

MINUTES SOUTH EASTERN SYDNEY LOCAL HEALTH DISTRICT BOARD MEETING 6 FEBRUARY 2013

16:00 - 18:00

DIRECTOR UNIT, LEVEL 3 PRINE OF WALES HOSPITAL

PRINE OF WALES HOSPITAL			
PART A.	MEETING OPENING		
	Item 1	WELCOME	
	1.1	Apologies • Nil	
	1.2	Members: The Hon. Morris lemma (Chair) A/Prof Peter Gonski (Deputy Chair) Ms Patricia Azarias Dr Ingrid van Beek Mr Robert Boyd-Boland Ms Deborah Cansdell A/Prof Robert Farnsworth Dr Harry Harinath Mrs Janet McDonald Ms Kate Munnings A/Prof Peter Smerdely Ms Kristin Stubbins Prof Jeanette Ward	
		 In Attendance: Mr Terry Clout – Chief Executive Mr Peter Hudnall – Chief Financial Officer (present for items 1-8) Ms Karen Foldi – Director of Finance (present for items 1-8) Dr Michael McGlynn – Executive Medical Director (present for items 1-8) Ms Kim Olesen – Director Nursing & Midwifery Services (present for items 1-8) Prof James Colebatch – Chair Medical Staff Executive Council (present for items 1-8) Secretariat: Ms Emily Janov – Board Secretary 	
	Item 2	DECLARATION OF PECUNIARY INTEREST, CONFLICT OF INTEREST AND DIRECTOR RELATED TRANSACTIONS There were no potential conflicts of interests declared at the meeting on 6 February 2013.	



Minutes Meeting held Wednesday 6 February 2013

	Item 3	CONFIRMATION OF MINUTES
	3.1	Minutes of the SESLHD Board meeting held 5 December 2012 The Board endorsed the minutes (excluding items 9-12) of the SESLHD Board meeting held 5 December 2012 as an accurate record of proceedings.
		Resolution 192 "That the Board approve the minutes (excluding items 9-12) of the SESLHD Board meeting held on 5 December as an accurate record of proceedings."
		Moved: J Ward Seconded: R Farnsworth Carried
	3.2	Minutes of the joint Mental Health Clinical Council and SESLHD Board meeting held 5 December 2012 The Board noted the minutes of the joint Mental Health Clinical Council and SESLHD Board meeting held 5 December 2012 as an accurate record of proceedings, subject to the amendment of Jeanette Ward being an apology to the meeting.
		Resolution 193 "That the Board approve the minutes of the joint Mental Health and Clinical Council meeting on 5 December 2012 as an accurate record of proceedings, subject to the amendment of Jeanette Ward being an apology to the meeting."
		Moved: J McDonald Seconded: P Smerdely Carried
	Item 4	ACTIONS ARISING
	4.1	Action Log The Board noted the action log (excluding items relating to 9-11), for information.
	Item 5	PRESENTATION There were no presentations provided to the Board at the meeting.
Part B	CHAIR &	CHIEF'S EXECUTIVE REPORTS
	Item 6	CHAIR'S REPORT
	6.1	2013 Board Membership The Chair welcomed the returning Board members: Ms Deborah Cansdell; A/Prof Robert Farnsworth; Dr Harry Harinath; A/Prof Peter Smerdely; and Prof Jeanette Ward.
		The Chair also welcomed the two new Board members: Ms Kate Munnings; and

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Ms Kristin Stubbins.

It was noted that Ms Kristin Stubbins was awaiting sign-off by the Board of Pricewaterhouse Coopers prior to formally accepting the position of Board member at SESLHD.

6.2 Council of the Chairs – SESLHD COAG Presentation

It was noted that the Minister for Health and Director-General of NSW Ministry of Health co-host quarterly meetings for LHD Board Chairs and Deputy-Director Generals. In the SESLHD Board Chair's absence, the Deputy Chair attends.

The Chief Executive was requested by the Director-General to present to this forum on Friday 8 March 2013 regarding the SESLHD subacute models of care initiative which was funded at SESLHD with COAG funding. The programs implemented at SESLHD were analysed for efficiency and effectiveness. The draft presentation was included for information.

Item 7 CE's REPORT

7.1 Organisational KPI Report – December 2012

The December 2012 Organisational KPI Report was noted for information.

The Chief Executive noted that the report had been aligned to the KPIs listed in the SESLHD Service Agreement with the Ministry of Health and that there was a covering page which summarised the District's performance against the KPIs. The summary page also included commentary from the Chief Executive on KPIs which were not being met.

The following KPIs with a risk rating of 'at risk' were discussed:

- KPI 14 Mental Health presentations staying in Emergency Department for greater than 24 hours;
- Service Measure 1 Emergency Access Performance;
- Service Measure 4 Large Claims Performance;
- KPI 23&25 Expenditure & revenue matched to budget year to date:
- KPI 24&26 Expenditure & revenue matched to budget June projection; and
- Service Measure 5 Cost of activity based funded activity.

The Board discussed Mental Health readmission rates and their likely correlation to the lack of community housing. The Board sought the Chief Executive to report on the number of Mental Health rehabilitation patients (in acute and subacute services), and the number of beds (in facilities and in the community) supported by SESLHD.

<u>Action:</u> Chief Executive to report back to the March Board meeting with the mental health patient and bed figures.

7.1.1 Northern Sector Clinical Council Service Level Agreement

This item has been marked as confidential

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	This item has been marked as confidential
7.1.2	Northern Sector Savings and Efficiencies Progress Report
	This item has been marked as confidential
7.2	Asset Strategic Plan The SESLHD Asset Strategic Plan 2012-2017 was noted. The Chief Executive explained that the Asset Strategic Plan was a plan which indicated the District's priorities to the Minister. Not all initiatives would necessarily receive funding for work during the plan's term.
	The Board requested that the St George Clinical Council present their redevelopment plans in the March joint meeting of the Council and the Board.

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<u>Action:</u> St George Clinical Council to provide Board with an update on the St George Hospital redevelopment plans at the March joint meeting of the Council and the Board.

The Chief Executive was sought investigation whether it was feasible to split the St George Hospital redevelopment proposals into stages.

<u>Action:</u> Chief Executive to report back to Board regarding the feasibility of splitting the St George Hospital redevelopment proposal into stages.

The Board discussed the cost of maintaining heritage listed sites, such as Sydney Hospital and the Edmund Blackett Building on the Prince of Wales campus. It was noted that the heritage fund had ceased over eight years ago and that maintenance of heritage listed facilities was required to be met from within the current LHD budget.

Resolution 196

"That the SESLHD Board endorse the Asset Strategic Plan 2012-2017."

Moved: D Cansdell Seconded: J McDonald Carried

7.3 Scoping Paper – Population Health Services Plan

The scoping paper for the SESLH Population Health Service Plan was noted. The plan included a Gantt chart indicating the review and consultation process for the Population Health Service Plan. The completed Plan is proposed to be brought back to the Board for approval in August 2013.

Resolution 197

"That the SESLHD Board approve the recommended deliverable due dates and planning process for the development of the Directorate's Population Health Plan 2013-2018 as presented in the Scoping Paper."

Moved: P Azarias Seconded: J McDonald Carried

7.4 SESLDH Executive Recruitment Update

The Board noted for information the update provided regarding the Executive recruitments and contract reviews currently being undertaken within the SESLHD Executive Team. These were:

- The use of an executive recruiter for external recruitment to the Director of Operations of the Northern Sector;
- The regrading of the position description for the Director of Information, Communication & Technology; and
- The review of the Director of Operations of the Southern Sector's contract (expiring in August 2013).

7.5 Norfolk Island Hospital Enterprise MOU

The final Memorandum of Understanding (MOU) between the Norfolk Island Hospital Enterprise (NIHE), Sydney Children's Hospitals Network (SCHN), and SESLHD was noted. The MOU stipulates the agreement of health service provided by SESLHD and SCHN to the NIHE.

SESLHD had been asked to identify a senior SESLHD representative to

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participate on the NIHE Advisory Council. The Chair had requested that the Chief Executive participate on the Advisory Council as the SESLHD representative, and the Chief Executive agreed to this arrangement.

The Board noted for information the update provided in relation to the MOU with the NIHE and the SESLHD representative on the NIHE Advisory Council.

7.6 CE's Appointment to Implementation Committee of the NSW HIV Strategy 2012-2015

The Board noted the NSW HIV Strategy 2012-2015 - A New Era, launched by the Minister on 1 December 2012. The Deputy Director-General Population and Public Health and Chief Health Officer had requested the SESLHD Chief Executive participate on the Implementation Committee for the Strategy. The Board noted the Chief Executive and A/Prof Ingrid van Beek's appointment to the Implementation Committee.

7.7 Randwick Urban Precinct Activation Project

The Board noted for information the brief provided regarding the Randwick Urban Activation Precinct provided by the Director of Operations of the Northern Sector.

7.8 Peritoneotomy Activity

The Board had received a briefing note regarding the Peritonectomy services at St George Hospital as a late agenda item.

The Chair, The Hon. Morris lemma, left the room during the following discussion, as he is the Chair of the Cancer Institute Board.

The Board noted that the Peritonectomy services at St George were being operated by one clinician who was not adhering to the agreed activity levels for the service. The clinician is the author of all Australian literature relating to the effectiveness of peritonecomy surgery and therefore all evidence relating to efficiency of the surgery may be biased.

The Board discussed the need to seek an external organisation to undertake a review of peritonectomy surgery and provide advice to the Ministry of Health on appropriate activity levels of the State-wide service. The Board agreed that the Cancer Institute would be an appropriate organisation to seek to undertake the review.

Resolution 197

"That the SESLHD Board note the update provide regarding the St George Hospital peritonectomy services and agree that the Chief Executive seek the Cancer Institute to undertake a review of the peritonectomy state-wide services and the future activity levels recommended."

Moved: J McDonald Seconded: P Smerdely Carried

<u>Action:</u> CE to seek Cancer Institute to undertake a review of the St George Hospital Peritoneotomy Services and the recommended future activity levels.

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	7.9	Interventional Neuroradiology
	7.3	The Board noted the late agenda item providing an update on the
		Interventional Neuroradiology services.
Part C	SUBCOM	IMITTEE REPORTS/COMPLIANCE ISSUES/PAPERS FOR
raito	INFORM	
	Item 8	SESLHN COMMITTEE REPORTS
	8.1	Clinical & Quality Council
	8.1.1	Clinical & Quality Council Minutes
		The minutes of the SESLHN Clinical & Quality Council meeting held on 19
		December 2012 were noted for information.
	8.2	Finance & Performance Committee
	8.2.1	Finance & Performance Committee Minutes
		The minutes of the SESLHD Finance & Performance Committee meeting held on 7 November and 5 December were noted by the Board for
		information.
	8.2.2	SESLHD Financial Narrative The SESLHD financial narrative for the periods ending November and
		December 2012 were noted by the Board.
		The Chair of the Finance & Performance Committee noted the District's
		projection was \$6.8M unfavourable to budget at the end of the financial year.
		Resolution 198
		"That the SESLHD Board approve the SESLHD financial narrative reports for
		the period ending November and December 2012."
		Moved: P Smerdely Seconded: J McDonald Carried
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	8.2.3	SESLHD Delegations Manual The SESLHD Delegations Manual had been amended in early 2013. The
		The SESLHD Delegations Manual had been amended in early 2013. The Finance & Performance Committee had approved the revised Manual.
		Third of the manage committee had approved the revised manage.
		Resolution 199
		"That the SESLHD Board approve the revised SESLHD Delegations Manual."
		Moved: J Ward Seconded: P Smerdely Carried
	8.3	Audit & Risk Management Committee
	8.3.1	Audit & Risk Management Committee Minutes
		The Board noted the Audit & Risk Management Committee meeting minutes
		of the meeting 28 November 2012.

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8.4	Community Advisory Committee
8.4.1	Community Advisory Committee Update There had not been a Community Advisory Committee meeting since the last Board meeting.
8.5	Sydney Metropolitan Aboriginal Health Partnerships Agreement There had not been a meeting of the Sydney Metropolitan Aboriginal Health Partnerships Agreement meeting since the last Board meeting.
8.6	Medical Staff Executive Council Minutes The Board noted for information the minutes of the Medical Staff Executive Council meeting held on 28 November 2012.

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MINUTES SOUTH EASTERN SYDNEY LOCAL HEALTH DISTRICT BOARD MEETING 6 FEBRUARY 2013

16:00 - 18:00

DIRECTOR UNIT, LEVEL 3 PRINE OF WALES HOSPITAL

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D		DARD MEMBERS AND CE ONLY)		
	Item 9	BOARD ADMINISTRATIVE MATTERS		
	9.1	Minute of Board Meeting held 5 December (items 9-12) The Board endorsed the minutes (items 9-12) of the SESLHD Board meeting held 5 December 2012 as an accurate record of proceedings.		
		Resolution 199 "That the Board approve the minutes (items 9-12) of the SESLHD Board meeting held on 5 December 2012 as an accurate record of proceedings."		
		Moved: R Farnsworth Seconded: J McDonald Carried		
	9.2	Actions Arising The Board noted the action log (relating to items 9-12) as at 29 January 2012, for information.		
	9.3	Chair's Report		
	9.3.1	Board only Meeting Times The Board discussed the appropriate SESLHD executive attendance at future Board meetings. It was noted that the Chair of the Medical Staff Executive Council was to be invited to the Board meetings, as a requirement of the legislation. The Board reaffirmed that the Director of Finance, Director of Nursing & Midwifery Service and Medical Executive Director should also attend Board meeting (general business).		
		It was clarified that the District Executive and Chair of the Medical Staff Executive Council attend as observers and will contribute when required by the Board Chair or Chief Executive.		
		Action: Chief Executive to discuss Board meeting participation with the Directors attending the Board meetings.		
	9.4	Chief Executive's Report		
	9.4.1	Prince of Wales Contentious Issues Brief		
		This item has been marked as confidential		

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Meeting held Wed	Inesday 6 February 2013
	This item has been marked as confidential
9.5.1	Board Governance Committee The Board Governance Committee had not met since the last Board meeting.
Item 10	Board Committee and Sub-Committee Membership The nomination process for the Deputy Chair, Alternate Deputy Chair, and Board membership on Board Committees and Sub-Committees was held out of session over January 2013. Nominations were reviewed by the Chair and all nominees were contacted to ensure their interest in the proposed roles. The Board noted the nominations received, and agreed to by the nominees, for the Deputy Chair and Alternate Deputy Chair roles in 2013, which were: • Deputy Chair (clinical) • Peter Gonski • Alternate Deputy Chair (external Board member)
	o Janet McDonald
	The Board noted the nominations received, and agreed to by the nominees, for the Board representative on Board Committees and Subcommittees in 2013, which were: • Audit and Risk Management Committee • Patricia Azarias • Finance and Performance Committee* • Kristin Stubbins – as Chair • Patricia Azarias – as representative on the Audit & Risk Management Committee • Jeanette Ward • Robert Boyd-Boland • Kate Munnings • Clinical & Quality Council • Deborah Cansdell – as Co-Chair • Robert Farnsworth • Peter Gonski • Peter Smerdely • Ingrid van Beek • Community Advisory Committee • Robert Farnsworth – as Chair • Harry Harinath • Sydney Metropolitan Aboriginal Health Partnership Agreement • Prof Jeanette Ward • Prof Ingrid van Beek - as alternative • RHW Transitional Subcommittee* • Janet McDonald – as Chair • Robert Farnsworth • Jeanette Ward • Kristin Stubbins • Board Governance Committee* • Peter Gonski – as Deputy Chair • Janet McDonald – as Alternate Deputy Chair • Patricia Azarias – as representative on the Audit & Risk
	Management Committee O Peter Smerdely

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Kate Munnings

The Board agreed to amend the charters of the Finance and Performance Committee, RHW Transitional Subcommittee, and Board Governance Committee to increase the additional Board representative memberships by one.

<u>Action:</u> Board Secretary to amend the charters of the Finance & Performance Committee, RHW Transitional Subcommittee, and Board Governance Committee.

Resolution 200

"That the SESLHD Board note for information the nominations received for the 2013 membership on Board Committees and Subcommittees, and the Deputy Chair and Alternate Deputy Chair roles."

Moved: Robert Farnsworth Seconded: D Cansdell Moved

Resolution 201

"That the SESLHD Board resolve to amend the charters of the Finance and Performance Committee, RHW Transitional Subcommittee, and Board Governance Committee to increase the additional Board repetitive memberships by one."

Moved: Robert Farnsworth Seconded: D Cansdell Moved

Resolution 202

"That the SESLHD Board appoint the following members as Deputy Chair and Alternate Deputy Chair for 2013:

- Deputy Chair (clinical)
 - o Peter Gonski
- Alternate Deputy Chair (external Board member)
 - o Janet McDonald"

Moved: Robert Farnsworth Seconded: D Cansdell Moved

Resolution 203

"That the SESLHD Board appoint the following members to Board Committees and Subcommittees for 2013:

- Audit and Risk Management Committee
 - o Patricia Azarias
- Finance and Performance Committee*
 - Kristin Stubbins as Chair
 - Patricia Azarias as representative on the Audit & Risk Management Committee
 - o Jeanette Ward
 - o Robert Boyd-Boland
 - Kate Munnings
- Clinical & Quality Council
 - o Deborah Cansdell as Co-Chair
 - Robert Farnsworth

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- Peter Gonski
- o Peter Smerdely
- o Ingrid van Beek
- Community Advisory Committee
 - o Robert Farnsworth as Chair
 - o Harry Harinath
- Sydney Metropolitan Aboriginal Health Partnership Agreement
 - Prof Jeanette Ward
 - o Prof Ingrid van Beek as alternative
- RHW Transitional Subcommittee*
 - o Janet McDonald as Chair
 - o Robert Farnsworth
 - o Jeanette Ward
 - o Kristin Stubbins
- Board Governance Committee*
 - o Peter Gonski as Deputy Chair
 - o Janet McDonald as Alternate Deputy Chair
 - Patricia Azarias as representative on the Audit & Risk Management Committee
 - o Peter Smerdely
 - o Kate Munnings"

Moved: Robert Farnsworth Seconded: D Cansdell Moved

Part E CORRESPONDANCE

Item 11 CORRESPONDENCE RECEIVED

The Board noted for information the correspondence received register, as updated on 29 January 2013.

11.1 NSW Health Pathology Board

The Board noted the NSW Health Pathology request for LHD nominations to the NSW Health Pathology Board. The agreed process within SESLHD for identifying suitable nominees was via the District Clinical & Quality Council. The Council had recommended Prof Amany Zekry (St George Hospital Clinical Council Chair and Director of the Gastroenterology Department at St George Hospital) was put forward as the SESLHD nominee.

11.2 Medicare Local Board Membership

It was noted that the Medicare Local had sought Local Health District representation on their Boards. The SESLHD Board had previously raised concerns that SESLHD staff were not the appropriate representatives on the Medicare Local Boards to represent SESLHD. Instead, SESLHD Board members were requested to participate on the Medicare Local Boards. Dr Harry Harinath had been recommended for membership of the Eastern Sydney Medicare Local Board, however the Board's membership constitution stipulated the number of General Practitioners allowed on the Board and the Board had already reached its capacity in this regard. A/Prof Ingrid van Beek had agreed to participate on the Eastern Sydney Medicare Local Board, and A/Prof Peter Gonski had agreed to participate on the South Eastern Sydney Medicare Local Board.

Resolution 204

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		Board had already reached its capacity in this regard. A/Prof Ingrid van Beek had agreed to participate on the Eastern Sydney Medicare Local Board, and A/Prof Peter Gonski had agreed to participate on the South Eastern Sydney Medicare Local Board. Resolution 204 "That the SESLHD Board approve the representation of A/Prof Peter Gonski on the South Eastern Sydney Medicare Local Board and A/Prof Ingrid van Beek on the Eastern Sydney Medicare Local Board."
		Moved: J McDonald Seconded: R Farnsworth moved
	11.3	RHW Transitional Committee Chair The Board noted for information the Minister's correspondence, and Chair's response, regarding the appointment of Janet McDonald as the Chair of the RHW Transitional Committee.
Part F	MEETING	CLOSE
	item 12	BUSINESS WITHOUT NOTICE Nil items raised
	item 13	NOTING OF CONFIDENTIAL ITEMS Items 7.1.1 (Northern Sector Clinical Council SLA), 7.1.2 (Northern Sector Savings and Efficiencies Progress Report) and 9.4.1 (Prince of Wales Hospital Contentious Issues Brief) were noted as confidential items.
Meeting	closed a	t: 6:00pm
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Date	6/3/	13