NSLHD BOARD MEETING

TUESDAY, 21 MAY, 2013 AT 4.30PM BOARDROOM, LUMBY BUILDING, HKH



MINUTES

1. Present:

Professor Carol Pollock Chair, Board Ms Betty Johnson AO **Board Member** Mr Michael Still **Board Member** Associate Professor Annette Schmiede **Board Member** Ms Diane Flecknoe-Brown **Board Member Board Member** Ms Ann Brassil **Board Member** Mr Peter Young Mr Anthony Hollis **Board Member** Dr Michele Franks **Board Member** Associate Professor Sue Kurrle **Board Member**

Invitees:

Adj Assoc Professor Vicki Taylor

Chief Executive

Mr Lee Gregory
Dr Andrew Montague
Ms Maree Hynes
A/Director Operations/Finance
Director Operations
Program Director

In attendance:

Ms Carol Parker A/Secretariat
Ms Meredith Richards Secretariat

Apologies:

Ms Judith Hopwood Board Member

Dr Adam Rehak Chair Medical Staff Council

Conflict of Interest

Nil

Presentations

Northern Beaches Project

Anthony Manning, Northern Beaches Project Director and Warwick Smith, Probity Officer - Procure Group, presented information on the Northern Beaches Project.

An industry briefing was held following the Minister's announcement. Six copies of Volume 2 of the EOI have been issued. Interested proponents have until 24 May to register interest. The EOI responses are due on 11 July 2013 and one to one briefing sessions with the EOI proponents will be held in the following weeks. The EOI's will be reviewed in July-August. Extracts have appeared in the Manly Daily.

A Tender Review Committee was involved in selecting the law firms. Consensus wasn't reached amongst the Committee in terms of one law firm. As this is a different model, it was felt very strongly that there was a need for a law firm that clearly understood a clinical contract, and the other component was the commercial contract and the IR. Freehills have been appointed to provide advice regarding the clinical component of the contract. The successful proponent for the business and IR contract is Minter Ellison. Financial implications in having two firms is small, both firms revised their costings.

An integrated project team has been established, the individual lawyers will be a part of the project team and will be managed as part of the team rather than as consultants.

The LHD Integrated Project Team is now working on the Request for Proposal (RFP) document, for release in September with the intention that it would be returned in March 2014 in order for a final decision by September 2014.

The Community Health development team has developed the concepts, and have prepared a functional brief for the Community Service Project. The functional brief will go to the Project Coordination Group for approval.

Warwick Smith provided information regarding probity processes.

Communications with proponents is one of the biggest risks. There is an overarching probity plan and Confidentiality Agreement which all involved will be requested to sign.

Probity related objectives of the procurement process are as follows:

- The implementation of a robust procurement process capable of withstanding external scrutiny
- To facilitate an excellent commercial outcome for the State
- To facilitate the meeting of project objectives.

The Chair stressed importance of probity and everyone's responsibilities.

Communication queries are all to go through Anthony Manning, the Project Director. Conflict of Interest information will be sought in the Probity documentation which will be distributed, once approved at the PCG.

A Clinical Reference Group is engaged in this process, and will also sign confidentiality agreements.

There are communication plans to be put on the website to explain in more detail about the Project, and possibly provide the Manly Daily a monthly update.

Action: Monthly update to Board on media who have been responded to. Information to be forwarded to the Board with information on contact details if they receive media enquiries.

2. Confirmation of Minutes

The Board accepted the minutes of the meeting held on 23 April 2013 as a true and accurate record, noting Mr Peter Young's request to have the HCQC Board presentation / update noted within the minutes.

3. Business Arising from Previous Meetings

3.1 Action List

3.1.1. Auditing of Board

The Review of the Board function will be discussed at the end of the Board meeting.

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3.1.2 Information from e-Health, age related statistics and school immunisations

Advice from Dept of Human Services is that School Immunisations are to be recorded on Australian Childhood Immunisation Register until the child reaches the age of seven.

Action: Greg Wells to draft letter from LHD to the Ministry regarding enhancement funding.

The McKinsey Group are working with the LHD and Medicare Locals to improve the uptake by the community of the National Personally Controlled e-Health Record (PCEHR). Approximately 1,000 people have signed up. Promotion is being undertaken in conjunction with Medicare Locals, with no expense to LHD.

3.1.3 Correspondence to Mr Hannaford requesting further detail on re-location requirements on RNSH campus for Tresillian Home

Letter finalised and signed.

3.2 Capital Planning Updates

3.2.1 Royal North Shore Redevelopment Update

A meeting was arranged with the Director General to present the RNSH Master Plan, and a further meeting is planned with the Minister on Thursday 23 May 2013.

The information in the Referral Note was noted. The matter of ongoing integration between the soft services and the hard FM delivery between CSB and ASB was raised at the last Executive Steering Committee meeting. The new CE Health Infrastructure is keen and willing to work collaboratively to ensure the LHD will be more involved in this process.

3.2.2 Hornsby Mental Health

The Board noted the Referral Note.

The Board was advised that due to wet weather many months ago, there might be a two week delay with the handover and commissioning of the Mental Health Unit. This potentially creates an issue with decanting out of Lumby and other buildings. All relevant parties are working together to progress.

As per the reference in the Referral Note to three weeks commissioning rather than four weeks incurring additional costs, there will be additional costs due to working overtime shifts to be able to commission the unit. The LHD has approached Health Infrastructure to propose that the LHD should not be bearing these costs.

3.2.3 Hornsby Stage 1 Development

The Board noted the information in the Referral Note.

3.2.4 Graythwaite

The Board noted the information in the Referral Note. The Project is on schedule and on budget and will be opened in September 2013.

The Board was advised of the new Organisation Structure at Ryde which will provide improved alignment between RNS and Ryde, and improved alignment within rehabilitation services.

3.2.5 Northern Beaches Redevelopment - Frenchs Forest Update

The Referral Note was discussed.

4. New Business

4.1 Infrashore / ISS Arrangements

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Director Finance reported, as indicated in the Referral Note, the proposed changes to the Governance structure.

Recommendations from Referral:

NSLHD to coordinate and liaise with HI on the following:

- Follow up with RBS to confirm Governance structure and delegations both current and proposed.
- HI to review if the change in Governance structure has any Contractual implications and advise NSLHD.

Request a key Governance transition plan from RBS to provide reassurance to NSLHD of continuity of services and obligations.

Action: Further information to be provided by the Director Finance to the Board at next month's meeting.

5. Standing Agenda Items

5.1 Chief Executive Report

The Chief Executive's Report was noted by the Board, of particular note was a number of Clinical KPi's which continue to track well and improve. Some ENT surgery is to be performed out of our LHD, and will be funded by the Ministry.

Sepsis kills data has fallen, particularly at Manly. There may be an issue regarding collection of data, which is being investigated by Michelle Franks.

Action: Dr Andrew Montague to investigate and provide feedback.

5.2 Finance and Performance Report & Recovery Plan

The Finance and Performance report was discussed and noted by the Board.

The Director Finance presented information on a required Recovery Plan to address the current overrun.

The Board discussed the 'Board Suggestions' paper regarding fiscally responsible solutions.

A paper that had consolidated responses regarding areas for efficiency and improvements from Board Members, Medical Staff Council and Heads of Departments was tabled and discussed. Following discussion regarding the activity of the LHD and Financial situation it was agreed by the Board that the Executive would finalise a draft of the Recovery Plan for consideration and endorsement at a Board Meeting to be held on Monday, 27 May 2013 at 3.30pm, Boardroom Building 51, RNS Hospital. The integrated Improvement and OESI plan is to be circulated to Board members by Friday, 24 May 2013. The plan will identify targets for improvement and measurement and who will be accountable for delivery, by when. The integrated plan will be structured into immediate, medium and long term actions. The integrated plan will be submitted to the MoH for approval and progress will be jointly monitored by the Board, LHD Executive and MoH.

It was agreed that the Board oversight would occur as follows:

 Strategies and activities required for immediate implementation: Implementation oversight, including achievement of targets and milestones to be undertaken by Michael Still and Annette Schmiede

- Strategies and activities required for longer term sustainability: That is what is required and deserves immediate thought and action but can't be implemented immediately to be undertaken by Anthony Hollis and Peter Young
- Oversight to ensure implementation of strategies doesn't compromise Accreditation Diane Flecknoe-Brown
- Oversight to ensure implementation of strategies doesn't compromise Quality and Safety and would have general community support - Betty Johnson AO and Judy Hopwood
- Oversight to ensure implementation of strategies is acceptable to Medical Staff A/Professor Sue Kurrle and Dr Michele Franks (Dr Adam Rehak)
- Areas where we can best involve the NGO/Private/Medicare Local sector, with appropriate contractual oversight - Ann Brassil

The Board Chair will update Director General of our progress on Wednesday, 22 May 2013 and the CE will update the DDG System Purchasing and Performance Wednesday 2013.

5.3 NSLHD Committee Minutes

5.3.1 Health Care Quality Committee

The minutes from the meeting held 11 April 2013 were **RATIFIED** by the Board.

5.3.2 Audit and Risk Management Committee

Nil - 22 February 2013 will be endorsed at June Board meeting.

5.3.3 Medical and Dental Appointments Advisory Committee (MADAAC)

The draft minutes from the meeting held 1 May 2013 were **NOTED** by the Board.

The endorsed minutes from the meeting held 3 April 2013 were **RATIFIED** by the Board.

5.3.4 Finance and Performance Committee

The draft minutes from the meeting held 23 April 2013 were **NOTED** by the Board.

The endorsed minutes from the meeting held 26 March 2013 were **RATIFIED** by the Board.

5.3.5 LHD Clinical Council

The draft minutes from the meeting held 6 May 2013 were **NOTED** by the Board.

The endorsed minutes from the meeting held 8 April 2013 were **RATIFIED** by the Board.

5.3.6 Education Sub-committee

Nil next meeting 28 May 2013

5.3.7 Research and Innovation Sub-committee

Nil

5.3.8 Peak Community Participation Council (PCPC)

The draft minutes from the meeting held 24 April 2013 were **NOTED** by the Board.

The endorsed minutes from the meeting held 27 February 2013 were **RATIFIED** by the Board.

5.3.9 Medical Staff Executive Council (MSEC)

Nil – next meeting 20 May 2013

5.3.10 NSLHD and Medicare Locals Consultative Council

The draft minutes from the meeting held 9 April 2013 were **NOTED** by the Board.

5.3.11 Major Capital Asset Planning Committee (MCAP)

Nil – next meeting 17 June 2013

5.3.12 Integrated Risk Management Advisory Committee (IRMAC)

Nil – next meeting 27 May 2013

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6. Correspondence

6.1 Response to Minister re request for update on New Devolved Governance Structure The Board provided input to the response. Final noted

6.2 Mental Health Commission – New role and request for feedback.

Action: Draft letter confirming Board agreement to meet.

7. General Business

8. Venue and time for next meeting

Additional meeting to be held on Monday, 27 May 2013 at 1530, Building 51, RNSH.

Meeting Closed: 7.30pm

CERTIFIED A CORRECT RECORD

By Professor Carol Pollock, Board Chair On 27 May 2013