NSLHD BOARD MEETING

TUESDAY, 3 NOVEMBER 2015, 4.00PM BOARDROOM EDUCATION BLDG, MACQUARIE HOSPITAL



MINUTES

Present:

Professor Carol Pollock Ms Diane Flecknoe-Brown Dr Michele Franks Mr Andrew Goodsall Ms Beata Kuchcinska Mr Peter Young Mr Don Marples Mr Anthony Hollis Ms Annette Schmiede Dr Dianne Ball

In attendance:

Mr Lee Gregory Dr George Lau Ms Andrea Taylor Ms Kim Field Ms Jen Smithwick Mr Anthony Dombkins Ms Carol Parker

Apologies:

Adj. Associate Professor Vicki Taylor Adjunct Professor Ann Brassil Ms Betty Johnson AO Dr Andrew Montague Chair, Board Board Member Board Member

A/Chief Executive Chair Medical Staff Executive Council Director Mental Health & Drug and Alcohol Director Primary & Community Health A/Director Finance & Corporate Services A/Executive Director Operations NSRHS/NSLHD Secretariat

Chief Executive, NSLHD Board Member (overseas) Board Member Executive Director Operations, NSRHS/NSLHD

1. Presentation

Ms Andrea Taylor, Director Mental Health & Drug and Alcohol presented information regarding highlights of the MH&DA Directorate over the last two years.

Ms Taylor advised the Board on the interaction with Healthscope in regards to the new Northern Beaches hospital. Further discussion will occur in regard to community services, which will be under the NSLHD, and mental health services within the hospital being under Healthscope.

The Board was advised of the status of patients currently living on the Macquarie Hospital campus in regard to the new Commonwealth Pathway to Community Living Project. There are 380 clients state-wide who have been in mental health care for over 12 months. NSLHD has 117 patients of the 380. The issue is how best to transition these clients to community facilities.

2. Patient Story

Professor Pollock relayed to the Board a patient story regarding a clinician who had contacted Professor Pollock following hand surgery at RNSH. The clinician had not previously been a patient and having to be in hospital at the other end of care was a new experience.

The clinician wanted to relay a special thanks to the nursing team, and was very pleased to have had such a positive experience whilst in hospital.

3. Attendance / Apologies / Quorum / Conflict of Interest

Attendance and apologies were noted. Conflict of Interest: Nil

4. Confirmation of Minutes

The Board accepted the minutes of the meeting held 6 October 2015 subject to amendments proposed by Board members to be considered by the Chair.

- Page 3 Clinical Networks Desktop Evaluation should read
 -The Board also suggested that this information should also be provided to the Audit and Risk Management Committee and Finance & Performance Committee where relevant to Finance and Performance.
- Page 4 Staff survey Actions as suggested Should read
 - the Board noted the challenges that need to be addressed, and expressed concern at the results of the staff survey
 - The Director Workforce & Culture was requested to report back to the Board on remedial actions early in 2016

5. Ongoing Business (in conjunction with Action List) The items in the Action List were discussed and **noted**.

5.1 A/Chief Executive Summary

The Board **noted** the report and discussion was had on the following points:

The Board requested that the A/CE indicate the three top issues that would be considered in seeking Board input/consultation

In regard to Mental Health, Drug & Alcohol, what might the LHD do to secure the future of resourcing (infrastructure and staffing) for MHD&A at Macquarie Hospital.

Members of the Board advised that following the meeting with Macquarie staff prior to the November Board meeting, some staff raised the issue of lack of communication in regard to the Macquarie campus site.

ACTION: LHD Executive to provide Macquarie Hospital staff an update regarding the future planning of the Macquarie Hospital campus. A/EDOPS to ensure that communications are kept up to date.

ACTION: LHD Executive to follow-up Macquarie Hospital staff concerns.

In relation to risks identified in the CE Report and in response to the Board raising this issue, the Board was advised that most risks are on the register and some are facility only risks which are reviewed every month. The Risk Manager has been asked to look at the Risks on the report and identify those that should be on the RiskIt Reporting system.

5.2 Update – Items for discussion with PHN's for Planning Day

Ms Dianne Ball advised the Board that the NSLHD Board Planning Day will be held shortly after the first meeting of the PHN, and information for the Planning Day will be ready by that time.

There was further discussion on timing of PHN discussion at the Planning Day as it is important that the LHD be involved in the PHN planning process to ensure cohesiveness in both planning processes.

5.3 Finance and Performance Report

The Board noted the Financial Summary for September 2015/2016 and that the DF&CS is pleased with the results to date, especially the improved performance around revenue.

The Board noted the new page (11) which shows additional staffing figures that have had to be recruited to due to new services and capacity. Further funding has been provided for these services.

An update was provided to the Board on the Royal North Shore (RNS) Public Private Partnership (PPP) issues that are being resolved with the LHD's private partner.

The Board queried the reason behind the significant increase in SP&T custodial funds in the period July through September 2015 and was provided advice on the timing of receipt of these funds across the financial year.

5.3.1. The Audit Office – Management Letter on the Final Phase of the Audit for the Year Ended 30 June 2015

The Board noted the Management Letter outlining issues, recommendations and management response.

In regard to the leave balances, the Board asked what remedial action is being taken to reduce leave balances > 70 days and by whom.

Action: DW&C to provide results of the remedial actions to the Board at the February 2016 meeting.

5.4 Capital Works Update

The Board noted the Report – taken as read.

Nothing further to report regarding southern campus at RNSH, the recommendation is yet to go to Cabinet.

5.5 Risk Register Report Summary

The Board discussed the report and requested further detail prior to discussions with the Director Clinical Governance at the next meeting of the Board.

Action: Director Clinical Governance to provide a detailed response to the above issues for the December Board meeting

6. New Business

6.1 Risks with the National Disability Insurance Scheme (NDIS)

The Board noted and congratulated Ms Kim Field, Director Primary and Community Health on such an in-depth paper. NDIS is a new Commonwealth package of care in regard to disability, which includes mental health disability and people with mild disability. Services that were previously identified and paid for by the Commonwealth, i.e. health delivery in the community, will now not be funded under this scheme. Part of the Commonwealth/State agreement is that there is a clear delineation between health and NDIS funded services. This presents a potential funding loss to NSLHD.

Other issues and services that this will impact on were discussed. Ms Field suggested that the assessment process needs to start fairly quickly regarding our long term and community patients, and the LHD must be proactive in engaging with NGO's so that patients can start to be moved through the process quickly.

A planning day will be held with FACS which will include a consumer group.

It was suggested that this also needs to be raised at the Risk Committee

Action: DMH&DA and DPCH to draft a few questions to raise with the Secretary at the Board Planning Day i.e. solutions/investments.

7. Standing Agenda Items

7.1 NSLHD Committee Minutes

7.1.1 Health Care Quality Committee

The endorsed minutes of 10 September 2015 and draft minutes of 8 October 2015 were **noted** by the Board.

7.1.2 Medical and Dental Appointments Advisory Committee (MDAAC)

The endorsed minutes of 2 September 2015 were noted by the Board.

7.1.3 Finance and Performance Committee

The endorsed minutes of 25 August 2015 and draft minutes of 22 September 2015 were **noted** by the Board.

7.1.4 NSLHD Clinical Council

The endorsed minutes of 7 September 2015 and draft minutes of 10 October 2015 were **noted** by the Board.

7.1.5 Medical Staff Executive Council (MSEC)

Next meeting 16 November 2015.

7.1.6 Integrated Risk Management Advisory Committee (IRMAC)

The endorsed minutes of 10 August 2015 and draft minutes 7 October 2015 were **noted** by the Board.

The Board queried whether the LHD can commission some research to identify whether there is any correlation between risk ratings and complaints, and separately, community vs LHD risk ratings. RISKIT should be able to do some of this evaluation. It was also suggested that CEC be asked if they have any information on correlation of complaints and risks.

Action: DCG to contact CEC for information for December Board meeting. Secretariat to contact Ms Marr's office regarding availability for December meeting.

7.1.7 Capital Asset Planning Committee

The endorsed minutes of 6 July 2015 and draft minutes 21 September 2015 **noted** by the Board.

7.1.8 Audit and Risk Management Committee

No further minutes to endorse, next meeting December 2015.

7.1.9 Education Sub-committee

The endorsed minutes of 11 August 2015 and draft minutes of 13 October 2015 **noted** by the Board.

7.1.10 Aboriginal Health Advisory Committee

Minutes not available

7.1.11 Peak Community and Consumer Participation Council (PCCPC)

The endorsed minutes of 3 June 2015 and 5 August 2015, and draft minutes of 7 October 2015 were **noted** by the Board.

7.1.12 Research and Innovation Sub-committee

Nil available

8. Correspondence

8.1 NSW Kids and Families

The Board noted the correspondence and asked if the work formerly oversighted the statutory Health Corporation will be impacted by the new arrangements?

Action: DPCH to provide information to be provided for December Board meeting

9. Assignment of Common Seal Documents

Deferred to next meeting

10. Date, Time & Venue for Next Meeting

1 December 2015, Building 51, LHD Executive Office, RNSH Campus

Meeting Closed: 7:10pm

CERTIFIED A CORRECT RECORD

By Professor Carol Pollock, Chair On 5 May 2016