

Wednesday, 26<sup>th</sup> March at 4:15pm | Boardroom, NeuRA Institute

## Minutes

### Apologies

- Dr Harry Harinath

### Members:

- Mr Michael Still (Chair) (attended for pre-meeting)
- Ms Patricia Azarias (attended for pre-meeting)
- Mr Robert Boyd-Boland (attended for pre-meeting)
- A/Prof Robert Farnsworth (attended for pre-meeting)
- Ms Deborah Cansdell (attended for pre-meeting)
- A/Prof Peter Gonski (attended for pre-meeting)
- Mrs Janet McDonald (attended for pre-meeting)
- Ms Kate Munnings
- A/Prof Peter Smerdely (attended for pre-meeting)
- Ms Kristin Stubbins
- A/Prof Ingrid Van Beek
- Prof Jeanette Ward

### In Attendance:

- Mr Gerry Marr – Chief Executive (attended for pre-meeting)
- Ms Kim Olesen – Director Nursing & Midwifery Services
- Ms Karen Foldi – Director of Finance
- Prof James Colebatch – Chair Medical Staff Executive Council

### Secretariat:

- Ms Melissa Angelucci – Board Secretary

## PRE - MEETING

### Meeting with the Neuroscience Research Australia

A representative group of the SESLHD Board toured the Neuroscience Research Australia (NeuRA) facility with the Chair, Mr Paul V Brassil and the Executive Director and CEO, Professor Peter R Schofield. Following the tour they met to discuss opportunities to enhance dialogue about collaborative engagement between research and health care activities.

The following key points were noted:

- Both SESLHD and NeuRA are two of 14 partners in The Health Science Alliance (THSA). THSA strives to deliver cutting edge healthcare in a research intensive environment.
- The Board noted that the approach of the Local Health District (LHD) should be to always incorporate research. There is collaboration work already underway between SESLHD Mental Health and the NeuRA Institute. This type of activity should be expanded.
- NeuRA explained that if clinicians and health managers begin by identifying clinical hypothesis, these hypotheses can be then treated as joint ventures.
- Clinicians are more likely to agree to be part of a research project if they are

involved in the research, rather than just providing patients for research purposes

- NeuRA is well placed to be able to work in collaboration with SESLHD to conduct research that is relevant and meaningful to SESLHD
- The SESLHD Board noted that collaboration between healthcare and research will be vital for innovation. Research discoveries are central to SESLHD being able to meet the health needs of its population into the future
- The Board would like to see the development of a SESLHD Research Plan and identify which SESLHD clinicians are research active or are seeking to be active
- The Memorandum of Understanding between SESLHD and NeuRA should act as an effective platform for building strong governance for the future

The SESLHD Board agreed that the Deputy Chair, A/Prof Peter Gonski will be responsible for this element of work on behalf of SESLHD.

**FOCUS**

**BUDGET PLANNING SEMINAR**

**Service Level Agreement development**

The following members of the Executive Team attended the meeting to discuss budget planning;

- Mr Jon Roberts, Director of Operations, Northern Sector
- Ms Cath Whitehurst, Director of Operations, Southern Sector
- Dr Murray Wright, Director of Mental Health
- Mr David Pearce, Director of Operations, Mental Health
- Mr Leisa Rathborne, Director of Operations, Royal Hospital for Women
- Mr Mark Shepherd, Deputy Chief Executive

The Chief Executive presented an outline of current status of discussions with the Ministry of Health (MoH) regarding the development of the 2013/14 Service Level Agreement (presentation attached). The following points were noted;

*Confidential*

**Action** - The Chief Executive and Executive Team to produce a quantifiable, risk assessed list of items that the Ministry of Health is asking SESLHD to deliver in the 14/15 financial year. For consideration and approval by the Board at the April Board meeting.

## STANDING ITEMS

### PATIENT STORY

The SESLHD Board noted the patient story which outlined the issue of poor physical health amongst mental health patients.

**Action** – Director of Mental Health to prepare a short paper on the actions SESLHD is currently undertaking to address the physical health of mental health patients and potential options for future work in the area. The Board to consider the appropriateness of these actions at the April Board meeting.

### GENERAL BUSINESS

#### Minutes of Board meeting held 26 February 2014

The Board **approved** the minutes of the SESLHD Board meeting held 26 February 2014 as an accurate record of proceedings.

#### *Resolution 275*

“That the Board approves the minutes of the SESLHD Board meeting held on 26 February 2014 as an accurate record of proceedings.”

Moved: P Gonski      Seconded: P Azarias      Carried

#### Minutes of F&P meeting held 12 February 2014

The Board noted the minutes of the SESLHD Finance and Performance Committee Meeting held 12 February 2014.

#### Minutes of CQC meeting held February 2014

The Board noted the minutes of the Clinical and Quality Council meeting held February 2014.

### Actions

The Board noted the action log as updated on 26 February 2014.

### Correspondence Register

The Board noted the correspondence received since 26 February 2014

## GENERAL BUSINESS

### GOVERNANCE

#### By-law Review

A/Prof Peter Gonski reported that he has had communications with the Chairs of the local Clinical Councils with regard to the by-laws. Feedback has been received and incorporated into the response provided in the Board papers. It was agreed that the final response would be finalised off-line with the Chairman, Chief Executive and Board Secretary.

#### Board Sub-Committee – membership nominations

Ms Kate Munnings has agreed to act as the Chair of the Finance and Performance Committee for the next few months as the Chair is stepping down due to a temporary conflict of interest.

Ms Munnings has been asked to join the Audit and Risk Management Committee as there is a requirement for an additional Board member to sit on the Committee.

Janet McDonald prepared the attached paper outlining the background and issues of SESLHD's consumer approach. It was agreed that the report would be sent out to all Board members and discussed at the April Board meeting. The Chair of the District Consumer Committee has not been finalised.

**Action** – Board Secretary to send the Consumer report to all Board members and ensure its inclusion on the April agenda

### **Board Training – Nous Group**

The Board noted the information provided regarding the upcoming NOUS Board Training.

## **PERFORMANCE**

### **Patient Safety and Quality Presentation**

Dr George Rubin, SESLHD Director of Clinical Governance attended the meeting to join the Chief Executive in giving a presentation on quality and safety reporting and the way forward for quality improvement. This presentation is a result of the discussion the Board had at its February meeting around safety and quality reporting to the Board.

The National Standards are based around the areas of major clinical risk Accreditation against the National Standards result in a large audit load for hospitals and often means that staff members are pre-occupied with work to meet the standards e.g. record keeping requirements. There is a misbalance between planning, compliance and improvement; with a heavy emphasis on compliance and not enough resource allocation to planning and improvement.

A new computer system called Edward is currently being implemented and this system is expected to minimise the need for clinicians to do hands on monitoring.

The current safety and quality KPIs don't measure harm to patients, only incidences of error such as cardiac arrest rates, rapid response calls, unplanned readmissions and complaints reported in the incident management system, IMMS.

The current KPI report includes some safety and quality KPIs. Many of these KPIs are from the Service Agreement with the Ministry of Health and others have been included organically overtime.

The Chief Executive reported that the international thinking around quality and safety has moved on from compliance and towards harm minimisation and healthcare improvement. The Chief Executive proposed that Dr Rubin's team work on establishing a plan for moving SESLHD towards the next phase in patient safety and quality. The Board agreed to this approach.

The Board asked the Chief Executive to also consider what meaningful patient safety and quality information should be provided to the Board on a monthly basis.

**Action** - Director of Clinical Governance and Chief Executive to produce a plan to move from compliance reporting work to actual improvement and harm reduction work and consider what meaningful patient safety and quality information should be provided to the Board on a monthly basis. To be presented at the June 2014 Board meeting.

It was noted that some Board members have noted the continued need for appropriate

maintenance at SESLHD facilities. The Board agreed that Janet McDonald would work with the Northern Sector, Director of Operations to oversee the maintenance and the cleanliness of the Hospital.

**Action** - Janet McDonald to work with the Northern Sector, Director of Operations to work to improve cleanliness procedures at the Prince of Wales Hospital.

### **Finance and Performance Overview**

The Chair of the Finance and Performance Committee, Ms Kristin Stubbins, made the following points in regards to SESLHD's financial performance;

- The financial forecast remains consistent with that predicted last month i.e. a deficit of \$22m. This has been communicated to the Ministry of Health.
- The intention is to focus on improving the non-financial KPIs. If the forecast becomes more favourable than predicted, those additional funds will be directed at improvement strategies focussed at the clinical KPIs
- The turn around plan will be for two to three years and planning for this must begin now
- The Finance and Performance Committee has asked management to review their financial recovery plans in light of potential areas of risk from a clinical perspective. The outcomes of this will be reported at the April Finance and Performance meeting.
- SESLHD should clearly articulate all the positive savings strategies that are occurring across the District and then share these positive stories

## **STRATEGY**

### **Draft Road Map to Excellence 2014-2017**

The Chief Executive reported that over his first few weeks in the role he has noted that the District language is predominantly a "negative conversation". The Chief Executive plans to change the narrative of the organisation.

The Road Map to Excellence pulls together the themes raised at the Board Off-site event and priorities articulated by the Minister for Health earlier this year. The Chief Executive proposed that the Road Map be used by the Board and Executive Team as a baseline and to report on progress quarterly.

The Road Map was well received and approved by the Board members. Some slight variations were suggested.

**Action** – Board Secretary to include suggested variations to the Road Map to Excellence

It was raised that organisational culture, staff morale, education and teaching and staff safety should be included in the Road Map. The Chief Executive noted that he is in the process of writing a separate paper on Just Culture which will incorporate all workforce issues and propose a way forward for SESLHD. This paper will be presented to the Board at its April meeting.

**Action** – Chief Executive to present paper on Just Culture at the April Board meeting.

### **SESLHD Smoke-free Health Care Program**

The SESLHD Board discussed the Smoke-free Health Care Program. It was noted that the program will be difficult to police and manage however the Board felt it is a move in the right direction. The program is a trial for three months and its effectiveness and sustainability will be re-considered by the Board at a future meeting.



*Resolution 276*

“That the Board approves the SESLHD Smoke-free Health Care Program.”

Moved: J McDonald    Seconded: P Azarias    Carried

**CLOSE**

**BUSSINESS WITHOUT NOTICE**

The Chair reported that he recently attended the Council of Board Chairs meeting. The Activity Based Management Portal was demonstrated and appears to be a useful tool. Social Media was discussed and will be addressed by the Board at a future meeting.

Mr Ken Whelan, Deputy Director-General has been invited to attend the April Board meeting.

The Chair noted that it was Prof Jim Colebatch’s last Board meeting as his tenure as Chair of the Medical Staff Executive Council has come to an end. On behalf of the Board, the Chair thanked Prof Colebatch and wished him well for his future activities.

Prof Colebatch thanked the Board for being open to his views and allowing him to represent his peers over the past three years. It was noted that Dr Theresa Jacques will be appointed as the new Chair of the Council.

**NOTING OF CONFIDENTIAL ITEMS**

Nil discussion

Date of next meeting:

28 April 2014

4-7pm – Board meeting, Sydney Hospital

Focus – Risk

Meeting closed at 19:15

*Michael Still* .....

**Name**

*Michael Still* .....

**Signature**

*28 April 14* .....

**Date**