
MINUTES

BOARD MEETING

Date: 2.00pm-5.00pm, Monday 3 April 2017

Venue: Conference Rooms, District Executive Office

ITEM 1: IN CAMERA SESSION

The Board held an in camera session.

ITEM 2: PRESENTATIONS

There were no presentations

ITEM 3: WELCOME

Attendance of members

Clinical Professor Denis King OAM (Chair), Ms Jill Boehm OAM, Associate Professor Stephen Andersen OAM, Mr Roger Downs, Professor Kathy Eagar, Mr Paul Knight, Professor Bill Lovegrove AO, Ms Marisa Mastroianni, Mr Geoff O'Donnell; Dr William Pratt, Ms Carrie Schulman, Mr John Stubbs, Professor Gerard Sutton AO.

In Attendance

Ms Margot Mains, Chief Executive; Ms Jasmina Jonceski, Board Secretary.

Apologies

Nil.

ITEM 4: DECLARATION OF PECUNIARY INTEREST, CONFLICT OF INTEREST

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

ITEM 5: BUSINESS FROM THE LAST MEETING

5.1 Confirmation of Minutes of meeting held 6 March 2017

The minutes were accepted as a true and accurate record.

The Board requested that copies of matters arising from Board meetings, such copies of presentations, be included in the future papers under Business arising.

5.2 List of Action Items

The Board noted progress/completion of actions.

In relation to Action Item 51; the Board noted that limited formal advised had been received from the Ministry of Health on the material impact of these changes. The Board agreed that the Chair write to the NSW Health General Counsel requesting that the Ministry of Health clarify the impact for Board as a result of the legislative changes and invited her to attend a future Board meeting to discuss the changes.

ACTION ITEM (15/17): Write to the General Counsel NSW Health inviting her to a future Board meeting to clarify material impact of legislative changes to the Board's functions.

5.3 Register of Board Resolutions

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

ITEM 6: BOARD CHAIR REPORT

The Board Chair advised that he had no significant issues to raise with his key preoccupation over the past month relating to the Shellharbour Hospital Health Partnerships Project.

ITEM 7: BOARD COMMITTEE REPORTS

7.1 Finance and Performance Committee

The Board received the draft minutes from the last Finance and Performance Committee meeting.

The Committee Chair advised that the Minutes from the February meeting were included, and that there was no March meeting due to no quorum.

7.2 Health Care Quality Committee

The Board received the draft minutes from the last Health Care Quality Committee meeting.

The Committee Chair advised that the Board of highlights from the last meeting:

- Presentation on the quality and safety plan from the Public Health Unit, with a focus on smoking compliance
- Presentation from the Maternity and Women’s Health Division Co-Directors concerning the Project 2020 proposal to address significant issues within the service
- Discussion on Emergency Treatment Performance (ETP) and how the District compares with other local health districts, noting that District while not meeting target is in the middle of the pack
- Update on neonates screening at Wollongong Hospital receiving, noting all babies returned negative test results.

7.3 Planning Committee

The Board received the draft minutes from the last Planning Committee meeting.

The Committee Chair advised the Board of the highlights of the meeting earlier in the day:

- Update Shoalhaven Hospital master plan and location of a multi-storey car park; presentation to be received at the next Committee meeting and Board meeting
- An update was provided on Wollongong Hospital car park revenue; steadily rising revenue, which is repaying the car park loan; will be impacted by the District
- Discussion on the Shellharbour Hospital Health Partnerships Project (further discussion under Confidential Agenda Item 20.1).

7.4 Aboriginal Health Committee

There was no report, as there had not been a Committee meeting since the last Board meeting.

7.5 Audit and Risk Management Committee

Ms Mastroianni, a Board representative on the Committee provided an update on the last Audit and Risk Management Committee meeting. She advised:

- Internal audit plan is on track; however, the Committee has noted there are delays in the Committee receiving Internal Audit reports as a result of delays in management responding to audit recommendations
- As an update to the open internal audit findings, management has discussed with the Director Internal Audit and reviewed due dates and responses to action items
- An Internal Audit report of interest to the Board is on the District Network Return, which is submitted concerning costing of patient data; found nil significant concerns with the District’s process and review of the data
- The Committee has reviewed its charter
- The annual financial statements timetable was presented and approved
- There was discussion on the role of the committee concerning the Shellharbour Hospital Health Partnerships Project; this was further discussed at Agenda Item 20.1.

ITEM 8: WORK HEALTH AND SAFETY

8.1 Safety Share

The Board received the information provided.

The Board noted that the District's safety focus for the month was Manual Handling, which is key cause of staff safety incidents and workers compensation claims.

8.2 Work Health and Safety Report

The Board received the information provided.

The Board discussed:

- Future review of Work Health and Safety to include a verbal update from the Chief Executive, particularly on key indicators such as lost time injuries, claims
- The notifiable electric shock incident and reports that there was greater visibility and timeliness on the response to the incident
- Proportionally high number of non-clinical staff incidents and claims, which is being reviewed by the Finance and Performance Committee
- Need for sharper reporting of work health and safety performance to the Board; noting that the report should include further information on high risk incidents and what has been done to provide the Board with an assurance that they are appropriately actioned and closed off.

ITEM 9: QUALITY AND SAFETY

9.1 Patient Safety, Quality and Risk Report

The Board received the information provided.

ITEM 10: STRATEGIC MATTERS

10.1 Board Strategic Directions Paper – Update

The Board received the information provided. The Board noted further work is continuing and that Nous Group's final proposed changes would be presented to the May 2017 meeting.

ITEM 11: MATTERS FOR APPROVAL

There were no matters for approval.

ITEM 12: CHIEF EXECUTIVE REPORT

The Board received the information provided.

In addition to the written report, the Chief Executive advised the Board:

- The Ministry of Health is developing a performance dashboard for health system performance; the Board indicated support for developing an ISLHD-specific dashboard, dependent on the strategic plan priorities and initiatives
- Tabled the Activity Inflows document presented at the last meeting; the Ministry of Health has accepted the additional inflows and impact to the District's budget
- The Ministry of Health is discussing the system-wide impact of private health insurance patients
- The Minister has issued a direction for the Christmas/New Year closedown period that no services to be closed for more than three weeks; the Board noted the need to ensure staff are appropriately informed in advance to plan leave
- Centre Health Research Illawarra Shoalhaven Population (CHRISP) continues met recently to discuss prioritisation and engagement with clinicians; Ms Eagar noted that Australian Health Services Research Institute (AHSRI) employed staff still do not have access to the data; the Chief Executive advised that this would be followed up with the Ministry of Health
- Relationship with NSW Corrections related the South Coast Correctional Centre in the Shoalhaven, particularly need for appropriate Emergency Department facilities, including secure rooms to support inmates requiring treatment; the District is working with the Justice Health and Forensic Mental Health Network to ensure that the Hospital has appropriate facilities, however, noted that there may be implications

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- The Chief Executive has been invited to the NSW Health Clinical Risk Action Group to provide an update on the work undertaken on Shoalhaven Hospital paediatrics.

The Board discussed doctor registration and credentialing noting the recent issue in another local health district and was advised that the Medical and Dental Appointments Advisory Committee has an appropriate system in place to ensure appropriate checks are undertaken.

In response to a question, the Chief Executive advised that there were no significant concerns for the District raised in the Bureau of Health Information *30 Day Mortality* report.

The Chief Executive circulated a copy of the Clinical Excellence Commission's *Summary of Root Causes Analysis Reviews: February 2017* report that was tabled at the Senior Executive Forum in March. The report includes de-identified information on themes arising from Root Cause Analysis reviews and outlines trending quality issues and concerns.

ITEM 13: GENERAL BUSINESS

13.1 Wollongong Hospital Neonates Screening Tests Update

The Board received the information provided.

13.2 Board Meeting Schedule amendments

The Board received the information provided and noted that a number of the scheduled meetings clash with the Council of Board Chairs meetings. The Board approved the amended 2017 Meeting Schedule.

RESOLUTION (2017/08): The Board approved the amended 2017 Meeting Schedule.

13.3 Board Calendar

The Board received the information provided.

ITEM 13: BUSINESS WITHOUT NOTICE

There was no business without notice.

ITEM 14: NEXT MEETING

Details for the next meeting of the Board are:

Monday 1 May 2017

2.00pm-5.00pm

District Executive Office, Warrawong

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

MEETING CLOSED AT 4.38PM.

CERTIFIED A CORRECT RECORD

Clinical Professor Denis King OAM

1 May 2017