

MINUTES

Present:

Professor Carol Pollock	Chair, Board
Ms Ann Brassil	Board Member
Ms Diane Flecknoe-Brown	Board Member
Dr Michele Franks	Board Member
Mr Andrew Goodsall	Board Member
Ms Judith Hopwood	Board Member
Ms Betty Johnson AO	Board Member
Professor Sue Kurrle	Board Member
Mr Don Marples	Board Member
Professor Annette Schmiede	Board Member
Mr Peter Young	Board Member

In attendance:

Adj. Associate Professor Vicki Taylor	Chief Executive
Dr Andrew Montague	Director Operations
Mr Lee Gregory	Director Finance
Ms Maree Hynes	Director OES
Ms Judith Hogan-Wright	Secretariat

Apologies:

Mr Anthony Hollis	Board Member
Dr Adam Rehak	Chair Medical Staff Executive Council

1. Presentations

1.1 Peak Community Participation Committee

Ms Betty Johnson AO, Board Member and Chair of Peak Community Participation Council (PCPC) presented an overview of the work, achievements and focus of the PCPC.

The presentation was centred on the NSLHD Strategic Plan p.5 *Leaders in Healthcare ...Partners in Community Wellbeing* and the work undertaken by PCPC over the last 12 months. The Chair of the PCPC outlined the impact and benefits of the six forums held over the last 12 months and relayed to the Chief Executive the success of the Carer Support forum. It was also noted the use of street theatre to educate and demonstrate to new staff the preferred positive relationship between a health service provider and consumer.

One of the emphases now and in the future by the PCPC is improving consumer health literacy across all levels of the community and in particular culturally and linguistically diverse communities.

In conclusion the Chair PCPC outlined the PCPC focus in 2014 and relayed to the committee the benefits of community forums and gave examples of hidden health issues identified at these forums. The committee agreed that a report should be forwarded to the Board members and seek their input and comments.

The Board Chair recommended that PCPC include in the community forums Advanced Care Directives and Organ Donations. The committee thanked the Chair PCPC for the presentation.

The Board **endorsed** the PCPC Terms of Reference.

Action: The Chair PCPC to distribute the report to the committee.

1.2 VMoney

Presented by Ms Eleonore Fuchter, VMoney Project Manager, HealthShare NSW and assisted at question time by Ms Brianna Gerrie, Manager, Junior & Senior Medical Staff Units, NSLHD.

HealthShare NSW processes Visiting Medical Officer (VMO) payments on behalf of NSW Health Local Health Districts (LHDs) and health agencies using a system called VMoney. Previously this system was paper based. A new Web based system VMoney has been implemented which automates and streamlines VMO payment processes.

VMoney a web-based time and charge entry application which requires VMOs or their delegates to log the hours and duties undertaken by them in order to claim payment and use workflow to route the claim information to the relevant departments for approval and processing. NSLHD will cease paper based payment system in September/October 2014. The initial take up and training of this system has been well received noting that there are 500+ VMOs working within NSLHD.

The Project Manager outlined the findings from the Auditor General's report and the potential savings by adopting the electronic VMoney process. The benefits to NSW Health, NSLHD and VMOs were outlined in detail.

Questions were taken and answered regarding the workings, checking and escalation process and the ability to produce reports from this system.

The Director OESI noted that this system has the capability to identify further efficiencies. The committee recommended that the findings and feedback from VMOs be provided to Australian Medical Association (AMA) to close the loop after AMA's initial input at the commencement of this project.

The Chair thanked Ms Eleonore Fuchter and Ms Brianna Gerrie for this presentation and the information provided.

Action: VMoney will be tabled for the November 2014 meeting including reporting and feedback from stakeholders.

2. Patient Story

Presented by Adj. Associate Professor Vicki Taylor

The story focused on the Easter weekend and the impact on staff and management to various incidents and in particular a complex mental health patient. The Easter weekend was busy with other mental health patients and was compounded by the untimely death of a well-known staff member who presented at Hornsby Hospital.

The Chief Executive outlined the amount of time and resources given to the complex mental health patient and the impact on staff involved.

The Board thanked the Chief Executive for such a grounding patient story.

3. Attendance / Apologies / Quorum / Conflict of Interest

Attendance and apologies were noted.

Mr Andrew Goodsall declared his interest in the Northern Beach Public Private Partnership (NBPPP). Mr Goodsall is Managing Director, Healthcare Analyst of UBS Australia and therefore there is perceived conflict of interest connecting the investment bank division of UBS currently advising a bidder in the project and therefore Mr Goodsall asked to be excluded from any decision making process in regard to NBPPP.

4. Confirmation of Minutes

The Board accepted the minutes of the meetings held on 4 March 2014 and 18 March 2014 as a true and accurate record of these meetings. The minutes for the meeting held 1 April 2014 was referred for further input covering the audit timetable on page 1.

5. Ongoing Business (in conjunction with Action List)

5.1 Chief Executive Summary & Presentation

The Board **noted** the Chief Executive's report and presentation and listed below in depth items of interest.

The Nursing Hours Per Patient Day (NHPPD) tool has been developed in house and NSLHD will commercialise this electronic tool. The NHPPD is already providing benefits with further efficiencies to be achieved.

Performance Review of Improvement and Development for Employees (PRIDE) has been launched. This new performance development system is in anticipation and preparation for the Academic Health Science Centre and to clearly articulate to new employees the expectations of the NSLHD.

The Board suggested that unallocated donations be considered and directed to leadership training to align with the Academic Health Science Centre project. The Chief Executive will investigate this proposal.

Manly Hospital has again achieved high NEAT and NEST targets and with the planned reconfiguration of wards and beds will provide both financial and clinical efficiencies.

The Director Operation detailed the findings from the staff survey with a report being compiled. NSLHD key stakeholders will participate in the forums scheduled for June to finalise the network restructure. Work is progressing with the Integrated Care model with consultation and engagement of all parties and to note that the collection of substantial data has delayed progress.

The Chief Executive added that the Northern Beaches Redevelopment Request for Proposal closed 5 May and two submissions have been received to date. The review and evaluation process will commence.

5.2 Finance and Performance Report

The Board **NOTED** the Finance and Performance Report year to date 31 March 2014.

The Director Finance commented on the above report and the following items are of note:

Page 1: The budget deficit remains on track for a result equivalent or better than the revised agreed deficit.

Page 3: The LHD has increased its forecast for year-end activity volumes for Emergency Department and Acute Inpatient NWAU.

The Board was advised that the Ministry of Health (MoH) has acknowledged the additional unplanned activity volumes and has indicated they will be purchasing additional activity from the LHD prior to the financial year end.

In addition advice was provided on the activity target negotiations for 2014/15. The MoH has also provided for the current activity volumes and that the purchasing offer and pricing will be available at the next Board meeting.

Page 4: Graph on Budget Variance and Projection reflects the Activity Year to Date graph listed below indicating a 3% rise in Acute Inpatients and 3.7% in ED.

Page 5: NEAT & NEST performance was commented on by the Director Operations stating more work is to be undertaken to maintain improvement.

Page 6: The issue of the cash swap with MoH regarding cash assistance and salary packaging revenue has now been resolved.

Page 7: FTE table and data is complex. The Board requested a simplified graph to be provided via the Finance and Performance Committee.

The Director Finance added that the April's payroll is appearing stable and there is cautious optimism that the April result will be a positive one relative to the year as a whole.

Action: The Director Finance to simplify the FTE Table and data via the Finance and Performance Committee

5.3 OESI Executive Report

The Board **noted** the OESI Report for period ending March 2014.

The Director OESI indicated to the Board the improvement from last month's end of year forecast. Additional cash has been received due to the recalculation of the Motor Accident Authority (MAA) actuals by the MoH.

The Director OESI commented on the following items:

Revenue has improved but it is not anticipated to continue in the new financial year.

Labour savings are promising in particular around nursing expenses at Royal North Shore Hospital.

Forecast calculations will remain based on a formula at this point in time. 30% of targets for quarter 4 were moved into the month of March to ease the target projection.

The OESI team is working towards in depth investigation of the increase in pathology above the increase in activity levels with the result of reports available to the individual departments. The OESI Team is working with the Directors of Medical Services and key stakeholders on the process and reporting is anticipated to be complete by end of May / early June.

Key targets areas for the next financial year will be pathology and imaging incorporating both change management process and IT modifications to affect efficiencies.

The Director OESI is comfortable with the deficit projection target but will not remove the focus on continual improvement.

The Board **noted** the OESI Program - April Estimated Savings – Q4 Focus report.

This report was generated to indicate the progress of achieving additional savings for Q4.

The Director OESI covered the above report and noted that the Enhanced Labour Management indicated at TBA is due to an IM&T software issue.

The positive results in discretionary spend is due to the lifting the approver to a higher senior management.

Overall the Director OESI is comfortable with the progress of the Q4 focus.

The issue of resourcing to enable achievement of this financial year's targets and in particular the buffer for exceptional circumstances were raised. Although it is unsustainable, it is necessary to meet the MoH's targets. The Chair commented that an important issue going forward is aligning accountability to the budget. The Chief Executive added that restructuring, accountability and cultural change within the organisation will bring forth efficiencies. This will drive longer term sustainability.

5.4 Joint Fundraising Foundation

The Chair tabled the latest draft from NSLHD legal counsel. To note the wording change from facility to network based to reflect the NSLHD restructure. The Chair will seek assurances from legal counsel the contract complies with regulations and policies appropriate to NSLHD.

Actions:

1. The Chair will distribute the draft to the Board members for review.
2. The Chair will seek assurances from counsel to ensure contract is compliant.

6. Capital Planning Updates

Progress update proved by the Chief Executive

6.1 Hornsby Ku-ring-gai Hospital

The Board **noted** the report.

The Chief Executive advised the Board of the risk for the NSLHD should the redevelopment be completed ahead of schedule. This will impact on funding of services and recruitment of staff.

6.2 Royal North Shore Developments / Master Plan

The Board **noted** the report.

The CSB remains a challenge and the risk being the timing of the opening of this building and therefore a risk matrix is being formulated.

The retail provision was raised and the Chief Executive advised this is covered under the Infrashore agreement.

6.3 Northern Beaches Redevelopment – Frenchs Forest update

The Board **noted** the report.

7. New Business

7.1 OESI Review of Child Care Services in NSLHD

The referral was **noted** by the Board

The Operations Director advised that a working group was set up in late 2013 to review child care services across the District. In summary 4 options were presented to the Board for their consideration. In consultation with the OESI Team and with full and in depth

investigation, comparison of services provide to other LHDs and taking into account MoH policies the preferred option is to outsource this service.

The Board agreed to proceed with the above recommendation to investigate outsourcing Child Care Services at NSLHD.

Action: Director Operations to proceed with above recommendation to investigate outsourcing Child Care Service provider.

8. Standing Agenda Items

8.2 NSLHD Committee Minutes

8.1.1 Health Care Quality Committee

The draft minutes from the meeting held 13 March 2014 were **noted** by the Board.

8.1.2 Medical and Dental Appointments Advisory Committee (MDAAC)

The endorsed minutes from the meeting held 5 March 2014 were **noted** by the Board.

8.1.3 Finance and Performance Committee

The endorsed minutes from the meeting held 25 February 2014 were **noted** by the Board.
The draft minutes from the meeting held 25 March 2014 were **noted** by the Board.

8.1.4 LHD Clinical Council

The draft minutes from the meeting held 7 April 2014 were **noted** by the Board.

8.1.5 Medical Staff Executive Council (MSEC)

Nil update. Next meeting 19 May 2014.

8.1.6 Peak Community Participation Council (PCPC)

The draft minutes from the meeting held 2 April 2014 were **noted** by the Board.

8.1.7 NSLHD and Medicare Locals Consultative Council

The endorsed minutes from the meeting held 11 February 2014 were **noted** by the Board.

8.2.8 Capital Asset Planning Committee

The endorsed minutes from the meeting held 16 February 2014 were **noted** by the Board.

8.2.9 Integrated Risk Management Advisory Committee

The draft minutes from the meeting held 2 April 2014 were **noted** by the Board.

8.2.10 Audit and Risk Management Committee

The draft minutes from the meeting held 12 March 2014 were **noted** by the Board.

8.2.11 Education Sub-committee

The endorsed minutes from the meetings held 13 February and 11 March 2014 were **noted** by the Board.

8.2.12 Research and Innovation Sub-committee

The endorsed minutes from the meeting held 21 January 2014 were **noted** by the Board.
The draft minutes from the meeting held 18 March 2014 were **noted** by the Board.

Action: Review of Mental Health sites by Health Infrastructure by Anthony Manning.
(Taken from Capital Asset Planning Committee minutes September 2013)

9. New business without notice

Action: Mr Peter Young to facilitate a Board discussion on healthcare performance KPIs and Benchmarks following his consultations with the NSW Health Ministers' Advisory Council in Q4 2014.

10. Venue, date and time for next meeting

Executive Boardroom, Building 51, Royal North Shore Hospital
Tuesday 2 June 2014 commencing 3:00pm

Meeting Closed: 7:15pm

CERTIFIED A CORRECT RECORD

By Professor Carol Pollock, Board Chair
On 4 June, 2014