

## NSLHD Board

### MEETING DETAILS

**Date:** Tuesday 20 March 2018 commencing 4:30pm

**Venue:** Meeting Room 2, Northern Sydney Education Centre, Macquarie Hospital

#### Present:

Mr Trevor Danos AM	Board Chair
Ms Annette Schmiede	Deputy Board Chair – via teleconference
Dr Dianne Ball	Board Member – via teleconference
Adjunct Professor Ann Brassil	Board Member
Professor Mary Chiarella	Board Member
Mr Anthony Hollis	Board Member
Mr Andrew Goodsall	Board Member – arrived 6:30pm
Mr Brad Goodwin	Board Member
Mr Don Marples	Board Member– via teleconference
Dr Harry Nespolon	Board Member
Dr Michelle Mulligan	Board Member

#### In attendance:

Ms Lavena Ramdutt	Director, Chief Executive's Office
Ms Jacqueline Ferguson	Director Finance, NSLHD
Ms Elizabeth Curran	Executive Director Operations, NSRHS & NSLHD
Dr David Jollow	Chair, Medical Staff Executive Council
Ms Judith Hogan-Wright	Secretariat

#### Apologies:

Ms Deb Willcox	Chief Executive NSLHD
Mr Keith Skinner	Board Member

### PRE MEETING DETAILS – commencing at 4:00pm

Prior to the commencement of the Board meeting, NSLHD Board and the Chair, Medical Staff Executive Council held a 30 minute discussion with senior executives from the Mental Health Drug & Alcohol (MHDA) Directorate and Macquarie Hospital so as to be better informed of the issues facing this facility.

### BOARD MEETING DETAILS – commencing at 4:30pm

The Board Chair welcomed the Board members and attendees to the meeting. The Board Chair relayed the apologies of the Chief Executive (CE).

At the invitation of the Board, Mr Trevor Danos AM 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. Presentation

## 1.1 Health Emergency Management Arrangements

The Board Chair welcomed Ms Rosemary Hegner ASM, Director, Health Emergency Management Unit to the Board meeting. The presentation was provided in the Board meeting pack and was **noted** and taken as read.

Ms Hegner provided in-depth information on the emergency management principles covering prevention, preparation, response and recovery. Also covered were the strategic improvements that build upon the resilience of organisations during emergency responses and the evidence based research embedded in the emergency plans. Ms Hegner spoke of the complexity of an emergency response: the levels of government involvement, the number of agencies involved and their interdependency, and the need to be flexible and adaptive to an ever changing world.

Discussed in the presentation was the NSLHD's function within the State Health Service Functional Area Coordinator (HSFAC) that is the State coordinated response to an emergency situation. In summary it was commented upon the importance of preparation for an emergency and the necessity of an organisation to undertake regular emergency management exercises.

From a question from the Board regarding communication risk if mobile phone networks are not available, Ms Hegner advised that this has been escalated to a State wide risk and assured the Board that there are plans in place and being refined for any network outages.

The Executive Director of Operations NSLHD advised the Board on NSLHD's Counter Disaster Unit and the District's preparedness, delivery and capability in supporting a health emergency as well as mentioning the business continuity plans.

The Board felt reassured in the District, State and National arrangements in health emergency planning and preparation and thanked Ms Hegner for an informative presentation.

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## 2. Patient Story

### 2.1 Consumer Story from Mental Health Drug & Alcohol (MHDA)

The referral prepared by Ms Andrea Taylor, Director MHDA was **noted** by the Board. The referral covered the background of a patient Louise, who for many years was a consumer of many public and private, inpatient and outpatient services across NSW. Also included in the referral were the progress and achievements by NSLHD for those patients with eating disorders. Louise was invited to address the Board to provide her personal story. Louise was supported by the Director MHDA and Ms Monique van Leeuwen, Eating Disorders & Clinical Service Manager.

Louise was warmly welcomed to the meeting and spoke to the Board of her personal journey to achieve good health. The points of note from this personal journey were as follows: she felt that she was part of and supported by a positive health team and an appropriate model of care, the team at NSLHD were specialists in eating disorders, there were good outpatient services and there was a collaborate approach. The Board was advised that Louise has joined NSLHD as a peer support worker sharing her story of recovery to those with eating disorders.

The Board members were deeply moved by this inspiring story and thanked Louise, Ms van Leeuwen and the MHDA team.

**Action:** A letter of thanks from the Board to be sent to both Louise and to Ms van Leeuwen; by the Secretariat.

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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 February 2018.

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

The Board Chair made several observations on matters that arose from the February 2018 Board meeting for which he had been an apology:

##### Item 5.6 Pedestrian & Vehicular Access

This piece of work is ongoing. Once construction commences in the vicinity of Building 51, this area will be cordoned off from pedestrian traffic. Alternative routes with appropriate signage will be required to direct pedestrian from St Leonards train station to Royal North Shore Hospital (RNSH). It was suggested that one route might involve and take advantage of the connectivity between Herbert Street Community Health Centre and the Clinical Services Building and then onto the Acute Service Building.

**Action:** The CE to provide a verbal update on pedestrian access once construction commences in the vicinity of Building 51; due April Board meeting.

##### Item 6.1.2 CE Performance Agreement

The Board Chair advised that he would undertake consultation with all Board members to obtain their views which would then be taken into account in a one on one discussion between the Board Chair and CE.

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

The Board **noted** the Action List.

An additional item will be included on the action item: **Speaking Up for Safety (February 2018)**

**Action:** The 6 monthly update should also include improved reporting of significant matters including reportable incidents.

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

There may be an opportunity to physically link this Health Hub to other health facilities e.g. Kolling and Northern Sydney Private Hospital, as well as Herbert Street. The CE was asked to consider this as part of the evaluation and negotiations.

**Action:** This agenda item and paper to be included in the April Board meeting.

##### 5.2 Kolling Foundation Investment History and Management Strategy

The referral note prepared by the Chair and the A/Chief Executive Officer, Kolling Foundation was **noted** by the Board. It was noted that any new agreement between the Kolling Foundation and NSLHD will include provisions relating to investment policies of the Kolling Foundation that will require sign off by NSLHD and will normalise any current investments made in the past by the Kolling Foundation. The new governance structure for the Kolling Foundation is currently being drafted which includes; the CE as a director of the Kolling Foundation and full transparency by NSLHD of the Kolling Foundation's financial and operational matters.

##### 5.3 NSLHD IT Plans 2016-2022 Quarterly Update

The referral and report was **noted** by the Board and taken as read. The Board sought advice on the shared ICT arrangements between NSLHD and Central Coast LHD.

**Action:** The CE to provide advice on the shared ICT arrangements.

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

The Board **noted** the tabled document prepared by the NDIS Transition Manager. The Board Chair noted that this matter was discussed at the Council of Board Chairs and relayed the comments from the Secretary of Health. The Board supported that NSLHD remain a passive provider of services.

**Action:** This agenda item and paper to be included in the April Board meeting.

#### **5.5 Junior Medical Officers (JMO) Wellbeing**

Dr Nespolon advised the Board of the discussions held with the CE concerning JMO Wellbeing. In able to ensure that an inclusive and comprehensive comments and views are garnered, JMOs are being contacted across the District including training and non-training registrars. It was recommended that comments should also be sought from the JMO managers.

Further updates will be provided to the Board as this work progresses.

**Action:** The CE to table a document covering the strategies and plans for ensuring JMO welfare at the Northern Beaches Hospital (NBH); due April Board meeting.

#### **5.6 Ryde Hospital Childcare – Lessons Learned**

The referral note prepared by the Site Operations Manager, Ryde Hospital was **noted** by the Board.

#### **5.7 Work Health Safety Update**

The referral prepared by the A/Director Workforce was **noted** and taken as read by the Board.

#### **5.8 Kolling Foundation - Rebranding**

The referral prepared by the A/Chief Executive Officer, Kolling Foundation was **noted** by the Board. Each Board member was asked their opinion of the proposed rebranding. A consensus emerged around NORTH Foundation. The Board Chair agreed to obtain further information on whether this name was possible, on the proposed tag line and on what market testing had been undertaken and to report back to the Board.

#### **5.9 Litigation Report - Draft**

A draft template was tabled. It was recommended to include a column listing the commencement date of the litigation and for the status column to include any updates, progress, developments, etc. The FRAP committee will receive this report on a six monthly basis and escalate this to the Board should there be any matters of concern.

#### **5.10 NSLHD Partnership / Collaboration Program**

The Chair advised that an Executive Group was likely to be formed and that its remit would include innovation.

**Action:** The CE to provide a verbal update on the establishment of the NSLHD Innovation Committee; due April Board Meeting.

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

The Board provided clarification on the following matters from the Action List:

#### **Staff Communication**

The Board requested a Communication presentation that will include the actions arising in November 2017 Board meeting.

**Action:** Presentation covering Communication as listed in the above; due May Board Meeting.

### **Northern Beaches Hospital (NBH) – Financial Modelling**

The Director Finance, NSLHD informed the Board on the finalisation of the Mona Vale Hospital Financial Impact Statement (FIS). Negotiations and discussions with the Ministry of Health (Ministry) continue. It is anticipated that the FIS will be signed within the next 7 days and that a presentation on the financial model will be made to the FRAP committee at or before its next scheduled meeting. Also to be taken into consideration is the impact on Brookvale and Dalwood Community Health Centres.

**Action:** The CE to table a report on the service provisions at Mona Vale Hospital post NBH operationalisation and to update the Board on the financial modelling and the negotiations with the Ministry at the same time; due April Board meeting.

**Action:** The CE to report to the Board on role delineation at Mona Vale Hospital post NBH; due April Board meeting.

### **Strategic Plans - Overview**

The Board was advised that the various plans due in June to the Ministry are progressing.

**Action:** The CE to table a document on the progress and finalisation of all NSLHD plans; due April Board meeting.

### **Innovation Program**

The Chair advised that the Research, Innovation, Teaching and Education (RITE) committee, chaired by Mr Anthony Hollis has been suspended for the time being. An NSLHD Executive committee will be formed that will take carriage of Innovation and Research matters. Mr Hollis has agreed to be co-chair of these Executive committees.

**Action:** Strategies for Innovation to be included in a paper tabled at the April Board meeting by the CE.

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## **6. Standing Business**

### **6.1 Board Chair Report**

The Board Chair updated the Board on the following:

- The Board Chair attend the recent meeting of the Council of Board Chairs and the following was discussed:
  - The Ministry will soon be launching a new risk reporting and tracking software program. The Board Chair has flagged this with the CE to ensure that the NSLHD risk reporting system aligns with the work of the Ministry.
  - The Board Chair requested clarification by the CE regarding the arrangements for reporting to the Board and Board committees of occurrences of, and trends in, bullying, harassment, fraud and sentinel events, Severity Assessment Code (SACs) and Root Cause Analysis (RCAs).

**Action:** The CE to recommend to the Board current and proposed reporting arrangements on those matters as mentioned above via a referral note; due April Board meeting.

- The Board Chair was pleased to report the focus of the Ministry aligned with NSLHD putting priority on patient experience and on safety and quality. The Board Chair also reported on issues discussed at the Council of Board Chairs meeting relating to mental health admissions, NDIS, sentinel events, and change management and digitalisation.

- The Board Chair and CE continue to attend a weekly meeting covering the progress of the NBH and meet monthly with the CEO of Healthscope. Workforce issues remain a priority. A risk for the organisation is to ensure that sufficient staffing levels and positive staff morale are maintained at Manly and Mona Vale Hospitals between now and when the NBH opens.
- The Board was updated on the NBH roads upgrades and the timeline of completion.
- The recent Risk Workshop was discussed which will include follow up input from a select number of Board members.
- The Board Chair requested that the CE present to the Board on Workforce issues covering overall strategy, recruitment, retention, training and grievance processes.

**Action:** The CE to arrange a Workforce presentation covering overall strategy, recruitment, retention, training and grievance processes; due no later than May Board meeting.

- The Board Chair led a discussion on the possibility of the monthly CE Report being published with the minutes of the Board meeting. The Board agreed in principle pending discussion with the CE including in relation to the exclusion or redaction of confidential material.
- A meeting with the NSLHD Board Chair, CE with the Chair and Chief Executive Officer of Sydney North Primary Health Network has taken place. Improvements in communication and better alignment of these organisations are priority actions.
- The rectification of the site of the Brown Building was discussed.
- The Board Chair and Ms Schmiede attended the Northern Clinical School Award Night.
- The Board Chair updated the Board on the proposed venues and timing of the Annual Public Meeting and the possibility of webcasting this event.
- The Breakfast with Emerging Leaders at Mona Vale received positive feedback.

#### **6.1.1 Brookvale Community Health Centre Opening**

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

#### **6.1.2 Basic Physicians Trainees – Resitting Exams**

Refer to 6.2.1.

#### **6.1.3 Health Staff Mandatory Vaccination**

The excerpt from a newspaper covering last year's flu season and the potential in 2018 for similar admissions in NSW was noted.

The Board Chair encouraged the Board to have their flu vaccinations and spoke of NSLHD drive to have improved staff participation.

#### **6.1.4 Appreciation of Care**

The tabled letter was **noted** and the Chair advised that a response letter had been sent.

### **6.2 Chief Executive Report**

The Board **noted** the report and was taken as read. Highlights from that report include the following:

- Strong performance across the District in access to emergency care with improvements at RNSH against the Emergency Treatment Performance and Transfer of Care measures.
- The commencement of the NSLHD Innovation Program for 2018 with staff members invited to submit applications and pitch their ideas to a panel of judges including the Chief Executive. The first pitch event is scheduled for May 2018 and quarterly thereafter.
- The 2018 Clinical Year commenced in February 2018 with new interns starting at NSLHD hospitals.
- The Child Care Centre on the RNSH campus is nearing completion and commissioning of the new building is on track for April 2018.
- James Stormon has been appointed as the Director, Northern Beaches Hospital Relationships and will commence on 26 March 2018. Working closely with the Chief Executive, the Director will play a key role in supporting the ongoing relationship with the new NBH and Healthscope post commissioning.

#### **6.2.1 Basic Physicians Trainees Exams – NSLHD Response**

The tabled document was **noted**. The Board was pleased with how the District had responded to assist and support staff members affected.

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

The Board **noted** the report for the month of January 2018 and the Director Finance, NSLHD advised that on current projections there will be a small deficit has and this has been communicated to the Ministry.

The Board was pleased with the creation of the NSLHD nursing casual pool and the work being undertaken to reduce expenditure using agency nursing staff.

A Board member requested more clarity on the Balanced Scorecard section of the FRAP report. The Director Finance, NSLHD advised that work is in progress with the FRAP committee members to redesign some of the current KPI and performance reporting.

#### **6.3.1 NSLHD 2018/2019 Service Agreement Update**

The tabled document was **noted** and taken as read by the Board

#### **6.3.2 NSLHD Full Year forecast Position**

The tabled document was **noted** and the Board was updated on the work being undertaken to address the projected deficit.

### **6.4 NSLHD Risk Report**

The Board **noted** the referral prepared by the NSLHD Chief Risk Officer. The Board discussed the mention of medical imaging staffing challenges, as well as the static nature of the rating of a number of risks. The Executive Director Operations advised that RiskIT is being rolled out to general management to broaden and strengthen reporting and accountability.

**Action:** The CE to speak to the Board's comments listed above concerning staffing challenges in medical imaging and the static nature of a number of risks; due April Board meeting.

#### **6.4.1 Enterprise Risk Management Report by District**

#### **6.4.2 Enterprise Risk Management Report by Site**

#### **6.4.3 Board Audit & Risk Committee (BARC) & Board Risk Workshop summary**

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 covering performance was **noted**.

#### **6.5.1. MoH January 2018 Performance update letter**

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

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## 7. New Business

Nil

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## 8. NSLHD Committee Reports

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

Nil available.

### 8.2 Clinical Council

The Board **noted** the draft February 2018 minutes.

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

Nil available.

### 8.4 Finance, Risk and Performance (FRAP) Committee

The Board **noted** the draft February 2018 minutes.

### 8.5 Health Care Quality Committee (HCQC)

Nil available.

### 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.

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## 9. Matters without Notice

### University Students

There was discussion regarding the financial and other arrangements with all relevant universities in respect of their students being trained at NSLHD and the impact on NSLHD.

Professor Chiarella declared a conflict of interest in the discussion.

**Action:** The CE to table a document covering the financial arrangement with all relevant universities regarding students, clinicians and academics; due April 2018.

### Proposed Executive Position

The Board supported the creation of an Executive position for Capital Asset Management.

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

Tuesday 17 April 2018

4:30pm Boardroom, Executive Office, Level 5, Douglas Building

**Meeting Closed:** 7:35pm



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**CERTIFIED A CORRECT RECORD**

**By Mr Trevor Danos AM, Chair**

**On 17 April 2018**