

Minutes

SESLHD Board Meeting

Wednesday 26 July 2017 5pm – 7pm Level 17, 1 International Towers, Barangaroo

Present and Apologies

Board Members:

- Mr Michael Still, Board Chair
- Ms Patricia Azarias
- Mr Jonathan Doy
- A/Professor Robert Farnsworth
- A/Professor Peter Gonski
- Dr Debra Graves
- Dr Gorur Krishna Harinath
- Mr Liam Harte
- Janet McDonald
- Mr Neville Mitchell
- Ms Helene Orr
- Professor Allan Spigelman

In Attendance:

- Mr Gerry Marr Chief Executive
- Ms Karen Foldi Director of Finance
- Dr James Mackie Medical Executive Director
- Ms Kim Olesen Director of Nursing and Midwifery Services
- Mr Mark Shepherd Director of Programs and Performance

Apologies:

• Dr Greg Kaufman - Chair of the Medical Staff Executive Council

Secretariat:

Ms Nicole McGregor – Executive Officer to the Chief Executive

Administration

1.1. Present and Apologies

The Board noted those present and the apologies received. It was proposed that an alternative member of the Medical Staff Executive Council be invited to attend Board member when the Chair of the Medical Staff Executive Council is not available.

1.2. Declaration of Interests



Nil declarations of interests made.

1.3. Minutes of the SESLHD Board meeting held Wednesday 28 June 2017

Resolution 317

The Board resolved to approve the minutes of the SESLHD Board meeting held on Wednesday 28 June 2017 as an accurate record of proceedings.

1.4. Minutes of the Finance and Performance Committee meeting held Monday 26 June 2017

The minutes of the meeting of the Finance and Performance Committee held on Monday 26 June 2017 were noted.

1.5. Minutes of the Healthcare Quality Committee meeting

Nil minutes to note this month. The next meeting is scheduled for Monday 31 August 2017.

1.6. Minutes of the Community Partnerships Committee

The minutes of the meeting of the Community Partnerships Committee held on Monday 5 June 2017 were noted. Ms Helene Orr will attend the next Community Partnerships Committee as a representative of the SESLHD Board.

The Board resolved to receive a further briefing on the implementation of the National Disability Insurance Scheme (NDIS).

1.7. Minutes of the Audit and Risk Management Committee meeting

The minutes of the meeting of the Audit and Risk Management Committee held on Wednesday 7 June 2017 were noted.

The Board discussed a proposal from the Audit and Risk Management Committee on mechanisms for the Board to address staff and visitor safety. The options proposed include establishing a dedicated Board subcommittee, for the Audit and Risk Management Committee to oversee the topic, or for regular reports be provided to the Board.

The Chief Executive proposed to bring back to the Board further information on these options for consideration.

<u>Action:</u> Information on options for the Board to address staff and visitor safety to be prepared for the Board.

1.8. Actions

The Board reviewed the Action Log.

1.9. Correspondence Register

The Board noted the correspondence received to Wednesday 19 July 2017.

Standing Items

2.1 Board Chair Report

The Board noted the verbal update from the Board Chair.



2.2 Chief Executive Report

The Board noted the verbal update from the Chief Executive.

The Chief Executive provided an update on the recent issues related to Garrawarra Centre. An administrator is in place and an action plan is being implemented to meet the required standards.

2.3 Finance Report

The Director of Finance provided an update on the District's financial results for June 2017 as well as a summary of the 2016/17 full-year performance, as detailed in the Director of Finance Report. SESLHD has continued its trend over the last three years of further improving its full-year financial position and is moving towards a balanced budget.

The Director of Finance and the Director of Programs and Performance provided a presentation on the risks in the 2017/18 Service Agreement with the Ministry of Health, including a review of the progress of risks identified for 2016/17.

Significant improvement was made during the 2016/17 on the risks identified for employee related costs and visiting medial officer expenses.

The Board discussed the key risks for the 2017/18 Service Agreement.

The Board resolved to seek an extension of the due date for the 2017/18 Service Agreement with the Ministry of Health. The Board resolved to hold an extraordinary meeting of the SESLHD Board to focus on the Service Agreement.

The Board was advised that the Annual Financial Statements for SESLHD were reviewed by the Audit and Risk Management Committee with no concerns raised. The external audit by the Audit Office of NSW will commence shortly.

2.4 Key Performance Indicator (KPI) Report

The Board noted the report provided in the meeting papers.

2.5 Program Management Office (PMO) Report

The Program Management Office (PMO) Report was noted. The Board acknowledged the contribution of the value improvement plans (VIPs) and PMO initiatives to delivering the financial result for the 2016/17.

VIP targets for 2017/18 are in development.

2.6 Teaching and Research

The Board was advised that a letter of offer is being progressed for the preferred applicant for the position of Director of Research for SESLHD. The appointment will be announced at the next Board meeting.



Focus

3.1 Presentation: SESLHD ICT Strategy

Invited Guest: Jon Straker, Group Manager, ICT Operations

Mr Jon Straker attended the start of the Board meeting to present on the SESLHD ICT Strategy.

The following key points were noted:

- The strategy covers a period of five years and has been developed following broad consultation across the District.
- The focus areas of the strategy have been developed in alignment with the SESLHD Roadmap to Excellence.
- A number of initiatives in the strategy are currently underway, including such state-wide programs as eMR and eMeds. These state-wide programs have comprehensive governance and assurance structures in place, including steering committees and useracceptance testing. The projects are rolled out using program management methodology.

The Board discussed the governance challenges associated with new technologies, such as remote monitoring devices.

The Board discussed the Randwick redevelopment and how important the technology component is in redesigning the campus. Experience will be taken from technologically advanced hospitals in New South Wales as well as internationally.

The Board discussed concerns regarding IT threats and risk assessments, and sought further assurance on the security mechanisms in place. The Board was advised that a security engineer is in place within the Information Management Services Directorate to address security matters. Support is also received from the eHealth security operations centre, which provides advice on threats.

<u>Action:</u> Briefing to be provided to the Board on the security mechanisms in place to prevent and address IT risks and threats.

The Board resolved to endorse the SESLHD ICT Strategy and to receive further information in the future on the progress against the strategy's action plan.

New Items

4.1 Health Care Quality Committee Charter

The Board approved the revised Health Care Quality Committee Charter, noting the key changes of the inclusion of the General Managers and the District Director of Medical Services as standing members of the committee.

4.2 Audit and Risk Committee Charter

The Board approved the Audit and Risk Committee Charter.

4.3 Corporate Governance Attestation Statement 2016/17

The Board discussed the Corporate Governance Attestation Statement 2016/17 and resolved for further review to be undertaken, in particular in relation to the section on Standard 3, and for the document to be tabled at the August 2017 Board meeting for discussion and approval.



4.4 Internal Audit and Risk Management Attestation Statement 2016/17

The Board discussed the Internal Audit and Risk Management Attestation Statement 2016/17 and resolved for further review to be undertaken and for the document to be tabled at the August 2017 Board meeting for discussion and approval.

4.5 Proposal for creation of a Board Subcommittee on Capital Planning and Redevelopment

The Board discussed the proposal for the creation of the Board subcommittee on capital planning and redevelopment. The Board discussed specifically the governance structure for the Randwick Campus redevelopment. The Board resolved to have Board representation on the governance committee with the key partners on the redevelopment. The Chief Executive is to seek further information on the scope and activities of the peak committees.

<u>Action:</u> Information on the scope and activities of the peak committees for the Randwick redevelopment to be provided for consideration of Board member involvement.

4.6 SESLHD Media and Communications Unit Report 2016/17

The Board noted the SESLHD Media and Communications Unit Report 2016/17 and acknowledged the work of Ms Maxine Brennan, Acting Manager, Media and Communications, and the team over the past year.

Meeting Close

5.1 Business without notice

Billing practices at the Royal Hospital for Women

The Board acknowledged receipt of a letter from SESLHD staff members raising concerns about billing practices at the Royal Hospital for Women. The Board resolved for this matter to be investigated promptly.

5.2 Noting of Confidential Items

Item 2.3 was noted as confidential.

5.3 Date of next meeting:

Wednesday 30 August 2017

4pm – 7pm Board Meeting, Sydney Hospital

Meeting closed at 7.15pm.

Signature

SESLHD Board



Michael Still	
Name	
27 September 2017 Date	