

NSLHD Board

MEETING DETAILS

Date: Tuesday 18 July 2017 commencing 4:30pm

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

Present:

Mr Trevor Danos AM	Board Chair
Dr Dianne Ball	Board Member
Adjunct Professor Ann Brassil	Board Member
Professor Elizabeth Chiarella	Board Member – teleconference until 6:30pm
Mr Andrew Goodsall	Board Member
Mr Brad Goodwin	Board Member
Mr Anthony Hollis	Board Member
Ms Beata Kuchcinska	Board Member
Mr Don Marples	Board Member
Adj. Associate Professor Annette Schmiede	Board Member
Mr Keith Skinner	Board Member
Clinical Associate Professor Saxon Smith	Board Member

In attendance:

Adj. Associate Professor Vicki Taylor	Chief Executive NSLHD
Mr Christopher Thomson	A/Director Finance & Corporate Services
Ms Elizabeth Curran	Executive Director Operations NSRHS & NSLHD
Dr David Jollow	Chair, Medical Staff Executive Council
Ms Judith Hogan-Wright	Secretariat

Apologies:

Nil

MEETING DETAILS

The Board and the Chair, Medical Staff Executive Council held a 15 minute in-camera session with the Chief Executive, NSLHD.

1. Presentation

1.1 Better Care Together

The Executive Director Operations NSRHS & NSLHD (EDOP) had provided in the Board meeting papers, detailed information on the above program currently operational at Ryde and Royal North Shore Hospitals (RNSH). The papers were taken as read. The Chair congratulated the EDOP on this initiative and invited a discussion on a number of strategic issues including culture and accountability, maintaining and improving patient-focus, improving clinician engagement, IT enhancements, gap analysis, required system and governance changes, required investment and rollout to other facilities.

The EDOP commenced her response by referring to the tabled document and the achievements at Ryde and RNSH. Further discussion covered the work currently being undertaken to ensure clarity on priorities in the following five areas: financial sustainability, efficiency of a patient's journey, surpassing surgery targets, successful transition of the Northern Beaches Hospital

including the implications to the whole of the District, and the continual improvement of quality of care. The Board noted that a prerequisite to achieving the above will be an engaged high performance leadership culture and an improved governance structure.

A Board member recommended that NSLHD progress cutting edge technology to enable improved patient journeys and to gather real-time patient feedback. Also discussed were the definition of culture that would be optimal at NSLHD and the removal of siloed operations and taking a District-wide focus.

Action: The EDOP to table an updated report addressing the matters identified by the Board at the September Board meeting.

The Chair and Board undertook discussions on the various matters of culture change and the importance of top-down commitment and commented on the Ernest & Young culture review. The Board noted that the NSLHD Executives have the full support of the Board to drive positive culture changes.

2. Patient Story

2.1 Letter of appreciation – RNSH

The Board **noted** the pleasing letter of appreciation.

2.2 Letter of complaint

The Board **noted** the tabled letter of complaint and were advised that an independent review is currently being undertaken.

Action: The Chief Executive (CE) to table the findings of this review for the Board's information.

3. Attendance / Apologies / Quorum / Conflict of Interest

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

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

The Chair advised the Board that Clinical Associate Professor Saxon Smith has tendered his resignation with the Health Minister. The Chair and the Board expressed their thanks and appreciation to Clinical Associate Professor Saxon Smith for his contribution to the NSLHD Board and to the Health Care Quality Committee.

It is anticipated that by the end of August 2017 a new Board member will be appointed.

4. Confirmation of Minutes

4.1 NSLHD Board meeting held 20 June 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 Board Strategic Planning Day and Quality & Safety Workshop

The CE advised that a planning meeting has been arranged with stakeholders and firm details will be provided at the August Board meeting.

5.2 Fire Performance of External Wall Cladding – NSLHD buildings

The Board **noted** the tabled document and an updated report will be provided at the August Board meeting.

Action: The CE to include a review of Northern Beaches Hospital in regards to external wall cladding to be included in the updated report; due August Board meeting

5.3 NSLHD Clinical Council – Representation from NSLHD Board

The Board **noted** the tabled document. The membership of the NSLHD Clinical Council is extensive and although Board member participation is not a requirement as per the Model By-Laws, there is representation by the Chair MSEC, CE and EDOP at these meetings to ensure the Board is updated on any matters of significance.

The Board commented on the number of committee meetings convened throughout the District and recommended a review of these committees be undertaken.

Action: The CE to table documents post the committee review which will include an organisational committee chart, the committee membership and purpose; due February 2018.

5.4 Junior Medical Officers – Support initiatives in response to suicides by young junior doctors

The Board **noted** the tabled document and the Chair advised that he is meeting with a Junior Medical Officer (JMO) on 19 July and will report back to the Board comments from this meeting. The Board commented on the siloed approach and recommended that the initiatives be unified and standardised District-wide. The CE commented on the uniqueness of certain services which will need to be taken into consideration when considering a District-wide approach.

Further discussion covered the overtime of JMOs, nursing etc. to which the EDOP advised that work is currently being undertaken to address this issue in consideration to the welfare of staff and its sustainability to the District. Also discussed was the approach not only on JMOs but by the wider clinical community.

Action 1: The CE and EDOP to provide an updated paper on the work currently being undertaken to support JMOs; due September 2017.

Action 2: The Secretariat to circulate to the Board a media article covering harassment and bullying experienced by a JMO.

5.5 Mental Health Drug & Alcohol Directorate - Update

The Board **noted** the tabled document. The Board discussed the information covering alcohol consumption rates across the NSLHD, particularly for women in the Northern Beaches area. The EDOP provided information on the current pathways and the proposed improvements to reduce acute presentations and improve patient outcomes.

Action 1: In relation to alcohol consumption rates across the NSLHD: A paper to be tabled by the CE covering public health initiatives and related policies; due by September Board meeting.

Action 2: A presentation to be scheduled in the next six months covering the NSLHD Health Promotion Team's work in reducing alcohol consumption.

In addition to the above, the following matters were discussed:

Leadership Walk Arounds

Action: The Secretariat to send out a reminder to the Board on the dates and proposed format.

RNSH Public Private Partnership – Financial Arrangements

A late tabled letter from Chief Financial Officer and Deputy Secretary, Ministry of Health was **noted** and discussed. The Chair Finance, Risk and Performance (FRAP) Committee outlined to the Board the background of the soft service agreement, the implications of the contents of the tabled document, and its financial effect on the NSLHD. The CE provided the operational aspects of the soft service agreement and the implications both to RNSH and to the District should a satisfactory resolution not be achieved.

Action: The CE to report to the FRAP Committee and then to the Board on the resolution to the RNSH PPP – financial arrangements; August Board Meeting.

Improve access to the Acute Services Building (ASB)

A late tabled document was **noted** with discussion on the various options to alleviate the difficulties of accessing the ASB from St Leonards train station. A Board member commented on the smart phone applications that can be used external and internal to a hospital to provide ease of navigation. The CE commented on the resourcing both financial and staffing to enable an optimal solution. The Board noted that issues of access were not unique to RNSH but that RNSH would be the initial focus of improved access.

Action: The CE to provide a short and long term approach to the accessibility issues; due by August Board meeting.

Brown Building – rehabilitating the site

The CE was requested to follow this matter up with Health Infrastructure to restore this landscape into a useable green space for staff and patients.

Action: The CE to provide a short and long term approach to the rehabilitation of the site; due by August Board meeting.

The Board also commented on the traffic configuration surrounding the ASB and was advised that this is a matter in hand following a safety audit report. The CE advised that a staged plan will be tabled for the Board information encompassing all the above issues.

NSLHD Strategic Plan – Performance Measures

The Chair sought information on the methodology of the performance measures and whether a traffic light report could be utilised for evaluation.

Chair’s Lunch or Chair’s Dinner

The Chair sought the opinion from the Chair MSEC and Clinical Associate Professor Saxon Smith regarding this initiative.

Action 1: The EDOP to retest the attendance by emerging leaders and to come back to the Board with the next steps on how to facilitate these sessions including various dates, times and locations; due by August Board meeting.

Action 2: The Secretariat to then arrange the function and garner attendance by Board members; post Action 1.

Action 3: The EDOP and CE to identify the tools to assist emerging leaders to develop their leadership skills; due August Board meeting.

Action 4: Mr Anthony Hollis to identify methodology to open channels of engagement with corporate stakeholders; due August 2017.

Fundraising Options

A late tabled document was **noted** and discussed. The CE updated the Board on the fundraising activities.

6. Standing Business

6.1 Board Chair Report

The Chair outlined the matters which have occupied him over the last month and also provided the following tabled documents providing detailed information on:

6.1.1 Meeting with the Health Minister

The Board **noted** the report.

6.1.2 Kolling Foundation – fundraising agreement

The Board **noted** the referral. The Chair provided background information on the extension of the current agreement.

6.1.2.1 Naming of Foundation

The Board provided their preferred name via an out of session circular for the fundraising entity. This in turn has been communicated.

6.1.2 NSLHD Emerging Leaders

The paper was **noted** and further comments are noted in the Ongoing Business section.

6.1.3 Independent inquiry into fraudulent doctor

The report was **noted** and the Board took comfort in the findings.

6.1.4 Service Agreement 2017-18 and covering letter from Secretary

The Board **noted** the agreement with the signed document will be returned by the end of this month. The Chair outlined 2018-19 agreement which will include the service provisioning of the Northern Beaches Hospital.

6.1.6 Board Performance Review

The Chair proposed that this review be postponed until December 2017 or June 2018 and the Board agreed. The Chair advised that he is open to discussion on Board performance at any time.

The Chair commented on additional matters of interest:

- Macquarie University has expressed their interest to have stronger ties with NSLHD and to increase joint research activities.
- Correspondence has been received covering carer's accommodation and a response is being drafted by the CE and will be shared with the Board. Further discussion extended to affordable accommodation for staff in the suburbs surrounding the major NSLHD hospitals.
- Correspondence has been received concerning RNSH bed blocks and this letter and the response will be tabled at the August Board meeting.
- A meeting has occurred with representatives of Hornsby Ku-ring-gai Hospital covering the Stage 2 redevelopment and any anticipated budget shortfall.
- The Chair discussed master planning and the relocation of staff currently located in the southern RNSH campus. An Expression of Interest (EOI) to participate in short and long term master planning has been circulated. Discussion moved to the service modelling post the operationalization of the Northern Beaches Hospital and the impact on the NSLHD. The CE commented on the large amount of work that has been undertaken in the past and the work currently being undertaken via the Northern Beaches Project Management Office to refresh this piece of work.

- The launch of the NSLHD Strategic Plan 2017-2022 was held on 13 July 2017 with pleasing feedback received. The next step is the reporting matrix due to the Board in August 2017.
- A late tabled document covering Aboriginal *Welcome to Country / Acknowledgment to Country* was discussed.

Action: The Secretariat to forward the document to the Director Aboriginal Health for review and for the updated document to be provided to the Board members for official duties.

- The Chief Executive of HETI will be presenting to the Board at the December Board meeting.
- The Chair requested that all future presentations and associated papers coming to the Board should be accompanied by a covering sheet that summarises the issues and identifies risk, governance, strategic issues and linkages to the Strategic Plan.

Action: The EDOP to prepare a proforma for review by the Chair. Due: ASAP.

6.2 Chief Executive Report

The Board **noted** the report prepared by the Interim Chief Executive and the report was taken as read. The CE confirmed to the Board that work as listed in the document is continuing and more details will be forthcoming in the August Board meeting covering NSLHD culture improvements facilitated by Ernst & Young.

6.2.1 Allied Health Professor appointment

A paper and a late tabled document were **noted** by the Board. The Board agreed that this was a pleasing enhancement to our services.

The Chair updated the Board on the imminent appointment of the Interim Director and the search for the Chief Operating Officer of the Kolling Institute. The Chair addressed the concerns of the Board by stating that he was very confident in the future of the Kolling Institute.

6.3 NSLHD Board – Finance Risk and Performance Report – May 2017

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

The Acting Director Finance & Corporate Service (ADF&CS) spoke to late tabled documents covering the 2016/17 Budget adjustment for additional activity, 2016/17 Financial Results, 2017/18 Service Agreement Summary and the projected forecast. The Board thanked the ADF&CS and his team for NSLHD's fiscal achievements.

The Chair and the Board commented on the other areas where expenditure will be required over the next five years, the areas that have potential efficiencies and the work currently being undertaken across the District in the area of accountability. The CE added that there will also be a focus to acknowledge achievements going forward. The CE commented on last year's performance and the ongoing focus on prudent use of premium labour and reduction in recruitment delays.

6.4 NSLHD Risk Report – District, Site & Service

6.4.1 Enterprise Risk Management Report by District

6.4.2 Enterprise Risk Management Report by Site

The Board **noted** the above tabled documents. The Board sought clarification as to why the Clinical Engagement risk was marked as increasing.

Action: The Chief Risk Officer to consider and advise why the Clinical Engagement risk is marked as increasing. Due: August Board meeting.

6.5 MoH Performance summary of all LHDs – May 2017

The report was **noted** with NSLHD remaining on Level 0.

7. Committee Performance Reports

7.1 Integrated Care Portfolio

7.1.1 Integrated Care – Report

7.1.2 Integrated Care Initiatives

The Board noted the tabled documents and requested a six monthly update be scheduled. A Board member commented on the ambiguity and lack of clarity in the Key Performance Indicators (KPI) resulting in difficulty monitoring milestones or KPIs.

8. NSLHD Committee Reports

8.1 Board Audit & Risk Committee (BARC)

The Board **noted** the endorsed March and April 2017 minutes.

Action 1: A paper to be tabled on the bad debt write-off processes by the ADF&CS within two months post discussion at the FRAP committee meeting.

Action 2: The ADF&CS to table a paper covering over drawn trust fund balances firstly to FRAP committee meeting and then referred to the Board; due within two months.

8.1.1 BARC Terms of Reference (ToR)

The Board commented on the references and membership etc. listed within this document which are no longer relevant and requested this ToR be reviewed and re-tabled for endorsement.

Action: The updated BARC ToR to be represented to the Board for endorsement; due post endorsement by the BARC membership.

8.1.2 NSLHD Internal Audit Charter

The Board noted the Charter.

8.2 Clinical Council

The Board **noted** the endorsed May & June 2017 minutes.

8.3 Consumer, Community, Carer & Communication (CCCC) Committee

Nil available. At the August Board meeting a report outlining the initiatives for this committee will be presented.

8.4 Finance, Risk and Performance (FRAP) Committee

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

8.5 Health Care Quality Committee (HCQC)

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

The Chair advised the Board that the Chair of HCQC going forward will be Professor Elizabeth Chiarella due to the resignation of Clinical Associate Professor Saxon Smith.

8.6 Medical Staff Executive Council

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

8.7 NSLHD & Sydney North Primary Health Network Executive Council

Nil available.

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

The Board **noted** the endorsed March 2017 minutes but requested that the draft June minutes be rescinded. The updated June minutes were re-presented for the Board's information during the Board meeting.

Action: Secretariat to schedule a suitable time for presentation to the Board on the initiatives by the RITE Committee.

9. Correspondence

9.1 Letter of apology to patient's family

The Board **noted** the letter.

10. New Business

10.1 Board meeting dates – proposed for 2018

Action: Secretariat to distribute the proposed list of Board meeting dates for 2018 and send calendar appointments to the Board and attendees.

10.2 Board Sub-committee proposed meeting dates for 2018

The Board **noted** the proposed dates.

10.3 Patient WiFi – Consumer, Community Carer & Communication (CCCC) Committee

The Board **noted** and thanked the Chair CCCC Committee for the initiative to improve patient experience within RNSH.

Action: The CE to table a detailed document covering principles, costings and the implementation processes and to seek the Board's endorsement; due August / September 2017.

11. Date, Time and Venue for Next Meeting

22 August 2017, commencing at 4:30pm, ECLA Meeting Room, Ryde Hospital

Meeting Closed: 8:00pm

CERTIFIED A CORRECT RECORD

By Mr Trevor Danos AM, Chair
On 22 August 2017