

NSLHD Board

MEETING DETAILS

Date: Tuesday 20 February 2018 commencing 4:30pm

Venue: Boardroom, Executive Unit, Douglas Building, Royal North Shore Hospital (RNSH) campus

Present:

Ms Annette Schmiede	Board Member – Acting Board Chair
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
Mr Don Marples	Board Member
Dr Harry Nespolon	Board Member
Dr Michelle Mulligan	Board Member
Mr Keith Skinner	Board Member – via teleconference

In attendance:

Ms Deb Willcox	Chief Executive NSLHD
Ms Jacqueline Ferguson	Director Finance & Corporate Services NSLHD
Ms Elizabeth Curran	Executive Director Operations, NSRHS & NSLHD
Dr David Jollow	Chair, Medical Staff Executive Council
Ms Judith Hogan-Wright	Secretariat

Apologies:

Mr Trevor Danos AM	Board Chair
--------------------	-------------

AGENDA ITEMS

The Acting Board Chair Ms Annette Schmiede welcomed the Board members and attendees to the meeting.

The A/Board Chair welcomed Ms Jacqueline Ferguson to her first Board meeting as Director Finance & Corporate Services NSLHD.

Mr Keith Skinner's presentation was postponed until the March 2018 Board meeting.

1. Presentations

1.1 HealthShare NSW

The A/Board Chair welcomed Mr Daniel Hunter, Chief Executive (CE) and Ms Carmen Rechbauer, Executive Director, Clinical Support Services, HealthShare to the Board meeting.

Mr Hunter briefed the Board on the transition of soft services provided at Royal North Shore Hospital (RNSH) to HealthShare in 2016 and on the reform plan, highlighting service improvements and the efficiencies that are being achieved.

Also discussed was the market testing requirement for these services to occur in 2019-2020. HealthShare will provide service specifications prior to market testing to ensure optimum service provision and value for money for all stakeholders in the Public Private Partnership (PPP). HealthShare also offered their expertise should it be required during any negotiation period.

In the interim, HealthShare will continue to optimise service provision and refine efficiencies leading up to market testing.

Ms Rechbauer updated the Board on the work that has occurred on engagement and collaboration between staff, management and stakeholders which has resulted in operational efficiencies and improved staff satisfaction.

Following a question from a Board member regarding recycling opportunities within RNSH, it was agreed by the Board and approved by NSLHD CE that RNSH be a participant in HealthShare's pilot recycling program.

Action: HealthShare advised they were willing to share further financial analysis; the Director Finance & Corporate Services to contact HealthShare.

Action: An invitation was extended to HealthShare to present to the Finance, Risk and Performance (FRAP) Committee and Board in late 2018; Secretariat to arrange suitable date for the Board meeting.

The Board thanked Mr Hunter and Ms Rechbauer for the informative presentation.

1.2 Child, Youth & Family Network Update

A/Professor Elisabeth Murphy, Director Child, Youth & Family Network (CYFN) NSLHD was introduced to the Board members and attendees.

The presentation commenced with A/Professor Murphy stating that Child Health is not only important in the paediatric age group; it is important for a life-time of good health. Of interest to the Board was the relationship between early childhood development and the predictors of educational, emotional and health outcomes in later life.

The presentation included the structure of CY&FN, performance and achievements and the benefits of the strong relationships with other networks across NSLHD. A/Professor Murphy spoke of the key priorities and challenges and concluded seeking the Board's support with three issues: emphasising the importance of networks; consider the establishment of an Adolescent/Young People's Ward and support community based youth health service enhancements. The A/Board Chair referred these to the CE to progress. The Board understood the vital importance of CFH/PACH in the early years of life and its long term impact on a person's life.

Questions from the Board were covered in detail and in particular paediatric surgery and the CE provided background information on this statewide issue.

In summary the Board strongly supported the work undertaken by CY&FN and the positive impacts to the population of the District. The Board acknowledged that this was an exemplary service and recommended that service enhancements be provided to the CE for consideration in the Ministry of Health service agreement for 2018/19.

Action: The CE to identify the priorities of the CY&FN and progress service enhancement and to progress a clinical services plan for CY&FN.

2. Patient Story

2.1 Hand Hygiene: A Patient's Perspective

The referral prepared by Mr Matthew Noone, Site Operations Manager Ryde Hospital was **noted** by the Board. The CE added that this story highlighted the importance of listening to and heeding patients' comments. Also commented upon was the high level of hand hygiene compliance at Ryde Hospital. The Board recommended that this be included as a HCQC agenda item to promulgate this to the District.

Action 1: The CE to acknowledge to Mr Noone the Board's appreciation on the Hand Hygiene referral note.

Action 2: The Chair HCQC to include Hand Hygiene as an agenda item.

3. Attendance / Apologies / Quorum / Conflict of Interest

Attendance and apologies were noted.

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

4. Confirmation of Minutes

4.1 NSLHD Board meeting held 19 December 2017

4.2 NSLHD Board Enterprise Risk Management Workshop held 6 February 2018

Minutes of the above meetings were confirmed as a true and accurate record of these meetings.

5. Ongoing Business (in conjunction with Action List)

The Board agreed the action list be reviewed by the CE and full details will be provided on those matters that have been closed.

Action: The CE to provide an updated action list detailing status of all items and progress. CE to follow up on previous request by Adjunct Professor Ann Brassil on the management of Board actions and the process for approving and noting circular resolutions taken outside of scheduled Board meetings.

The Board discussed the delay in finalising the most current financial modelling for the Northern Beaches Hospital project and the impact on the NSLHD. The FRAP Committee has carriage of this action and has it as a high priority. The reasons for the delay were discussed at length by the Board.

Action: The CE to ensure the completion of the financial modelling receives the highest priority.

5.1 Work Health Safety (WHS) Due Diligence Report

The referral note and the quarterly report prepared by the A/Director Workforce & Culture were **noted** by the Board. This reporting is required by the MoH and quarterly updates will be tabled for the Board's information.

The CE provided additional information to the tabled document and commented that NSLHD has responded well to the mandatory undertakings and positive actions have occurred as a result. The Board discussed the rise in claims, the increase in assaults and requested further detail. The CE updated the Board on recent funding by the MoH that will fund safety coordinators for NSLHD.

Action: The CE to provide a breakdown on claims and incidents and what work has been commissioned to address staff safety; due by March 2018.

5.2 WHS Enforceable Undertaking

The referral note prepared by the A/Director Workforce & Culture was **noted** by the Board. The Board sought assurance that the NSLHD is fully compliant with the Enforceable Undertaking and advice as to the closure of this matter.

Action: A referral note to be tabled indicating the NSLHD compliance with the Enforceable Undertaking and advising when closure of this matter will occur; due March 2018 by the A/Director Workforce & Culture.

5.3 Speaking Up for Safety

The referral note and the background document titled the *Vanderbilt Model* were **noted** and taken as read. An update on the work outlined in the referral note will be provided at the May 2018 Board meeting. The CE provided information on the cultural improvement aspects being undertaken by executives and management throughout NSLHD to support staff. It was noted that this will be a long term project to improve culture and staff morale, but positive change is occurring.

Action: The Board requested that a 6 monthly progress report be tabled; due August 2018 by referral by the Director Workforce & Culture.

5.4 Website Improvements

The Board **noted** the tabled document prepared by the Director Corporate Communications. The Board commented on their ongoing dissatisfaction with the current website despite some enhancements.

The CE advised that the complete update of the NSLHD website layout, contents and navigation will take 12 months to complete.

5.5 NSLHD Asset Strategic Plan

The referral note prepared by the Director Corporate Services was **noted** by the Board and the CE provided additional comments on the District's priorities particularly the funding for replacement of major equipment. The CE outlined the proposed strategy to fund the purchase of this major medical equipment. There was discussion on the planning approach that would identify the opportunities to develop a District wide method to efficient asset management.

Action: The Director Finance & Corporate Services will provide an update on the progress of the 2018 Asset Strategic Plan; next update due April 2018 with sign off by the Board at the May 2018 Board Meeting.

5.6 Pedestrian & Vehicular Access – Royal North Shore Hospital (RNSH)

The referral note prepared by the Director Corporate Services, North Shore Ryde Hospital was noted by the Board. The Board was pleased with the comments that an extension of the pedestrian bridge over Herbert Street is under contemplation which will greatly assist patients, family and carers walking to RNSH. The CE updated the Board on the work that is occurring to expedite improvement for pedestrian and vehicular access.

Action: The CE to update the Board via a referral note regarding pedestrian and vehicular access improvements to RNSH; due June 2018.

5.7 Staff Communication

No further update provided by the CE.

5.8 Strategic Plans - overview

A detailed report will be provided to the Board in March 2018.

6. Standing Business

6.1 Board Chair Report

The A/Board Chair advised that no further information is to be noted that is not included in the Board papers.

The Board commented on the tour of the Northern Beaches Hospital which occurred on 8 February 2018 and were pleased with the progress to completion, the layout and the high standard of finishes throughout the building. Discussion continued regarding the general practice clinic located adjacent to the Emergency Department.

The A/Board Chair sought comments from the Board regarding the Breakfast with Emerging Leaders held on 8 February at Ryde Hospital. Those attending the breakfast commented on the value of meeting a wide cross section of staff and the opportunity to hear about innovations and challenges. An issue that was raised at the breakfast was the poor mobile phone coverage at the hospital and the lack of Wi Fi. The Executive Director Operations NSLHD advised that the issue had been pursued with the mobile service provider and a solution undertaken but the results have still been poor. This matter continues to be pursued to ensure optimal coverage within Ryde Hospital for staff and visitors. Also brought to the attention of the Board was the delineation of referrals due to the local government boundary changes. This is a matter being addressed by NSLHD executives.

The A/Chair discussed with the Board the official opening of the Brookvale Community Health Centre. The Board acknowledged the service improvement from the purpose designed building located in a prime, accessible location.

Action: The Board requested that the new Professor Allied Health be asked to present to the Board; due prior to December 2018.

6.1.1 Letter to Annual Public Meeting attendees

The tabled document was **noted** and was taken as read.

6.1.2 CE Performance Agreement 2017/2018

The tabled document was **noted** and was taken as read. The Board discussed the process for the review of the CE's performance. Clarification of the process would be provided by the Chair at the March meeting.

6.1.3 *How to make our hospitals safer* – Grattan Institute

The tabled document was **noted** and was taken as read. It was tabled for the information of the Board. The HCQC Chair commented that this literature would be beneficial and proposed inclusion in this committee's work. Further discussion covered the achievements by NSLHD that is not part of the MoH KPIs but beneficial and noteworthy. This will be considered by management for mentioning to MoH. Value Based Healthcare was also covered and the Board requested that this be included on a future Board agenda.

Action: CE to identify suitable person to undertake a presentation covering Value Based Healthcare; due prior to December 2018.

6.2 Chief Executive Report

The Board **noted** the report and the CE added additional detail pertaining to: the upcoming performance meeting with the MoH, RNSH accreditation and its findings, update on litigious matters, the MoH focus on Emergency Treatment Performance (ETP) and the work that NSLHD is undertaking to achieve targets, and the Oncology Management Information System (OMIS) to be implemented by 30 June 2018 and the work being undertaken to achieve this deadline. The CE updated the Board on the recruitment for the Director Northern Beaches Hospital Relationships and advised that the incumbent will be introduced to the Board post commencement date.

The CE has met with stakeholders regarding the future use of the Mona Vale Hospital and Manly Hospital site. The Board will be kept informed of these meetings and any decisions.

The CE also updated the Board on matters of significance; Northern Beaches Hospital, elective surgery wait lists including those from out of area, Ambulatory Care improvement project, and the ever increasing number of presentations at RNSH emergency department and its flow on effect. The Board was pleased to hear that the District nursing casual pool has been operationalised.

6.2.1 Kolling Foundation update

The tabled document was **noted** and the Board was delighted with the recent bequests and recent fundraising results. The CE advised the Board that these events are very recent, and further work and consideration will be undertaken regarding the use of these funds.

Action: The Board requested a paper on the investment strategy of the Kolling Foundation; due March 2018 by the Acting Chief Executive Officer Kolling Foundation.

6.3 NSLHD Board – Finance Risk and Performance (FRAP) Report

The Board **noted** the report for the month of December 2017 and the DF&CS advised the Board that on the request of the FRAP committee, a new suite of reports are being created. These reports will focus on performance by facilities and the mitigating circumstances of underperformance.

Of significance noted in the December 2017 is the revenue decline from private patients at both Manly and Mona Vale Hospitals. This risk to the budget has been notified to the MoH. Also mentioned was the budget supplement provided by the MoH in response to the extensive activity experienced during the winter period.

Action: The DF&CS to provide a report on the end of year forecast; due March 2018.

Action: The DF&CS to provide a report on the service agreement process; due March 2018.

6.4 Performance Report

The Board **noted** the report for the months of November and December 2017 and was taken as read.

6.5 NSLHD Risk Report – Board update

The Board **noted** the referral prepared by the NSLHD Chief Risk Officer.

6.5.1 Enterprise Risk Management Report by District

6.5.2 Enterprise Risk Management Report by Site

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

6.6 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.

6.6.1 MoH December 2017 Performance update letter

The Board **noted** the above letter from the MoH.

7. New Business

Nil

8. NSLHD Committee Reports

8.1 Board Audit & Risk Committee (BARC)

Nil available.

8.2 Clinical Council

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

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

Nil available.

The Chair 4Cs Committee updated the Board on the proposed meeting to be held in March 2018 and to hold a workshop covering the principles and framework for consumer engagement. This will develop the scope for this committee.

8.4 Finance, Risk and Performance (FRAP) Committee

The Board **noted** the draft December 2017 minutes.

8.5 Health Care Quality Committee (HCQC)

Nil available.

The Chair HCQC updated the Board on the progress to divide the functionality of this committee; operational and strategic. A workshop will be held 31 March 2018 facilitated by Professor Braithwaite covering Safety I and Safety II.

8.6 Medical Staff Executive Council

Nil available.

8.7 NSLHD & Sydney North Primary Health Network Executive Council

Nil available.

8.8 Research, Innovation, Teaching and Education (RITE) Committee

Nil available.

9. Matters without Notice

The Board sought from Mr Brad Goodwin details pertaining to the super ambulance stations infrastructure developments that are occurring across the State. Of particular interest is the development occurring at Willoughby. Mr Goodwin outlined the purpose and benefits of this delivery model.

10. Date, Time and Venue for Next Meeting

Tuesday 20 March 2018

4:30pm Meeting Room 2, Northern Sydney Education Centre, Macquarie Hospital

Meeting Closed: 7:35pm

CERTIFIED A CORRECT RECORD

By Mr Trevor Danos AM, Chair

On 20 March 2018