

MINUTES

Present:

Professor Carol Pollock	Chair, Board
Adjunct Professor Ann Brassil	Board Member
Ms Diane Flecknoe-Brown	Board Member
Mr Andrew Goodsall	Board Member
Ms Beata Kuchcinska	Board Member
Mr Peter Young	Board Member
Mr Don Marples	Board Member
Mr Anthony Hollis	Board Member
Adj. Associate Professor Annette Schmiede	Board Member
Dr Dianne Ball	Board Member (via telephone)
Ms Betty Johnson AO	Board Member
Dr Michele Franks	Board Member

In attendance:

Dr George Lau	Chair Medical Staff Executive Council
Dr Andrew Montague	A/Chief Executive
Mr Lee Gregory	A/Executive Director Operations NSRHS & NSLHD
Ms Jen Smithwick	A/Director Finance & Corporate Services
Ms Carol Parker	Secretariat

Apologies:

Adj. Associate Professor Vicki Taylor	Chief Executive, NSLHD
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1. 2012 – 2016 Strategic Plan Evaluation and Planning Process 2017 to 2022

Presentation by Mr Bob McDonald (Consultant) on the process to develop the 2017-2022 NSLHD Strategic Plan.

Mr McDonald expanded on the key issues regarding consultation, opportunities, risks and workshops.

There was discussion on the outcomes and how they would be achieved. It was agreed that there needs to be agreement on the terminology used in the plan. Mr McDonald stressed that it is critical that there is clarity around where the Strategic Plan sits in terms of other plans at a State and local level.

A communication plan for staff will be developed jointly with the LHD communications team to advise broadly on the process and to ensure that all staff will have the opportunity to have input. Board members will be interviewed. Mr McDonald advised that at least 60 staff, community members and strategic partners will be individually consulted through a variety of mechanisms. There may be the opportunity to provide staff with a draft strategy map, as people prefer to have something to look at prior to commenting. Strategy development workshops will be organised, then a draft strategy plan and map will be considered by the Board. An operational plan will then need to be developed by the LHD Executive to deliver on the strategy.

The Board would like confidence that if any major issues are raised in the consultation process that they be addressed immediately by reporting back to the NSLHD Executive and/or Board as soon as it is realised rather than wait for the end of the consultation process.

Action: Detail of workshops etc. to be added to Board Calendar when available. Dr Montague and David Miles to meet with Mr McDonald to sort out details. Board members to email Professor Pollock if interested in being part of the governance process in developing the plan.

2. Staff Feedback – Response to Memo re Anniversary of Apology to Stolen Generation

Dr Montague relayed to the Board the message received from a staff member in response to the memo sent to staff regarding the Anniversary of Apology to the Stolen Generation. The staff member thanked Dr Montague for acknowledging the anniversary, particularly as he and members of his family had been involved, and indeed, were in fact children of the stolen generation.

Action: Dr Montague to ask staff member if he wishes the letter to be published in the newsletter.

3. Attendance / Apologies / Quorum / Conflict of Interest

Attendance and apologies were noted.

Conflict of Interest: Nil

4. Confirmation of Minutes

Minutes of the meeting held 2 February 2016 were confirmed as a correct record of that meeting.

5. Ongoing Business (in conjunction with Action List)

5.1 Macquarie Hospital Communication with staff – update item from 5.2 December Meeting

Focus groups have been facilitated by an independent consultant who were able to raise issues, which will then be workshopped. Staff were advised that they could also comment via survey on paper or on line also. The process is a robust one, and the feedback has been extremely open, with staff feeling that they can provide feedback. This process has brought some issues to the fore, which gives the LHD the opportunity to find a resolution to these issues.

The independent consultant will be addressing the Board in May 2016 to advise on progress.

5.2 End of year Budget Position

At present it is forecast that there will be a nil net cost of services at end of financial year 2015/16. The TMF hindsight adjustment has been notified which will provide extra funding for the LHD. A number of projects have been identified which can be invested in to lead to sustainable improvements in the future. These include: talent development, violence prevention, additional investment in repairs and maintenance, reallocation to the capital budget, surgical wait list reduction and setting up a delirium prevention unit at both Mona Vale Hospital and Hornsby Hospital.

Negotiations are also underway with the MoH for agreement to move funding into capital projects.

The Board congratulated the LHD Executive on the work done to get to this point.

There was discussion regarding whether to consider a deficit budget for this year with a recommendation from the Executive that it should be balanced.

The Board endorsed the strategy proposed by the Executive.

6. Standing Business

6.1 A/Chief Executive Summary

The Board **noted** the report.

Invitations for the formal opening of the Mona Vale Community Centre will be provided to the Board.

The Board noted the successes by Aboriginal staff, this is a very good milestone and the Board were pleased to be advised of the progress.

6.2 Finance and Performance Report

The Board **noted** the Financial Summary for January 2016.

The LHDs result for the month was a budget surplus, this was primarily driven by favourability in RMR, patient fees and grants and other revenue. Other user charges have been impacted by a decrease in child care fees due to the permanent closure of one of the child care units.

FTE decreased by 222 FTE as a result of leave planning, including strategies in place to reduce excess annual leave.

Variance for acute inpatients is below target. Strategies are underway to ensure that actual separations will align to targets by the end of the financial year. ED presentations were 7% above target.

The Board was advised of the progress in regard to VMO's gap payments, this will start to be phased out from the Northern Beaches and Hornsby Hospital, specifically in surgery.

Hornsby Hospital figures have deteriorated to what was projected. This occurred due mainly to the VMO gap payments and the optimistic revenue budget. Private patient revenues are not being realised and the elective rooms are not being used as predicted. Reconfiguration of wards has occurred to optimise the model of care. Next year's budget will be realigned.

6.3 OESI Report (s)

The Board **noted** the January 2016 report and congratulated Ms Hynes and the team on the success of the OESI program.

7. New Business

7.1 PCCPC Revised Plan

Ms Johnson advised the Board that the process of deciding on priorities has been worthwhile and has seen a very good output.

The recent accreditation at RNSH received praise regarding the courses that had been held in relation to consumer engagement.

Some suggestions to be included in the Plan would be to have responsibilities allocated and operational objectives allocated. These suggestions have been raised with the Director Clinical Governance.

There was discussion on how to measure the success of the plan (KPIs and milestones), and how to include in the strategic plan. The measures/outcomes should be reported back to the

Board. Funding hasn't been costed at this time, with most of the items not having a financial cost over and above existing staff time. It was noted that consumer involvement in the Northern Beaches was not included in the document.

7.2 2015/2016 Annual Internal Audit Plan

The Board **noted** the Plan. There are a few issues from last year to be included and the PPP will also be included in the Plan. There are always items that can be added to the plan in addition to any usual audits that are progressed.

There was discussion on whether clinical audits and should be included in the Plan. It was explained that the Healthcare Quality Committee oversees all clinical audits and outcomes across the district.

Action: Dr Montague to follow up with the Director of Internal Audit on the audit of the Kolling Foundation.

7.3 Update Private Public Partnership

Dr Montague updated the Board on the process up to date. The recent meeting with AMP Capital was positive. Dr Montague updated the Board on the progress of the soft FM services market testing.

8. NSLHD Committee Minutes

8.1 Health Care Quality Committee

Meeting of 11 February 2016 – will be presented to April meeting

8.2 Medical and Dental Appointments Advisory Committee (MDAAC)

The endorsed minutes of December 2015 were **noted** by the Board.

8.3 Finance and Performance Committee

The endorsed minutes of November 2015 were **noted** by the Board.

8.4 NSLHD Clinical Council

The endorsed minutes of December 2015 were **noted** by the Board.

8.5 Medical Staff Executive Council (MSEC)

The Draft minutes of February 2016 were **noted** by the Board

8.6 Integrated Risk Management Advisory Committee (IRMAC)

The endorsed minutes December 2015 and draft minutes February 2016 were **noted** by the Board.

8.7 Capital Asset Planning Committee

Next meeting March 2016

8.8 Audit and Risk Management Committee

December minutes not approved to date

8.9 Aboriginal Health Advisory Committee

Nil, no longer reporting to the Board

8.10 Peak Community and Consumer Participation Council (PCCPC)

The endorsed minutes of November 2015 were **noted** by the Board

8.11 Education Sub-committee

The endorsed minutes of December 2015 were **noted** by the Board.

Minutes are wrong in terms of the 'separate proposal' – note back to chair.

9. Correspondence

9.1 Update Annual Board Calendar of Events

The Board **noted** the Calendar, the Annual Public Meeting dates will be arranged for November 2016 and calendar will be updated when date is confirmed.

9.2 Action Plan Security Roundtable

Dr Montague updated the Board on the planned upcoming security audit to occur in emergency departments. NSLHD will be undergoing a desktop exercise in sites that aren't audited by the Ministry of Health

9.3 Sounding Board Response to MHD&A Issue

As mentioned under 5.1.

10. Assignment of Common Seal Document

The Board **noted** the report.

11. Other business

Nil

Meeting Closed: 7pm

12. Date, Time & Venue for Next Meeting

5 April, Building 51, Executive Office, RNSH.

CERTIFIED A CORRECT RECORD

**By Professor Carol Pollock, Chair
On 5 May 2016**