

## NSLHD Board

### MEETING DETAILS

**Date:** Tuesday 17 April 2018 commencing 4:30pm

**Venue:** Boardroom, Executive Unit, Douglas Building, Royal North Shore Campus

**Present:**

Mr Trevor Danos AM	Board Chair
Ms Annette Schmiede	Deputy Board Chair – teleconference
Dr Dianne Ball	Board Member
Adjunct Professor Ann Brassil	Board Member
Professor Mary Chiarella	Board Member
Mr Anthony Hollis	Board Member
Mr Andrew Goodsall	Board Member
Mr Brad Goodwin	Board Member
Dr Donna Lynch	Board Member
Mr Don Marples	Board Member
Dr Harry Nespolon	Board Member – arrived 6pm
Dr Michelle Mulligan	Board Member
Mr Keith Skinner	Board Member – teleconference

**In attendance:**

Ms Deb Willcox	Chief Executive NSLHD
Ms Jacqueline Ferguson	Director Finance, NSLHD
Ms Elizabeth Curran	Executive Director Operations, NSLHD
Dr Bruce Cooper	Representing Medical Staff Executive Council
Ms Judith Hogan-Wright	Secretariat

**Apologies:**

Dr David Jollow	Chair, Medical Staff Executive Council
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### BOARD MEETING DETAILS – commencing at 4:30pm

The Board Chair welcomed the Board members and attendees to the meeting. The Board Chair welcomed Dr Donna Lynch to her first Board meeting and introductions were made. The apology by the Chair, Medical Staff Executive Council (MSEC) was made and the Board Chair acknowledged Dr Bruce Cooper as MSEC representative.

At the invitation of the Board, Mr Brad Goodwin provided a brief autobiographical introduction for the information of those in attendance. Another Board member will be identified to present at the next Board meeting.

## 1. Presentations

### 1.1 Musculoskeletal Health, Plastic/Burns, Spinal & Trauma (MSBPST)

The Board Chair welcomed Dr Andrew Ellis OAM, Clinical Director for the above network and Ms Anna Butcher, Service Development Manager to the Board meeting. The presentation was provided in the Board meeting pack and was **noted** and taken as read.

Dr Ellis OAM commenced his discussion by stating that this network is relatively new in its development, yet has outstanding clinical leaders and world renowned researchers who are part of this network and has achievements that are ground-breaking and recognised for their excellence. Further details were provided on the high number of patient episodes that this network undertakes and the broad range of services provided.

In summary, three strategic items were noted from Dr Ellis' discussion and for the Board's consideration:

1. The development of a MSBPST Centre of Excellence in clinical and research areas.
2. The need for comprehensive funding for all spinal conditions, not just trauma.
3. Promote Royal North Shore Hospital (RNSH) as the State's premier trauma service.

The Board Chair stated the Board's support in principle for the above strategic items and ambitions, goals and vision for this network. The Board requested the Chief Executive (CE) to take action as appropriate. Dr Ellis will be invited to present a strategic plan for this network at a future Board meeting, post discussions with the CE.

## **1.2 Integrated Care**

The Board Chair welcomed Mr Martyn Brookes, Project Manager, Integration & System Innovation, NSLHD to the Board meeting. The presentation was provided in the Board meeting pack and was **noted** and taken as read.

Mr Brookes spoke of the major challenges to achieve full integrated care within NSLHD, noting the need for system enablers to provide the analytical data and ICT integration.

The CE noted that NSLHD's work in Integrated Care / Integrated Systems is highly regarded. Also mentioned was the work currently being undertaken in the area of governance to ensure roles and responsibilities are well defined.

The Board noted the possible benefits of partnering or co-investing with other LHDs, the importance of constructive engagement with stakeholders including the Sydney North Primary Health Network and private insurers, the significant role of eHealth and the possible benefits of having a focus on user experience, and having a Chief Partnership Officer.

## **1.3 Mona Vale Hospital – future services post 2018**

The presentation was provided in the Board meeting pack and was **noted** and was taken as read. The CE advised the Board that meetings have been ongoing with all the stakeholders including Friends of Palliative Care Inc. regarding the design work for the Palliative Care services to be provided at Mona Vale Hospital. It was noted that there is strong community support for this service.

The CE and the Board Chair spoke of the engagement with the community and the Member for Pittwater on the future of Mona Vale Hospital. Ongoing communication with the community will be a priority to keep the public aware of the services that will be provided post the redevelopment of Mona Vale Hospital.

The financial modelling for Mona Vale Hospital post the opening of Northern Beaches Hospital is ongoing with the Finance, Risk and Performance Committee (FRAP Committee).

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## **2. Patient Story**

### **2.1 Patient Story from Manly Hospital**

The referral prepared by the General Manager, Northern Beaches Health Service was **noted**. The Board was pleased with the information provided and the patient outcome.

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### 3. Attendance / Apologies / Quorum / Conflict of Interest

Attendance and apologies were noted.

The Board Chair requested all attendees to declare any conflicts of interest at this meeting. There were no conflicts of interests declared.

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### 4. Confirmation of Minutes

#### 4.1 NSLHD Board meeting held 20 March 2018

Minutes of the above meeting were **confirmed** as a true and accurate record of the meeting.

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### 5. Ongoing Business (in conjunction with Action List)

The Board **noted** the Action List.

There was discussion on the Ryde Master Plan. The CE advised that this will be incorporated within the review and revision of the NSLHD Clinical Services Plan. This updated plan is scheduled to be presented to the Board later this year.

#### 5.1 Dexus – Proposed North Shore Health Hub

The referral and report was **noted** by the Board. The CE updated the Board on the complexity of the proposal which includes access and traffic flow. Further details on the proposed services will be provided to the Board as and when updates are received. The Board noted the importance of requiring all relevant information before any decision is made by NSLHD, including in response to requests for consents and approvals.

#### 5.2 Pedestrian Access at RNSH

The CE gave a verbal update on the progress to provide improved pedestrian access to RNSH. It was advised that a meeting with Willoughby Council to consider options in relation to the current shuttle service is being arranged. Further details will be provided to the Board on this initiative, the improved signage from St Leonards train station and the role of way-finding volunteers when updates are received. The Board noted the importance and urgency of achieving material outcomes in relation to these matters.

#### 5.3 Asset Strategic Plan – update

The referral and report was **noted** by the Board and taken as read. The CE advised the Board will be regularly updated on the status and progress of this plan.

#### 5.4 National Disability Insurance Scheme (NDIS)

The Board **noted** the tabled document prepared by the NDIS Transition Manager. The Board Chair updated the Board on the discussion at the Council of Board Chairs regarding this matter. The CE reaffirmed the direction of NSLHD to remain, at least for the foreseeable future, a passive provider of services which was endorsed by the Board at the April Board meeting.

There was discussion regarding NSLHD's role and support for more complex patients to access adequate service provision. There was further discussion regarding clinically complex patients who have multiple care teams and the ongoing commitment of NSLHD to appropriately manage these patients.

The Board noted the need for appropriate NSLHD data to be available to the Board.

### **5.5 Junior Medical Officers (JMO) Welfare at Northern Beaches Hospital (NBH)**

The Board noted the tabled document prepared by the Acting Director Workforce & Culture. The Board Chair advised the Board that this matter has been scheduled as an agenda item at the NBH meeting to be held 18 April 2018. The matters that will be discussed will cover: welfare, training, grievance processes and ensuring that the JMOs receive parity of experience at all NSLHD facilities.

A committee has been formed; chaired by Dr Nespolon, Board member covering JMO Welfare and to ensure that best practice is transferred across all NSLHD facilities.

### **5.6 Strategic Plans - Overview**

The information provided in the referral was noted. The Board expressed its satisfaction with the current status of the Strategic Plans and related Directorate Plans.

There was discussion on the role of the Board to approve relevant plans.

The Board noted the importance of any schematic diagrams including the one on the Clinical Services Plan to identify feedback and continuous improvement loops.

The Board will continue to receive regular updates on the progression to completion as well as the review of established plans.

### **5.7 Risk Reporting & Tracking**

The referral prepared by the Directors of the following directorates: Workforce, Clinical Governance and Internal Audit was **noted** by the Board. The Board Chair commented on the Board committees that will review matters concerning; Bullying and Harassment, Fraud, Whistleblower, Safety & Quality and Sentinel Events. Any matters of concern by these committees will be escalated to the Board for their information and direction.

The Board Chair advised that NSW Health is moving to an improved State system of grievance reporting and staff support. The CE advised that NSLHD will embrace the *Speaking Up for Safety* model (Cognitive Institute) which will include an anonymous method for clinicians to raise concerns about the conduct and behaviour of staff.

### **5.8 NSLHD Risk Report – Medical Imaging**

The referral prepared by the General Manager, Hornsby Ku-ring-gai Health Service was **noted** and taken as read.

### **5.9 NSLHD Partnership / Collaboration Program**

The CE advised the Board that the formation of the NSLHD Innovation Committee is still progressing and it was suggested that Mr Hollis co-chairs this committee with a clinician. In light of this development, the Research, Innovation, Teaching and Education committee has been suspended. The Board **approved** the above developments.

### **5.10 NSLHD Complaints Analysis**

The Board **noted** the referral provided by the Director Clinical Governance. Professor Mary Chiarella, Chair of Health Care Quality Committee (HCQC) advised that this report will be tabled in future for the information of and discussion by HCQC, but was pleased with the improvements as noted in the report.

### **5.11 Progress of HCQC and Safety II**

The Chair of HCQC advised the Board that a workshop meeting will be held on 24 April 2018 where the Terms of Reference and identification of KPIs will be identified. Professor Chiarella stated that the work and priorities of this committee will in part be informed by the answers to the questionnaire distributed to Executives and leaders in NSLHD.

### **5.12 Action Items - Clarification and discussion:**

The Board provided clarification on the following matter from the Action List and agreed with the referral note provided; refer to Item 5.15.

### **5.13 ICT Shared Services**

#### **NSLHD Web Redesign Project**

The CE advised the Board that engagement with FutureGov has commenced with the identification of resourcing for this project. Board members were invited to participate in this project (as one of many stakeholders) and to advise the CE of their interest. As the project develops, the CE will update the Board as and when progress is achieved.

### **5.14 Review of NSLHD Committees**

The CE advised that the review of NSLHD Committees is ongoing.

### **5.15 Review of Delegations**

The Board **noted** and agreed with items listed in the referral note that require Board approval or notification.

The Board supported the suggestion by the CE to include an introductory page within the NSLHD Delegations Manual listing those items requiring Board approval or notification.

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## **6. Standing Business**

### **6.1 Board Chair Report**

The Board Chair updated the Board on the following:

- The Board Chair has met with local representatives regarding the new Northern Beaches and Ryde Hospitals respectively. Discussions are ongoing regarding IM&TD interface with Healthscope. The Board Chair and the CE have undertaken a reconnaissance of the road traffic surrounding the Northern Beaches Hospital. There are ongoing discussions with the Ministry of Health regarding the roadworks.
- The Board Chair sought advice in relation to Patient Journey Boards located within hospital wards.
- The Board Chair has met with the Vice Chancellor of University of Technology Sydney (UTS) regarding the North Sydney Academic Health Science Centre (NSAHSC). The CE and the Board Chair will be meeting with UTS to discuss deeper involvement by NSLHD with UTS.

- The Board Chair advised that:
  - The Kolling Foundation draft documentation has been finalised and will be forwarded to the Kolling Foundation for their approval. Recruitment is progressing for the Chief Executive Officer for the Kolling Foundation.
  - Monthly meetings of the Interim Management Committee of the Kolling Institute continue. In addition, a meeting with Sydney University is planned to discuss progressing documentation. Further work is being planned to improve the amenity of the Kolling Building.
  - The Board Chair in conjunction with Ernest & Young (EY) is drafting a paper on empathy training. This paper will be provided to HCQC for their review.

#### **6.1.1 Appointment of Professor Mark Molloy**

The tabled document was **noted** and was taken as read. Professor Molloy will be the inaugural Lawrence Penn Chair in Bowel Cancer Research at the Kolling Institute.

#### **6.1.2 Board Chairs Forum - agenda**

The tabled documents was **noted** and distributed to the Board via separate email.

#### **6.1.3 Hospital Avoidance Initiatives – Sydney North Primary Health Network (SNPHN)**

The tabled documents were provided to the Board for their information and **noted**.

#### **6.1.4 Recycling Initiative – RNSH**

The pleasing news article regarding recycling at RNSH was **noted**.

#### **6.1.5 Survey participation by NSLHD Board**

The information regarding the invitation by the John Curtin Institute of Public Policy to participate in a survey regarding the devolution of governance in the Australian Health System was **noted**.

### **6.2 Chief Executive Report**

The Board **noted** the report and was taken as read.

The Board Chair advised that commencing May 2018, the CE Report will be published along with the endorsed minutes on the NSLHD website. The CE will publicise the practice of public disclosure of the CE's Report to NSLHD staff.

The CE made mention of the following points:

- The NSLHD remains on Performance Level 0.
- Positive improvements are being made in Planned Surgery and in Emergency Treatment Performance (ETP).
- Negotiations are continuing with the Ministry of Health regarding the NSLHD FY18/19 budget.

#### **6.2.1 Health Legislation Amendment**

The letter from the Deputy Secretary, People, Culture and Governance, Ministry of Health covering the changes in the *Health Services Act* was **noted**. The Board discussed the changes to the interaction between the Health Secretary and board functions.

### **6.3 NSLHD Board – Finance Risk and Performance Committee Report**

The Board **noted** the report for the month of February 2018. The Board Chair opened the discussion with a legacy item that has recently been identified that will have an adverse impact on the FY17/18 financial position.

The Director Finance updated the Board that this item was for services provided in FY16/17 and the Ministry of Health has been kept abreast of this matter. The Director Finance is currently undertaking a review of finance procedures and processes to be satisfied that this is a one off.

The Director Finance updated the Board on the March performance. The Net Cost of Service was \$1m unfavourable resulting in year to date result of \$2.3m unfavourable. The drivers of this impact are due to salaries and wages across Royal North Shore and Hornsby Hospitals and reduced revenue generation from Manly Hospital. The Director Finance is working on the Financial Turnaround Plan to deliver a balanced budget.

The Ministry of Health has been kept up to date on the current financial year end projections.

The Board Chair advised the Board to be open to appropriate opportunities and to bring forward for consideration by the CE of any efficiency or cost effective programs.

### **6.3.1 Northern Beaches Hospital Financial Modelling**

The Director Finance advised that NBH Financial Modelling is progressing and further reports will be provided to the FRAP Committee.

## **6.4 NSLHD Risk Report**

The Board **noted** the referral prepared by the NSLHD Chief Risk Officer. The Board Chair and CE mentioned the ongoing work by certain Board members of a Risk Working Group, addressing both facilities and services.

### **6.4.1 Top Strategic Risks**

### **6.4.2 NSW Health Risk Matrix**

### **6.4.3 Top 10 Risks by Site / Service**

### **6.4.4 Enterprise Risk Management Plan 2017-2019**

The Board **noted** the above tabled reports.

## **6.5 Ministry of Health (MoH) Performance summary of all LHDs**

The report from the Ministry of Health was not received in time for tabling at this meeting. The CE commented that NSLHD is performing well against most Key Performance Indicators.

### **6.5.1 MoH February 2018 Performance update letter**

The Board **noted** the above letter from the Ministry. There was acknowledgment in the letter of the Own Resource Revenue deterioration which was covered within the FRAP commentary.

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## **7. New Business**

### **7.1 Updated Financial Performance Reporting**

The draft Finance, Risk and Performance template was circulated out of session for the Board's information. The Board Chair advised that advantages of this reporting template include accompanying commentary and action plans and performance reporting broken down by site / service.

The Board commented on the granular nature of the reports to the Board and the move towards a more strategic and governance role of the Board. It was agreed that the FRAP Committee will undertake more granular investigation of performance reporting but the full report will be provided to the Board should they wish to undertake an in-depth review.

## **7.2 Correspondence from Minister Hunt**

This letter was distributed out of session to the Board. The correspondence outlined the funding by the Commonwealth to public hospitals in New South Wales. The Board **noted** the contents.

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## **8. NSLHD Committee Reports**

### **8.1 Board Audit & Risk Committee (BARC)**

The Board **noted** the endorsed December 2017 minutes. The Board confirmed the Chair of BARC as Mr John Hunter, Independent Member and the secretariat as the delegate of the Director Internal Audit NSLHD.

### **8.2 NSLHD Clinical Council**

The Board **noted** the endorsed February 2018 and draft March 2018 minutes. The Board **endorsed** the nomination of Dr Michelle Mulligan as Board representation to the Clinical Council.

### **8.3 Consumer, Community, Carer & Communication (4Cs) Committee**

Nil available.

The Board confirmed the Chair of 4Cs as Dr Dianne Ball, Board member and the secretariat as the Clinical Quality Manager or his/her delegate.

### **8.4 Finance, Risk and Performance Committee**

The Board **noted** the draft March 2018 minutes. The Board confirmed the Chair of FRAP as Ms Annette Schmiede, Board member and the secretariat as the delegate of the Director Finance NSLHD.

### **8.5 Health Care Quality Committee (HCQC)**

Nil available. The Board confirmed the Chair of HCQC as Professor Mary Chiarella, Board member and the secretariat as the delegate of the CE.

### **8.6 Medical Staff Executive Council**

The Board **noted** the endorsed November 2017 minutes.

### **8.7 NSLHD & Sydney North Primary Health Network Executive Council**

Nil available.

The Board Chair advised a NSLHD Executive committee covering innovation is currently being formed.

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## **9. Matters without Notice**

### **Demolition of Buildings – RNSH Southern Campus**

The CE updated the Board on the completion of the new Child Care facilities and the access via Eileen Street. The staff and parents are pleased with the new facilities and the move will occur over a weekend to minimise disruption.

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## **10. Date, Time and Venue for Next Meeting**

Tuesday 15 May 2018

4:30pm John Newlinds Education Centre, Level 1, Mona Vale Hospital

**Meeting Closed:** 7:30pm

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### **CERTIFIED A CORRECT RECORD**

**By Mr Trevor Danos AM, Chair**

**On 15 May 2018**