

Minutes for ISLHD Board Meeting

02/11/2020 | 02:30 PM - 06:00 PM - AEST
Auditorium, Level 8, Wollongong Hospital

Attendees:

Denis King; Jill Boehm; Roger Downs; Kathy Eagar; Alan Hudson; William Lovegrove; Rod McMahon; William Pratt; John Stubbs; Gerard Sutton; Marisa Mastroianni; Paul Knight

In Attendance:

Ms Margot Mains, Chief Executive
Dr Joshua Rijdsdijk, Co-Chair Medical Staff Council
Ms Angela Twist, A/Board Secretary and Executive Officer
Ms Angela Butler, A/Assistant Board Secretary

Apologies:

Ms Eve Bosak, Board Member

In attendance for Item 2.1 - Southern Illawarra Hospital Group Showcase:

Ms Chris Lowry, General Manager Southern Illawarra Hospital Group
Dr Jacqui Irvine, Director Medical Services Southern Illawarra Hospital Group
Ms Kerry Sutherland, Director of Nursing Southern Illawarra Hospital Group
Ms Justine Dwyer, Deputy Director of Nursing and Operations Manager
Ms Amanda Paloff, Operations manager Shellharbour Hospital
Ms Ngarla Tetley, Workforce Manager Southern Illawarra Hospital Group
Mr Peter Orr, Associate Director Allied Health Southern Illawarra Hospital Group

In attendance for Item 2.2 - Integrated Care, Mental Health, Planning, Information and Performance Showcase:

Ms Caroline Langston, Executive Director Integrated Care, Mental Health, Planning, Information and Performance
Ms Sue Fitzpatrick, Executive Director Allied Health Service

Ms Amy Hains – Director Planning, Information and Performance

Mr Adam Bryant, Operations Manager Mental Health Services

Dr Mark O'Connor, Director Oral Health Service

Mr Curtis Gregory, Director Public Health Service

Mr David Reid, Director Drug and Alcohol Service

Dr Paul van den Dolder, Director Ambulatory and Primary Health Care

Ms Faoziyah Lawal, Finance Business Manager

Ms Kirsty Temple, Workforce Support Manager

Agenda

The meeting commenced at 2.04pm.

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

ITEM 1 - Annual Public Meeting

The Board received information provided at the Annual Public Meeting.

ITEM 2 - Presentation

2.1 - Southern Illawarra Hospital Group Showcase

The Board received the presentation provided by the Southern Illawarra Hospital Group (SIHG) Executive, discussing:

- The model aimed at reducing security related overtime costs associated with the Community Palliative Care Service.
- Culture change related to managing resources and the new understanding by Managers to provide more efficient services.
- Patient watching and needs assessments and the Behaviour and Assessment Tool which requires a multidisciplinary approach from a quality and safety perspective.
- The 20 per cent improvement in triage times, ensuring patients receive the right level of treatment at the right time.
- The review of services to create more efficient service models in the new Shellharbour Hospital.

The Board thanked the SIHG Executive Team for the presentation and congratulated the team on the promising progress.

2.2 - Integrated Care, Mental Health, Planning, Information and Performance Showcase

The Board received the presentation by the Integrated Care, Mental Health, Planning and Performance Directorate, discussing:

- The quality assurance program in place for testing Private Water Suppliers.
- The Public Health Unit's pandemic management response and results, including the 880 community members in isolation at home (at one time) and 10 per cent of the population have been tested.
- The District's surge plans and surge services as well as the need to continue to maintain flexibility.
- Oral Health Clinical Pathways, including the new "Mum and Booris" program.
- The Drug and Alcohol Service Award from the NSW Health Awards for the 'Finding help for Multicultural Alcohol and Drug Use' project.
- Local Drug and Alcohol treatment and services that are available in both the public and private health services.
- The Drug and Alcohol Service initiative to work with pregnant woman to reduce their use of drugs and alcohol in their pregnancies.
- The Mental Health Service presentations in Emergency Departments and their causes.
- The Workforce program providing case conferencing for injured workers to improve return to work rates.
- The promotion of psychological wellness support during the pandemic.
- The focus on managing workplace issues, including the promotion of the "Speak Up" and "Manager Assist" programs.
- The aim to improve data literacy throughout the District.
- The Aboriginal Health Strategy and booklet launch during NAIDOC week aimed at improving Aboriginal patient's journey through the Hospital and Community Health Services.
- The targeted \$2.4 million in efficiency savings, including; the reduction of premium medical labour costs, pool car rationalisation, health care interpreter service efficiencies, FTE management.

The Board congratulated the team on the presentation and their management and leadership during the pandemic.

ITEM 3 - Strategic Matters for Approval

3.1 - ISLHD Delegations Manual - Part 1

The Board did not approve the updates to part one of the new Delegations Manual and the ISLHD CORP DOC 11 – ISLHD Delegations Policy after a discussion about deleted delegations from the previous manual.

The Board were pleased with the updated format of the Manual however requested the deleted delegations be re-added advising that delegations should not be removed on the basis that there is a related policy in place.

The Board agreed the revised manual would be reviewed out of session.

ACTION 153/20 - The Chief Executive to provide the Delegations Manual for approval (out of session) with the agreed amendments made. (Assignee(s): CE; Due Date: 07/12/2020)

ITEM 4 - Strategic Matters for Noting

4.1 - Audited Financial Statements

The Board received the report on the Audited Financial Statements and requested the financial reports be circulated to the Board Members.

ACTION 154/20 – The Board Secretariat to forward the Audited Financial Reports to the Board Members for information. (Assignee(s): Board Secretariat; Due Date: 07/12/2020)

ITEM 5 - Board Chair Report

There was no Board Chair Report at this meeting.

ITEM 6 - Chief Executive Report - verbal by exception

The Board received a verbal update by the Chief Executive discussing the need for the Community to remain COVID vigilant during the holiday period with the influx of visitors to the region.

6.1 - Risk Assessment Review and Outcomes

The Board received the report on the Risk Assessment Review and Outcomes, discussing:

- The process undertaken through the Strategic Executive to review 24 risk assessments with 7 being deemed an unacceptable risk.
- The importance to continue to focus on clinical safety and quality, even during financial difficulty.
- The benchmarking against other LHDs regarding senior medical officer staffing which shows ISLHD are below the benchmark.
- The need to use existing funds before it is retracted.
- The recommendations also were reported through the Districts Risk Profile.
- The consequences of increasing FTEs as requested in the reviews versus the financial implications to the District.
- The District's current review of all existing FTEs.
- The options available to the District for funding the required staff, including approaching the Ministry of Health, use of contracts, voluntary redundancies of non-essential staff or re-training and/or upskilling existing staff.
- Aboriginal employment options and if this should be included as an essential requirement in the current pandemic environment.

The Board supported the Chief Executives decision to move forward with the recommendations.

The meeting closed at 5.45pm