

NSLHD Board

MEETING DETAILS

Date: Tuesday 21 August 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
Dr Dianne Ball	Board Member – via teleconference
Adjunct Professor Ann Brassil	Board Member
Professor Mary Chiarella	Board Member
Mr Andrew Goodsall	Board Member
Mr Brad Goodwin	Board Member
Mr Anthony Hollis	Board Member
Dr Donna Lynch	Board Member
Mr Don Marples	Board Member
Dr Michelle Mulligan	Board Member
Mr Keith Skinner	Board Member

In attendance:

Ms Deb Willcox	Chief Executive, NSLHD
Ms Jacqueline Ferguson	Director Finance, NSLHD
Dr Bruce Cooper	Chair, Medical Staff Executive Council
Ms Bonnie Yates	Secretariat
Ms Jessica Zinghini	Health Management Trainee

Apologies:

Dr Harry Nespolon	Board Member
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BOARD MEETING DETAILS – commencing at 4:30pm

The Board Chair welcomed the Board members and attendees to the meeting.

1. Presentations

1.1 BARC: Performance & Audit Plan

Mr John Hunter, Chair Board Audit and Risk Committee (BARC) was welcomed to the Board meeting. The report was **noted** and taken as read. Mr Hunter provided detailed information on the favourable outcome of the internal audits of NSLHD completed during the year. A majority of recommendations have been implemented.

Topics discussed included reporting of fraud and bullying, setting of passwords, grievance processes and data analytics.

The Board acknowledged the role of Director of Internal Audit, commending activity and the team.

Action: Distribute future Board minutes to independent members of the BARC and circulate recent Grattan Institute on Improving Patient Care to Board members and BARC members.

1.2 Clinical Network: Cardiothoracic & Vascular Health

The Board Chair welcomed Dr Stephen Nolan, Clinical Network Director NSLHD for Cardiothoracic & Vascular Health. The presentation was **noted** and taken as read. The Clinical Network Director provided an overview of strategic and clinical priorities within the Network.

Action: Recommended Chair, Consumer Committee Dr Dianne Ball, invite Clinical Network Director NSLHD for Cardiothoracic & Vascular Health to brief the Consumer Committee.

1.3 Health Infrastructure

The Board Chair welcomed Mr Sam Sangster, Chief Executive, Health Infrastructure. Mr Sangster discussed options to remediate the former site of the “brown building” on RNS campus.

Action: The Chief Executive and Mr Sangster to assess the site and develop options for full or partial remediation.

2. Patient story – Mona Vale Hospital

2.1 The referral prepared by the General Manager, Mona Vale Health Service was **noted**. The Board acknowledged the learnings, highlights and improvements as contained in the referral note.

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 interest declared.

4. Confirmation of Minutes

Minutes of the meeting held 17 July 2018 were confirmed as a true and accurate record of the meeting.

5. Standing Business

5.1 Board Chair Report

The Board Chair updated the Board on the following:

- Thomson Geer will be invited to present at the following Board meeting to discuss the CBA APRA report.
- Invitation to Board members to suggest changes and improvements for the Board meeting agenda, to contribute to a review being undertaken by the Board Chair and the Chief Executive (CE).
- Campus walkabouts and Board breakfasts.
Action: reschedule Macquarie Mental Health walk about.
- Commonwealth inquiry on the use of private health insurance in public hospitals.
- Kolling Institute and University of Sydney Joint Venture.
- Recruitment of Director of Research.
- Process for signing the annual Governance Attestation Statement (**approved** by the Board, subject to replicating last year's covering letter).
- Kolling (soon to be North) Foundation has appointed a new Chief Executive Gilbert Lorquet.
Action: Mr Lorquet to be invited to attend the Board meeting in October/November 2018.
- The CE to provide update at the September Board meeting on the plan for the Annual Public Meeting.
- The CE has been requested to prepare a protocol to deal with third party referrals made to the CE via Board members.

5.1.1 Notifiable Data Breaches

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

5.2 Chief Executive Report

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

The CE outlined financial and operational priorities and challenges for the year along with details of strategies, revenue initiatives, resources and organisational structure to support her in achieving those priorities. The CE will provide the Board with ongoing reporting on progress against KPIs generally, those priorities and the strategic plan.

5.3 Finance, Risk and Performance Report

The CE to provide an update on forecast for 2018/19 at the next Board meeting.

5.4 NSLHD Risk Report

The report was **noted** and taken as read. The Board identified a number of improvements that could be made to the way in which the top 10 risks are currently identified, assessed and reported. The Board deferred approving the paper on Risk Attitude Statements.

Action: The CE to review the current reporting format with the Chief Risk Officer and bring the Risk Attitude Statement back to the Board at a future meeting.

5.5 Performance Summary of all LHDs

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

5.5.1 Performance Update from Ministry of Health

The Board **noted** the letter from Executive Director, System Managing Branch.

6. Ongoing Business (in conjunction with Action List)

The Board **noted** the Action List.

7. New Business

7.1 Planning Status Dexus Property Group

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

7.2 NSLHD Safety and Quality Accounts

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

7.3 2018/19 Audit Plan and Objectives

The Board **approved** the Audit Plan.

7.4 2017/18 Corporate Governance Statement

The Board **noted** and endorsed the report.

7.5 Update of NSLHD Clinical Services Plan

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

7.6 WHS and Due Diligence Guidelines

The Board **noted** the NSLHD Board Work Health Safety Performance Report. The Board identified a number of improvements that could be made to the way in which WHS matters including data and trends are currently reported. The Board requested that the Finance, Risk and Performance Committee (FRAP) conduct an analysis of relevant iCare data.

Action: WHS audit to be conducted at the Kolling Building. FRAP to review relevant iCare data.

7.7 Update on Innovation Program

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

8. NSLHD Committee Reports (*taken as read*)

8.1 Board Audit & Risk Committee (BARC)

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

8.1.1 Approval of BARC Terms of Reference

The Board **approved** the terms of reference.

8.2 NSLHD Clinical Council

The minutes were **noted** and taken as read.

8.3 Consumer Committee

The minutes were **noted** and taken as read.

8.3.1 Terms of Reference

The Board **approved** Terms of Reference subject to amendments.

8.4 Finance, Risk & Performance (FRAP) Committee

The minutes were **noted** the report and taken as read.

8.5 Health Care Quality Committee (HCQC)

8.5.1 Approval of HCQC Terms of Reference

The Board Chair **approved** the Terms of Reference subject to amendments.

8.6 Medical Staff Executive Council (MSEC)

The minutes were **noted** and taken as read.

9 Date, Time & Venue for Next Meeting

Tuesday, 18, September and 2018, commencing at 4.30pm, Ryde Hospital

Meeting Closed: 7.45 pm

CERTIFIED A CORRECT RECORD

**Mr Trevor Danos AM, Chair
On 18 September 2018**