

NSLHD Board

MEETING DETAILS

Date: Tuesday 17 October 2017 commencing 4:30pm

Venue: Boardroom, NSLHD Executive Unit, Royal North Shore Hospital

Present:

Mr Trevor Danos AM	Board Chair
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 - teleconference
Ms Beata Kuchcinska	Board Member - teleconference
Mr Don Marples	Board Member
Dr Michelle Mulligan	Board Member
Dr Harry Nespolon	Board Member - teleconference until 6:40pm
Mr Keith Skinner	Board Member

In attendance:

Mr Graeme Loy	Acting Chief Executive NSLHD
Mr Christopher Thomson	A/Director Finance & Corporate Services
Mr Lee Gregory	A/Executive Director Operations NSRHS & NSLHD
Dr David Jollow	Chair, Medical Staff Executive Council
Ms Judith Hogan-Wright	Secretariat

Apologies:

Dr Dianne Ball	Board Member
Adj. Associate Professor Annette Schmiede	Board Member
Ms Elizabeth Curran	Executive Director Operations NSRHS & NSLHD

MEETING DETAILS

The Board Chair, Mr Trevor Danos AM welcomed the Board members and attendees to the meeting.

As this was the last Board meeting prior to the announcement of the appointment of the Chief Executive, NSLHD, the Board took the opportunity to thank Mr Graeme Loy, Acting Chief Executive for his dedication and efforts. The Board Chair expanded on the appreciation of the Board and the District for the work, achievements and direction of NSLHD under Mr Loy's leadership.

At the invitation of the Board Chair, Mr Don Marples provided a brief autobiographical introduction for the information of those in attendance. Mr Keith Skinner agreed to present at the next Board meeting.

1. Presentation

1.1 NSLHD Surgery & Anaesthesia Network Update

Dr Michelle Mulligan, Clinical Director and Ms Jillian Moxey, Service Manager of the NSLHD Surgery & Anaesthesia Network provided a detailed presentation which was **noted** and taken as read by the Board. Dr Mulligan commenced her overview of the issues facing the Surgery & Anaesthesia Network by advising that this network does not include all areas of surgery and this

does cause confusion. A number of key achievements were discussed. Dr Mulligan brought to the attention of the Board the innovative work by Ms Moxey "My Patient Journey Booklet" and its proposed transition into a smartphone application.

The main areas of concern for the Network are as follows: (1) understanding and addressing the impact of the Northern Beaches Hospital on surgery and anaesthesia; (2) District waitlist management policy; (3) structures (including administration and governance)/data/resources that underpin the Network and perceived gaps in them; (4) insufficient focus on craft groups; (5) underdeveloped functional and organisational matrices and related responsibilities and reporting lines; (6) importance of improving clinician engagement; (7) need to improve quality, focus and functionality of data so it can drive decision making; and (8) scope to improve communications with VMOs including through remote access.

The Board Chair spoke of the work currently being undertaken to address the matters of concern including system improvements that are hindering achieving the Network's and other networks' goals. It was stressed the importance of short term goals and short term outcomes to address the issues.

The Board thanked Dr Mulligan and Ms Moxey for an informative presentation and discussion.

2. Patient Story

2.1 Letter of Dissatisfaction

The letter of dissatisfaction and response was **noted**. The letter was provided by a third party regarding a patient of Royal North Shore Hospital. The A/CE commenced his discussion by stating that this was a complex and complicated story and the correspondence provided both sides of the patient's journey. The Board members agreed that this was a challenging patient story in weighing up the emotional, legal, patient autonomy and best outcome of the patient. In summary, NSLHD could have improved communication to the third party and this will be relayed to the appropriate department.

3. Attendance / Apologies / Quorum / Conflict of Interest

Attendance and apologies were noted.

The 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 September 2017

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

5. Ongoing Business (in conjunction with Action List)

5.1 Wi-Fi Services for Patients and Visitors

The referral was **noted** by the Board. The Board Chair commented on the All Staff email covering this matter and the benefits of a different and improved style of communication. It was noted that there were input from a patient's or a consumer's perspective on this project. It was requested that the NSLHD Corporate Communication team review and improve All Staff and similar external communications. The A/CE added that the bandwidth used for Patient and Visitors Wi-Fi Service will not impact on any services as this is a quarantined bandwidth, specifically provided for this service alone. This is a Royal North Shore Hospital's proof of concept for Guest Wi-Fi Services and post evaluation, if positive, it is anticipated this will be rolled out across the State.

Action: The Director Corporate Communication to ensure that All Staff emails and similar external communications are reviewed to improve the clarity and effectiveness of the message prior to distribution; to be undertaken ASAP.

Action: The A/CE to write to eHealth, NSW advising that the NSLHD Board would like to share patient/consumer feedback on Guest Wi-Fi services and areas considered by the Board where significant enhancements are possible and desirable. The NSLHD Board wish to share these thoughts before eHealth NSW moves beyond Proof of Concept.

5.2 Northern Sydney Home Nursing Services

The Board read and **noted** the referral. The Board requested that further information be provided on the Activity Data NSRHS 2016/2017 including the financial impacts associated with the information contained within the table, as well as details of customer feedback on the quality of the service.

Action: The A/CE to present a referral note to the Board in November 2017 covering: 1. Activity Data NSRHS 2016/2017 and whether there are improvements or financial impacts associated with the information contained within the table, 2. Financial information on the services provided by Northern Sydney Home Nursing Services and any impact of the Northern Beaches Hospital on this service, and 3. Details on customer feedback including the methodology associated with collection of that feedback.

5.3 Ryde Master Plan & Ryde Clinical Services Plan

The Board **noted** the tabled document. The Chair advised that there are a number of challenges for this hospital including patient catchment and patient flow. The question for NSLHD is the role of Ryde Hospital in the future and this will be addressed via the updated NSLHD Clinical Service Plan; refer to item 5.10 and 5.14 for further details.

Action: The A/CE and the Board Chair will make an appointment with the Ministry of Health to discuss the future of Ryde Hospital.

5.4 Ryde Hospital Data Reporting

The Board **noted** the tabled document. The Board acknowledged that the reporting is separated but RNSH & Ryde Hospital do come under the umbrella of the North Shore Ryde Health Service which causes confusion. The Board suggested that communication should be separated as well e.g. a separate newsletter for each of these hospitals.

Action: The A/DF&CS to table information to the Board in November 2017 on what remains as a “combined” entity and the process and implications of separating these items whether it is financial, performance, quality and safety or other.

Action: The Director Corporate Communications to present to the Board in November 2017 on the NSLHD Communication Strategy including the nature and status of existing newsletters and recommendations in respect of newsletters.

5.5 Northern Beaches Hospital – financial modelling

The information provided on the referral was **noted**. The A/CE and the A/DF&CS provided information on the work undertaken by the Paxon Group and the tool that will be utilised to undertake various scenarios and the impact on the District. The Board Chair stressed to the A/CE the importance of ensuring that there is no delay in the Finance, Risk and Performance (FRAP) Committee receiving the modelling tool from Paxon Group to enable FRAP to undertake a detailed analysis.

Action: The FRAP Committee to report to the Board outlining the findings of the Northern Beaches Hospital financial modelling and the impact on the District once the analysis has been completed.

5.6 London Protocol Investigation – Next steps

The A/CE provided a verbal update. There have been numerous attempts to contact the complainant's lawyer. This matter is now closed unless a response is received.

5.7 Management of Patient Complaints

The tabled referral note outlined the action plan and progress thus far in addressing the issues previously identified in responding to complaints. The Board **noted** the information and the A/CE provided additional information on the linking of this improvement process across the District.

Action: The EDOP to establish a re-fresher program for existing staff and an induction program for new staff on the management of Patient Complaints and to table an update; due November Board meeting.

5.8 Pedestrian Access for Royal North Shore Hospital (RNSH)

The tabled referral note was **noted** by the Board and the Board Chair commented on the impracticality of some of the suggestions provided, but sought a swift solution to this long standing issue. RNSH will be the initial facility to resolve pedestrian access issues; other facilities will follow. Other matters were discussed including a covered walkway from the Reserve Road bus stop to the Acute Services Building (ASB) and the importance of having RNSH on the Artarmon Loop Bus shuttle, a service provided by Willoughby Council. The Board Chair advised that this matter had been brought to the attention of the NSW Minister for Health and received his endorsement to resolve this matter.

Action: The A/CE to present to the Board a series of solutions and the scope of the recommendations to improve pedestrian access; due by December 2017 Board meeting.

5.9 Vehicular Access for RNSH

The Board Chair updated the Board on the confusion by drivers and pedestrians regarding appearance of the roadway and walkway to the north of the ASB. The tabled document was **noted** covering the proposal for a campus-wide Traffic Planning Study.

In conjunction with the resolution to the repurposing of the Brown Building site (refer to item 5.13), the appearance, flow of pedestrians and traffic surrounding the ASB will be greatly improved.

The Board sought an urgent risk assessment on the traffic flow on the Reserve Road north of the entrance to the ASB.

The Board noted that it did not see any need for the master planning committee to be reconvened in relation to these matters.

Action: The A/CE to undertake an urgent risk assessment on the traffic flow on the Reserve Road north of the entrance to the ASB and to table the recommendations for traffic calming, improved lighting and signage to indicate whether the pathway is either vehicular or pedestrian and to clarify and enforce the no-right-turn sign; due as soon as possible.

Action: The inclusion of the traffic flow from North Shore Private Hospital to be included in the traffic assessment.

Action: An update to be tabled post the Traffic Planning Study and the remediation of the Brown Building by the A/CE; due no later than February 2018.

5.10 Lack of Clinical Space – Follow-up to meeting

The Board Chair updated the Board on the meeting he attended on 25 September 2017, A/CE and with members of the RNSH Medical Staff Council. It was agreed that face to face interactions is the preferred method of communication. A further meeting has been scheduled.

The Board Chair updated the Board on the temporary relocation of the NSLHD Executive team into the Douglas Building to allow the redevelopment of 4A, Zone 8 of the southern RNSH campus. Also discussed was the relocation of the childcare facilities. The potential opportunities for the area identified as 4B, Zone 8 and under the ownership of Property NSW, were discussed.

It was noted that an update to the NSLHD Clinical Services Plan will be undertaken as a matter of priority.

Action: A/CE to update the NSLHD Clinical Services Plan as a matter of priority.

5.11 NSLHD IT Plans 2016-2022

The Board **noted** the tabled document and the Board sought a three monthly update on the progression of the NSLHD ICT Plan 2016-2022.

Action: The Director, ICT to table a quarterly report on the progression of the NSLHD ICT Plan 2016-2022; due at the February, May, August and November 2018 Board meetings.

5.12 Options to reduce pressure on Private Health Insurance Premiums

The information provided in the referral note was **noted** by the Board and feedback has been provided to the Ministry of Health on 27 September 2017.

5.13 Brown Building – Rehabilitation of site

The Board Chair updated the Board on the meeting with the Chief Executive, Health Infrastructure and the A/CE. There are two elements in the resolution to transforming this site into a useable and visually pleasing green space opposite the entrance of the ASB; clean “fill” is easily and cheaply obtainable and in plentiful supply; the financial impost to address are costs associated with the drainage and stabilisation of the site. To this end, Health Infrastructure is obtaining a geotechnical report. The Board Chair advised the Board that the Minister for Health is fully aware of the situation and has given his full support to the resolution of this matter.

Action: An update to be tabled post the Traffic Planning Study (item 5.9) and the remediation of the Brown Building by the A/CE; due no later than February 2018.

5.14 Strategic Plans - Overview

The Board **noted** the tabled documents which covered the identification of the plans that cascade from the NSLHD Strategic Plan. The Board Chair advised that all NSLHD Plans are to be endorsed by the Board and regularly reviewed. It is envisaged that it will take approximately six months to ensure that all plans have been updated and are current. In addition to these plans, a new requirement by the Ministry of Health, the Quality and Safety Account is due in November 2017. In light of the amount of work to be undertaken, the Board supported the A/CE to seek additional and external resources if necessary.

The Board noted that the Corporate Governance Plan required additional work to tie together the individual components.

Action: The A/CE to present to the Board a roadmap of the development / updating / refreshing of the NSLHD Plans including resourcing, timing, endorsement by the Board and thereafter the timeline of regular updates to the Board; due November 2017 Board meeting.

6. Standing Business

6.1 Board Chair Report

The Board Chair updated the Board on the following:

- The *Board Walkabouts* are a great success and the Board is pleased with the feedback they are receiving from staff.

- The *Breakfasts with the Board* is proving to be a great opportunity for staff from a wide range of roles and seniorities to meet and converse with Board members in a casual environment.
- The meeting with the Chief Executive of HealthShare and the proposed presentation to the Board in February 2018.

The Board Chair updated the Board on the following workforce matters:

- The announcement of the appointment of the Chief Executive.
- The imminent recruitment to the following positions:
 - General Manager, Royal North Shore Hospital
 - Relationship Director, Northern Beaches Hospital
 - Director Finance & Corporate Services
 - Executive Director Medical Services.
- The resignations of NSLHD senior executives and the opportunities for realignment of roles and responsibilities.
- Various pending and possible projects in the District would require additional senior resources in capital works delivery and contract management.

The Board Chair shared with the Board his thoughts on:

- A Clinician Engagement Plan
- Ideas to encourage the next generation of doctors to be engaged on various managerial committees/councils etc.

Action: The A/CE to provide via the CE Report an update on the resolution of the matters presented to the Board at the Walkabouts/Breakfasts.

From a suggestion from the Board regarding improved feedback to/from staff, the A/EDOP advised that at Hornsby Hospital, management currently undertakes walkabouts and direct engagement with staff to discuss and address matters of concern and provide feedback.

Action: The A/CE to provide to the Board a paper on the work being undertaken to address matters raised by staff including innovation suggestions, the specific CE mail box and other avenues for improved communication to/from staff; due February 2018.

6.1.1 Hornsby Walkabouts – feedback

The tabled document and the information provided by the Board members were noted.

Action: The Chair, Consumer, Community, Carer & Communication committee to present to the board the findings of the NSLHD Website Improvement Plan; due prior to end of 2017.

6.1.2 Northern Beaches Hospital – notes

The tabled document and the information provided by the Board Chair was **noted**.

6.1.3 Consumer, Community, Carer & Communication (4Cs) Committee – Work Plan

The tabled document covering comments and suggestions on the above Work Plan provided by a Board member was **noted** and forwarded to the Chair 4Cs committee.

6.1.4 Sydney Clinical Skills & Simulation Centre

The tabled document and the information provided by a Board member attending the 20 year anniversary symposium were **noted**.

6.1.5 NSLHD Board Strategy

The tabled document and the information provided by the Board Chair on the Board Chairs Forum held 3 October 2017 were **noted**. The Board noted that the strategic work and priorities currently being undertaken by the Ministry of Health and the NSLHD Board are aligned.

6.1.6 Council of Board Chairs Forum

The tabled document **noted** and further information is provided via item 6.1.5.

6.1.7 Junior Medical officers (JMO) – follow up

Dr Harry Nespolon advised that work is progressing and updates will follow. The Board repeated its endorsement of the importance and priority of this work.

6.1.8 Sydney North Primary Health Network (SNPHN) - Update

The Board Chair advised of a meeting that he attended with the Chief Executive and Chair of SNPHN and the NSLHD A/CE. Of note are the actions coming from this meeting to improve participation and collaboration and the exchange of information on joint projects.

6.1.9 Opportunity for Board member training

The Board Chair sought from the Board their requirements for additional Board training.

Action: All Board to provide to the Secretariat their requirements for training for approval by the Board Chair.

The Board Chair asked Mr Andrew Goodsall to address the Board on the Private Health Insurance reforms. Mr Goodsall provided a tabled document outlining the issues for health insurance providers and to the public hospitals and in particular the implication of the reduction of benefits payable on prostheses.

6.2 Chief Executive Report

The Board **noted** the report and was taken as read. The A/CE advised the Board that roadmaps on NSLHD efficiencies and performance improvements are underway. Financial performance is noted as a high risk for the District. The A/CE advised that all executives have been alerted to the financial risk to the District, and are responsible for their financial roadmap.

The Brookvale Community Health Centre will open their doors by early December 2017. The Board will be undertaking a tour of this facility on 17 May 2018.

6.2.1 Auditor General – Statutory Audit Report 30 June 2017

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

6.2.2 Board visit to HKH – 20 September 2017

The Board **noted** the tabled document.

6.2.3 NSW Health Service Senior Executive Arrangements

The Board **noted** the policy directive: PD2017_029.

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

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

6.3.1 Client Services Report – 30 June 2017

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

6.4 Performance Report

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

6.5 NSLHD Risk Report – Board update

The Board **noted** the report as well as the increase in risk rating concerning the financial performance for the District.

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 MoH Performance summary of all LHDs – August 2017

The referral and report and the letter from the Ministry of Health covering performance were noted. It was agreed to continue with the referral note. The NSLHD remains on Level 0.

7. New Business

7.1 Model By-Laws

The Board **noted** the papers tabled covering the new Model By-Laws. The Board endorsed the adoption of these Model By-Laws for NSLHD. The Board Chair requested that the NSLHD & Sydney North Primary Health Network Executive Council be removed from the table as it is not a committee of the Board. The Board endorsed the Implementation Plan, and the current Committee Chairperson, secretariat and Executive Lead for the committees.

8. NSLHD Committee Reports

8.1 Board Audit & Risk Committee (BARC)

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

8.2 Clinical Council

The Board **noted** the draft September 2017 minutes. There were comments regarding item 4.7 – *Senior Medical Review of Multi-Day Stay Inpatient – LHD Guidelines* and the Board advised their concerns regarding the contents of the minutes.

Action: The A/CE to advise the Clinical Council of the concern of the Board regarding item 4.7 - *Senior Medical Review of Multi-Day Stay Inpatient – LHD Guidelines* and that the policy should be reconsidered and if continued, reworded to address the Board's concerns.

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

The Board **endorsed** the amended Terms of Reference, and **noted** the amended draft July and draft September 2017 minutes.

8.4 Finance, Risk and Performance (FRAP) Committee

The Board **noted** the endorsed August and draft September 2017 minutes.

8.5 Health Care Quality Committee (HCQC)

The Board **noted** the approved July and draft September 2017 minutes.

8.6 Medical Staff Executive Council

Nil available – next meeting 13 November 2017.

8.7 NSLHD & Sydney North Primary Health Network Executive Council

Nil available – no further meeting dates confirmed as yet.

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

The Board **noted** the endorsed June and draft September 2017 minutes.

Action: The Chair RITE to provide a report on the RITE committee at the December 2017 meeting.

9. Date, Time and Venue for Next Meeting

Tuesday 21 November 2017:

2pm Tour of Northern Beaches Hospital, Warringah Road, Frenchs Forest

4:30pm Board meeting South Wing Dining Annex, Manly Hospital, Darley Road, Manly

Meeting Closed: 7:50pm

CERTIFIED A CORRECT RECORD

**By Mr Trevor Danos AM, Chair
On 21 November, 2017**