

## Communique

#### **Child and Adolescent Health Service Board**

This Communique highlights key discussions fromt eh Child and Adolescent Health Service (CAHS) Board's February 2022 meeting as well as other important information.

The first Board Meeting for 2022 was held on 3 February 2022 in the Perth Children's Hospital Boardroom.

## **Consumer Engagement**

The Board reinforced that all Consumer complaints are to be actioned as SAC clinical incidents to support the identification and addressing of systemic issues and its expectation that all clinical incidents, complaints and mortality and morbidity meetings are used to identify issues, learnings and actions to improve service delivery.

The Board discussed three (3) complaints made by consumers regarding:

- Access to Child Development Services Paediatrician Services;
- Support and care available for children with Functional Neurological Disorders (FND) including access to outpatient services, allied health and medical equipment; and
- Management of consent were conflict exists between the parent and treating team regarding clinical care.

The Board were advised of a working group to review racism within the workforce and strategies to address challenges identified.

The Board discussed two (2) compliments made by consumers regarding:

- the care received by a newborn with a rare condition across emergency, neonatology, critical care and acute inpatient and outpatient services across the organisation; and
- the care received by a child with Glioma by emergency, acute inpatient, outpatient, Ronald McDonald House Charities and parent accommodation services.

The Consumer Advisory Committee (CAC) and Youth Advisory Committee (YAC) meeting minutes were tabled with key issues discussed including:

- buggy services for transport of patients across the QEII site;
- car parking for families;
- scoping of the CAHS Bereavement Project and appointment of a Bereavement Officer;
- support for the Childhood Oncology Survivors Project including transition services for children to adult services:
- parental access to food and water services whilst children are inpatients and support by volunteers;
- prioritisation of regional patients because of reduction of elective surgery services secondary to COVID; and
- plans and design of the WA Children's Hospice and the model of care expectations.



The Board notes that the YAC and CAC are provided with safety and quality (S&Q) data and reports (excluding SAC1s) and can provide feedback directly to the S&Q Unit.

The Board were advised that the CAHS Reconciliation Action Plan had received conditional endorsement from Reconciliation Australia. The Disability Access and Inclusion Action Plan was tabled with multiple challenges and issues identified within the Perth Children's Hospital. The Board requested that the Executive document the challenges to enable sharing with other jurisdictions building new hospitals.

## **Key Organisational Discussions**

### 1. Accreditation

The Board noted that the final Accreditation survey was completed on 1 February 2022 with the surveyors noting that the organisation was aspiring to be "better than the standards". The Board Chair expressed that all activity generated as a result of the accreditation and for implementing further actions is to be integrated within business as usual with Accreditation to remain as a standard item on the Safety & Quality Committee agenda with monthly reporting against all standards.

# 2. Aishwarya Aswath – Root Cause Analysis (RCA) recommendations

The Board were provided with an update against recommendations from the RCA report into the death of Aishwarya Aswath.

- Recommendation 1. The CAHS Triage Policy and Guidelines were tabled with the Board requesting further clarification of the audit process associated with the policy and development of a quick prompt document for clinical staff to support compliance.
- Recommendation 2. The CAHS Emergency Department Nursing Staff Roles and Responsibilities were tabled with the Board requesting further clarification of clinical supervision Framework to support staff in clinical decision making.
- Recommendation 5. A summary of the PARROT Chart Audit report was tabled with the Board expressing concern that further work is required to embed the PARROT Chart within clinical practice in the ED.
- **Recommendation 7.** The Board noted the identification and purchase of two (2) education packages to address cultural competency training for both clinical and non-clinical staff across CAHS.
- Recommendation 9. An update was provided to the Board regarding minor works being completed within the PCH ED to improve patient flow and visibility for patients within the waiting room. The Board were advised that a new amber/red room had been created and ventilation works and equipment installation would be completed in March 2022.
- Recommendation 10. The Board was advised that additional junior medical officers (JMOs) had been allocated to ED and roster changes enacted to enable compliance with AMA EBA leave requirements.

The Board requested that the Oversight Committee established to support the implementation of recommendations coming from the Independent Inquiry Report into PCH was added to the Board agenda as a standing item.

### **Chief Executive Report**

The Board received a verbal and written report from the CE regarding:



- The completion of minor works at PCH to replace bollards at the front of the building damaged as a result of a car accident;
- The recall of all Health Service General Counsel by State Solicitors Office (SSO) secondary to SSO workforce pressures, and actions undertaken by the Health Executive Committee (HEC) to recruit new General Counsel across all HSPs;
- Identification of noncompliance by PCH ED with completion of the WA Health Gifts and Donation Policy, and subsequent remediation of the issue including staff education;
- The impact of COVID 19 on the CAHS Audit Schedule with the Board advising that all scheduled activity was to continue and any decisions to change the schedule to be made by the Board;
- The development of a Concept Proposal to establish a Comprehensive Cancer Centre for Children in conjunction with Telehealth Kids Institute and the appointment of Nous Consulting to develop the concept document. The Board requested further investigation and information regarding the proposal.
- An update regarding development of the WA Children's Hospice with the Board clarifying allocation of \$5million capital funding by the WA government and requesting further oversight into the design and model of care.
- The completion of a Fire Audit at King Edward Memorial Hospital with advice to be provided by NMHS as to the impact on CAHS Neonatology Services;
- The ACP Cladding Remediation Project, including advice that a performance solution for PCH was being scoped by the DoH;
- The completion of a PCH Bushfire Survivability Assessment with the Board requesting an update regarding implications of risk mitigation strategies and controls;
- Ongoing consultation with DoH into the ability to access data regarding ethnicity and language spoken at home within WebPAS; and
- Clarification received from DoH regarding methodology for the targets for Aboriginal and Non-Aboriginal people within the Health Service Performance Report.

### **COVID19 Preparedness**

The Board was provided with an update by the CE regarding CAHS preparedness for COVID19 with the following noted:

- Movement of outpatient services from face to face to telehealth:
- Three designated entry points at PCH: northern door for staff entry and exit; the main doors for visitors to wards and for appointments; and the southern doors for access to ED;
- A security guard will be in placed at the northern entrance and screeners are in place at the main and ED entrances. Visitors not vaccinated or unable to wear a mask will be escorted; and
- Changes to the carpark, which was identified as a weak point for safe patient flow.

The Board expressed ongoing concerns regarding the changes to the car parking at PCH, consultation with the Board regarding the decision and communication of the decision to both the Board and the wider public. The Board requested clarification of arrangements for the identified cohort of vulnerable/at-risk patients to ensure that their journey into the hospital is expedited.

The Board noted that utilisation of Rapid Antigen Testing (RAT) would commence 4 February with education for staff already underway. The Board discussed workforce strategies being considered if furloughing of staff was required.



## **Child and Adolescent Mental Health Service Update**

The ED CAMHS provided a brief update highlighting the challenges in CAMHS staffing, CAMHS triage process and CAMHS funding. The Board discussed the need for further due diligence and assurance from the Mental Health Commission regarding commitment to the development of the Eating Disorder Service Business Case.

# **Clinical Incidents and Recommendations Report**

The Board noted and discussed the current SAC1 investigations expressing their concerns regarding the number of incomplete recommendations arising from these reports including the SAC1 report into the death of Aishwarya Aswath. The Board also noted the number of SAC1 investigations regarding medication errors and expressed concern that there did not seem to be an acknowledgement, recognition and understanding of the requirement by nurses for double-checking medication.

### **Balanced Scorecard**

The Board expressed ongoing concerns that the information provided was not adequate to enable the Board to undertake its governance role. The Board acknowledged the changes currently being made to the Balanced Scorecard and emphasised the need to identify areas where performance is deteriorating to enable to early intervention.

## Midland and Murdoch Community Hubs

The Board noted that the Murdoch Hub project was now listed as a High risk within the organisation risk register secondary to a 10% variation above budget caused by significant increase in building and ICT costs.

#### Other Matters

The Board noted:

- Resolution of the BOC data breaches
- The escalation of the review of the mandatory training framework as a result of Accreditation including implementation of the new Learning Management System will be implemented in May 2022.

#### **Board Committees:**

The Board received reports from its four Standing Committees as follows:

## Safety and Quality Committee

The Board noted:

- the draft minutes of the meeting 14 December 2021;
- the Committee's concerns related to not having the outcomes of the PathWest audit into the Results Acknowledgment System; and
- that a revised Clinical Governance Framework was to be provided to the Committee at the February 2022 meeting.

#### **Finance Committee**

The Board noted:

- that there was no Committee meeting in December 2022;
- the Draft Business Case Scoring System provided by the EDCS for Board input; and



- the advice from the DoH regarding the 2021-22 Mid-Year Review funding allocations; and
- the update to the Clinical Centre for Expertise for Rare and Undiagnosed Diseases business case on advice from the DoH to request funding development of a model of care.

#### **Audit and Risk Committee**

The Board noted:

- the draft minutes of the meeting 7 December 2022;
- the approval by ARC of the Audit Scopes for Complaints Management (Governance and Diversity), Striving for Excellence Neonatology and Eating Disorder Services.

#### The Board endorsed:

- the CAHS Internal Audit Charter; and
- the closure of recommendations 2 & 3 from the PCH Cyber Security Audit 2021

# **People, Capability and Culture Committee**

The Board noted that there was no People Capability and Culture Committee meeting in December 2021.

## **Board Committee Chairs Meeting**

The Board noted the minutes of the 18 January 2022 Board Committee Chairs Meeting.

# **Board Chair Activity**

The Board Chair maintained regular meetings with the Minister for Health, Director General and Chief Executive and continued to engage with key stakeholders via:

- CAHS Staff Forum
- DoH Workforce Planning Presentation
- Meeting with the Chair and members of the Clinical Advisory Group; and
- Meeting with Telethon Kids Institute; WA Children's Hospice Project Control Group

The Board Chair and Board Members were involved in Christmas activities through out CAHS including the CAHS Volunteers Christmas Lunch and PCH Oncology Christmas Bake Off.

### **Next Meeting**

The Board will meet again on Thursday 3 March 2022

Dr Rosanna Capolingua BOARD CHAIR CHILD AND ADOLESCENT HEALTH SERVICE

24 February 2022

