

**MINUTES
ILLAWARRA SHOALHAVEN LOCAL HEALTH DISTRICT
BOARD MEETING**

Date: Monday 3 June 2013

4:00pm – 6:00pm

Venue: Clinical Skills Lab, ISHEC

Item 1: Presentation:
No presentation.

Item 2: Attendance/Apologies:
Clinical Professor Denis King, Ms Sue Baker-Finch, Ms Jill Boehm, Mr Paul Knight, Professor Kathy Eager, Professor Gerard Sutton, Clinical Professor Jan Potter, Dr Bill Pratt, Mr Geoff O'Donnell, Associate Professor Rod McMahon, Mrs Sue Browbank, Mr Barry Mitrevski, Ms Kristen Davies (Minutes)

Apologies:
Mr Roger Downs

Item 3: Declaration of Pecuniary Interest, Conflict of Interest
There were no conflicts of interest, gifts, or benefits declared.

Item 4: Confirmation of the Minutes of the previous meeting held on 6 May 2013
Committee members requested wording is changed to "role clarity" in Confidential Minute 2. Minutes then accepted as a true and accurate record.

Item 5: Matters Arising From the Previous Minutes:

5.1 Urology – opportunity for future service models
Noted by the Board – nil discussion.

5.2 Organisational Structure
Refer to Confidential Minute 9.2

Item 6: Reports

6.1 Chief Executive Report
Report received and noted by the Board.

The Board members extended their congratulations to the scholarship recipients listed in the report. It was agreed that a letter of congratulations should be sent to each recipient.

The reasons for improved performance in relation to Ambulance Off-Stretcher Time (OST) Performance were discussed. The Chief Executive noted a redesign project, and increase in treatment bays at the Wollongong Hospital (TWH) contributed to the success. It was noted that p.22 of the business papers was included to allow for comparison to other metropolitan hospitals.

Minutes – Illawarra Shoalhaven Local Health District Board Meeting held on Monday 3 June 2013

The Chief Executive advised that Whole of Hospital Programme second phase is currently underway. Michelle Noort is the executive lead of the programme, and Kate Bone has been appointed as the service lead.

Action: Staff award recipients to receive a letter of congratulations from the ISLHD Board.

6.2 Financial and Activity Based Funding Performance Report – April 2013 Report received and noted by the Board.

The Chair referred to p.46 of the business papers and noted progress has been slow for SDMH. The A/Director Finance advised that the District is continually reviewing the budget and monitoring the performance of the site. Members expressed concern that the efficiencies required at SDMH are not being realised and it will be necessary for further strategies to be developed.

Action: Director Southern Operations to provide a monthly report on progress and strategies to realign the budget.

The A/Director Finance noted that specific programme and project funds are contributing to the District's full year favourability of \$1.8M. It was also noted that the District does not employ staff or commence project work before the funds are received. This contributes to the timing effect in expenditure.

The A/Director Finance noted that the District is currently in a good financial position for this fiscal year, and has used this opportunity to buy out leases, replace equipment and undertake significant RMR projects during this time.

Action: Noted for information.

6.3 ISLHD Board Health Care Quality Committee – no meeting held Noted by the Board – nil discussion.

6.4 ISLHD Board Planning meeting – held 6 May 2013 Minutes received and noted by the Board.

Timing of the planning meetings, and reporting timeframes to the Board were discussed. It was agreed that the ISLHD Board Planning meeting would continue to be held the first Monday of each month.

The Shellharbour Hospital future service plan was discussed. Concerns that the content of the plan was based on current work, rather than future demand have been addressed in the revised estimates.

J Boehm queried the progress of the SDMH Paediatric Service Review. The Chief Executive noted that the review process is being coordinated by SDMH, and progress is underway. Delays had been experienced due to a clash with the leave of the paediatricians.

Action: Noted for information.

6.5 Aboriginal Health meeting – held 13 May 2013 Minutes received and noted by the Board.

6.6 ISLHD Audit and Risk Management meeting – no meeting scheduled Noted by the Board.

6.7 ISLHD Shoalhaven Clinical Council meeting – held 15 April 2013 Minutes received and noted by the Board.

**Minutes – Illawarra Shoalhaven Local Health District Board Meeting held on
Monday 3 June 2013**

6.8 ISLHD Illawarra Clinical Council – held 5 May 2013
Minutes received and noted by the Board.

6.9 MDAAC meeting – held 25 March 2013 – no executive summary
Noted by the Board.

Item 7: Business Arising

7.1 Extreme Risk Report
Report received and noted by the Board.

Board members requested clarification on the background information contained in the report. It was noted that the wording required some revision for future reports. The Chair referred to Risk 2175 on p.83 of the business papers, and discussion focussed on Medical Imaging and its risk for the District.

Action: B Mitrevski to draft a brief about the implications of the capital outlay for Medical Imaging, for the Chair to discuss with Treasury.

M Mastroianni provided an update from the ISLHD Audit and Risk Management Committee meeting held prior to the Board meeting. Concerns were raised about the lack of reassurance from HealthShare in relation to the Business Continuity Plan.

Concerns about the disconnect between IT, HealthShare and clinicians were also discussed.

Action: Chairman to liaise with HealthShare.

The risk rating for planned and unplanned readmissions at TWH were discussed. Concerns were expressed at the Audit and Risk Management Committee meeting regarding the lack of control systems in place for the Department. The Chief Executive noted there is no nationally agreed readmissions policy, and acknowledged data collection issues.

Action: Chief Executive to obtain review of the updated systems.

Item 8: New Business

8.1 StaffLink Implementation across the District
Report received and noted by the Board.

8.2 Strategic Plan for Managing NGOs
Report received and noted by the Board.

The Chief Executive noted that the District has provided funding to NGOs for a number of years. There has not been a systematic evaluation of service delivery or requirements for some time. It was noted that the District provides approximately \$3.5M in funding, comprised of approximately \$3M in MoH grants, and approximately \$.5M in LHD grants. The MoH are currently reviewing funding arrangements relating to NGOs. The District is awaiting the outcome of their deliberations.

There were concerns raised about how funds were distributed and Board members agreed that the District should have some say in how funds are allocated.

Action: Noted for information.

**Minutes – Illawarra Shoalhaven Local Health District Board Meeting held on
Monday 3 June 2013**

8.3 Public Sector Performance Development Framework
Report received and noted by the Board.

8.4 Third Quarter Performance Review
Correspondence received and noted by the Board.

Action: Noted for information.

8.5 IAB and MoH ERMS Implementation
Report received and noted by the Board.

8.6 Essentials of Care (EOC) Program
Report received and noted by the Board.

8.7 MoU between ISLHD and UoW
Report received and noted by the Board.

Item 9: Confidential Items

9.1 Confidential Item One
Report received and noted by the Board.

Board members are referred to Confidential Minute One for further information related to this item.

9.2 Confidential Item Two
Report received and noted by the Board.

Board members are referred to Confidential Minute Two for further information related to this item.

Item 10: Information

10.1 Statutory Governed Board Training
Board members agreed that the preferred method of delivery for training would be a session conducted at Wollongong Hospital combining the top three modules outlined on p.144 of the business papers.

Action: Noted for information.

Meeting closed at: 6:45pm

Next Meeting: Monday 1 July 2013
4:00pm – 6:00pm
Conference Rooms, Level 8, Block C
WOLLONGONG HOSPITAL

CERTIFIED A CORRECT RECORD

Clinical Professor Denis King
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Name

DK
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Signature

1.7.13
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Date