

Wednesday 29 October at 4:30pm | Prince of Wales Hospital, Executive Meeting Rooms

SESLHD Board Minutes

Apologies

- A/Prof Ingrid Van Beek
- A/Prof Robert Farnsworth

Board Members:

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

In Attendance:

- Mr Gerry Marr Chief Executive
- Ms Karen Foldi Director of Finance
- Mr Mark Shepherd Director of Programs
- Mr Michael McGlynn, Medical Executive Director
- Ms Kim Olesen Director Nursing & Midwifery Services
- Dr Theresa Jacques Chair Medical Staff Executive Council

Leave of absence

Ms Kristin Stubbins

Secretariat:

Ms Melissa Angelucci

– Board Secretary

STANDING ITEMS

Minutes of Board meeting held 24 September 2014

The Board **approved** the Minutes of the SESLHD Board meeting held 24 September 2014 as an accurate record of proceedings.

Resolution 285

"That the Board approves the Minutes of the SESLHD Board meeting held on 24 September 2014 as an accurate record of proceedings."

Moved: D Cansdell Seconded: G Harinath



Minutes of Clinical and Quality Council meeting held 10 September 2014

The Board noted the Minutes of the SESLHD Clinical and Quality Council meeting held 10 September 2014

Minutes of Finance and Performance Committee meeting held 22 August 2014

The Board noted the Minutes of the Finance and Performance Committee meeting held 22 August 2015

The Board requested that the draft minutes of the Finance and Performance Committee meeting, which is held two days prior to the Board meeting, be circulated to the Board as a late item each month, so that the Minutes of Finance and Performance Committee be considered as part of the Board meeting.

Actions

The Board noted the Action Log.

Correspondence Register

The Board noted the correspondence received since 24 September 2014,

The Chief Executive reported on progress regarding the letter form Ms Julian Skinner, Minister for Health regarding Aboriginal employment. The Chief Executive recently met with the Yarn'n (Aboriginal Employment Consultant) Project Officer and noted that Sydney LHD is doing innovative work in this space. The Chief Executive has scheduled to meet with the Chief Executive from Sydney LHD and Yarn'n to discuss these successes.

Teaching and Research

This item was deferred to the next meeting.

FOCUS

VALUE IMPROVEMENT PLANS

1st Quarter Financials

Mr Ken Whelan, Deputy Secretary, Systems and Performance, NSW Ministry of Health and Mr Mark Britt, Director Systems Relationship Branch attended the meeting to discuss SESLHD's first quarter financial position. The following points were noted;

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The Director of Finance reported that September performance for the District was good and in line with the projection. Revenue performance is improving and is currently sitting above projection, to the value of \$2.5m favourable to target. This can be attributed to the revenue taskforce which has now been formed for two months and a Salary Packaging Marketing Program which is underway.

The Chief Executive reported that work is underway in the Integrated Care program. SESLHD is beginning to understand that Integrated Care will be pivotal to health system success into the future. It is an evidence based change that will begin to drive systematic shifts in the delivery of care. Work is currently underway to set the foundations for this change.

Primary Health Organisations, formally the Medicare Locals, were discussed. Mr Whelan noted that the boundaries articulated by the Commonwealth are bigger than what NSW had considered ideal, however the boundaries assigned will likely be workable.

Mr Whelan reported that the Commonwealth has announced that it will continue to measure NEST performance; however it will discontinue measuring NEAT performance. NSW Health is now considering how it will continue NEAT in a sustainable and achievable way. This may be in the form of two separate NEAT targets, one for admitted and one for non-admitted. It was noted that SESLHD's admitted NEAT performance is improving and performs well amongst its peers.

Mr Whelan advised the Board that part of his role is to support the Local Health Districts wherever possible. The Board thanked Mr Whelan for joining them for their meeting and his on-going support.

GENERAL BUSINESS

GOVERNANCE

Membership Healthcare Quality Committee



The Board confirmed the following Board members to be members of the Board Healthcare Quality Committee;

- Ms Deb Cansdell
- Mr Robert Boyd-Boland
- A/Prof Ingrid Van-Beek
- A/Prof Peter Smerdely

Ms Deb Cansdell was nominated to Chair this Committee.

Annual General Meeting – Bright Spot Celebration

The Board noted that the 2014 AGM will be linked to a Bright Spots Showcase and 'question and answer' session with the Chief Executive, Chair of the Board and a senior clinician, to be held at Sydney Hospital. A Bright Spot showcase will be made up of high performing teams from within each facility / local services who will be invited to create a poster to showcase their work.

The Board noted that this is a positive event as it is important to take time to celebrate successes.

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 was \$3.6m unfavourable to budget at the end of September 2014.
- Total expenditure is currently 4.9m unfavourable to budget. This is being offset by a revenue position of \$1.3m favourable to budget.
- Five workstreams have been established and are working to improve revenue and the revenue toolkit produced by the MoH is also being used.

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STRATEGY

Primary Healthcare Organisations - Boundaries

The Chief Executive reported that Local Health Districts have been advised by the Ministry of Health that Local Health Districts are unable to support any organisation/entity which may be tendering to be a lead agency. SESLHD must show equal support to any bids from any source.



Some Board members noted concern that the new Primary Health Networks may be looking to engage the community in similar ways that SESLHD is planning to do so. The Board does not wish to duplicated effort.

Physical Health and Mental Health

Mr David Pearce, Director of Mental Health and Dr Murray Wright attended the meeting to report on the outcomes of recent work undertaken to improve the physical health of Mental Health clients.

Mr Pearce provided the following information;

- Mental Health consumers experience increased rates of physical co-morbidity leads to lower life expectancy (\(\psi 15-20 \) years)
- The NSW Health Physical Health Care within Mental Health Services Policy Directive PD2009_027 prescribes that health care organisations must Ensure consumers receive a physical examination within 24 hours of admission and Ensure consumers in nonacute care (community MH) have a physical examination no less frequently than every 12 months.
- Since the Board heard about this issue last (May 2014) the Mental Health Service has been very active in working towards achieving the policy directive. Activities include, but are not limited to, a Gap Analysis, a new website, communications to all staff, development of a policy implementation plan, partnering with GPs, recruitment of peer support workers.
- The SESLHD Mental Health Service has seen vert positive, early outcomes from this their comprehensive approach. For example, over the past three months the percentage of Mental Health patients who have received a physical examination within the past 12 months has increased from 18.1% to 25.5%.

The Board commended Mr Pearce and Dr Wright on their progress and outcomes over the three month period. Dr Harinath supported the concept of having Mental Health expert support at hand in GPs practices.

Update – Program Management Office

Mr Mark Shepherd, Director of Programs provided a summary of the PMO report provided on page 102 of the agenda pack.

Community engagement update

Item deferred to a future meeting.

CLOSE

BUSINESS WITHOUT NOTICE

Clinical Ethics Committee - It was noted that SESLHD does not have an overarching Clinical Ethics Committee. Hunter New England Local Health District has an effective ethics committee. It was agreed that this should be discussed offline with A/Prof Peter Smerdely and Dr Greg Stewart.

Staff Afternoon Teas - It was noted that the Board afternoon teas with high performing staff



have been successful this year. It was suggested that, next year, nominated staff members be invited to also bring their colleagues to these events, this will enable the Board to meet more staff members throughout the year.

NOTING OF CONFIDENTIAL ITEMS Nil discussion Date of next meeting: 26 November 2014 4-7pm — Claffy Lecture Theatre, Sydney Hospital Focus — Aboriginal Health Meeting closed 7pm. Signature Ai chael Still Name 26/11/14— Date