



Communique

Child and Adolescent Health Service Board

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

The fifth Board Meeting for 2022 was held on 2 June 2022 via MS Teams.

The Board discussed the following items:

1. **CAHS Customer Service Program** – initial sessions completed with evaluation underway to determine changes to future education sessions;
2. **Statewide approach to Paediatrics** – initial scoping of state patient flow capacity underway and a project control group being commissioned to undertake the Paediatric Hospital Services Review;
3. **Neonatal Interpreter Service** – data access to evaluate service and assessment of service to determine gaps and changes required; and
4. **Nursing Capability Framework** – the Board were provided with a presentation regarding the Framework including recruitment and workforce development pipelines, education and supervision frameworks.

Consumer Engagement

The Board endorsed:

1. CAHS Multicultural Action Plan 2022-2027; and
2. CAHS Disability Access and Inclusion Plan 2022 - 2025.

The Board noted and discussed Complaints and Compliments related to:

- Child advocacy and discharge documentation;
- Clinical governance related to clinical pharmacy;
- care coordination;
- clinician communication with families; and
- interhospital transfer of neonatal patients.

The Board noted additional information provided as a result of the complaints provided in May 2022 and discussed the following:

1. Use of Restraints and holds in CAHS
 - the medical definitions of restraints vs holds;
 - the different approaches and inconsistencies in reporting amongst HSPs;



Healthy kids, healthy communities

Compassion

Excellence

Collaboration

Accountability

Equity

Respect

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- education and training opportunities for deescalating; and
 - the use of female security guards and the development of specific paediatric training
2. Strategies for minimising trauma for children undergoing medical procedures
 - use of smiley scope goggles;
 - utilisation of KKind services; and
 - education/training of staff.
 3. Strategies to address the reduction of waiting lists for video electroencephalograms.
 4. Support for the development of business cases related to the Refugee Health Service.

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

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 management of Neonatal services including management of babies where mothers are transferred to SCGH.

2. CAMHS

The Board discussed key challenges within CAMHS as noted by the A/ED CAMHS including:

- Staff Shortages and depleted workforce;
- Review of CAMHS Community Clinics;
- Office of the Chief Psychiatrist review report into the Sexual Safety Breach on 5A;
- CAMHS patient activity;
- Crisis Connect;
- ICA Taskforce Models of Care;
- Additional CAMHS FTE; and
- Community Health Services.

The Board welcomed the A/ED Community Health and noted the report outlining:

- COVID-19 – impact of staff furloughing and ability for community clinics to support child health appointments within current COVID restrictions;
- Child Development Service wait times impacted by increased demand for services and workforce recruitment issues;
- Child Health Nursing universal post-natal visit including the return of face to face visits;
- Child Health Nursing one- and two-year checks; and
- School Health Programs and the role of community nurses.

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

The Board noted the progress report of the Independent Inquiry into PCH and requested a detailed report to understand current completion of work and actions to address incomplete recommendations.

Major Projects

The Board discussed updates on major projects as below:

1. Midland and Murdoch Community Hubs

The status report was noted, and the Board discussed identified challenges, including escalation of costs, community consultation and project delivery timeframes.

The Board were advised that the DoH had offered a further 1000sqm above the Murdoch Hub location and asked CAHS to consider whether it would be interested in utilising the space. The Board agreed that whilst this was an opportunity to support current services it would need to be appropriately funded before the Board would endorse accessing the space.

2. WA Children's Hospice

The Board noted the report and were advised that the next PCG meeting was scheduled for next week. The Board were advised that the schematic design is having a final review by the clinical team and the architects would be presenting several options for consideration.

Regular Reports

The Board was provided with the Balanced Scorecard, noting the report and discussed:

- accuracy of FTE numbers and the shortage of skills;
- the alignment of the recruitment and the budget;
- accuracy of number of people injured at work; and
- phone follow-ups for mental patients.

Chief Executive Report

The Board noted the Chief Executive report and discussed:

- review of the CAHS Chaperone policy including education and reporting requirements; and
- clarification of the implementation of a Digital Medical Record at CAHS.

PRESENTATION - CAHS Strategic Plan

The Board were provided with a presentation by the Nous group providing an update to the Board regarding the progress in developing the first draft of the CAHS Strategic Plan and an initial review of the CAHS Mission and Vision statements.

PRESENTATION – Shape Our Future

The Board noted presentations provided to the Board the Shape Our Future Chair outlining strategies to address cultural reform within CAHS.

Board Committees

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

1. Safety and Quality Committee

The Board noted the Safety & Quality Chair Report and draft minutes of the meeting 10 May 2022 and discussed:

- how CAHS triangulates data resulting from clinical incidents, complaints and morbidity and mortality meetings; and
- the completion and utilisation of PARROT charts within CAHS.

2. Finance Committee

The Board noted the Finance Committee Chair Report and draft minutes of the meeting 24 May 2022 and resolved to endorse the following Committee Recommendations:

- to refer to the Safety & Quality Committee the action to determine the interoperability between NETS cots and the RFDS helicopter service to determine the utility of the service for neonatal transport;
- to amend the program approval for the CCERUD pilot project period of 12 months with philanthropic funding subject to an evaluation and formal business case to be submitted to DOH;
- to execute the 2021-22 Deed of Amendment, subject to a covering letter that outlines our appreciation for the improvements but also highlighting the outstanding risks; and
- to recommend to the Minister that debts totalling \$467,903, related to a Neonatology case are endorsed for write off with cover letter outlining the circumstances of the case.

3. Audit and Risk Committee

The Board noted the Audit and Risk Committee Chair Report and minutes of the 17 May 2022 meeting and resolved to endorse the following Committee Recommendations:

- to note and endorse the amended 2022 – 2023 CAHS Internal Audit Plan with amendment that the Waitlist Management Audit Plan is scheduled for Quarter 1 of 2024;
- to endorse closure of recommendation AHR1;
- to endorse closure of recommendation FC 1; and
- to endorse closure of recommendation PCM 17.2.

The Board noted the concern about self-authorisation of rosters and self-authorisation of payroll certification statement as outlined by the Office of the Auditor General.

4. *People, Capability and Culture Committee*

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

5. *Clinical Advisory Group*

The Board noted the minutes of the Clinical Advisory Group on 26 May 2022 and resolved to endorse the update Terms of Reference with an amendment to the section “*appointments to the group will recognise the principle of diversity and membership will be encouraged from across CAHS*” adding a footnote to the “*diversity*” policies as CAHS not has policies and procedures that guide the selection of representation..

Board Chair Activity

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

- Commissioner for Children and young People;
- Board Chair PathWest;
- Meeting with the Director, Aboriginal Services;
- Meeting with A/Executive Director Child and Adolescent Mental Health Services; and
- Interview with the ECU Survey team regarding the Department of Health Stakeholder Survey.

The Board Chair continued to take a key role in:

- Department of Health Level 3 Intervention;
- WA Children’s Hospice project control group;
- Progress of recommendations from the Independent Inquiry into PCH;
- Progress of recommendations from the OCP Review into the death of Kate Savage;
- COVID-19 activities; and
- Recruitment of CAHS Executive Team.

Next Meeting

The Board will meet again on Thursday 7 July 2022

Dr Rosanna Capolingua

BOARD CHAIR

CHILD AND ADOLESCENT HEALTH SERVICE

22 June 2022