Minutes

Health
Northern Sydney
Local Health District

NSLHD Board

MEETING DETAILS

Date: Tuesday 16 March 2021 commencing 4:15pm

Venue: ELCA Training Room, Ryde Hospital or via Skype

Present:

Mr Trevor Danos AM	Board Chair
Adj A/Professor Annette Schmiede	Deputy Board Chair
Mr Andrew Goodsall	Board Member
Mr Anthony Hollis	Board Member
Mr Brad Goodwin	Board Member
Dr Donna Lynch	Board Member
Ms Karen Filocamo	Board Member
Mr Keith Skinner	Board Member (Skype)
Ms Kimberley Reynolds	Board Member
Professor Mary Chiarella AM	Board Member
Dr Michelle Mulligan	Board Member
Dr Stephanie Teoh	Board Member

In attendance:

Dr Tamsin Waterhouse	A/Chief Executive, NSLHD
Dr Bruce Cooper	Chair MSEC, NSLHD (Skype)
Mr Lee Gregory	A/Executive Director Operations, NSLHD
Ms Jacqueline Ferguson	Director Finance and Corporate Services, NSLHD
Ms Brooke Barnett	Board Secretariat
Ms Paula Williscroft	Director People and Culture, NSLHD (item 2.0)
Mr Mark Zacka	Director Clinical Governance, NSLHD (item 12.7)
Ms Heather Gough	General Manager Ryde Hospital (item 3.0)

Apologies:
Nil

AGENDA ITEMS

The Board held an initial 15 minute in-camera session.

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

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1. Attendance / Apologies / Conflict of Interest

Attendance was **noted**; there were no apologies.

The Board Chair asked those present to declare any additional or new conflicts of interest. None was declared.

2. People and Culture Update

2.1. Diversity, Inclusion and Belonging

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

The Director People and Culture (DPC) provided a verbal update on the Diversity, Inclusion and Belonging strategy in NSLHD. The strategy is well underway with additional staff networks to be launched this year. There is a video being developed to showcase the NSLHD strategy for recruitment and onboarding. Training is also being provided to new managers on inclusive leadership.

NSLHD is working on a Zero Tolerance commitment statement to be endorsed by the Board. Key features of the statement are that it will apply to sexual harassment, bullying, intimidation and other unacceptable forms of conduct and that there will be a proportionate response to such matters. It is intended to be launched with effect from 1 July 2021.

2.2. HSW Quarterly Board Report

This item was **noted** and taken as read.

The DPC provided a verbal update on the Health Safety Wellbeing quarterly report. There has been an increase in training and education particularly online. NSLHD has both an internal and an external EAP service. The People Matters survey will be distributed in the second half of 2021. The Board discussed trends in assaults and aggression shown towards staff.

Action: DPC to provide further detail and breakdown on assaults including prevention strategies in place and planned in the next quarterly report for June 2021 meeting.

Action: CE to provide referral note and update on the 2020 Peter Anderson report into the safety of staff, patients and visitors in NSW public hospitals at May 2021 meeting.

Action: DPC to provide further detail on EAP utilisation in next quarterly report for June 2021 meeting.

2.3. Leadership and Talent

This item was noted and taken as read.

The DPC provided a verbal update on Leadership and Talent in NSLHD. NSLHD is piloting a senior leadership program in addition to the Leadership Development Program.

3. Ryde Hospital Update

The General Manager Ryde Hospital provided an update on the priorities, highlights, achievements, key issues and challenges of the next 12 months. The topics covered were: delivering contemporary services, patient experience, quality and safety improvements, the redevelopment of Ryde Hospital, staff wellbeing, accreditation, budget management and financial focus and corporate governance enhancement.

The Board Chair and Board members commended the General Manager Ryde Hospital for the recent changes and improvements at Ryde Hospital.

4. Confirmation of Minutes

4.1. Minutes of meeting held 16 February 2021

Minutes of the meeting held 16 February 2021 were confirmed as a true and accurate record of the meeting.

5. Patient Story

5.1. Opportunity for Service Improvement – Patient Y

This item was **noted** and taken as read.

6. Ongoing Business/Action Items

6.1. Action List – February 2021

The action list was reviewed and updated accordingly.

7. Chief Executive update on COVID-19 activities

The A/Chief Executive (A/CE) provided a verbal update on the COVID-19 activities with the following highlights:

- The NSLHD vaccination hub at Hornsby Ku-ring-gai Hospital (HKH) was opened last week, with positive feedback.
- Peter Shine, Director Aboriginal Health NSLHD was the first person to be vaccinated at the HKH hub.

The Board Chair and Board members commended the A/CE and the staff involved in successfully setting up and organising the vaccination program in NSLHD.

8. Update on Accreditation

The Board Chair provided an update on Accreditation. The Mental Health Drug and Alcohol (MHDA) Assessment will commence on Monday 22 March 2021. The Board Chair and subcommittee Chairs will attend the opening and summation.

HKH, Royal North Shore Hospital (RNSH) and Ryde Hospital are preparing for their assessments in October and November 2021.

The A/CE advised the Board the sites' preparations for assessments are progressing well with support from the NSLHD Clinical Governance Unit (CGU). Mock surveys have been arranged.

9. Matters for Decision/Approval

9.1. NSLHD Sorry Statement

Brad Goodwin, Board Member provided an overview of the background of the sorry statement. The statement has been developed by the NSLHD Director of Aboriginal Health in consultation with members of the local indigenous community.

The Board endorsed the Sorry Statement (annexure 1). The Board looks forward to the statement appearing at all facilities of NSLHD and on the NSLHD website.

9.2. NSLHD Fellowship Proposal

The Board Chair presented a further revised proposal.

The Board endorsed the NSLHD Honour Board Proposal (annexure 2).

10. Strategic Discussion

10.1. HNELHD Carbon and Waste Neutral by 2030

This item was **noted** and taken as read.

10.2. Financial Sustainability Report (FRAP)

This item was **noted** and taken as read.

The NSLHD Finance Risk and Performance Committee (FRAP) Chair provided an update and overview of the report. This report is the third in a series of reports to be produced. The Board endorsed the direction of the work being undertaken by FRAP to assess and enhance financial sustainability at NSLHD including at RNSH. The Board noted that positive outcomes will require a focus not just on financial matters but also on culture.

10.3. NBH finance progress FRAP paper

This item was **noted** and taken as read.

10.4. Zero Tolerance Policy

This item was discussed by the Director People and Culture in item 2.0.

10.5. Ryde Hospital Clinical Services Plan

This item was **noted** and taken as read.

10.6. NSLHD Board Strategy Day

The Board Chair provided an update on the proposed agenda for the NSLHD 2021 Board Strategy Day.

11. Standing Business

11.1. Board Chair Report

The Board Chair provided a verbal update with the following highlights:

- The Board Chair and Chief Executive (CE) met with Professor S Bruce Dowton, Vice Chancellor Macquarie University to discuss the process for the planning of the possible relocation of Ryde hospital.
- The Board Chair and the CE met with the CEO of the NORTH Foundation regarding governance and fundraising enhancements.
- The Board Chair and the CE met with Property NSW and the new Executive Director on the team working on the Herbert Street Precinct Project.
- The Board Chair attended the Council of Board Chairs meeting on Monday 15 March 2021. Updates were provided by the NSW Health Minister, Health Secretary and Health Deputy Secretaries.

- The Board Chair and a Board member attended the media event with Minister Bronnie Taylor on the MHDA Stepping Stones program opening at Macquarie Hospital.
- The Board Chair noted the successful celebration at NSLHD of International Women's Day.
- The Board Chair gave an update on Northern Beaches Hospital.
- The Board chair advised on the status of the RNSH archives.

11.2. A/Chief Executive Report March 2021

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

The A/CE noted the mask fit testing is three quarters complete with an 86% success rate. Once the project is finished it will become business as usual, with staff now trained to fit test.

11.3. Finance Risk and Performance Report

This item was **noted** and taken as read.

The Chair, FRAP provided an update on the in depth analysis currently being done on the financial performance of RNSH and the additional resources being applied to assist with this analysis.

11.4. Committee Updates

Board Audit and Risk Committee (BARC)
No further update provided.

Finance, Risk and Performance Committee (FRAP)
No further update provided.

Consumer Committee (CC)
No further update provided.

Health Care Quality Committee (HCQC)
No further update provided.

JMO Board Wellbeing
No further update provided.

Clinical Council
No further update provided.

Medical Staff Executive Council (MSEC)
No further update provided.

NSLHD Research Advisory Committee
No further update provided.

Planetary Health Committee
No further update provided.

Health Education and Research Precinct
No further update provided.

11.5. NSW LHD Selected Performance Indicators – January 2021
This item was **noted** and taken as read.

11.6. Communications Calendar
This item was **noted** and taken as read.

11.7. Quarterly Risk Report
This item was **noted** and taken as read.

Action: Board Secretariat to invite new Chief Risk Officer to present next Quarterly Risk Report.

12. NSLHD Committee Minutes and Reports (taken as read)

12.1. Board Audit and Risk Committee (BARC)
This item was **noted** and taken as read.

12.2. Finance Risk and Performance Committee (FRAP)
This item was **noted** and taken as read.

12.3. Consumer Committee
This item was **noted** and taken as read.

12.4. Consumer Committee STRA2P Report
This item was **noted** and taken as read.

12.5. Health Care Quality Committee (HCQC)
Not available.

12.6. HCQC STRA2P
Not available.

12.7. HCQC Safety and Quality Report
The Director Clinical Governance provided an update on the Safety and Quality report. The Board suggested some possible changes to future reporting.

12.8. JMO Wellbeing Board Committee
This item was **noted** and taken as read.

12.9. Clinical Council
This item was **noted** and taken as read.

12.10. Medical Staff Executive Council (MSEC)
Not available

12.11. NSLHD Research Advisory Committee
This item was **noted** and taken as read.

12.12. Planetary Health Committee
Not available.