

Wednesday 30 September 2015 at 4:30 pm | Prince of Wales Hospital

SESLHD Board Minutes

Board Members:

- Mr Michael Still (Chair)
- Ms Patricia Azarias
- Ms Deborah Cansdell
- Mr Jonathan Doy
- A/Prof Robert Farnsworth
- A/Prof Peter Gonski
- Dr Harry Harinath
- Janet McDonald
- A/Prof Peter Smerdely
- Prof Jeanette Ward (*via teleconference*)
- Dr Debra Graves
- Ms Kate Munnings

In Attendance:

- Mr Gerry Marr – Chief Executive
- Ms Karen Foldi – Director of Finance
- Mr Mark Shepherd – Director of Programs and Performance
- Dr James Mackie - Medical Executive Director
- Ms Kim Olesen – Director Nursing and Midwifery Services
- Dr Theresa Jacques – Chair Medical Staff Executive Council

Apology

- Ms Kristin Stubbins (Advisor)

Secretariat:

- Ms Melissa Angelucci

STANDING ITEMS

1.1. Patient Story

The Board noted the patient story as provided by a member of the Prince of Wales and Sydney/Sydney Eye Hospital Community Advisory Committee regarding care at the Eastern Heart Clinic, and acknowledged its appreciation of the story being shared with the Board.

1.2. Minutes of Board meeting held 26 August 2015

The Board approved the Minutes of the SESLHD Board meeting held Wednesday 26 August 2015 as an accurate record of proceedings.

Resolution 297

“That the Board approves the Minutes of the SESLHD Board meeting held on Wednesday

26 August 2015 as an accurate record of proceedings.”

Moved: J McDonald Seconded: D Cansdell Carried

1.3. Minutes of Finance and Performance Committee

The August minutes of the Finance and Performance Committee were noted.

1.4. Minutes of Health Care Quality Committee

The September Healthcare Quality Committee was deferred to October.

1.5. Actions

The Board reviewed and updated the Action Log.

It was noted that the bullying incident which occurred at the Sydney / Sydney Eye Hospital has now been closed.

1.6. Correspondence Register

The Board noted the correspondence received to 20 September 2015.

1.7. Teaching and Research

The Chief Executive reported that the St George Foundation proposal to establish academic chairs in Integrated Care is gaining momentum. The objective is to build good research and evaluation into integrated care.

SESLHD is advancing a local research strategy.

FOCUS

2.1. Presentation on Capital Development

Ms Cath Whitehurst, SESLHD Director of Capital Redesign attended the meeting to present to the Board on progress against SESLHD’s capital development projects. The following key points were noted;

- The Sutherland Hospital scope includes a new emergency department and the project is valued at \$62.5 million. The project is at the delivery stage. Cash flow for this project is of concern.
- The St George Hospital scope includes a new Acute Services Tower, to the value of \$309 million. The project is at the delivery stage.
- At the Prince of Wales Hospital progress on the new Comprehensive Cancer Centre is underway. This project is worth \$114 million. Another project worth \$500 million is in the process of being scoped and will likely include a new emergency department, acute inpatient beds, mental health and ambulatory care.

Health Infrastructure manages all projects that are \$10 million or greater. The Board noted that it would like to be engaged and involved in these capital projects and asked that the project governance structure be amended to include the Board.

The Director of Capital Redesign advised the Board of the issues with the Primrose House building at Dolls Point. It was noted that the building is old and ongoing maintenance is costing SESLHD a significant amount. The building is no longer habitable for office staff and 48 staff are being relocated to space at Sutherland Hospital. Work is underway in partnership with Property NSW to identify the best use for this building into the future.

GENERAL BUSINESS

GOVERNANCE

3.1 Appointment of non-medical practitioner to Medical and Dental Appointments Committee

The Board noted the brief provided regarding the appointment of non-medical practitioner to Medical and Dental Appointments Committee. The Chief Executive noted he would seek further information on this matter and bring back to the Board for its consideration.

Action – Chief Executive report back to the Board on the Appointment of non-medical practitioner to Medical and Dental Appointments Committee.

3.2. Update on Audit and Risk Management Committee

Ms Patricia Azarias, the Board risk representative provided an updated on the recent meeting of the Audit and Risk Management Committee. The following key points were noted;

- Current and future audits cover the following topics; emergency management, digital record keeping, infection control, incident management and root cause analysis. The Healthcare Quality Committee will review the incident management and root cause analysis audit results.
- A new NSW Treasury Audit and Risk Policy has been released.
- The capacity of the audit team is under review following the resignation of the Chief Internal Auditor.
- The Committee would like to have an IT representative on its membership. This will enable the correct expertise on the committee with the continuing emergency of IT and the resulting significant risk it may pose for the district.
- Following the risk session held by the Board in November 2014, Ms Azarias proposed holding a follow up session with the Board in December 2015. The Board agreed to this and the session was scheduled for 4 December 2015. Ms Azarias advised that she will prepare and present a background paper at the October Board meeting so that the Board is best placed to make the most of the December risk session.

The Board agreed that it would like the Audit and Risk management Committee to report to the Board on a quarterly basis, with the use of an exception report if any matters arise monthly.

3.3. New NSW Treasury Audit and Risk Policy

As discussed in item 3.2.

PERFORMANCE

4.1 SESLHD Key Performance Indicators

The Board noted the Key Performance Indicators (KPIs) report for August 2015.

The work on the triangulation of data is progressing well. Triangulated data will give the Board the ability to correlate issues for example harm and occupancy. SESLHD has been commissioned by CRAG to do this work as a pilot for NSW.

4.2 Finance and Performance Update

The Director of Finance reported the financial position as at the end of August 2015. The following key points were noted;

- The Year to Date result for August 2015 was \$1.8 million unfavourable to budget.
- The \$1.8 million is equally made up of revenue and expenditure.
- Patient Fee revenue continues to challenge the District. Whilst year to date results are above actuals as compared to the same period last year, results are still less than budget. The Revenue Improvement group continues to meet and will be led by the newly appointment Financial Operations Manager.
- The first quarter of the 2015/16 financial year is about to be finalised. It is too early to determine the figures however it is anticipated that SESLHD will be on track with its projection.

Coding was discussed. It was noted that the quality and accuracy of SESLHD’s coding is managed by the facilities and is constantly reviewed and that clinical staff often meet with coders. The Director of Finance is assured that SESLHD’s coding quality is of a high standard.

The Chief Executive noted that the changes occurring in the insurance industry are a risk for SESLHD. SESLHD is seeing dramatic changes in insurance company’s willingness to pay for some procedures which may have an impact of patient fee revenue. The Board noted that SESLHD should document the impacts of these changes and present it to the Ministry of Health.

4.3 Prince of Wales Hospital Emergency Department Re-Presentation Rates Anomaly

The Board noted the report provided regarding a Prince of Wales Hospital Emergency Department Re-Presentation Rates Anomaly. The report concluded that there were some data entry errors, where planned Emergency Department revisits were incorrectly assigned as unplanned returns to Emergency Department contributed to the observed increase in Emergency Department Unplanned Readmissions and that correcting the error would significantly reduce this rate.

STRATEGY

5.1. Update – Program Management Office

The Board noted the PMO report provided in the meeting papers. SESLHD has saved a total of \$2.94 million year to date. Some value improvement initiatives did not start on the scheduled date and therefore the savings have been delayed.

Emergency Treatment Performance (ETP) (formerly known as NEAT) has deteriorated over winter for all facilities across the District. The Emergency Treatment Performance target will be set by the NSW Government and will be based by reviewing relative pressures on emergency departments across the state.

Elective surgery performance across the District is improving and all KPIs have been met for

category 1 patients.

The Chief Executive reported that he is holding a District-wide symposium to look at winter performance and plan for next year. The Symposium will also analyse what effect the winter pressure is having on the broader hospital systems.

The Board noted that SESLHD staff sick leave was higher than average over the past winter. This is due to the flu vaccine not including all three vaccination strains.

5.2. Randwick Campus Development Meeting Update

Nil discussion held.

5.3 NSW Ambulance Partnership with Southcare

The Board noted the paper provided by A/Prof Gonski on the NSW Ambulance Service Partnership with Southcare Outreach Service (SOS).

5.4 Big Conversation - Update

The Board noted that report provided summarising the results of the SESLHD Big Conversation. The Big Conversation occurred late in 2014 and involved a team of staff volunteers going out to sites and services across SESLHD to speak with individual staff to find out what matters to them, what is working well, as well as what they would like to change.

The Board commended this work and also noted that the preliminary YourSay survey results had recently been released. The initial findings from the survey indicate that SESLHD has improved in 80% all indicators including staff engagement. A more detailed report will be provided to the Board at a future meeting.

5.5 SESLHD Annual General Meeting and Remaining Board Meetings for 2015

The Board agreed that the Annual General Meeting should be held in the afternoon of Friday 4 December 2015. No Board meetings will be held in December or January. Meeting papers and reports will still be sent to the Board in December for its information.

CLOSE

Business without notice

Uniform Policy

The Board noted its concern with staff members wearing surgical scrubs inappropriately. It was noted that there is a policy stating that surgical scrubs are not to be worn outside of surgical areas. This is managed at a facility level.

SESLHD Performance Rating

The Board noted the Ministry of Health’s Performance Rating for SESLHD remains unchanged. Discussions are underway between the Chief Executive and the Ministry of Health to have this performance level reviewed in light of the consistent performance improvements made by SESLHD over the past 12 months.

Inaugural Community Partnerships Committee

Janet McDonald, the Board community engagement representative advised the Board that the inaugural Community Partnerships Board subcommittee met recently. The meeting was considered a success by all who attended. Janet McDonald commended the SESLHD Director of Planning, Population Health and Equity for her hard work and enthusiasm getting the committee started.

The Chief Executive reported that SESLHD recently signed a Memorandum of Understanding with the Rockdale Council to work in partnership on issues surrounding health inequity. The Chief Executive noted that this would be brought to a future Board meeting.

Naming rights

The naming of the Comprehensive Cancer Centre continues to be an ongoing issue. The Board urged management to establish clear guidelines on naming rights.

NOTING OF CONFIDENTIAL ITEMS

Nil.

Date of next meeting:

Wednesday 28 October 2015

4-7pm – Board Meeting

Sydney, Sydney Eye Hospital

Meeting closed 6.55pm.



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Signature

Michael Still

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Name

28 October 2015

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Date