attachment in Agenda Item 3.2 is a good representation of the devolution of managerial accountability that linked back to strategy and the core values of ISLHD. This form of reporting would also give comfort to the Board that initiatives and action plans were being developed and managed and could be cascaded down through the organisation which would then allow the Board to focus on more strategic issues. The Chief Executive considered that this is an appropriate template for Core Executive reporting.

6.2 Health Care Quality Committee – Minutes of 24 February 2016

The Board received the minutes.

The Committee Chair advised the Board that since January 2016, the Board has received monthly presentations from the Clinical Co-Directors on their quality plans, with all the plans received to date being impressive. The Committee Chair noted the Surgery Division's achievements, including completion of the Illawarra Elective Surgical Services Centre, Perioperative Services Certificate, fasting clock initiative, electronic booking of elective surgery trial. Key challenges include sessional contracts, safe working practice models, obesity impact on surgery and investment in surgical services.

The Committee Chair noted that the Committee also received presentations from Aged Care, Rehabilitation and Palliative Care Division, Cancer Care Division, Medicine Division, and has requested to receive a presentation from the Director Aboriginal Health.

The Committee Chair advised that at its last meeting, the Committee considered:

- The quality of risk reporting, particularly to the clinical risks across the District
- Two internal audit reports referred through the Audit and Risk Management Committee on Waiting List Management and Theatre Usage.

6.3 Planning Committee

There were no minutes available.

The Committee Chair advised that at its last meeting, the Committee considered:

- The Shoalhaven Strategy
- Maternity Services
- Restart Illawarra Funded Bulli Aged Care Centre of Excellence, noting the news that Health Infrastructure has advised that they will accept a 10 per cent budget variation to progress the project to the next stage
- Asset Strategic Plan, reviewed priorities to be:
 - Shellharbour Redevelopment Phase 1 and 2
 - o Shoalhaven redevelopment
 - $\circ~$ Integrated Primary Health Care (including Kiama and Port Kembla)
 - o David Berry
- NDIS report.

The Committee Chair advised that the Planning Committee will now meet monthly for the next few months to progress the volume of planning work to be referred to the Board in the coming months.

6.4 Aboriginal Health Committee

There were no minutes available.

6.5 Audit and Risk Management Committee – Minutes of 1 March 2016 The Board received the minutes.

6.6 Media and Community Engagement Activity – 26 February 2016 to 23 March 2016 The Board received the information provided.

ITEM 7: NOTIFICATIONS REGARDING UPCOMING EVENTS

7.1 Board Calendar of Events

The Board received the Calendar of Events.

Board members are referred to the Confidential Minutes for minutes relating to the Confidential Agenda.

MEETING CLOSED AT 6.05PM.

Next meeting: Monday 2 May 2016 3.30pm-6.00pm Conference Rooms, ISLHD Executive Office, Warrawong

CERTIFIED A CORRECT RECORD

Ms Jill Boehm OAM 2 May 2016