

SUMMARY OF MINUTES 21 February 2012

Meeting of the Board of the Western Sydney Local Health District No. 2012/12

Date: Tuesday 21 February 2012

Time: 5.00 p.m. to 7.30pm

Venue: *Conference Room, Level 1, Mt Druitt Hospital*

Minutes

Present

Stephen Leeder (Chair), Peter Zelas (Deputy Chair) Rose Garzaniti (Secretariat),

Members

Kathleen Baker, Abby Bloom, Jeremy Chapman (via phone), Paul Gibson, Hadia Haikal-Mukhtar, Diana O'Halloran, Andrew Pesce, Jane Spring

Ex officio

Kim Hill, Peter Klineberg, Danny O'Connor, Sue-Anne Redmond

The meeting opened at 5.00pm.

Item 1 Welcome and apologies

Rose Garzaniti was welcomed as the new Board secretariat taking over the role from Michelle Wensley.

Apologies: Nil.

Item 2 Declarations of Changes in Material Circumstances

There were no Declarations of Changes in Material Circumstances.

Item 3 Correspondence

Correspondence was tabled and noted under 3.1.1.

A Bloom advised that the Chief Executive Communique, *New Management Arrangements, General Manager Blacktown Mt Druitt* – dated 27.01.2012 was not accessible on the WSLHD Governing Board Webpage.

RESOLVED: a copy of the correspondence to be emailed to A Bloom and reattached to the webpage.

S Leeder advised that the Expressions of Interest for the Board vacancy to replace Michelle Cutmore closed on 16.02.2012. Two nominations received, however one withdrew. Ms Dea Thiele has expressed her interest in the role.

RESOLVED: Convene a panel to interview D Thiele prior to making a recommendation to the Minister.

Item 4 Minutes of previous meeting

Item 4.1 Acceptance of Minutes

Item 4.1.1 Minutes of Meeting

RESOLVED: that the minutes from the previous Board Meeting held on 14 December 2011 are accepted as a true record of the meeting.

4.2 Matters Arising from the Minutes

Item 4.2.1 Action Log

4.2.1 WSLHD Community Engagement and Consultation Plan

Held over to the 13 March 2012 Board Meeting.

Item 4.2.1.1 WSLHD ABF Preparedness Paper

Acronyms were clarified: "ABF" acronym stands for "Activity Based Funding" - a Model Pricing Comparison "SNAP" stands for "Sub-acute Non-acute Patients."

D O'Connor provided a brief overview on the plan which outlines the WSLHD preparedness for the implementation of ABF. Key points:

- WSLHD has been preparing for this change in funding model under a number of different strategies.
- Management and senior clinician workshops are currently in progress to support preparations for the introduction of ABF in 2012/13.
- An implementation management plan is being updated following discussions in a number of forums regarding actions required to assist WSLHD readiness.
- The current contract with the MoH is being reviewed in response to further information received about changes to the efficient prices to be applied next year.
- The ABF implementation management plan will be further updated by the outcomes of the state-wide and local KPMG ABF consultancy.

4.2.1.2 WSLHD High Level Risks

D O'Connor advised:

- The extreme risks are reported to the MoH on a quarterly basis to comply with the Enterprise Risk Management Strategy and Policy Directive.
- The District continues to review the former SWAHS register to ensure that the risks previously identified are subject to action by the risk owner.

A Bloom commented risks are also addressed by the Audit and Risk Management Committee (ARMC) and requested clarification on the mechanisms of risk reporting in WSLHD. D O'Connor advised that ARMC monitors enterprise risk for the organisation. The information reported to the Board is a summary of the extreme and high level risks identified within the District at present. Members discussed this information and supported early escalation of matters to the Ministry where required.

4.2.1.3 WSLHD Management actions in response to BMDH Emergency Services Review Report

S Leeder asked members if the level of detail provided in the report was required for Board meetings. Members agreed that reports to the Director-General should also be submitted to the Board

RESOLVED: Status Reports provided to the Director-General to be provided to the Board.

4.2.1.4 WSLHD Financial turnaround strategy (Efficiency Improvement Plan)

The meeting noted the Efficiency, Revenue and Turnaround Strategies. Members discussed the potential for FTE reductions impacting on patient care and the provision of orthopaedics services across the district.

Item 5 Standing Agenda Items - Reports

Item 5.1 Chair Report

The Chair's Report was noted.

RESOLVED to accept the Chair's Report as tabled.

Item 5.2 Chief Executive Report

The Report from D O'Connor, Chief Executive was noted.

D O'Connor provided a brief overview advising this financial year will be difficult in terms of management.

Key focus areas are:

- Improving performance
- Completing and confirming governance structures and functions
- Completing key appointments
- Educating staff about Activity Based Funding Model

S Leeder referred to the Independent Hospital Pricing and Authority Report.

P Klineberg sought advice about the progress of the Westmead Clinical Services Plan D O'Connor advised the Plan is back on track.

RESOLVE: Pricing and Authority Report to be discussed further at the next meeting

RESOLVE: to accept the Chief Executive's Report as tabled.

Item 5.3 Board Sub-Committee - Health Care Quality Committee (HCQC) Report

The Report from S A Redmond, Executive Director of Clinical Governance was noted. Key Focus areas:

- Between the Flags Program (Management of the Deteriorating Patient)
- Program for Prevention of Healthcare Associated Infections with a focus on better documentation, change in the culture and the need for a plan to be implemented at every level of the organisation.
- Mental Health performance

P Klineberg proposed a group such as a District Clinical Council Group could be established to review patient safety and clinical quality matters.

P Zelas requested to be included in the membership of the Health Care Quality Committee.

The draft minutes of the HCQC Meeting held on 14 December 2011 were noted.

RESOLVED K Baker welcomed P Zelas's proposal to be a member of the HCQC.

RESOLVED to accept the Report as tabled.

Item 5.4 Board Sub-Committee - Financial and Performance Committee Report

The Report from B Morfis, Executive Director of Finance was noted.

A Bloom noted the requirement for Board Members to Chair sub-Committees of the Board.

D O'Connor thanked Abby Bloom and Jeremy Chapman and for their significant input into refining the Finance & Performance Committee.

D O'Connor provided a brief overview of the current financial situation. In addition provided an overview of the two key issues within ABF:

- 1) Planned surgery and the December 2011 and January 2012 closures.
- 2) Emergency Department

A Bloom provided an overview of the Committees obligation on the financial network, in particular capital infrastructure.

RESOLVED to accept the Report as tabled.

Item 5.5 Board Sub-Committee - Medical and Dental appointments Advisory Committee (MDAAC)

Jane Spring advised that Sub-Committee is functioning well to ensure the right candidates selected.

The MDAAC Report and draft minutes of the MDAAC meeting held 14 December 2011 were noted.

RESOLVED to accept the Report as tabled.

Item 5.6 Board Sub-Committee - Research and Education Committee

S Leeder advised members a website was being developed and the Research Hub will bring together the Millennium Institute Blacktown/Auburn.

RESOLVED to accept the Report as tabled.

Item 5.7 Board Sub-Committee - Audit and Risk Management Committee (ARMC)

D O'Connor noted that the Audit Program is fully resourced and implemented.

The Draft Minutes from the ARMC Meeting held on 13 December 2011 were noted.

RESOLVED to accept the Report as tabled.

Item 6 New Business

Item 6.1 Matters raised by Board Members

Item6.1.1 New By-Laws

Held over.

Item6.1.2 Medicare Local Joint Workplan

D O'Halloran provided a brief overview of the Workplan noting the workplan had been endorsed by the WentWest Board. Danny O'Connor was thanked for his continuing support and involvement with progressing the key priorities under the Workplan.

RESOLVED To endorse the Medicare Local Joint Workplan

Item 6.1.3 Clinical Lead Groups

Held over.

Item 7 Other Business

Item 7.1 Public Release of Board Minutes

Members discussed how Board minutes would be produced for future meetings, and provided for public information where discussion points were confidential or contentious and acknowledged public release of board minutes is desirable.

Members agreed to publically release a public extract of the minutes and approve the extract for public release at the same time as approving the formal minutes.

RESOLVED to publically release a public extract of the minutes and approve the extract for public release at the same time as approving the formal minutes.

Item 7.2 Volume of Papers for Discussion at Meeting

S Leeder noted the need to reduce the volume of papers circulated with the agenda for discussion, proposing that the Sub-committee minutes circulated with the standing item reports be eliminated. Members noted that they find such minutes useful.

RESOLVED Board subcommittee minutes to be circulated out of session.

Item 7.3 Patient Case Mix Studies

P Gibson requested some examples of patient experience of failure to escalate care.

RESOLVED Examples to be provided to the next meeting.

The next meeting of the Board is scheduled for **Tuesday, 13 March 2012**, 5-7pm in the Conference Room Level 3 Administration and Education Building, Blacktown Hospital

Item 8 Close

There being no further business, the meeting closed at 7.40pm



Signed: _____ (Stephen Leeder, Chair)