

Meeting of the Board of the Western Sydney Local Health District
No. 2019/94
Date: Tuesday, 10 September 2019
Venue: Westmead Hospital, Westmead Education and Conference
Centre – Lecture Theatre 4

Minutes

Present: Richard Alcock (Chair)
Jeremy Chapman (Deputy Chair)
Narelle Bell
Don Nutbeam
Andrew Bernard
Kathy Baker
Michael Edye
Mick Reid
Keith Hartman

Medical Staff Council: Chris Liddle (Medical Staff Council Chair, Westmead)
Mark McLean (Chair, Blacktown and Mount Druitt)

Chief Executive: Graeme Loy

Ex Officio Invitees: Emma McCahon, Executive Director Medical Services WSLHD

Invited Guests: Allan Cook, Chair Audit and Risk Committee WSLHD
Heather Doolan, Acting Director Clinical Governance WSLHD
Brett Thompson, Acting Executive Director Operations WSLHD
Elizabeth Andersen, Acting Executive Director Finance WSLHD
Chris Reece, ACHSM Intern

Apologies: Elizabeth Crouch
Diana O'Halloran
Adam Stuart
Andrew Pesce
Robynne Cooke, Executive Director Operations WSLHD
Barry Mitrevski, Director of Finance WSLHD

Secretariat: Julia Millen

Meeting commenced: 3:00pm

Quorum: A quorum was met

Item 1.1 Welcome

The Chair welcomed members, attendees and invited guests to the meeting of Tuesday, 10 September 2019.

Item 1.2 Acknowledgement of Country

The Acknowledgement of Country was delivered.

Item 1.3 Declarations of Changes in Material Circumstances

Members were asked to declare:

- i. Conflicts of interest in relation to the agenda and
- ii. Changes in material circumstance.

Action and decision: No declarations of conflict of interest or changes in material circumstances were advised by members at the WSLHD Board meeting held on 10 September 2019.

Item 1.4 Patient Story

The acting Director Clinical Governance read the patient story. The Chief Executive (CE) commented on the story themes and noted the root cause analysis process can add strong value for consumers.

Action and decision: The patient story was noted by members.

Item 1.5 Minutes from meeting 13 August 2019

The Chair asked members for comments on the 13 August 2019 board meeting minutes. The Chair asked members to endorse the minutes.

Action and decision: The minutes were endorsed as a true record of the 13 August 2019 board meeting.

Item 2 Strategy

Item 2.1 Westmead Central Acute Services Building configuration

The Acting Executive Director Operations (a/EDO) presented to the board on the Central Acute Services Building (CASB) stacking configuration, providing an overview of the fourteen levels of the CASB and the services that will occupy each level.

Members commented on the importance of signage and wayfinding throughout Westmead Hospital, and the a/EDO advised the executive is engaging with stakeholders including consumers to focus on improving hospital accessibility.

The executive will also produce a document that illustrates the master plan for the Westmead Precinct. The CE commented on the communication plans for WSLHD staff and consumers for the CASB opening and precinct planning.

The Chair noted his recent visit to London for the Western Sydney Leadership Dialogue Western Sydney meets East London study tour, which illustrated the Westmead Precinct project requires an executive group to oversee high level issues and this will evolve through coordination by the CE.

Action and decision: Members thanked the a/EDO for the presentation and commended the engagement with the Westmead Medical Staff Council in progressing the CASB configuration.

Action: The Chair asked the a/EDO to provide a future update on the proposed Westmead CASB ED experience including information on initiatives to enhance customer experience.

Item 2.2 2019/20 Safety and Quality Account WSLHD

The Acting Director Clinical Governance (a/DCG) provided an overview of the 2019/20 Safety and Quality Account WSLHD reporting progress on a number of mandatory key performance indicators, as well as a broader picture of safety and quality. The Account incorporates the variety of initiatives undertaken to improve the care and services we give to our patients and community and aligns with the Safety and Quality Framework. The a/DCG noted the extensive consultation workshops that were facilitated by the Clinical Governance Unit and the involvement of many WSLHD services to prepare the Account.

The CE provided an overview of initiatives in the Account that focus on the priority area of addressing the specific health needs of Aboriginal and Torres Strait Islander people. The Account outlines initiatives such as the Aboriginal Patient Journey, understanding Infant, Child and Family Mental Health Service needs of the Aboriginal population, the Aboriginal Professional Development Program, developing Aboriginal and Torres Strait Islander meetings places, like the Mt Druitt Hospital Healing Garden, at the Western Sydney LHD facilities and building key events like NAIDOC week, the Aboriginal Elders Olympics, and Closing the Gap activities into the district's calendar of activities. Members asked to receive updates on these initiatives as they progress during the next 12 months.

Action: An executive summary will be prepared and published on the WSLHD performance webpage.

Action and decision: The Board commended the Account recognising the efforts of the WSLHD services in preparing the Account.

Action and decision: The Board endorsed the Western Sydney Local Health District (WSLHD) Safety and Quality Account 2019/20 and recommended the Board Chair and Chief Executive sign the WSLHD Safety and Quality Account 2019/20 Board Attestation Statement.

Action: The Board Chair and Chief Executive signed the 2019/20 Safety and Quality Account for Western Sydney Local Health District.

Item 3 Standing Items

Item 3.1 Chief Executive's Report

The CE referred to his written report provided at item 3.1 noting the Director, Office of the Chief Executive has done excellent work in re-working the report and providing the supporting documentation as referenced.

The Chief Executive discussed two current issues for the information of board members – Cumberland Hospital with the Parramatta Light Rail (PLR) works, and Westmead Emergency Department access and flow.

The CE advised the NSW Nurses and Midwives Association (NSWNMA) has become active in the progression of the PLR through the Cumberland Campus. The District has met with eh NSWNMA and conducted a joint risk assessment on 12 September 2019 where no significant risks were identified. The CE advised WSLHD’s strategy moving forward is to undertake risk assessments per PLR investigation work request and manage each construction activity as individual projects. This will enable a consultation process with all parties and enact structure and governance on the PLR project through Cumberland hospital.

The CE also discussed the recruitment activity for the Mental Health Services Director of Nursing role noting the NSWNMA has been advised recruitment is progressing.

The Chief Executive referred to the information on access and flow management at Westmead and provided an overview of the issues around the Westmead ED.

Action: Members noted an error in the WSLHD Action Plan relating to the Anderson Interim Report on Improvement to Security in Hospitals at Recommendation 30, security staff should not be referred to as “guards”. The recommendation document will be updated and typographical errors corrected.

Action and Decision: Members noted the updates provided by the CE. The Chair advised the CE will provide updates in future board reports.

Item 3.2 Finance Report

The Acting Director of Finance provided commentary on the financial results for July and August 2019.

Members discussed the private patient mix, noting two health funds have now cut payments on private hospital rooms. The a/DOF noted at a local level there is no change in our message to consumers / patients on coverage of gap payments for inpatients choosing to use their private health insurance cover.

Action and decision: Members NOTED the report provided.

Item 3.3 Safety & Quality Report

The Chair referred members to the report provided at item 3.3.

Members requested information on the outcome of accreditation remediation reviews for Auburn, Mental Health Services and Drug Health Services. The CE noted the outcomes have been positive and all facilities have received accreditation. The next Safety and Quality Report will provide further information on accreditation outcomes.

Action and decision: Members noted the report provided.

Item 3.4 Operations Report

The Chair referred members to the report provided at item 3.4.

Action and decision: Members noted the report provided.

Item 3.5 Mental Health Service Report

The Chair referred members to the report provided at item 3.5.

Action and decision: Members noted the report provided.

Item 4 Business Arising

Item 4.1 Actions from previous meetings

Members were referred to the Register of Actions to note updates in relation to the actions identified from previous WSLHD Board meetings.

Action and decision: Members noted the register of actions.

Item 5 Board Sub-Committee Reports

Item 5.1 Committee Updates

Committee reports were provided:

- Finance Performance and Assets (FP&A) Committee
- Audit and Risk Committee (ARC)
- Health Care Quality Committee (HCQC)
- Nominations Committee.

Action and decision: Members noted the reports provided.

Item 6 Items for Noting

The Chair referred to the items for noting and asked for members to provide comments. Members commented on item 6.5, the summary of Improvement Notices issued by SafeWork NSW and the CE advised he is meeting with the district's leadership team to discuss.

Action and decision: Members noted the items provided.

Item 7 New Business

The Chair referred to item 7.1 WSLHD Annual Financial Statements noting the report confirms the ARC reviewed the statements at their meeting held on 3 September 2019, and endorsed the documents for signature by the Chief Executive and Director of Finance. Under the Public Finance & Audit Act 1983, a written representation letter is required from 'Those Charged with Governance'. The Chair asked members to endorse the Representation Letter by Those Charged with Governance document for his signature.

Action and decision: Members endorsed the Representation Letter by Those Charged with Governance for signature by the WSLHD Board Chair.

Action: The Chair signed the Representation Letter by Those Charged with Governance.

The Chair referred to item 7.2 the appointment of the Medical and Dental Appointments Advisory Committee Chair and asked the EDMS to discuss the report provided. The EDMS advised the current MDAAC Chair is stepping down, and under the Model Bylaws, section 50 Composition of Medical and Dental Appointments Advisory Committee, the board is required to appoint two members, one of whom shall be nominated as the chairperson of the Committee. Accordingly, the report recommends the appointment of Professor Michael Edye as the incoming Chair of MDAAC.

The Board Chair acknowledged the efforts of Mr Bernard in his role of Chair MDAAC, including the extraordinary quinquennium process and hours worked on that project.

The Board Chair recommended the appointment of Prof Michael Edye as Chair MDAAC and the board endorsed this recommendation.

Action and decision: Members recognised and thanked Mr Bernard for his stewardship of the MDAAC.

Action and decision: Members endorsed the appointment of Professor Michael Edye to the role of Chair Medical and Dental Appointments Advisory Committee.

Item 8 In Camera Session

The Chair introduced the in camera session for members and the CE to attend. Board ex-officio invitees were excused from the meeting.

Next meeting

The next meeting is scheduled on 8 October 2019 at Blacktown Hospital.

Close

Meeting closed at 7:00pm



Signed: _____
(Mr Richard Alcock AO, Board Chair)