

MINUTES

Present:

Professor Carol Pollock	Chair, Board
Dr Dianne Ball	Board Member
Ms Ann Brassil	Board Member
Ms Diane Flecknoe-Brown	Board Member
Dr Michele Franks	Board Member
Mr Andrew Goodsall	Board Member
Ms Betty Johnson AO	Board Member
Ms Beata Kuchcinska	Board Member
A/Professor Annette Schmiede (<i>via teleconference</i>)	Board Member
Mr Peter Young	Board Member

In attendance:

Adj. Associate Professor Vicki Taylor	Chief Executive, NSLHD
Dr Andrew Montague	Executive Director Operations
Mr Lee Gregory	Director Finance & Corporate Services
Ms Maree Hynes	Director Planning, Performance & Innovation
Dr George Lau	Chair Medical Staff Executive Council
Ms Tina Hoang	Secretariat

Apologies:

Mr Don Marples	Board Member
Mr Anthony Hollis	Board Member

1. Presentation

Primary and Community Health

Presented by Executive Director Operations

The Board noted the tabled presentation slides.

The Executive Director Operations (EDO) spoke to the overall structure of Northern Sydney Local Health District (NSLHD) Primary and Community Health along with achievements of health services (including breast screening, oral health, child, youth and family health, chronic and aged care, and population health services). The EDO further spoke to the challenges and opportunities anticipated for 2015-2017. The EDO advised that 2014/15 service reviews included review of women's health services, paediatrics, integrated care, aged care, home nursing and acute post-acute care services. The Board raised concern regarding the safety of staff particularly where there are behavioural management issues involved. In addition, the safety of staff when conducting home visits. The EDO advised that the Director Primary and Community Health and the Director Mental Health Drug and Alcohol are aware of the risks staff are exposed to and that these risks are managed. There are policies and procedures in place to ensure the risk is mitigated whilst ensuring that patients are treated in the most appropriate environment (i.e. when home care is most appropriate versus hospital admission). These risks are identified on the NSLHD Enterprise Risk Register.

It was noted that the Aged Care Directorate has re-tendered for eighty-eight community packages and twenty residential places, as funded by the Commonwealth for aged care services. The Board requested information regarding the current spending on non-government organisation contracted services. The Director Finance and Corporate Services (DFCS) advised that the query will have to be taken on notice.

Action: The DFCS to provide information on the current spend for non-government organisation contracted services.

It was queried whether specific areas of clinical or research activity could be highlighted to the Board. The Chair took this on notice. Interest was expressed in having the Primary and Community Health presentation tabled at the Peak Community and Consumer Participation Council (PCCPC). The Chief Executive (CE) advised that the Director Primary and Community Health could be invited to present at the PCCPC meeting.

Action: The Secretariat to relay to the Director Primary and Community Health that the PCCPC would appreciate a presentation.

Targets and monitoring of outcomes in Primary and Community Health and the value of the Board being provided with data and information on what is cost effective and how models of care are developed was discussed. The CE advised that the outcome measures are from the NSLHD Service Level Agreement with the NSW Ministry of Health. The Deputy Chair advised that a great depth of monitoring occurs across the service programs. The Chair and Deputy Chair advised that they have great confidence that the services are of an appropriate level of service. The Chair commended the Primary and Community Health Team for their hard work.

Primary Health Networks

The Board noted the referral note tabled.

2. Patient Story

The CE relayed to the Board a patient story that was received in March 2015. The patient gave detailed feedback on the standards of patient care received at Royal North Shore Hospital. In addition, the attentiveness in care and service by all staff that the patient had noted during the patient's stay. As the patient was not a local resident of the Northern Sydney Local Health District, the patient advised that the efforts of staff was greatly appreciated to ensure a subsequent visit to the hospital would not be needed. The patient thanked staff for their thorough and diligent work.

3. Attendance / Apologies / Quorum / Conflict of Interest

Attendance and apologies were noted.

4. Confirmation of Minutes

The Board accepted the minutes of the meeting held 3 March 2015 as a true and accurate record of the meeting.

The Board also accepted the minutes of the meeting held 7 April 2015 as a true and accurate record of the meeting with amendment to:

- Page 1: Item 1 to include: "**Action:** DFCS to provide the Board with clarification of NSLHD fundraising arrangements"
- Page 2: "Recruitment Process Outsourcing" should be amended to "Imaging Partners Online"
- Page 2: "reward" should be amended to "ward"
- Page 5: "communication strategy for the Board" should be amended to "communication strategy to the Board"

- Page 6: Amendment to note “PCCPC meeting scheduled for 4 February and 1 April 2015 were held. Minutes of the two meetings are not yet available”.

Action: Secretariat to follow-up with the PCCPC Secretariat for the meeting minutes of the February and April meetings.

The Board subsequently revisited discussions on Board Sub-Committees which was discussed at the April Board meeting. The Chair advised that she is speaking to the Associate Director Corporate Governance and Risk Management, Legal and Regulatory Services of Ministry of Health (MoH) as the LHD Model By-Laws are expected to be updated, but confirmation has not yet been received as to when this will occur. The Chair also advised that without clarity on the roles of the Sub-Committees and agreement from the Board members on the suggested model, only a draft of the proposed model could be provided until the matter is discussed at a later Board meeting. A paper on Committee Structures will be developed by a Board member that will be discussed by the Board.

Action: A Board Member to provide to the Board, a paper on Committee Structures for discussion.

The Chair also took the opportunity to congratulate Ms Ann Brassil on her academic title as Adjunct Professor from the University of Technology, Sydney (UTS).

5. Ongoing Business (in conjunction with Action List)

The items in the Action List were discussed and **noted**.

5.1 Risk Register - Update

Mental Health Presentations to Ryde Emergency Department – The EDO advised that he has met with the Director Clinical Governance (DCG) to discuss the matter. The risk is acknowledged, however, the risk rating noted in the report tabled at the April Board meeting was not appropriate. The EDO further advised that processes are being put in place to mitigate the risk and the item will be reported back to the Integrated Risk Management Advisory Committee.

Inability to produce accurate reporting of staff attendance at education due to transition from Pathlore to HETI Online – The CE advised that the EDO and the Director Workforce and Culture have met with the CE of Health Education and Training Institute (HETI). The HETI CE has advised that the item has been taken on notice for HETI to follow-up.

Report Format – The CE advised that the report format has been raised with the DCG. The matter was also raised at the Audit and Risk Management Committee and the Integrated Risk Management Advisory Committee to ensure that the risk matters reported to the Board are done so appropriately. The Chair suggested the use of the ACI Monitoring Tool for Risk Register reporting with the suggestion taken on notice by the EDO.

The CE advised that it was raised by the Capacity Assessment Project (CAP) Site Visit Team how impressed they were of the NSLHD Risk Register and Report. The CE advised that the results of the CAP for NSLHD will be shared at the June Board meeting if available.

Action: The CE to provide the Board with the CAP results for NSLHD when available.

5.2 Clinical Quality Improvement Plan 2015-2018 – Update

The CE advised that there is further work that needs to be done on the Clinical Quality Improvement Plan 2015-2018 by the DCG. The draft paper requires further refinement and consultation. This has been relayed to the DCG. The Board agreed for the matter to be tabled at the July Board meeting.

Action: Secretariat to table the Clinical Quality Improvement Plan 2015-2018 for the July Board meeting.

5.3 NSLHD Communication Strategy

The Board noted the communication strategy tabled. The Board asked for further information as to how effective communication is measured.

Action: The CE to note the feedback provided by the Board on measuring the effectiveness of the NSLHD Communications and provide an update in November 2015.

5.4 Access to the Committee Meeting Papers

The Board noted the referral note tabled. Access to Sub-Committee meeting papers was discussed. The Board discussed the security risks around the proposed electronic delivery methods. The Board further discussed what would be most cost effective and useful to the Board in accessing Sub-Committee meeting papers whilst ensuring that an effective approach is employed to governance versus an excessive review of Sub-Committee meeting papers. The Board agreed that in cases whereby it would be helpful to have access to Sub-Committee meeting papers, the Board Members will contact the Board Secretariat directly to obtain any papers attached to the Sub-Committee Meeting minutes. The Chair agreed that this method could be trialled for the time being before deciding if other forms of obtaining the Sub-Committee Meeting papers would be necessary.

5.5 Trends noted in the NSLHD Incident Investigation Management System (IIMS) Board Reports

The Board noted the referral note tabled.

5.6 Northern Beaches Sub Committee (NBSC) Update

The CE advised that the item will be deferred to the June Board meeting. In the meantime, the CE advised that the Board Chair, CE and DFCS have met with the NSW Ministry of Health Deputy Secretary, Strategy & Resources, the Acting Deputy Secretary, System Purchasing and Performance and the Chief Financial Officer. There has been verbal endorsement of the proposed NSLHD governance and contract administration structure of the Northern Beaches Hospital Public Private Partnership (PPP). The item will be re-tabled for the June Board meeting to discuss options regarding NSLHD oversight.

5.7 Processes and Systems for Maternity Vaccine Fridge

The CE advised that the information provided by the DCG on the matter is not yet complete and will need to be deferred to the June Board meeting.

5.8 Peak Community & Consumer Participation Council (PCCPC) Action Plan 2015 - Update

The CE advised that the information provided by the DCG on the matter is not yet complete and will need to be deferred to the June Board meeting.

5.9 Investigation and Report on Potential Revenue Streams and Investments to Achieve Returns on Innovation

The Board noted the presentation slides tabled. Mr Andrew Goodsall spoke to the presentation and presented on the phases of identifying potential revenue streams, reviewing opportunities and implementation. The Director Planning, Performance and Innovation (DPPI) advised that the OESI Team will assess and evaluate the potential opportunities based on the criteria approved by the CE. The opportunities will then be

reported back to the Board. The DPPI advised that she will include an update in the OESI presentation scheduled for July Board meeting.

Action: The DPPI to include an update on innovation opportunities in the OESI presentation scheduled for July Board meeting.

The Board also discussed and agreed that although it is important to consider opportunities of delivering efficiencies and maximising savings, it is also important to look at opportunities that will maximise other revenues.

5.10 Chief Executive Summary

The Board noted the CE Summary report. Where the papers had not been received, the items will be rescheduled for future meetings.

Discussion regarding the Palliative Care review ensued. The EDO explained that the review conducted on NSLHD Palliative Care services identified the gaps that need to be addressed. The EDO advised that the goal is to ensure that the palliative care service provided is optimal and that the community component of it is strengthened. The review was a rigorous process with extensive external expertise engaged and consultation with key stakeholders. The EDO advised that following agreement, the next step would be implementation over a five year period.

The Board endorsed the NSLHD Palliative Care Services review and commended the staff involved in the review for their hard work. The Board also raised concern around providing additional support to family and friends of patients, particularly in cases where organ donation is involved. The matter has been noted for discussion between the Chair and CE.

5.11 Finance and Performance Report

The April Finance Report was tabled and noted by the Board. The year to date result and the year-end forecast was discussed. The Director Finance and Corporate Services (DFCS) advised the Board that in line with March's finance forecast, the forecast model indicates a year end deficit below the target deficit set by the NSW Ministry of Health (MoH). The DFCS flagged that there however has been an increase in unplanned demand in March whereby there was an increase in Emergency Department presentations, concentrated at Royal North Shore and Mona Vale Hospitals.

The DFCS also advised that further to the queries raised by the Board around fundraising arrangements with the Kolling Foundation at the April Board meeting (including the issue of controlled entities and the recently releases associated accounting standards), the Audit of Office NSW (AONSW) has been consulted. In terms of audits of fundraising arrangements, the DFCS advised that the AONSW recommends the LHDs Internal Audit team review arrangements, however it was agreed that if the Kolling Foundation is deemed a controlled entity under the new accounting standards then this view would likely change to one of greater involvement by the AONSW.

The DFCS also advised that the Deputy Director Finance (DDF) will be undertaking a secondment as Director Finance and Corporate Services of the Sydney Local Health District. The Board requested a letter of appreciation be drafted and sent to the DDF for her hard work.

Action: Secretariat to organise a letter of appreciation to be sent to the DDF from the Board.

5.12 Operational Efficiency & Service Integration (OESI) Report

The OESI Report was tabled and noted by the Board.

5.13 Operating Model Update

The EDO advised that recruitment of the first of nine Clinical Director appointments to the Clinical Network has been finalised. Professor Stephen Clarke has been appointed as the NSLHD Clinical Director for the Cancer and Palliative Care Network. Interviews will be conducted on 8 May 2015 for further appointments of the Clinical Directors.

6. Capital Planning Update

6.1 Hornsby Ku-ring-gai Hospital Redevelopment

The Board **noted** the tabled referral notes concerning Stage 1 and 2 Redevelopment of Hornsby Ku-ring-gai Hospital.

Given the imminent decanting of buildings at Hornsby Hospital, the Board asked whether “lessons learned” from the RNSH decanting process could be applied to Hornsby. The CE advised that these would be captured.

6.2 Royal North Shore Developments

The CE advised that an update on Royal North Shore Developments will be provided at the June Board meeting together with the Northern Beaches Sub-Committee update.

6.3 Northern Beaches Redevelopment

The Board **noted** the tabled referral note concerning the Northern Beaches Health Service Project.

7. New Business

7.1 Assignment of Common Seal Documents

The items were noted by the Board.

Further details of the two Deed of Release and Indemnity items listed were requested.

The details of the Deeds were clarified by the CE and EDO.

8. Standing Agenda Items

8.1 NSLHD Committee Minutes

8.1.1 Health Care Quality Committee

The endorsed minutes from the meeting held on 12 March 2015 were **noted** by the Board.

8.1.2 Medical and Dental Appointments Advisory Committee (MDAAC)

The endorsed minutes from the meetings held 11 March and 25 March 2015 were **noted** by the Board.

8.1.3 Finance and Performance Committee

The draft minutes from the meeting held 24 March 2015 were **noted** by the Board.

8.1.4 NSLHD Clinical Council

The endorsed meeting minutes for 2 March 2015 were **noted** by the Board.

8.1.5 Medical Staff Executive Council (MSEC)

Nil available.

8.1.6 Peak Community and Consumer Participation Council (PCCPC)

Nil available. The meeting minutes for 4 February 2015 and 1 April 2015 were not yet available.

8.1.7 NSLHD and Medicare Locals Consultative Council

The endorsed minutes for 14 October 2014 were **noted** by the Board. The meeting minutes for 14 April 2015 were not yet available.

8.1.8 Capital Asset Planning Committee

Nil available. The last meeting was held on 16 March 2015 and the next meeting is scheduled for 15 June 2015.

8.1.9 Integrated Risk Management Advisory Committee (IRMAC)

The draft minutes from the meeting held 4 March 2015 were **noted** by the Board. The next meeting is scheduled for 6 May 2015.

8.1.10 Audit and Risk Management Committee

Nil available. The endorsed minutes for 3 December 2014 were **noted** by the Board. The meeting minutes for 23 March 2015 were not yet available.

8.1.11 Education Sub-committee

The draft minutes from the meeting held 10 March 2015 were **noted** by the Board.

8.1.12 Research and Innovation Sub-committee

Nil available. The meeting scheduled for 17 March 2015 was cancelled. The next meeting is scheduled for 19 May 2015.

8.1.13 Aboriginal Health Advisory Committee

The next quarterly update will be provided in June 2015.

8.1.14 Northern Beaches Hospital Project Sub-committee

To be discussed at the May Board meeting.

9. Correspondence

Nil

10. Date, Time & Venue for Next Meeting

South Wing Dining Annexe, Building 4, Manly Hospital
Tuesday, 6 June 2015 commencing 4.00pm

Meeting Closed: 8.14pm

CERTIFIED A CORRECT RECORD

By Professor Carol Pollock, Chair

On 16 June 2015