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# MINUTES

## BOARD MEETING

Date: 2.00pm-6.00pm, Monday 1 July 2019

Venue: Conference Rooms, District Executive Office

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Health  
Illawarra Shoalhaven  
Local Health District

*Presentations commenced at 2.00pm and the meeting was formally declared open at item 1 at 3.20pm following the discussion and presentation.*

### **DISCUSSION: CHIEF EXECUTIVES OF THE AGENCY FOR CLINICAL INNOVATION AND CLINICAL EXCELLENCE COMMISSION**

Dr Jean-Frederic Levesque (ACI) and Ms Carrie Marr (CEC) provided brief presentations on the history, functions and plans of their respective agencies.

Dr Levesque began by providing an overview of the ACI's strategic plan, noting that it was increasingly looking to bring its eight clinical streams together and work on solving "bigger problems."

Dr Levesque highlighted the ACI's understanding of innovation as a process of renewal and explained that this is why it is important to work with LHDs; innovation can be both emerging from the base, as well as centrally coordinated. It was explained that a key part of the ACI's strategic approach to research is to develop a framework to guide, prioritise and manage the flow of innovations through a development and dissemination "pipeline".

The agency has been conscious in its strategic plan to explain how the ACI aligns with the Ministry and the other pillar agencies.

The Board discussed a number of issues with Dr Levesque, including:

- what mechanisms the ACI has in place to capture innovation internationally;
- how the ACI ensures that innovation emerges from (and is driven by) evidence-based research, and is not just a response to "fashion";
- what role the ACI plays in guiding decisions about disinvestment in low value services, particularly when the data on many low value services are already available;
- the need for a governance framework to assist decision makers in LHDs to make investment and disinvestment decisions, including to give comfort to practitioners who are already aware of evidence about low value procedures; and
- what role the ACI might play in developing a statement on the application of robotic surgery, as an expensive though essentially untested innovation.

In her presentation, Ms Marr noted drew a distinction between the ACI and CEC by explaining that the issues discussed above would be referred to the ACI — the CEC focuses on questions around safety systems and governance.

Ms Marr spoke about the CEC's focus on moving to new ways to think about safety and quality, including moving from a project-based approach to safety, to a system-based approach, with systems that can be predictive, proactive, and anticipatory

The focus of the CEC this year is supporting frontline teams and organisations to establish safety systems (including by training teams and not just individuals), better use of data analytics, team safety fundamentals, improving coaching and support, better learning from incidents, and board development.

Ms Marr discussed the Quality Improvement Data System, which aims to get as much realtime data in clinicians' hands every day, in turn providing the system with a focus for action on a daily basis.

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The Board discussed a number of issues with Ms Marr, including:

- delays in implementing IMS+, noting it was necessary to pause its roll-out because it was not ready — premature roll-out would have inflicted an untested system on busy clinicians, in turn risking confidence and buy-in;
- the value of existing policy settings around RCAs, and whether the system was entrenched in a cycle of identifying the same issues with the same recommendations;
- the potential value in moving to a more predictive environment where effort is put into identifying the SAC2s that may become SAC1s in the future; and
- the need to ensure that the District fully utilises staff who are alumni of the CEC Quality Improvement Academy programs (as well as the training offered by the ACI, such as through the Centre for Healthcare Redesign)

The Board thanked Dr Levesque and Ms Marr for their presentations.

**ACTION ITEM (16/19):** Obtain list of staff who have completed ACI or CEC training

**PRESENTATION: STRATEGIC SUSTAINABILITY PROGRAM**

Mr Gerrard Golding, Executive Director Strategic Improvement Programs, provided an introductory presentation on the procurement initiatives of the Strategic Sustainability Program (SSP).

Mr Golding highlighted the substantial achievements achieved in just 5 months, including:

- \$3 million saving achieved, with a clear plan to achieve \$10 million;
- good anecdotal feedback from stakeholders; and
- a rebuilt procurement team with a good skills profile to move the LHD forward, without increasing FTE.

Staff further highlighted the opportunities to improve procurement performance by optimising state-wide contracts, as well as the importance of building relationships with HealthShare. It was noted that the district's procurement function is moving from a simple purchasing model, to a more strategic approach.

The Board discussed a number of issues with Procurement staff, including:

- to note that the program scope includes identifying, monitoring and reducing wastage;
- the value in providing concrete examples of savings;
- the importance of balancing price and volume in ensuring effective procurement; and
- the potential to draw on procurement and supply management students from UOW to help establish a research base for the district's strategic procurement.

The Board thanked the team for the informative presentation.

**ACTION ITEM (17/19):** Scope a potential relationship between the Procurement Unit and UOW procurement and supply management research students

**ACTION ITEM (18/19):** Provide the Board with concrete examples of cost savings from the Strategic Sustainability Program

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**ITEM 1: WELCOME**

**1.1 Acknowledgement of country**

The Chair acknowledged the traditional owners of the land on which the Board met and paid respects to Elders past, present and future.

**1.2 Attendance**

Attendance of members

Professor Denis King OAM (Chair); Ms Jill Boehm OAM; Ms Eve Bosak; Mr Roger Downs; Professor Kathy Eagar; Mr Alan Hudson; Professor Bill Lovegrove AO; Dr Rod McMahon; Dr William Pratt; Mr John Stubbs; Ms Marisa Mastroianni (teleconference); Mr Paul Knight (teleconference).

Others in Attendance

Ms Margot Mains, Chief Executive; Dr Joshua Rijdsijk, Co-Chair Northern Illawarra Medical Staff Council; Mr Andrew Hayne, Board Secretary; Ms Angela Tugrul, Assistant Board Secretary.

Mr Gerrard Golding, Executive Director Strategic Improvement Programs; Ms Jodi Chiumento, A/g Director Procurement and Supply Chain, Ms Micele Peterson Senior Manager Procurement Governance, and Andrew White, Manager Supply Chain, were also present for Agenda Item 4.1 Presentation on Strategic Sustainability Program procurement initiatives.

**1.3 Apologies**

Ms Eve Bosak, Professor Gerard Sutton

**ITEM 2: DECLARATION OF PECUNIARY INTEREST, CONFLICT OF INTEREST**

There were no conflicts declared.

**ITEM 3: BUSINESS FROM THE LAST MEETING**

**3.1 Confirmation of Minutes of meeting held 3 June 2019**

The Board approved the draft minutes of the meeting held 3 June 2019.

**3.2 List of Action Items**

The Board noted progress/completion of actions.

**3.3 Register of Board Resolutions**

Members received the Board resolutions of the previous 12 months, and the progress to date.

**ITEM 4: STRATEGIC MATTERS**

**4.1 Financial Sustainability Program**

*Minutes from this agenda item are noted under 'Presentations' above.*

**4.2 Ministry of Health Board Performance Report**

The Board received the report.

**4.3 Strategic Directions Measures – Quarterly Update**

The Board received the report.

**4.4 Delegations Manual Review**

The Board approved the amendments.

**RESOLUTION (2019/15):** The Board approved the following ad hoc amendments to the ISLHD delegation manual:

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- Add a new delegation 4.1.2.5 Approval of Domestic and Family Violence Leave with delegates 100,200 and 300 consistent with NSW Health Leave Matters as updated in February 2019 to include provisions for Domestic and Family Violence Leave.
  - Delete Delegation 6.6.6 authority to purchase using a purchasing card (per transaction/total per month) and related paragraphs 6.6.1.6 as per Internal Audit recommendation.

**ITEM 5: MATTERS FOR APPROVAL**

**5.1 Asset Strategic Plan**

The Board approved the Asset Strategic Plan.

**RESOLUTION (2019/16):** The Board approved the Asset Strategic Plan 2019 — Schedule 3 Priority Project Template for submission to the Ministry of Health

**5.2 Planning and Innovation Committee Terms of Reference**

The Board approved the Planning and Innovation Committee terms of reference.

**RESOLUTION (2019/17):** The Board approved the Planning and Innovation Committee terms of reference.

**5.3 Audit and Risk Committee Charter**

The Board approved the Audit and Risk Committee Charter.

**RESOLUTION (2019/18):** The Board approved the Audit and Risk Committee Charter.

**ITEM 6: BOARD CHAIR REPORT**

The Board received the Chair's verbal report.

The Chair further advised the Board:

- He is currently finalising a review of Board committee membership; and
- Dr Bethan Richards, Chief Medical Wellness Officer, Sydney LHD, has been invited to present at a forthcoming meeting of the Finance and Workplace Performance Committee — all Board members will be invited to attend.

**ITEM 7: CHIEF EXECUTIVE REPORT**

The Board received the information provided.

The Chief Executive further noted:

- The District will review the 80 services and programs that can be accessed by people over 75 to ensure Fit for Frailty has been implemented.
- Surgeons have seemed keen to participate in NSQIP.
- Access and flow remain a challenge.

**ACTION ITEM (18/19):** Invite Ministry of Health staff to make First 2000 Days presentation to Board and Strategic Executive Meeting

**ITEM 8: BOARD COMMITTEE REPORTS**

**8.1 Finance and Workforce Performance Committee**

The Board noted the report and minutes from the recent Finance and Workforce Performance Committee meetings. The Committee Chair advised on the key points from

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June 2019:

- PED completion rates and WHS results continue to show little progress.
- There may be a need to review how effectively managers are held accountable for the lack of progress in these areas.

The Chief Executive provided the Board with information on these issues:

- Internal Audit has suggested that the PED completion rate is understated due to not all PEDs being recorded in the system.
- A simple PED tool has been released over the weekend over 29-30 June.
- The EDSIP will be convening a regular working group of WHS managers to ensure tools are being implemented to improve results

There was also discussion about current high workloads creating a challenging environment to address these issues, particularly work that is generated from the Ministry with uncertain provenance or governance.

The Board resolved to establish a register of work generated by the Ministry of Health, with a view to determining its volume, purposes and benefit.

**ACTION ITEM (19/19):** Compile a register of work generated by requests from the Ministry of Health

## **8.2 Health Care Quality and Safety Committee**

The Board noted the report and minutes from the recent Health Care Quality and Safety Committee meetings. The Committee Chair advised on the key points from June 2019:

- The Committee received presentations on Patient Report Outcome Measures (PROMs) and Patient Reported Experience Measures (PREMs), as well as on rates, causes and management of falls in the District.
- The Committee received its standing item report on activity, noting the high volume achieved across the District, as well as the going challenges in Emergency Departments.
- Associate Professor Rod McMahon is now attending PHN partnership meetings and will report back to the Committee on a regular basis.

## **8.3 Audit and Risk Committee**

The Committee Chair advised on the key points from June 2019:

- The Internal Audit on nutrition was a concern to the Committee, which had resolved to bring this to the attention of the Quality and Safety Committee for ongoing monitoring.

**ACTION ITEM (20/19):** Refer the findings and recommendations of the internal audit into patient nutrition to the Health Care Quality and Safety Committee for ongoing monitoring

*Ms Mastroianni left the meeting at the conclusion of this item.*

## **8.4 Planning and Innovation Committee**

The Board noted the report and minutes from the June 2019 Planning and Innovation Committee meeting. The Committee Chair noted that the Board had received a verbal update at its last meeting.

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**ITEM 9: FOR INFORMATION**

**9.1 Board Calendar**

The Board received the information provided.

**9.2 Independent Review of Hospital Security in NSW**

The Board received the information provided.

The Chief Executive noted that many recommendations will require a system-wide response, so further engagement with the Ministry of Health is necessary. Internal Audit has also been asked to review the recommendations and confirm the preliminary assessment of their feasibility.

**9.3 CHRISP Update**

Professor Kathy Eagar discussed this paper, explaining the background, purpose and achievements of the Centre for Health Research Illawarra Shoalhaven Population partnership.

Professor Eagar noted:

- that existing core funding will expire at the end of December 2019 and that this funding status will need to be resolved in the next three months
- that conflicts of interest would prevent her from participating in Board deliberations about funding.

The Board received the information provided.

**ITEM 10: BUSINESS WITHOUT NOTICE**

*There was no business without notice.*

**ITEM 11: MEETING FINALISATION**

**Details for the next meetings of the Board are:**

Board Meeting

2.00pm-6.00pm, Monday 5 Aug 2019  
Conference Rooms, District Executive  
Offices

Board Meeting

2.00pm-6.00pm, Monday 21 Oct 2019  
Location to be confirmed

Board Meeting

2.00pm-6.00pm, Monday 2 Sep 2019  
Conference Rooms, Block C Level 8,  
Wollongong Hospital

Board Meeting

2.00pm-6.00pm, Monday 4 Nov 2019  
Conference Rooms, District Executive  
Offices

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***Board members are referred to the Confidential Minutes for minutes relating to the Confidential Agenda.***

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**MEETING CLOSED AT 6.05PM**

**CERTIFIED A CORRECT RECORD**

**Professor Denis King OAM**



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**Signature**

5.8.19

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**Date**