

Wednesday 26 November at 4:30pm | Claffy Lecture Theatre, Sydney Hospital

SESLHD Board Minutes

Board Members:

- Mr Michael Still (Chair)
- Ms Patricia Azarias
- Mr Robert Boyd-Boland
- Ms Deborah Cansdell
- A/Prof Robert Farnsworth
- A/Prof Peter Gonski
- Dr Harry Harinath
- Janet McDonald
- Ms Kate Munnings
- A/Prof Peter Smerdely
- A/Prof Ingrid Van Beek
- Prof Jeanette Ward

In Attendance:

- Mr Gerry Marr – Chief Executive
- Ms Karen Foldi – Director of Finance
- Mr Mark Shepherd – Director of Programs
- Ms Kim Olesen – Director Nursing & Midwifery Services

Leave of absence

- Ms Kristin Stubbins

Secretariat:

- Ms Melissa Angelucci– Board Secretary

STANDING ITEMS

Patient Story

This item was held over until the December 2014 meeting.

Minutes of Board meeting held 29 October 2014

The Board **approved** the Minutes of the SESLHD Board meeting held 29 October 2014 as an accurate record of proceedings.

Resolution 286

“That the Board approves the Minutes of the SESLHD Board meeting held on 29 October 2014 as an accurate record of proceedings.”

Moved: R Farnsworth Seconded: D Cansdell

Minutes of Clinical and Quality Council meeting held 8 October 2014

The Board noted the Minutes of the SESLHD Clinical and Quality Council meeting held 8 October 2014.

Minutes of Finance and Performance Committee meeting held 27 October 2014

The Board noted the Minutes of the Finance and Performance Committee meeting held 27 October 2015

The Draft Minutes of the Finance and Performance Committee meeting held 24 November 2015 were circulated to the Board as a late agenda item and were noted by the Board.

Actions

The Board noted the Action Log.

The actions relating to hospital demand are no longer listed on the Action Log. It was noted that this is because hospital demand is at the forefront of the Chief Executive's strategic direction and therefore, is central to many matters brought to the Boards attention.

It was noted that the matter of a Clinical Ethics Committee was raised at the most recent Clinical and Quality Council. The Clinical and Quality Council is preparing a brief for the Board.

Correspondence Register

The Board noted the correspondence received since 20 November 2014.

Teaching and Research

This item was deferred to the next meeting.

FOCUS

Aboriginal Health

Dr Greg Stewart, Director of Ambulatory Care and Ms Gail Daylight, Manager of Aboriginal Health attended the meeting to provide an update on Aboriginal Health. Ms Daylight presented and made the following key points;

- SESLHD encompasses the traditional lands of eight Aboriginal language groups, including the Cadigal, Birrabirragal, Muru-ora-dial, Kameygal, Norongerragal, Gweagal, Targary and Tharawal peoples. However, two large Nations cover the region. These include the Eora and Tharawal Nations, which extend way beyond boundaries of SESLHD.
- Re-signing of the Sydney Metropolitan Local Aboriginal Health Partnership Agreement (SMLAHP) took place at Redfern on Monday 7 July, 2014 which welcomed St Vincent's Health Network and The Sydney Children's Hospital Network to the partnership.
- Six Health Priorities have been identified through the SMLAHP Agreement 2013 – 2016; Drug, Alcohol, Smoking and Gambling, Social Determinates of Health, Chronic Care, Workforce, Research and Cancer
- The SESLHD Business Intelligence & Efficiency Unit has developed the Aboriginal Health Unit 2014/15 Dashboard Performance Measures.

- Patient and Staff surveys are currently being developed to assist with the improvement of existing services accessed by Aboriginal and Torres Strait Islander people.
- A total of 133 Aboriginal patients presented at St George and Sutherland Hospitals during 2013-14.
- Providing a Culturally safe environment is vital for the Aboriginal Patient journey throughout the health system. It was suggested that the Aboriginal Health Unit should have some input into the design of the new emergency department at Sutherland Hospital.
- Having an Aboriginal room where families can go, having Aboriginal artwork on the wards and around the hospital, and flying the Aboriginal flag are ways to make the Aboriginal patient and their families feel at ease which in turn would decrease "walk outs" against medical advice.

The percentage of the SESLHD workforce who identifies as Aboriginal or Torres Strait Islander (ATSI) was discussed. As at November 2014, the total people employed with SESLHD is 14,509 compared to 13,885 in July 2013. Of these staff, 93 (0.64%) identified as Aboriginal as at November 2014 compared to 92 (0.66%) in July 2013

The Ministry of Health has set a target of 2.6% of staff who identify as ATSI. SESLHD needs to employ 284 more ATSI people in order to achieve this target. The following points were noted;

- SESLHD has not performed well in this area over the past few years; one reason for this is the regular turnover of the Aboriginal Employment Coordinator position. It is hoped that as this position sees greater continuity, gains will be made on the Aboriginal workforce target.
- SESLHD has a partnership with Yarn'n, an Aboriginal Employment Consultant.
- The achievability of the Aboriginal workforce target within the next 12 months is very difficult. Ms Daylight reported that the Board can expect to see an addition 100 ATSI staff members in 12 months' time. While this target of 100 in 12 months is a stretch, it is not unrealistic.
- There are structures in place to provide extra support to SESLHD's ATSI workforce, including mentoring programs and networking opportunities.

Ms Daylight informed the Board that the Aboriginal Medical Service in Redfern has extended an invitation to the Board, to hold one of its future meetings at the service. The Board agreed that it should accept this invitation.

Action – Board Secretary to arrange a future Board meeting to be held at the Aboriginal Medical Service in Redfern.

The Board thanked Ms Daylight for her presentation and on-going work in this important area.

GENERAL BUSINESS

GOVERNANCE

Board Self-Assessment

The Board noted that a self-assessment is necessary. The Board agreed to undertake a self-assessment rather than have a third party undertake an assessment. This will occur in February 2015. The Chair agreed to determine an appropriate self-assessment tool that can be utilised.

Action - The Chair to determine an appropriate self-assessment tool that the Board utilise. Chair to circulate the tool for comment.

Presentation on Board Governance from APAC Conference

The Board noted the governance presentation from the APAC conference as very good.

PERFORMANCE

SESLHD KPI Report

The Board noted the KPI report.

Finance and Performance Update

The Director of Finance noted the following points in relation to the financial position;

- SESLHD's full year projection is \$20.3m unfavourable to budget (made up of \$18.4m in the general fund and \$1.9m in the Special Purpose and Trust Fund).
- SESLHD's year to date position is \$5.7m unfavourable to budget. This is made up of \$10.3m unfavourable to budget which is being offset by a favourable revenue position of \$4.6m.
- <<<< Confidential Section >>>>
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- Actual FTE across the District has increased slightly over the last pay period. Actual FTE should be trending downwards.

The largest component of the over expenditure is in Goods and Services, followed by Employee Related costs. Increased activity can contribute to the Goods and Services overspend.

It was noted that the Prince of Wales Hospital's overtime budget is greater than that of St George Hospital. However, St George is a busier hospital. The Director of Finance noted that it is more useful compare overtime actuals with actuals from last year.

It was agreed that the Program Management Office should undertake a piece of work to identify overtime efficiencies at each hospital. Approximately 18 months ago, an internal audit into overtime was conducted. This resulted in various actions and a decrease in overtime use.

The Chief Executive noted that the implementation of Service Line Reporting will assist Cost Centre Managers to manage their overtime budgets.

Population Health Report Card

The Board noted the Population Health Report Card.

STRATEGY

Update – Stage One, Implementing the smoke-free Health Care Program

The Board noted the update of stage one, implementing the smoke-free health care program. The program has not been as successful as the Board had hoped, with reports of staff and patients continuing to smoke at the front of hospitals. The Board requested a further update in three months.

Action – Director of Population Health to provide a further update on the smoke-free health

care program at the March 2015 Board meeting.

SESLHD Change Program

The Board noted the SESLHD Change program.

Update – Program Management Office

Mr Mark Shepherd, Director of Programs provided a summary of the PMO report provided on page 114 of the agenda pack. The reporting template has been improved to give the Board greater assurance of the 14 work stream currently being facilitated by the Program Management Office.

Value Improvement Plan Revenue Generation Opportunities Identified and Benefits Realised on page 120 was noted. The surplus in revenue is, in part, due to the work underway to improve Salary Packaging take-up rates.

The Board noted that the work of the Program Management Office to streamline the recruitment process has had significant benefits. The streamlined process makes recruitment easier for managers as it removes various unnecessary approval steps from the process. This has been very well received.

It was noted that Staff Specialists positions should be reviewed against need and appropriateness before they are re-recruited to, as all other positions within the organisational are.

The Board noted that variation in medication procurement is significant. The Medication Management Work Stream is beginning to address variation in discharge medication cost and practice with recommendations to be developed for value improvement.

St George Hospital Final Value Improvement Plan

<<<< Confidential Section >>>>

CLOSE

BUSINESS WITHOUT NOTICE

Director of Mental Health – The Board noted that Dr Murray Wright has accepted a secondment to the Ministry of Health as the Chief Psychiatrist. The Board agreed to write to Dr Wright to congratulate him on this achievement.

Action – Board Secretary to arrange a letter be sent on behalf of the Board to Dr Wright to congratulate him on his appointment to the position of Chief Psychiatrist.

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NOTING OF CONFIDENTIAL ITEMS

Nil discussion

Date of next meeting:

10 December 2014

12:30-3pm – Claffy Lecture Theatre, Sydney Hospital

Focus – Year in Review and 2015 plans

Meeting closed 7:15pm.



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Signature

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Michael Still
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Name

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10/12/14
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Date