



Communique

Child and Adolescent Health Service Board

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

The third Board Meeting for 2022 was held on 7 April 2022 via MS Teams.

Consumer Engagement

The Board was joined by Ms Erica John, Service Lead, Complaints and discussed the review and reform of the Child and Adolescent Health Service (CAHS) complaints management process including:

- relationship development with the divisions and clinicians;
- development of education resources to support upskilling particularly related to customer service;
- organisational reporting and benchmarking; and
- utilisation of data systems

The Board noted and discussed Complaints and Compliments related to:

- surgery cancellation secondary to being "out of area";
- response and escalation of care secondary to repeated presentations to the Emergency Department (ED);
- assessment, diagnosis and treatment of patients in 4A, ED and Plastic Surgery; and
- care coordination for children with complex issues.

The Board reinforced the utilisation of patient stories gathered from compliments and complaints as learning tools in clinical areas. They were provided with an updated report regarding the implementation of the Inclusivity, Diversity, Equity and Accountability (IDEA) Program and discussed its integration with the CAHS Multicultural Plan currently in development.

The Board noted the tabling of the minutes of the Consumer Advisory Committee (CAC) and Youth Advisory Committee (YAC).

Presentations

The Board noted presentations provided to the Board by the Refugee Health Team outlining service provision, challenges and opportunities for development.



Healthy kids, healthy communities

Compassion

Excellence

Collaboration

Accountability

Equity

Respect

Neonatology | Community Health | Mental Health | Perth Children's Hospital

Key Issues Reports

The Board discussed key issues within CAHS including:

1. COVID Preparedness

The Board noted the report provided including current COVID-19 activity within CAHS and the impact of staff furloughs on service provision. In addition, the Board discussed the completion of capital works in ED to support patient flow and the impact of elective surgery restrictions on service waitlists. The Board discussed the need to consider workforce planning post COVID to ensure transition of services.

The Board expressed concerns over the low vaccination rates within Aboriginal populations and discussed the utilisation of partners to ensure that vaccination and general medical services are accessible for this group.

2. CAMHS

The Board noted the tabling of the ICA Mental Health Taskforce Report and the A'ED CAMHS advised that they were waiting for Mental Health Commission (MHC) to indicate how they are going to coordinate the implementation plan. The A/ED CAMHS outlined that CAMHS were aligning the current reform being undertaken being undertaken as a result of the Office of the Chief Psychiatrist Review into the Death of Kate Savage with milestones and recommendations from the Taskforce report.

Key Issues identified within CAMHS included:

- experience of the children and young people receiving services and the need to ensure that this service is individualised and tailored to their need;
- workforce shortages in all nursing and allied health areas, including the ability to recruit fulltime experienced staff; and
- the ability to maintain service leadership particularly within the Community team when there is significant staff movement.
- the large-scale reform currently underway as a result of the Emerging Directions paper and anticipated ICA Mental Health taskforce report.

The Board received a progress status report from the ED CAMHS regarding progress towards the recommendations outlined within the Chief Psychiatrist Report into the death of Kate Savage. The Board Chair advised the Board that she and the Chief Executive had met virtually with Ms Meron Savage to discuss her experience with CAMHS.

3. Independent Inquiry in to PCH/Aishwarya's death

The Board noted the progress report of the Independent Inquiry into PCH including organisational activity against recommendations.

Major Projects

The Board discussed updates on major projects as below:

1. Midland and Murdoch Community Hubs

The CE provided an update to the Board regarding the Midland Hub and advised that the project delivery would be delayed for 12 months secondary to the lease negotiations impacting on practical completion dates.

The Board expressed profound dissatisfaction for not having accurate project implementation timeframes before the endorsement of the project and requested further information on the terms of the lease, and potential impact of the delay in practical completion on patients, services and staff. The Executive advised that all efforts were being made to mitigate the issue.

2. WA Children's Hospice

The Board were provided an update on the current status of the development of the WA Children's Hospice including:

- ongoing negotiation between CAHS and PCHF regarding design;
- development of the legal framework for the project and ongoing operations of the Hospice;
- ongoing concerns regarding parking; and
- development of a Business Case by CAHS to address operational costs associated with the clinical services.

Regular Reports

The Board was provided regular reports as follows:

1. SAC, 2 and 31 Clinical Incident Reports and Recommendations

The Board discussed common themes regarding clinical incidents including behaviour, medication errors, absconsion from clinical services and SABSI.

2. Balanced Scorecard

The CAHS Balanced Scorecard including HSPR and Major KPI metrics was presented with discussion related to the representation of aboriginal children within the COVID data, mental health metrics particularly related to ED presentation and access, policy compliance rates, non-COVID vaccination programs, aboriginal employment rate and access to Child Development Services.

The Board also noted a report from the CAHS Communications Team outlining their quarterly activity.

Chief Executive Report

Key items discussed as a result of the Chief Executive Report includes:

- Early Childhood Dental Service development and concerns regarding the budget development;
- 5-11yrs COVID Vaccination/Immunisation Program;
- recruitment of General Counsel services for CAHS;
- scheduled showing of the CAHS/FSH Documentary; and
- the determination of emerging risks related to the wait times for access to Child Development Services.

CAHS Strategic Plan

The Board were provided with a presentation by the Nous group outlining an updated Strategy on a Page to be used as part of the consultation phase in developing the CAHS Strategic Plan.

The Board requested that Nous include Derbarl Yerrigan, the Aboriginal Health Service of WA and Multicultural communities within the consumer engagement.

Board Committees

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

1. Safety and Quality Committee

The Board noted:

- the draft minutes of the meeting March 2022;
- the revised Terms of Reference for the Committee; and
- the revised Clinical Governance Framework with clearer responsibilities and accountability included. The Board noted that the CGF would be revised in terms of the Committee Structure following the Executive appointments currently in train.

The Board discussed the minutes from the March 2022 meeting and noted:

- the introduction of the Waiting room nurse and its impact on time taken to be seen; and
- the ongoing review into GEKO quality improvement projects and potential need for research ethical review.

The Board resolved to endorse the Committee recommendations including:

- endorsement of the SQ report on the action plan for the 18 actions 'met with recommendations; and
- closure of actions 2.3, 2.4 and 2.5 of the CIMS Audit report including the compliance testing framework, as well as the Terms of Reference.

2. Finance Committee

The Board noted:

- the draft minutes of the meeting March 2022;
- the management approved Business Case for the Clinical Centre of Expertise for Rare Diseases (CCERUD) as a pilot under the delegations; and
- that the CE will provide to the Finance Committee a detailed report on the proof of concept for the CCERUD.

The Board discussed endorsement of the 2021-22 Mental Health Commission Service Level Agreement including the SLA not providing clarity regarding clarity of funding for FTE publicly committed to and the prescriptive wording related to the Crisis Care Call

The Board resolved to endorse the Committees recommendations including:

- to not endorse the Mental Health Commission Service Agreement, until there is greater clarity regarding funding of FTE;
- to refer the Pathology User Group Status Report on the Development of KPIs to the Safety and Quality Committee; and
- to place the approval of the CAHS Additional Community Facilities Business Case on hold.

3. Audit and Risk Committee

The Board noted the Audit and Risk Committee Chair Report and minutes of the March 2022 meeting.

The Board noted that:

- adoption of the Audit Scope for the CAHS Risk Management Framework set out in the paper;
- endorsement of the Essential Eight Review to replace the CAHS Cyber Security Audit for 2021-22; and
- endorsement of the audit scope for the SAC 2 and SAC 3 management with the following inclusions:
 1. the timing between the occurrence of the incident and the reporting of the incident;
 2. incidents raised in outpatients in the community; and
 3. incident management in Community Mental Health.

The Board resolved to endorse the Committees recommendations including:

- to endorse the closure of Recommendation 7 from the Additional Hours Remuneration Audit Report;
- to endorse the closure of Recommendation 6 from the PCH Cyber Security Audit;
- to endorse the renewal of the Directors and Officers Insurance for 2022-23 on expiring terms;

- to endorse the revised CAHS Internal Audit Charter (with additional changes required by ARC
- to endorse People, Capability and Culture Committee to oversee staff exit controls and the implementation of the recommendations in the Staff Exit Better Practice Guide and report back to the Committee in practically reasonable time; and
- to endorse Safety and Quality Committee to address the risk inpatient filing errors in Oncology, identified in the Health Information Audit (Diagnosis Related Groups).

4. People, Capability and Culture Committee

The Board noted that there was no meeting of the People, Culture and Capability Committee in March 2022.

5. Clinical Advisory Group

The Board noted that there was no meeting of the Clinical Advisory Group in March 2022.

Board Chair Activity

The Board Chair attended the Board and Committee meetings in March 2022 and maintained regular meetings with the Minister for Health, Director General and Chief Executive in March 2022. She also attended meetings regarding:

- Department of Health Level 3 Intervention
- Ministerial Taskforce into the Public Mental Health Services for Infants, Children and Adolescents in WA;
- Office of the Chief Psychiatrist Review;
- WA Governance Review;
- ACSQHC Independent Inquiry into Perth Children's hospital;
- COVID-19 Preparation;
- WA Children's Hospice;
- CAHS Strategic Plan; and
- Office of the Auditor General Entrance Meeting.

Next Meeting

The Board will meet again on Thursday 5 May 2022

Dr Rosanna Capolingua

BOARD CHAIR

CHILD AND ADOLESCENT HEALTH SERVICE

20 April 2022