

# Minutes of the Board of the South Eastern Sydney Local Health District

Date: Time: Location:	Wednesday, 24 November 2021 4:00pm – 7:00pm Virtual*/ Sydney Eye Hospital, 8 Macquarie Street, Sydney NSW 2000
Present:	Michael Still, Chair Allan Spigelman Debra Graves Elli Baker* Greg Levenston* Jonathan Doy Liam Harte Neville Mitchell
Ex Officio Invitees:	Tobi Wilson, Chief Executive Kim Olesen, A/Executive Director, Operations Karen Tuqiri, A/Director Nursing and Midwifery Services* Payal Kapoor, Director Finance
Guests:	Tony Jackson, A/Director, Population and Community Health Timothy Croft, Manager, Aboriginal Health Unit Lisa Altman, Director, Strategy, Innovation and Improvement
Apologies:	Helene Orr, Board Member Jo Karnaghan, Director Clinical Governance and Medical Services John Estell, Medical Staff Executive Council
Secretariat:	Susan George, A/Executive Assistant to the Chief Executive

# Focus Area - Presentations

Presentation:	Aboriginal Health Strategy Update			
Guest Presenter:	Tony Jackson, A/Director, Population and Community Health			
	Timothy Croft, Manager, Aboriginal Health Unit			

The Board welcomed both A/Director, Population and Community Health and the Manager, Aboriginal Health Unit.

The A/Director, Population and Community Health acknowledged the Traditional Custodians of Dharawal Country, Elders past and present, he also thanked the Chief Executive and Board for their significant support in meeting the needs of the aboriginal community. In particular, the leadership efforts of the Chief Executive to elevate services and governance activities were acknowledged.



An update on the vaccination program was also provided and the meeting was advised of the community's favourable response to vaccination, as a result of collaborative efforts between the South Eastern Local Health District and many aboriginal health workers.

The presentation focussed on embedding a business plan with supporting priority initiatives across SESLHD, along with continuing SESLHDs work with the Sydney Metropolitan Local Aboriginal Health Partnership. The introduction of an Aboriginal Dashboard to effectively review and report health response/impact comparatively between LHDs/SHNs was also discussed. There were also a number of future initiatives and tools envisaged to support better health outcomes for the Aboriginal community.

After some discussion it was agreed there is further work to be undertaken in the areas of funding support, education, and delivery of mental health services.

The Board thanked both the A/Director, Population and Community Health and the Manager, Aboriginal Health Unit for their comprehensive presentation.

Resolution:	The Board noted the information provided.			
Presentation:	Virtual Care Strategy Implementation			

Guest Presenter:	Lisa Altman,	Director,	Strategy,	Innovation	and Improvement

The Board welcomed the Director, Strategy, Innovation and Improvement.

The presentation opened by acknowledging the success of virtual care relies heavily on stakeholder engagement in all its forms, along with significant investment.

The Board noted the positive experience of a 74-year-old female patient, where continuum of care was achieved whilst being cared for and monitored in the home.

The Board acknowledged the volume of work that has been undertaken to date to achieve this positive patient experience and noted the strategic priorities that underpin the successful delivery of virtual care that SESLHD are working too as being:

- 1. Embed Virtual Health Models
- 2. Establish Virtual Health Oversight
- 3. Invest in Virtual Health Technology Foundation
- 4. Define our Data Management and Structures

It was acknowledged there is a great deal more to be done, especially in the areas of surgical care, telehealth and managing services to the needs of the community.

The Board thanked the Director, Strategy, Innovation and Improvement for the informative presentation.

*Resolution:* The Board noted the information provided.

# Opening

## 1.1 Present and Apologies

A quorum was present and the meeting opened at 4:15pm.



### **1.2 Declaration of Interests**

There were no declarations of interest raised.

### **1.3 Minutes of Previous Meeting**

*Resolution*: The Board resolved that the minutes of the previous meeting held on 27 October 2021 be signed as a true record of the meeting.

### 1.4 Actions from previous meeting

*Resolution*: The Board reviewed and noted the Action Log.

## 2. Committees

### 2.1 Finance and Performance Committee

#### 2.1.1 Meeting Minutes

The Minutes of the 25 October 2021 meeting were tabled in the papers and taken as read.

*Resolution:* The Board noted the Finance and Performance Committee Minutes

### 2.1.2 SESLHD DNR Results (Jul-Dec 2020)

After short discussion, the Chief Executive advised there are a number of opportunities for improvement with plans in place to improve visibility and sharing of information with streams, along with the inclusion of benchmarking data to promote ongoing efficiency review.

*Resolution:* The Board noted the information provided.

### 2.2 Quality and Safety Committee

#### 2.2.1 Meeting Minutes

The presentation made to the Quality and Safety Committee on the Reporting for Better Cancer Outcomes (RBCO) will be summarised into a report and is to be tabled for noting by the Board.

*Resolution:* The Board noted the Quality and Safety Committee Minutes

### 2.3 Strategic Community Partnerships Committee

Minutes of the 15 November meeting were not available and are to be presented to the Board at its February meeting.

*Resolution:* The Board noted information provided by the Chair

## 2.4 Audit and Risk Committee

Minutes of the 15 October meeting were not available and are to be presented to the Board at its February meeting.

*Resolution:* The Board noted the information provided by the Chair



# 3. Standing Items

### 3.1 Patient Story

In response to the Premier's Priority of reducing preventable visits to hospital by five percent through to 2023 by caring for people in the community, SESLHD established an Integrated Care Unit – Planned Care for Better Health (PCBH). The story shared with the Board demonstrated the significant benefits of implementing a collaborative care plan. In this particular case, the plan included consultation with a number of agencies and support services to ultimately deliver the best outcome for patient and citizen.

Resolution: The Board noted the Chief Executive's report.

### 3.2 Board Chair Report

*Resolution:* The Board noted the information provided by the Chair.

### 3.3 Chief Executive Report

The Chief Executive's Report was tabled in the papers and taken as read.

Resolution: The Board noted the Chief Executive's report.

### 3.4 Finance Report

SESLHDs financial position was noted as performing to expectation and in line with the expected impacts COVID management are having on the District.

*Resolution:* The Board noted the information provided.

### 3.5 Operations Report (includes COVID-19 update)

The Operations Report was tabled in the papers and taken as read.

Resolution: The Board noted the Operations Report.

### **3.6 Performance Reporting (includes Integrated Performance Report)**

The Performance Report was tabled in the papers and taken as read.

*Resolution:* The Board noted the Performance Report.

## 3.6.1 Ministry of Health League Table

The report was tabled in the papers and taken as read.

*Resolution:* The Board noted the Ministry of Health League Table.

# 4. Regular Reporting

# 4.1 Capital Works Reporting

# 4.1.1 Capital Works Report – June 2021

The Capital Works Report was tabled in the papers and taken as read.

Resolution: The Board noted the Capital Works Report.

# 5. New Business



### 5.1 Safety and Quality Account

The Account presented was taken as read.

*Resolution:* The Board endorsed the 2021/22 Safety and Quality Account for progression to the Ministry of Health and subsequent publication.

### 5.2 SESLHD By-Laws

The Paper provided was taken as read, noting SESLHD have opted to establish its own Mental Health Medical Staff Council in response to the new By-law requirement for the establishment of said Council.

*Resolution:* The Board approved the By-Law.

### 5.3 Prince of Wales ASB Opening Plans

The impact of COVID on the construction and operational commissioning of the Prince of Wales Acute Services Building has delayed the opening by three months. The Ministry of Health agree, and the Chief Executive confirmed the formalities are being coordinated.

*Resolution:* The Board supported a change to the go live date of the Prince of Wales Hospital integrated Acute Services Building (ASB).

### 5.4 Prince of Wales Foundation – Board Nomination

The Board were presented with nominations for Ms Lisa Altman and Mr William (Bill) Petch to be appointed as members of the Prince of Wales Foundation.

*Resolution:* The Board endorsed the nominations.

### 5.5 SESLHD Strategic Framework 2022-25

The Board were advised that there are a number of planned leadership forums, roadshows and world café's to introduce the strategy and to ignite conversation. The importance of identifying clear consistent messaging was discussed. Board acknowledged the significant work that has been undertaken to achieve the results to date.

*Resolution:* The Board endorsed the Strategic Framework 2022-25.

### 5.6 People Matter Employee Survey

The Board noted the opportunities identified by SESLHD executive to support wellbeing and overall employment satisfaction and how they can align with the overall organisational strategy.

*Resolution:* The Board noted the information provided.

### 5.7 Board self-assessment

The Board were asked to complete the self-assessment and return to the Board Secretary. An overview of feedback will be presented to the February Board at its in-camera session.

*Resolution:* The Board noted the information provided.

## 5.8 Randwick Health and Innovation Precinct (RHIP) Collaboration Agreement



The Agreement was broadly discussed and taken as read.

*Resolution:* The Board endorsed the Randwick Health and Innovation Precinct (RHIP) Collaboration Agreement.

# 6. Matters for Noting

#### 6.1 Correspondence Register

*Resolution:* The Board noted the correspondence register.

6.2 Register of External Board and Committee Membership Resolution: The Board noted the information provided.

### 6.3 Annual Board Calendar for 2022

*Resolution:* The Board noted the information provided.

# 7. Meeting Finalisation

### 7.1 Business Without Notice

There were no items raised.

#### 7.2 Noting of Confidential Items

There were no confidential items raised.

#### 7.3 Next Meeting

The next Board meeting is scheduled for *Wednesday, 23 February 2022* at 8 Macquarie Street, Sydney.

### 7.4 Close

Before closing the meeting, the Chair and Board thanked retiring member, Mr Neville Mitchell for his input, acknowledging his membership has been invaluable. The Executive endorsed these comments and the meeting wished Neville all the very best in his future endeavours.

The meeting closed at 6:50pm

I certify that the foregoing is a true and correct copy of the minutes

approved by Members of the Board

MASAUL

Michael Still, Chair 23 February, 2022