
Minutes

Ordinary Meeting of the Board of the Far West Local Health District

Date: 25 March 2019

Time: 08.30 am CDST (09.00 am EDST)

Venue: 1st Floor, Community Health Centre, Boardroom

Present:

Mr Stephen Rodwell	Chief Executive
Mr Wincen Cuy	Board Member
Mr John Harris	Board Member
Mr Paul Kemp	Board Member
Mr Stephen O'Halloran	Board Member

By Videoconference:

Dr Andrew Refshauge	Chairman
Ms Mariette Curcuruto	Board Member
A/Prof Lilon Bandler	Board Member

Invitees:

Ms Diana Ferry	Executive Officer
Ms Noni Inglis	Director Finance and Corporate Services
Ms Jodie Miller	Deputy Director of Mental Health Drugs and Alcohol
Dr Andrew Olesnicky	Director Emergency Services BHHS

In Attendance:

Mrs Jenelle Bussell	A/Board, Committees and Policy Clerk (Minutes)
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Meeting Commenced: 08.40 am CDST

Item 1. Acknowledgement of Country

The Far West Local Health District acknowledges the traditional owners of the lands within its boundaries including Barkanji/Paakanjji; the Muthi Muthi; Wilyakali; and the Nyampa. We acknowledge and pay respects to the elders past and present and their ancient wisdoms. We also acknowledge the communities of today and the Aboriginal community members who are part of our communities.

Item 2. Apologies

Michelle Dickson

Item 3. Disclosure of Interest

Nil new.

4. Order of Business/Urgent Business

Nil.

Item 5. Minutes of Ordinary Board Meeting 25 February 2019

Resolution: **The Minutes of the Ordinary Board meeting held on 25 February 2019 be received as a true and correct record.**
Moved Lilon Bandler, seconded John Harris. Carried.

Item 6. Action List

18/19-012 – Performance Reviews – The Chief Executive explained the process for Performance Reviews. The reviews are completed after 3 months of employment following on yearly.

18/19-014 – Email correspondence from Haylee Rogers advised that the Maari Ma Board would like to meet the FWLHD Board on 24 June 2019. Stephen O'Halloran noted that an Aboriginal meeting was also scheduled for 8am the same day.

18/19-016 – Review of the Do Not Waits – The Chief Executive advised the report was missing the previous month's data however that data showed the same variance - of the number of people presenting to Broken Hill Hospital, 6% of Aboriginal people did not wait compared to 3.5% of non-Aboriginal people in the same period of February who did not wait. The data included shows that the 2015 report showed a higher rate of do not wait times which has been reducing over time. This data will now be reported monthly in the Chief Executive Report.

18/19-027 - Medical Staff Council Representative– Andrew Olesnicky advised a new Medical Staff Council may be formed in the near future. The first meeting would be held on 1 April 2019 and may consist of seven to eight members at present. The Chief Executive suggested the new Council could endorse Andrew Olesnicky as the Board Representative.

18/19-045 – Board Charter – To be discussed in closed meeting

18/19-047 – Sharyn Cowie advised all Health Council centres had Pexip capabilities for Board Members to access.

Item 7. Reflections of our Care

Item 7.1 Patient Story

The Patient Story was discussed.

Lilon Bandler asked how people were chosen to give their patient story. The Board and Committee Members discussed the importance and processes of collecting the patient and staff stories.

Item 7.2 Staff Story

Noted

Item 7.3 Presentation Jodie Miller, Director of Mental Health Drug and Alcohol

Jodie Miller introduced herself and went through her presentation. Key points discussed;

- Programs and telehealth - Addiction Medicine, Partnership with Children's Network, Partnership with St Vincent, Sexual Assault Responders

- Achievements since last report - MHDA Plans, Drug and Alcohol Day programs, Recovery Journal, Recovery Centre, Paeds Model of Care, Connections Program on "The Feed" SBS, First Aboriginal Trainee in NSW in Violence, Abuse and Neglect Services, new Clinical Director commencing in July 2019, realignment and regrading of positions
 - Challenges – Connections funding, Drought, Safety, Implementing new state- wide programs
 - Workforce Challenges – Dareton Community MHDA, consistent staffing, attracting seniors, retaining good staff, supporting inexperienced staff, competencies
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Mariette Curcuruto joined the meeting via video conference at 9.40am

- Current major projects - MoU review and Maari Ma and RFDS, Seclusion and restraint reduction, MHIPU – criteria for entry and transfer, strengthen Sexual Assault response throughout LHD, Domestic violence response pathway, MHDA Safety and Quality, Towards Zero Suicide, MHIPU refurbishment
- Performance – NWAU's, Psychosocial assessments following Sexual Assault, Your experience of Service, Seclusion, Restraint, 28 day readmission, 7 day follow up, MHDA ED Performance
- Future Directions – Towards Zero Suicide – 8 FTE, MH Pt Safety program implementation, MH D&A and Suicide Prevention Plan for the LHD, VAN redesign, Maintain partnership with SES LHD – TPP, mentoring and supervision, potential for staff swaps, Purpose built MHIPU, DV response

The Board and Committee Members discussed the Presentation at length with Jodie Miller answering questions.

Recess 10.15am – 10.30am

Item 8. Chief Executive Report

8.1 KPI Report

Noted

8.2 Chief Executive Report

Key points from the Chief Executive Report:

- The Clinical Director Psychiatry has resigned and will finish full time work at the end of June. A potential successor has been identified and negotiations about their contract are progressing well
- A patient from the MH Inpatient Unit died in an Adelaide hospital following transfer for treatment of physical ill health. A long term client of Broken Hill Community MHDA Service died from suicide. RCA's will be conducted into both deaths.
- Far West Local Health District will receive funding to support the new Towards Zero Suicide initiative. The funding will support 8 FTE. The MHDA Directorate is working on an implementation plan.
- There were three new Workers Compensation claims received in February 2019.

- Emergency Department Treatment Performance for February 2019 was slightly under target at 83.9% (target 89%). Transfer of Care from the Ambulance Service to the Emergency Department for January 2019 was 93.1% well above the target of 90.0%
- There were no category 1 or 2 elective surgery patients waiting for surgery at the end of February 2019. There were no category 3 patients overdue at the end of February 2019.
- Mary Hoy, the new Chief Pharmacist for FWLHD, commenced work on 6 March 2019
- A new resident Specialist Physician, Dr Shakawan Ismaeel will commence at Broken Hill Hospital on 11 March 2019.
- Patient Reported Measures (PRMs) Project Officer - new ACI funded position - This is one of 32 new positions funded by the ACI state wide to support all LHDs to implement the PRMs program for acute, community and non-admitted type care patients. The program will initially target the Integrated Care and LBVC population groups using validated tools. The position is currently under recruitment with an expected successful applicant to commence within 6-8 weeks.

The Chief Executive opened for questions on the remaining items listed in his report.

John Harris questioned the naming of the Lower Western Sector as opposed to the Upper Western Sector. The Chief Executive explained he proposed to review the description. The Board Members discussed options.

Resolution: **A name change is endorsed by the Board of the Upper and Lower Western Sectors to District Services or District Sites at the discretion of the Chief Executive.**
Moved Wincen Cuy, seconded Paul Kemp. Carried

Item 9. District Performance

9.1 Finance and Performance Report

9.1.1 Finance and Performance Committee Chair's Report

Stephen O'Halloran recognised Noni Inglis and the Finance Team was working well to the whole District and was very pleased with the approach they were taking.

9.1.2 Finance Report

Noni Inglis provided the Board with highlights from the Finance and Performance Report.

- The YTD result \$1.078M unfavourable to budget.
- The full year projection to budget is \$0.584M unfavourable to budget.

Key Issues

- The YTD performance against budget was impacted by the following actions:
- Employee Related costs - unfavourable variance for reporting month \$0.083M with YTD unfavourable variance being \$0.451M.
- VMO expenses were \$0.154M unfavourable in the reported month with the YTD result an unfavourable variance of \$0.764M. VMO's is trending higher than previous year due to resignations of staff specialists
- In Goods and Services - Medical, Nursing and Allied Health Agency Costs actuals were \$0.158M unfavourable in the reported month with the YTD result an unfavourable variance of \$0.781M.

- Repairs, maintenance and renewals actuals were \$0.084M unfavourable in the reported month with the YTD an unfavourable variance of \$0.302M

Outcomes of significance

The following relating to HI WIP occurs during March and June each year:

- HI WIP amounts accounted for by HI in their books relating to LHD's WIP projects are transferred to LHD's
- this transfer relates to increases in the following actual and budget amounts:
 - Capital Allocations (revenue account in profit and loss)
 - Building and Plant and Equipment (balance sheet account under Non-Current Assets)
 - Capital Expenditure (expense accounts in profit and loss)
- the sum of the amounts reflected above in balance sheet and expenses will agree to amount on the revenue side

As at the end of February 2019 the WIP amount has not been brought into account for FY19 – these adjustment will be processed in March 2019.

- For the period July 2018 to 31 March 2019 the HI Capital WIP amount for FWLHD is \$6.179M.

Identification of Risks

The following financial risks associated with expenditure have been identified:

- Short term / high turnover of Medical workforce in the BHHS Emergency Department Shortage of senior nurses.
- The growth in FTE.
- Premium employee related costs such as Agency Medical and Agency Nursing and overtime costs continue to inflate the employee related expenses.

Particular note was given to the premium employee related costs such as Agency Medical and Agency Nursing and overtime costs continue to inflate the employee related expenses.

The Board and Committee members discussed at length ways to reduce the costs.

Wincen Cuy suggested The Chief Executive and Noni Inglis prepare a draft strategy for implementation in the next Financial Year with an explanation to be provided to the Ministry of overflow of premium costs.

Action: Stephen Rodwell and Noni Inglis to provide a draft strategy to reduce premium employee related costs such as Agency Medical and Agency Nursing and overtime costs in the next Financial Year.

9.1.3 Financial Reports

Broken Hill Health Service Broken Hill Hospital Campus replacement of sheet metal roofing

This matter has been mentioned in previous months report with the total of the works expected to be \$2.582M. The details in this month is reflecting the accounting treatment. The following points are noted regarding the accounting treatment:

- costs associated with this each month will be recorded in a profit and loss account expense account (repairs and maintenance building account)
- the insurance refunds will be recorded in a profit and loss revenue account (insurance refunds account)
- insurance refunds received and not been expensed at month end will be accounted for in a balance sheet account (income in advance account)
- actual versus budget for Insurance Refunds revenue and Repairs and Maintenance Building account noted above will be unfavourable
- this will result in a nil impact in the profit and loss
- any unexpended insurance refunds at 30 June 2019 will be accounted for in profit and loss revenue account and not accounted for in balance sheet account

During June 2019, a fair value assessment will be done on the Broken Hill properties. The fair value assessment will include:

- assess the increase in value in these properties
- increasing the buildings value in the Non-Current Assets section of the balance sheet
- increasing the revaluation reserve section in Equity
- the estimated of the fair value increase would be the completed costs of works on these properties

Early Close and Year End

The following points are to be noted regarding the Early Close reporting:

- a complete set of financial statements for FWLHD and FWLHD Special Entity will be prepared by FWLHD
- the external auditors will be performing their interim site visit in the week commencing 6 May 2019
- a detailed list of external auditors requirements have been submitted to FWLHD

Resolution: **The Finance and Performance Report be received and noted.**
Moved Lilon Bandler, seconded John Harris. Carried

9.1.4 MoH Narrative – February 2019

Noted

9.2 Clinical Governance Report

9.2.1 Health Care Quality Committee Chair's Report (verbal)

Lilon Bandler noted there was no documentation in support of the Chair's Report due to the need for timely data which will occur in the next month or so. It will then enable her better delivery. Lilon Bandler also noted the need for rescheduling the meeting times to better enable Mariette Curcuruto to attend.

9.2.2 Clinical Governance Report

Noted

The Chief Executive noted there were four root cause analysis investigations in progress not three as stated in the report.

Resolution: **The Clinical Governance Report is received and noted.**
Moved Wincen Cuy, seconded Paul Kemp. Carried

9.3 Workforce Report

9.3.1 Workforce Development Committee Chair's Report (verbal)

Noni Inglis advised the Workforce Development Committee had not yet met as the meeting was scheduled directly after this Board Meeting.

9.3.2 Workforce Report

Noni Inglis advised a key point of the Workforce Development Committee was the Industrial action update.

Diana Ferry left the meeting at 11.35am

The District has been working with the Ministry of Health and the Barrier Industrial Council to commence the modernisation of the 1997 Unregistered Agreement. The BIC have raised several issues regarding the remuneration and working conditions of their members. A Union Specific Consultative Committee was established in 2018 to address these issues. The MoH and the District have responded in writing and via meetings to the BIC several times regarding these issues.

There was a deadlock between the parties due to their respective positions on these issues. The BIC commenced industrial action on 11 February 2019. On 12 March 2019, the MoH lodged a request for conciliation with the industrial relations commission and on 15 March the parties met in front of the Commission and the industrial action was lifted by the BIC.

Through the conciliation process, the District hopes to resolve the outstanding issues so it can move forward with the Award modernisation.

Resolution: **The Workforce Report be received and noted.**
Moved Wincen Cuy, seconded Mariette Curcuruto. Carried

Noni Inglis left the meeting and Diana Ferry re-joined at 11.42am

9.4 Risk Dashboard Report

Noted.

9.5 Risk Management Unit - Work Health and Safety Report

Noted.

9.6 Workers Compensation Report

Noted

Resolution: **The Risk Dashboard Reports be received and noted.**
Moved Mariette Curcuruto, seconded Stephen O'Halloran. Carried

Noni Inglis returned to the meeting at 11.45am

9.7 Health Performance Report January 2019

Noted

Resolution: **The Health Performance Report January 2019 is received and noted.**

Moved Lilon Bandler, seconded Wincen Cuy. Carried

Item 10. Business on Notice

Nil

Item 11. Items for Discussion

11.1 Review of Board Members Committee Membership

The Board Members discussed changes to the Committee Membership. Wincen Cuy will take on Chair of the Finance and Performance Committee, Mariette Curcuruto will Chair the Workforce Development Committee and join the Audit and Risk Committee, Paul Kemp joins the Health Care Quality Committee and all other members stay on the Committee's currently allocated.

Diana Ferry noted the need for a table to track what decisions are to be made and reports the Board should expect to see.

Action: **To update the Annual Board Calendar 2019 which lists the reports to come to each monthly Board meeting.**

11.2 FWLHD 2018 Strategic Priorities

The Board Members discussed the Actions arising from the Board and Executive Planning Session.

Endorsed by the Board.

Item 12. Calendar of Events

Noted.

Item 13. Correspondence

Nil

Item 14. Other Business

Noni Inglis referred to a past question Mariette Curcuruto had asked regarding paying Health Care Council Committee Members. Noni noted Policy FW_PD2015_038 Consumer Carer Community Engagement Framework s4.10 under the Consumer and Carer Payment Guidelines clearly stated sitting fees will not be paid.

Ordinary Meeting Closed:

12.00pm cdst.

Item 15. Closed Meeting

Item 16. Next Meeting

Monday 24 April 2019

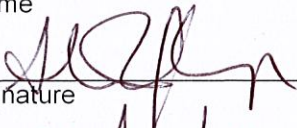
Certified as a correct record.

Andrew Refshauge

Name

Signature

Date



24 April 2019

