

## NSLHD Board

### MEETING DETAILS

**Date:** Tuesday 16 August 2022 commencing 4:00pm

**Venue:** Garrigarrang Room, Level 14, Kolling Building or via MS Teams

**Present:**

Mr Trevor Danos AM	Board Chair
Professor Emerita Mary Chiarella AM	Deputy Board Chair (via MS Teams)
Mr Andrew Goodsall	Board Member
Mr Anthony Hollis	Board Member
Mr Brad Goodwin	Board Member
Mr Chris Greatrex	Board Member
Dr Donna Lynch	Board Member (via MS Teams)
Ms Karen Filocamo	Board Member (via MS Teams)
Ms Kimberley Reynolds	Board Member (via MS Teams)
Dr Michelle Mulligan OAM	Board Member
Ms Nadia Levin	Board Member (via MS Teams)
Dr Stephanie Teoh	Board Member (via MS Teams)

**In attendance:**

Ms Deb Willcox	Chief Executive, NSLHD (CE)
Mr Lee Gregory	Executive Director Operations, NSLHD
Ms Jacquie Ferguson	Director Finance and Corporate Services, NSLHD
Ms Tegan Mitchley	A/Board Secretariat
Ms Carla Bailey	Executive Director Operations Murrumbidgee LHD (Observer)
Mr Jorge Ferreira	Manager, Internal Audit, NSLHD (Item 3.1)
Ms Lewis Rangott	Executive Director Corruption Prevention, NSW ICAC (Item 3.1)
Ms Katie Kelleway	Clinical Nurse Specialist ICU, RNSH (Item 3.2)

**Apologies:**

Dr Cesar Uy	Chair MSEC, NSLHD
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### AGENDA ITEMS

There was no in-camera session preceding the meeting.

The Board Chair welcomed the Board members and attendees to the meeting and opened the meeting with an acknowledgement of country.

#### 1. Attendance / Apologies / Conflict of Interest

Attendance and apologies were **noted**.

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

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## 2. Confirmation of Minutes

### 2.1. Minutes of meeting held 19 July 2022

Minutes of the meeting held 19 July 2022 were confirmed as a true and accurate record of the meeting.

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## 3. Presentations

### 3.1. Update on corruption topics and trends (ICAC)

The Executive Director Corruption Prevention, NSW ICAC presented an update on corruption topics and trends.

**ACTION:** Guide to Conflict of Interest for Board Members to be circulated to Board

### 3.2. Mechanical restraint quality initiative in ICU

Katie Kelleway, Clinical Nurse Specialist ICU, RNSH presented to the Board on the mechanical restraint quality initiative in ICU. The Board congratulated Ms Kelleway for the thoughtfulness and positive outcomes of this initiative.

### 3.3. Patient Flow

The Executive Director Operations, NSLHD provided an update on Patient Flow within NSLHD. Current challenges in patient flow were identified as staffing shortages, delayed discharges, COVID effects and complexity of patients. NSLHD is exceeding both its peer and state averages in key patient flow KPIs. Additional funding has been invested into the 2022 Winter Strategies across the district and a number of sustainable patient flow initiatives are being implemented.

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## 4. Patient Story

### 4.1. HKH Speech Pathology, Allied Health

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

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## 5. Ongoing Business/Action Items

### 5.1. Action List – July 2022

The action list was reviewed and updated accordingly.

### 5.2. Service Agreement Update

The Chief Executive NSLHD (CE) provided a verbal update on the Service Agreement with the following highlights:

- 93 additional FTE under the Resilience Workforce component. This is to reduce excess leave, premium labour and overtime to support NSLHD staff in taking leave
- There will be some one-off funding for surgery and deferred care
- Additional funding has been received for operational costs for Hornsby Kuring-gai Hospital, Adolescent and Young Adult Hospice operating costs, and an extra NICU cot and for the RNSH Spinal Unit

### 5.3. JMO Wellbeing Update

The CE provided a verbal update on JMO Wellbeing.

**ACTION:** A paper on JMO Wellbeing will be provided at the next Board meeting

#### **5.4. (Business without notice) Update on Accreditation**

The Board Chair noted that Primary and Community Health will undergo Accreditation in the week commencing 22 August 2022. The CE advised that preparations are well underway.

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### **6. Chief Executive update on COVID-19 activities**

The CE provided a verbal update on the current COVID-19 situation within NSLHD with the following highlights:

- Staff furlough has decreased
- Recruitment of additional staff continues
- State remains on Amber alert
- Surgical activity has decreased to align with staff shortages and assist in patient flow

The Board Chair requested information on unused annual leave of the NSLHD Executive .

The CE discussed the possible implications of COVID-19 on the upcoming People Matter Survey.

The Deputy Board Chair led a discussion on ways that NSLHD might staying connected with staff, staff recognition and reward and flexible working arrangements.

**ACTION:** Board to receive a paper regarding Executive staff's unused annual leave at next Board meeting

**ACTION:** Director Nursing and Midwifery Services NSLHD, Director Allied Health NSLHD, and Director People and Culture NSLHD to attend the next Board meeting to discuss COVID-19 impact on staff and staff wellbeing generally.

**ACTION:** Director People and Culture, NSLHD and Director Organisational Development and Capability, NSLHD People and Culture Directorate to present to Board at the next Board meeting on the communications strategy for the upcoming People Matter Survey.

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### **7. Ryde Redevelopment Update**

The CE provided a verbal update on the Ryde Redevelopment, highlighting that all planning work is proceeding with a strong focus on sustainability.

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### **8. Matters for Decision/Approval**

#### **8.1. NSLHD Strategic Plan**

The NSLHD Strategic Plan 2022 – 2027 was endorsed by the Board.

The Board acknowledged the Health Services Planning Manager, NSLHD and the Director Strategic Operations, NSLHD as well as the NSLHD Strategic Plan Project team for their outstanding work and efforts in the development of the plan.

The Board discussed research at NSLHD in the context of the plan.

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**ACTION:** CE to convene a meeting of the Board Chair, Ms Nadia Levin and others to discuss research at NSLHD with a view to the Board receiving a paper at the October Board meeting

## **8.2. 2021/22 Corporate Governance Statement**

The 2021/22 Corporate Governance Statement was endorsed by the Board. The Board Chair was authorised to sign the document on behalf of the Board.

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## **9. Strategic Discussion**

### **9.1. Board Priorities August 2022**

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

### **9.2. Chief Executive Priorities August 2022**

This report was **noted** and accepted by the Board.

### **9.3. Kolling Institute Academic Director**

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

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## **10. Standing Business**

### **10.1. Board Chair Report**

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

- NSLHD Honour Roll proposal is in development
- The Board Chair visited Royal Rehab
- Consumer Forum to be held in September 2022
- Board breakfasts to resume shortly
- Afternoon tea with Consumer Committee to be rescheduled to later this year
- 2022 Safety and Quality Account to come to the Board in September
- PHN joint board meeting to take place in October
- Annual Public Meeting and Year in Review publication will give focus to Diversity, Inclusion and Belonging and Sustainability achievement and initiatives
- Possible consumer digital literacy project to be further investigated
- NSLHD will be a lead location for State-wide coordination of the NSW voluntary assisted dying initiative

**ACTION:** Board to receive paper on NSLHD role in relation to NSW voluntary assisted dying initiative at November Board meeting

### **10.2. Chief Executive Report August 2022**

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

The CE provided a verbal update with the following highlights:

- NSLHD remains on Performance Level 0
- Recruitment underway (jointly with CCLHD) for Chief Digital Health Officer
- CE attended NORTH Foundation annual strategy day
- NSLHD has two nominations in the NSW Nursing and Midwifery awards – both staff members from Ryde Hospital

**ACTION:** NORTH Foundation to do briefing note to the Board on what Board members can do to support NORTH Foundation's social media activities.

**ACTION:** CE to arrange for a briefing note from Director Corporate Communications NSLHD on what Board members can do to support NSLHD's social media activities.

### 10.3. Finance Risk and Performance Report

Not available due to Statewide financial results for July (as first month of the year) having not yet been uploaded.

### 10.4. Committee Updates

#### Board Audit and Risk Committee (BARC)

No update available.

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

Discussion on how "Net Cost of Service" and its components will be reported (with accompanying narrative) going forward, both to the Ministry and the Board.

#### Consumer Committee (CC)

A verbal update was given by the Committee Chair.

#### Health Care Quality Committee (HCQC)

A verbal update was given by the Committee Chair. General discussion on COVID-19 staffing issues and their implication for reported results as well as the challenges of a possible unannounced assessment program for Accreditation in 2024.

#### JMO Board Wellbeing

No update available.

#### Clinical and Quality Council

No further update provided.

#### Medical Staff Executive Council (MSEC)

No further update provided.

#### NSLHD Research Advisory Committee

No update available.

#### Planetary Health Committee

No update available.

#### NSLHD Digital Health Steering Committee

No update available.

### 10.5. NSW LHD Selected Performance Indicators – June 2022

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

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## 11. NSLHD Committee Minutes and Reports (taken as read)

## 11.1. Board Audit and Risk Committee (BARC)

Not available.

## 11.2. Finance Risk and Performance Committee (FRAP)

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

## 11.3. Consumer Committee

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

### 11.3.1. Consumer Committee STRA2P Report

Not available.

## 11.4. Health Care Quality Committee (HCQC)

This item was **noted** and taken as read. The Board **noted** and discussed the NSLHD Quarterly Board Report: Key Performance Indicators (January to March 2022) issued by the Ministry. The Board had the benefit of a detailed briefing note from the CE that identified and provided an explanation for all KPIs that were reporting Red. The impact of COVID-19 on various KPIs was noted. Several performance improvement opportunities were identified. The Board encouraged the CE in future to involve the HCQC and the HCQC Chair in the review and response to the quarterly reports.

### 11.4.1. HCQC STRA2P

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

### 11.4.2. HCQC Safety and Quality Report

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

## 11.5. JMO Wellbeing Board Committee

Not available.

## 11.6. Clinical and Quality Council

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

## 11.7. Medical Staff Executive Council (MSEC)

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

## 11.8. NSLHD Research Advisory Committee

Not available.

## 11.9. Planetary Health Committee

Not available.

## 11.10. NSLHD Digital Health Steering Committee

Not available.

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## 12. Other Business

### 12.1. Risk Register

A Board Member raised the issue of how patient information and patient data sets is being coordinated across different IT platforms. It was noted that eHealth is

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undertaking a substantial piece of work to move all LHDs to a single platform so as to eliminate hybrid systems.

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### **13. Date, Time & Venue for Next Meeting**

Tuesday 20 September 2022 commencing at 4:00pm, Mona Vale Hospital, Coronation Street/Microsoft Teams

**Meeting Closed:** 7:19pm

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### **CERTIFIED A CORRECT RECORD**

**Trevor Danos AM, Chair**

20 September 2022