

MINUTES
ILLAWARRA SHOALHAVEN LOCAL HEALTH DISTRICT
BOARD MEETING

Date: Monday 5 September 2011
4.00pm – 6.00pm

Venue: Conference Room 2, Level 8,
The Wollongong Hospital

Item 1: Presentations:

1.1 Quality and Patient Safety Management Plan

Mr Robert Farrugia, Director of Clinical Governance presented an overview of the District's Quality and Patient Safety Management Plan for 2011-13.

Board members had the opportunity to ask questions related to the Quality and Patient Safety Management Plan.

The Plan was described as being very easy to read and understand. Board members commended the Plan for its comprehensiveness and format.

RESOLVED (2011/5-1): The Board endorsed the ISLHD Quality and Patient Safety Management Plan 2011-13.

ACTION ITEM:

An additional paragraph to articulate the responsibility of the Board in relationship to the governance of quality and safety.

1.2 Process of Allocation of the 2011/12 Budget

Ms Sofia Halligan, Service Development Manager presented an overview of the District's process of allocation of the 2011/12 budget.

Board members were provided with the opportunity to ask questions related to the methodology adopted by the ISLHD executive in allocating activity based funding for 2011/12.

RESOLVED (2011/6-1): The Board endorsed the Process of Allocation of the 2011/12 Budget.

ITEM 2: Attendance of members

Ms Sue Baker-Finch, Professor Kathy Eagar, Mr Roger Downs, Mr Paul Knight, Mr Geoff O'Donnell, Professor Jan Potter, Dr William Pratt, Professor Gerard Sutton

In Attendance

Mrs Sue Browbank, Mr Henry Kornacki, Mrs Rosemary Croke (secretariat)

Apologies

Clinical Professor Denis King, Ms Jill Boehm, Ms Marisa Mastroianni

ITEM 3: Declaration of Pecuniary Interest, Conflict of Interest

There were no other conflicts of interest, gifts, or benefits declared.

ITEM 4: Confirmation of Minutes of meeting held 1 August 2011

Minutes accepted as a true and correct record.

ITEM 5: Reports

5.1 Chief Executive

Report tabled for information and noted by the Board.

Board members were provided with an update on the \$100M Wollongong Hospital capital works programme. The funding has been approved with \$83M allocated to surgical infrastructure and \$17M for the Emergency Department expansion programme. The projects are due for opening in 2015 and will come on line gradually with staggered funding. Hospital Road will be closed to through traffic from January 2012. This closure will significantly impact on traffic flow.

5.2 ISLHD Board Finance and Performance Committee Summation – meeting held 22 August 2011

Report tabled for information and noted by the Board.

ITEM 6: Action List

Action list tabled for information and noted by the Board.

ITEM 7: Confidential Item

Board members are referred to the confidential minute 1 (page ...) for discussion of this item.

ITEM 8: Business Arising

8.1 Shoalhaven District Memorial Hospital Budget Review

Report tabled and noted by the Board.

The Chief Executive reported internal auditors have been requested to audit Shoalhaven District Memorial Hospital's enhancements

over recent years and staff appointments that were made in line with the enhancements.

The delay in distribution of Southern Transition Office resources is limiting capacity and access to the skills to undertake the budget analysis necessary in the development of a sustainable budget for Shoalhaven District Memorial Hospital.

8.2 Committees of the Board

The importance of the Board engaging with the community was discussed. Opportunities for this to occur will arise with the Consumer Advisory Council and the GP Liaison Committee as these committees will be chaired by Board members.

Discussion took place on the meshing of the GP Liaison Committee and the Consumer Advisory Council as both fall under the same 2011/12 Service Agreement governance requirement of involving stakeholders in decisions that affect them.

ACTION ITEM:

The Chief Executive to communicate with the Division of General Practice enquiring as to their position regarding the ISLHD joining with the Division of General Practice to create a Community Advisory Council.

Discussion occurred on whether Performance should be with Planning or Finance. The District's role in Performance is viewed as short term monitoring whilst Planning is related to setting longer term strategic direction. It was agreed that Performance continue to be aligned with Finance as this replicates reporting arrangements to NSW Health.

The Board referred to the advice and information provided in the business papers regarding the possible configurations of Board committees and clinical council required to be established to comply with the requirements of the Model By-Laws and the 2011-12 Service Agreement. Discussion took place on the need to recall for nominations to the Board committees and clinical council. Also discussed was the need for the Charters to be endorsed by the Board.

ACTION ITEMS:

- i Nominations to be called from Board members for representation on Board committees and clinical council prior to October Board meeting.*
- ii Charters to be tabled at the October Board meeting for endorsement.*

8.3 Better Faster Emergency Care: *improving emergency care and access across the Illawarra Shoalhaven*

Progress report tabled and noted by the Board.

ITEM 9: New Business

9.1 Chief Executive Report-Key Performance Indicators

The Chief Executive will provide the Board with monthly reports detailing the District's performance via a suite of key performance indicators. The Board requested trended reports on Tier 1, Tier 2 and Service Measures be provided. Trending over three to six months was recommended in the first instance.

ACTION ITEM:

The Chief Executive reporting on Key Performance Indicators to the Board will commence at October 2011 meeting.

9.2 Plan to Fix our Hospitals: \$10M for the Illawarra Regional Plan

The Chief Executive advised that on 22 August 2011 NSW Health requested the District submit a Service Statement by 31 August 2011 detailing the intended use of \$10M capital funding dedicated to the District under the Plan to Fix our Hospitals.

This presented the ISLHD with an opportunity to propose the drafting of a comprehensive Illawarra Regional Plan to develop clinical services in the Illawarra. A plan of this calibre would form one of the foundations of the ISLHD Planning Committee.

RESOLVED (2011/9): The Board endorsed the ISLHD's intentions submitted to NSW Health Statewide Branch concerning the District's response to Plan to Fix our Hospitals: \$10M for the Illawarra Regional Plan.

9.3 Model By-Laws

Board's approval for inclusion of Amending Part 7 into the Interim Model By-Laws is sought. Part 7 relates to a process of peer selection for membership of Clinical Councils.

RESOLVED (2011/10): The Board endorsed the inclusion of Amending Part 7 of the Model By-Laws into the Interim Model By-Laws.

ITEM 10: Information

10.1 Performance Profiles-patient Care Experiences: Outpatient services in NSW public hospitals-August 2011 – ISLHD

Report tabled for information and noted by the Board.

10.2 NSW Health Senior Executive Forum – 26 August 2011

The Chief Executive provided the Board with information related to the transfer of cluster functions presently located at Transition Offices that will be devolved to Local Health Districts.

In relation to the Southern Transition Office, it is anticipated some services will take some time to separate, and there are others that are unable to be separated and will remain hosted between ISLHD and SESLHD. Negotiations between the Chief Executives of ISLHD and SESLHD surrounding the transition of functions and services continue.

ACTION ITEM:

The Chief Executive is to provide the Board with the District's Order of Transition timetable.

10.3 Governance Review: Future Arrangements for Governance of NSW Health

Tabled for information and noted by the Board.

The role of the ISLHD Board was raised and discussed.

ACTION ITEM:

The Deputy Chair and Chief Executive to draft a paper detailing the Board's perceived responsibilities and accountabilities for circulatory comment.

11. Late Business:

11.1 Proposed Charter for the Audit and Risk Management Committee and advice regarding the composition of the Committee

The Model By-Laws detail that Local Health Districts need to establish an Audit and Risk Management Committee in accordance with NSW Treasury policy.

RESOLVED (2011/11): The Board endorsed the Audit and Risk Management Committee Charter.

RESOLVED (2011/12): The Board endorsed Marisa Mastroianni to be the interim Board member on the Audit and Risk Management Committee until the process of formal appointments to all committees is resolved.

11.2 Corporate Governance Statement for ISLHN-1 January 2011 to 30 June 2011

Tabled for information and noted by the Board.

ITEM 12: Business Without Notice

Board members are referred to the confidential minute 2 (page ...) for discussion of this item.

Meeting closed at: 6.55pm

Next meeting: Monday 10 October 2011
4.00pm – 6.00pm
Conference Room 1, Level 8,
Wollongong Hospital

CERTIFIED A CORRECT RECORD

Clinical Professor Denis King



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Signature

10.10.11

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Date