

MINUTES

BOARD MEETING

Date: 2.00pm-6.00pm, Monday 3 December 2018

Venue: Conference Rooms, Block C Level 8, Wollongong Hospital



Health
Illawarra Shoalhaven
Local Health District

ITEM 1: WELCOME

1.1 Acknowledgement of country

The Board Chair acknowledged the traditional owners of the land on which the Board met and paid respects to Elders past, present and future.

1.2 Attendance

Attendance of members

Professor Denis King OAM (Chair); Ms Jill Boehm OAM; Dr Stephen Andersen; Mr Roger Downs; Professor Kathy Eagar; Mr Paul Knight; Professor Bill Lovegrove AO; Ms Marisa Mastroianni; Dr Rod McMahon; Dr William Pratt; Ms Carrie Schulman; Professor Gerard Sutton; Mr John Stubbs.

Others in Attendance

Ms Margot Mains, Chief Executive; Dr Maureen Lonergan, Chair Illawarra Medical Staff Council; Ms Jasmina Jonceski, Board Secretary; Ms Angela Tugrul, Assistant Board Secretary.

Mr Gerrard Golding, Executive Director Finance, Workforce, Corporate and Strategic Improvement was present for Agenda Items 1 to 11.

Mr David Basire, Director Business Performance was present for Agenda Items 3.5, 3.6 and 4.2.

1.3 Apologies

Nil.

ITEM 2: DECLARATION OF PECUNIARY INTEREST, CONFLICT OF INTEREST

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

ITEM 3: BUSINESS FROM THE LAST MEETING

3.1 Confirmation of Minutes of meeting held 15 October 2018

The Board approved the draft minutes of the meeting held 15 October 2018.

In response to a question from Ms Schulman on her request on papers following the recent ISLHD/COORDINARE Strategic Alliance meeting, the Chief Executive advised that the Suicide Prevention information would be presented at the February 2019 Board meeting, as would the update on Discharge summaries.

ACTION ITEM (36/18): Provide Suicide Prevention and discharge summary information from Strategic Alliance to February 2019 Board meeting.

3.2 Notes from Informal meeting of 5 November 2018

The Board received the notes from the Informal meeting of 5 November 2018.

The Board noted the presentation from the Integrated Care, Mental Health, Planning, Information and Performance team, and asked that this be included as an annual presentation and discussion for the Board, as most discussion is focused on hospitals, and it was informative to learn more about non-hospital services.

3.3 List of Action Items

The Board noted progress/completion of actions.

3.4 Register of Board Resolutions

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

3.5 Action 19/18: Activity Based Management

The Board received the information provided. The Executive Director Finance, Workforce, Corporate and Strategic Improvement noted that the request for this information arose from previous Board discussion, and has met with Professor Kathy Eagar to better understand the request.

Mr Gerard Sutton arrived at 2.10pm during discussion on this item.

The Board noted positive progress and the need to understand the Activity Based Funding (ABF) model and whether the District is receiving its fair share, which will enable understanding of how much of the current budget position is due to activity and how much is due to other pressures. The Chief Executive advised the District has engaged with the Ministry to try to understand the drivers of activity levels.

Mr Paul Knight arrived at 2.19pm during discussion on this item.

In response to a question on how the Ministry perceives the budget position and forecast, the Chief Executive advised that the District's budget position is not a key issue for the Ministry, with greater focus on Emergency Treatment Performance (ETP) and Transfer of Care (TOC). The Board noted the need to better understand the path to a balanced budget position, with the Executive Director Finance, Workforce, Corporate and Strategic Improvement advising the Ministry is reviewing the District's finances to understand activity impacts.

The Board discussed that overall, the unfavourable budget forecast is not significant percentage wise, however, in terms of funding that the District does not have it is significant, and the need for managers to understand activity on an operational basis, technical efficiency and the linkages to finance. The Board requested that regular updates on progress towards Activity Based reporting be provided, with the next update due in March 2019 following advice from the Ministry of Health on drivers.

ACTION ITEM (37/18): Provide update on outcome of MoH review of activity in March 2019 and with regular updates thereafter.

3.6 Action 21/18: Activity Growth

The Board received the information provided and discussed the principles used to make forecasting, clinician input into the process, the system and the engagement process.

In response to a question on whether forecasting reflects the accuracy of the budgeting process, the Chief Executive noted the District is reviewing its process and that the Ministry includes historic growth and growth bids; for example, in the prior year the District received an increase in growth but not to cover the full projections due to the Ministry's budget. The Executive Director Finance, Workforce, Corporate and Strategic Improvement advised of the planned change to combine bottom-up budgeting with top-down budgeting.

The Board noted that the brief stated that Oral Health activity had decreased, however, this was not consistent with information presented at the November 2018 meeting. The Board sought clarification on Oral Health activity.

ACTION ITEM (38/18): Provide clarification on Oral Health activity.

ITEM 4: STRATEGIC MATTERS**4.1 Strategic Directions - Quarterly Dashboard – Quarter 1, Year 2**

The Board received the information provided, noted the progress to date, and commended the combination of visual and narrative information.

The Board queried the status indicator 'Not applicable' and noted that the measures could be reported as red or amber based on the information provided against the overall Level 1 and Level 2 measures. The Board requested that measures that include the 'Not applicable' status include a more appropriate indicator in the next report.

ACTION ITEM (39/18): Amend status indicators marked as 'Not applicable' to be red or amber to reflect the progress against the individual performance.

In response to a query on how the Emergency Treatment Performance (ETP) measures are set, the Board noted that the measures are set state-wide. The Chief Executive advised of ongoing challenges to meet ETP performance, including that District experienced 80 ambulances at Wollongong Hospital on the Sunday just past and the challenges with emergency department activity and patient flows.

4.2 Quarter One Financial Projections Update

The Board received the information provided and noted the discrepancy in Oral Health data.

The Board queried the cost of corporate staff as an overhead and as a percentage of the District's costs and requested that it be reported and tracked to the Board Finance and Workforce Performance Committee.

ACTION ITEM (40/18): Provide a report on corporate staff overhead costs to the Finance and Workforce Performance Committee.

The Medical Staff Council Chair asked about registrar funding, which the Chief Executive took on notice.

ACTION ITEM (41/18): Provide advice on the funding of registrar positions.

ITEM 5: MATTERS FOR APPROVAL**5.1 Delegations Manual V7.4.1**

The Board received the information provided.

The Executive Director Finance, Workforce, Corporate and Strategic Improvement advised that the proposed Delegations Manual includes updates from executive structure changes. In response to a question seeking clarification on the changes to the Executive Director Finance, Workforce, Corporate and Strategic Improvement role, it was confirmed that Gerrard Golding's role would return to Executive Director Strategic Improvement Programs once the new Executive Director Finance commence.

RESOLUTION (2018/21): The Board approved the Delegations Manual V7.4.1.

5.2 Clinician Engagement Attestation Statement

The Board received the information provided.

Ms Schulman advised that she does not believe that the Board meets engagement requirements in the Model By-Laws and the *Health Services Act 1997*, however, the Board did not support this view and queried what additional activities would give her an assurance that the Board meets the functions.

The Medical Staff Council Chair advised that the role of the Board has been raised at Council meetings, with some staff unclear about the role of the Board. The Chair advised that he has received a number of concerns from clinicians about various matters throughout the year which have been dealt with confidentially.

The Board discussed its role in setting the culture of the organisation and non-involvement in operational matters, and that clarity is needed around which matters are appropriate to refer to the Chair and appropriate escalation channels.

In response to a question on the comments included on the establishment of a Medical Staff Executive Council, the Medical Staff Council Chair, the Chief Executive advised that she wrote to Council Chairs earlier in the year and no response was received, and that the matter had been raised previously with feedback indicating that hospital-based Medical Staff Councils did not support the establishment of a Medical Staff Executive Council.

The Board approved the 2018 Clinician Engagement Attestation Statement against the By-Laws, noting that Ms Schulman dissented to the response to section 28(h-i) on the *Health Services Act 1997* requirements.

RESOLUTION (2018/22): The Board approved the 2018 Clinical Engagement Attestation statement for signature by the Board Chair and Chief Executive.

5.3 Draft By-Laws

The Board received the information provided.

The Medical Staff Council Chair queried the proposed equivalent to the Hospital Clinical Councils, advising of the need to have independent voices on the Councils that are not heads of departments to represent peers. The Chief Executive advised that the current structures were developed through the Leadership and Governance Framework, which included extensive consultation.

The Board sought clarification on clause 17.1 of the By-Laws regarding membership of committees, and requested that the section be amended to provide clarity that membership will only be Board members.

RESOLUTION (2018/23): The Board approved the draft Illawarra Shoalhaven Local Health District By-Laws for consultation, subject to the changes to clause 17.1 as noted in the minutes.

ITEM 6: BOARD CHAIR REPORT

6A ADDENDUM TO BOARD CHAIR REPORT

The Board received the information provided.

The Chair advised that the proposed agenda for Strategic Planning Day would continue to be developed as the date of the event neared. The Board discussed the inclusion of the risk appetite on the draft agenda and whether it needed to be reviewed at the Planning Day as it is being developed for review and approval by the Board in early 2019 prior to the Planning Day.

The Chair advised that the four Board Members seeking reappointment were successful, and that new appointments were proceeding through Cabinet. The Chair acknowledged the contribution of Dr Stephen Andersen and Ms Carrie Schulman to the Board over the past four years.

The Chair noted that paper on the People Matter Employee Survey Results and Actions Plan, tabled as a late paper. The Board noted that the paper would be reviewed out of session and a response sent to the Minister for Health.

ITEM 7: CHIEF EXECUTIVE REPORT

The Board received the information provided.

The Board discussed:

- The District's performance against Nursing Hours per Patient Day (NHPPD)
 - The Chief Executive advised that the District has been improving its performance against the measure and that it is reported to the Health Care Quality and Safety Committee monthly
 - The Nurses and Midwives Association campaign for ratios is continue, and that it was a focus of the Union's 10th anniversary of the Garling review event
- The Healthy Hearts translational research project, noting that the project manager had commenced and that the District, University of Wollongong and local Aboriginal Medical Services are collaborating on projects and attracting grants
 - The Chair noted that the District's progress against Aboriginal Health Strategy was positive and moving forward.

ITEM 8: BOARD COMMITTEE REPORTS**8.1 Finance and Workforce Performance Committee**

The Board noted the report and minutes from the September and October 2018 Finance and Workforce Performance Committee meetings.

The Committee Chair advised on the key points from November 2018:

- Work Health and Safety performance continues to trend favourably
- A lost-time injury occurred with a staff member injured off-site
- The decrease in FTE due to rotations as per prior years did not occur, however FTE is consistent and remains under the budgeted level.

In response to a question on the staff safety observation conducted at Shoalhaven Hospital as noted in the minutes in the meeting papers, the Board discussed the observation of the helicopter arrival where safety concerns were identified. The Board noted that the development of the multistorey car park would not resolve the concerns as the development would not include the helipad, however, that Hospital management would be reviewing the procedures with for helicopter transfers.

8.2 Health Care Quality and Safety Committee

The Board noted the report and minutes from the October 2018 Health Care Quality and Safety Committee meeting. The Committee Chair advised that the November 2018 meeting was postponed due to the poor weather on 28 November to coincide with the first joint meeting with the Clinical Governance Council.

The Board noted that the Committee's minutes of October 2018 and discussed complaints management and lagging complaint responsiveness and noted that customers are often dissatisfied from lack of or delays in response than the incident itself and that this has a reputational impact for the organisation. The Committee Chair noted that reporting against complaints management timeliness and themes are reviewed regularly by the committee, and that the Committee noted that the Australian Health Practitioner Regulation Agency (AHPRA) undertook a review of complaints management and recommended that complainants should receive an update on their complaint every 10 working days and that the Committee queried whether this occurs within the District.

8.3 Board Planning and Innovation Committee

The Board received and noted the minutes from the November 2018 Board Planning and Innovation Committee meeting.

The Committee Chair thanked the Board Secretariat for the 2017-18 annual report to the Board and Ms Carrie Schulman for her contribution on the Committee.

8.4 Aboriginal Health Committee

The Board received and noted the report and minutes from the November 2018 Aboriginal Health Committee meeting.

The Chair advised that the Committee discussed concerns that had been raised during the First Step Bus Tour undertaken in October 2018 about treatment of hepatitis C, and noted that these had been resolved, with clarification that the Aboriginal Medical Services offering services as required within their accreditation capacity.

The Chair noted that he had asked for the First Step Bus Tour to be offered to local Members of Parliament and that the tour should become part of the Board's onboarding process.

The Chair advised that the Committee also discussed:

- Strategies to improve employment rate of Aboriginal people
- The achievements of the Aboriginal Health Strategy team are encouraging.

ACTION ITEM (42/18): Run a First Step bus tour in 2019 for new and existing board members and consider inviting local MPs on the tour.

ITEM 9: FOR INFORMATION

9.1 Board Calendar

The Board received the information provided.

ITEM 10: BUSINESS WITHOUT NOTICE

10.1 Christmas acknowledgements

The Board Chair recognised efforts of the Chief Executive, the Board Secretariat, the Core Executive, and the team that developed the Strategic Directions measures, during an especially tough year.

10.2 Palliative Care Conference

The Board noted that the District was the host for NSW State Palliative Care Conference in Kiama in November 2018; this is a large conference and the Board acknowledged the work of the palliative care team for organising the event.

ACTION ITEM (43/18): Prepare letters of acknowledgement from the Board for the organisation of the Palliative Care Conference to the palliative care team Dr Greg Barclay and Ms Kay Cope.

The Board acknowledged the work of Dr Greg Barclay to the District and that he would be retiring from his role as Palliative Care Head of Service.

ACTION ITEM (44/18): Prepare a letter of thanks from the Board to Greg Barclay for his service and commitment to the District.

ITEM 11: MEETING FINALISATION

Details for the next meeting of the Board are:

Board Meeting

Monday 4 February 2019

2.00pm-6.00pm

District Executive Office, Warrawong

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

MEETING CLOSED AT 5:50PM

CERTIFIED A CORRECT RECORD

Professor Denis King OAM



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Signature

4.2.19

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Date