

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

Date:	Wednesday, 22 February 2023
Time:	4:00pm – 7:00pm
Location:	Virtual*/ Heritage Boardroom, Level 1 Admin Block, Sydney/Sydney Eye Hospital, 8 Macquarie Street, Sydney, NSW 2000
Present:	Michael Still (Board Chair) Debra Graves* Allan Spigelman Arthur Diakos Greg Levenston Elli Baker Jan Dudley John Estell Liam Harte Helene Orr Jonathon Doy Anna Guillan
Ex Officio Invitees:	Tobi Wilson, Chief Executive (CE) Kim Olesen, Executive Director Operations (EDO) Wayne Evans, A/Director, Finance Kate Hackett, Director, Nursing and Midwifery Services Dr Martin Mackertich, A/Director, Clinical Governance and Medical Services Grant Eruiini-Bennett, Chair, Medical Staff Executive Council *
Guests:	Lisa Altman, Director Strategy, Innovation & Improvement Carol Nader, Planning Lead, Strategy, Innovation and Improvement Chloe Yarwood, Management Trainee OCE (observer)
Apologies:	Nil
Secretariat:	Carrie Han, Executive Assistant to the CE / Board Secretary

### 1. Opening

#### 1.1 Acknowledgement of Country

An acknowledgement of country was shared.

#### 1.2 Present and Apologies

Apologies were noted by the Board. The Chair welcomed Ms Anna Guillan, new member to SESLHD Board in joining the meeting. The chair declared that a quorum was present and the meeting opened at 5pm.

#### 1.3 Declaration of Interests

Nil

#### 1.4 Minutes of Previous Meeting

The minutes of the previous meeting were reviewed by the Board.

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*Resolution:* The Board resolved that the minutes of the previous meeting held on 30 November 2022 be signed as a true and correct record of the meeting.

### 1.5 Actions from previous meeting

CE advised updates on SPHERE was included in the CE report. The action item regarding SESLHD's nomination for two representatives to the Health Science Alliance Board of Director will be provided at March 2023 Board meeting.

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*Resolution:* The Board notes the information provided.

## 2 Committees

### 2.1 Finance and Performance (F&P) Committee

Minutes of the meeting held on 28 November 2022 were tabled in the papers and taken as read.

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*Resolution:* The Board notes the information provided.

### 2.2 Quality and Safety Board Committee (QSBC)

It was noted there were no minutes for this month.

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*Resolution:* The Board notes the information provided.

### 2.3 Audit and Risk Committee (ARC)

Minutes of the meeting held on 9 September 2022 was tabled in the papers and taken as read. It is noted that the minutes of meeting held on 2 Dec 2022 will be tabled at March 2023 Board meeting.

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*Resolution:* The Board notes the information provided.

### 2.4 Board Strategic Community Partnerships Committee (BSCPC)

Minutes of the meeting held on 5 December 2022 and the Consumer Advisory Committee reports tabled were included in the papers and taken as read.

Ms Helene Orr, the Chair of BSCPC advised an update on the four focus areas in the Community Partnerships Alliance (CPA) workplan was provided at the meeting, including:

- Mental Health - Young people experiencing co-morbid mental health challenges
- Aboriginal Workforce Development
- Domestic Violence/ IPARVAN framework
- Social isolation

Measures of evaluating the effectiveness of the Community Partnerships Alliance were discussed at the December 2022 meeting. It is noted the Partnerships Framework will commence early this year.

Ms Helene Orr discussed a revised structure that was approved in principle by the BSCPC in December 2022 and included the replacement of the CPA and subgroups with an annual Consumer and Partner Forum, annual Showcase and annual report. The Aboriginal Health Leaders forum would continue in its current form. A revised Governance Framework will be circulated reflecting the changes in the BSCPC Governance Framework.

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*Resolution:* The Board notes the information provided.

## 3 Matters for Noting

### 3.1 Correspondence Register

The correspondence register was provided, including:

- A letter from the Minister for Health advising that Ms Ellie Baker has been re-appointed to SESLHD Board to 31 December 2025 and Mr Jonathon Doy and Dr Debra Graves have been reappointed to 31 December 2024.
- A letter from the Minister for Health appointing Ms Anna Guillan to the SESLHD Board

- A letter from the Aged Care Quality and Safety Commission advising that For the Board Kit has been added as a feature of the Governing for Reform in Aged Care Program.

Resolution: The Board notes the information provided.

## 4 Standing Items

### 4.1 Chief Executive Report

The Chief Executive's Report was tabled and taken as read, including updates on following matters:

- SPHERE
- Resignation of SESLHD Director, Corporate and Legal Services
- Acting Chief Executive, Hunter New England Local Health District
- Australia Day Honours, including the recognition of Dr Debra Graves for service to medical administration with the Medal of the Order of Australia and Public Service Medal for Vicki Manning and the late David Pearce
- First Australian Uterine Transplant Surgery undertaken at the Royal Hospital for Women in January 2023
- Sutherland Hospital MRI opening on 13 February 2023

Ms Eli Baker congratulated the District on successfully holding the SESLHD Future Forum.

Resolution: The Board notes the information provided.

### 4.2 Patient Story

The Patient Story provided by St George Hospital was tabled, which reflected the complexity of patient journeys and recognition of the clinical collaboration by the General Medical Unit multidisciplinary team and the focus this team places on person centred and compassionate care.

Resolution: The Board notes the information provided.

### 4.3 Board Chair Report

Resolution: The Board notes the Chair's report.

## 5 New Business

### 5.1 Paper - Sydney/Sydney Eye Hospital Clinical Service Plan

A paper detailing the Sydney/Sydney Eye Hospital (SSEH) Clinical Services Plan (CSP) 2022 was tabled for the Board's endorsement. The plan outlines aspirations for services over the next 10 years. It has been developed in parallel to planning work currently under way for the Macquarie Street East Precinct to ensure alignment. CE advised the plan was developed through a process of extensive consultation with key stakeholders including staff, consumers and other integral partners. The plan has been endorsed by the SESLHD Clinical and Quality Council and Executive Meeting. Following endorsement by the Board, it will be formally submitted to the Strategic Reform and Planning Branch, Ministry of Health for review. This review will support the development of the business case examining the infrastructure options that would meet the clinical service requirements of the Plan and enable the development of the Macquarie Street East Precinct.

Resolution: The Board resolved to endorse the Sydney/Sydney Eye Hospital Clinical Services Plan 2022.

### 5.2 Paper - SESLHD Future Forum summary report

A paper describing the SESLHD Future Forum Summary Report was tabled, providing a summary of the themes that emerged from the forum. The Board's reflection on the quality of the event was noted.

Director, Strategy Innovation and Improvement (DSII) advised that SESLHD is developing a ten-year District CSP to provide district-wide clinical service direction, identifying the key opportunities for the clinical services to grow and evolve as the needs of SESLHD population change. The Future Forum held on 31 January 2023, with leaders across SESLHD and NSW Health, included two panel discussions, focusing on Dis/investment and Sustainability and the SESLHD Future. The ideas that emerged from the forum will inform the development of the District CSP, with further consultations with staff, partners and consumers planned for coming months. Ideas raised at the forum will be taken to upcoming workshops for further discussion such as options to specialise in centres for excellence.

There were discussions around communication channel and approaches between the Board and staff across the District.

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*Resolution:* The Board notes the information provided regarding the SESLHD Future Forum and resolved to endorse the SESLHD Future Forum Summary Report.

### **5.3 Paper - Appointments of two independent members of SESLHD Audit and Risk Committee**

A paper describing membership of the SESLHD Audit and Risk Committee (ARC) was provided to the Board for endorsement. CE advised that there are current vacancies on the SESLHD ARC. It is recommended that the SESLHD Board approves the appointment of Mr Garry Dinnie and Mr Jon Isaacs as independent members to the SESLHD ARC.

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*Resolution:* The Board resolved to approve the appointments of Mr Garry Dinnie and Mr Jon Isaacs as independent members of the SESLHD Audit and Risk Committee.

### **5.4 Paper - Prince of Wales Hospital Acute Service Building Go-live update**

A paper around Prince of Wales Hospital (POWH) Acute Service Building (ASB) go-live plans was tabled. CE advised the original date for the go-live of the POWH ASB was November 2022. In November 2021, the SESLHD Board endorsed deferral of this date to February 2023. The Central Sterilising Services Department commenced operations within the ASB on the 14 November 2022. Decant of further services is planned to commence the week beginning 27 February 2023 and will extend over a few weeks/months. Due to delayed delivery of some key equipment and rectification of building issues, the Emergency Department (ED), Intensive Care Unit (ICU) and satellite imaging will not go-live at the same time as other clinical services. The ED and ICU are not expected to be ready for go-live before the end of April 2023. Recognition of contribution will be considered post the smooth move and commissioning.

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*Resolution:* The Board notes the go-live plans for the Acute Services Building at Prince of Wales Hospital, including the risks/issues.

### **5.5 Paper - Appointment of co-chair of the SESLHD Clinical and Quality Council**

A paper detailing appointment of Associate Professor (A/Prof) Amany Zekry as Co-chair of the SESLHD Clinical and Quality Council (CQC) is provided for endorsement by the Board. It is noted the Co-chair of CQC, with the CE, is involved in shaping the agenda and focus areas of the Council and in chairing meetings. The proposal to appoint A/Prof Zekry as co-chair of the CQC has been discussed with the Chair of the Board Quality and Safety Committee.

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*Resolution:* The Board resolved to endorse appointment of Associate Professor Amany Zekry as Co-chair of the SESLHD Clinical and Quality Council.

## **5 Regular Reporting**

### **5.6 Finance Report**

The Finance report was tabled and taken as read. It is noted that YTD the District's expenditure variance including COVID is \$19.7 unfavourable and total own source revenue is \$11.5m unfavourable due to lower than anticipated activity. CE advised the District's Performance Grade remains at Level 1 with no significant concern raised at the performance meeting with MoH. There were discussions around overtime over budget across the District (\$18.6) and overtime FTEs variance to previous year. CE advised further review will occur with updates provided to the Board offline.

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*Resolution:* The Board notes the Finance Report.

*Action:* Director of Finance to review overtime across the District and provide update to the Board.

### 5.7 Operations Report

The Operations report was tabled and taken as read. The EDO provided an update on COVID-19, operational matters and facilities' performance as well as highlights from across the District. CE highlighted the Clinical Services Statewide Contract between Ramsay Health Care and NSW Health has been signed. Local arrangements are under development in addressing elective surgery issues.

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*Resolution:* The Board notes the Operations Report.

### 5.8 Performance Report

The Performance report, including the Integrated Performance Report and MoH League Table for December 2022, was tabled and discussed.

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*Resolution:* The Board notes the Performance Report.

### 5.9 Capital Works Report

The Capital Works report was tabled.

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*Resolution:* The Board notes the Capital Works Report.

### 5.10 Work Health Safety report

The Work Health Safety report was tabled.

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*Resolution:* The Board notes the Work Health Safety report.

### 5.11 Safety report

The Clinical Governance report was tabled, including the summaries of harm score 1 incidents reported in December 2022 and January 2023 across the District. Director, Clinical Governance and Medical Services advised that improvement seen on the District's performance of Hospital Acquired Complications (HACs), with further review and analysis underway across all sites. CE indicated the review of three recent paediatrics cases across the District has been completed with no significant concern identified.

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*Resolution:* The Board notes the Clinical Governance Report.

## 6 Meeting Finalisation

### 6.6 Business Without Notice

There was no business without notice.

### 6.7 Noting of Confidential Items

There were no confidential items raised.

### 6.8 Next Meeting

The next Board meeting is scheduled for **Wednesday, 29 March 2022** at Prince of Wales Hospital, 320-346 Barker Street, Randwick NSW 2031.

**6.9 Close**

The meeting closed at 7pm.

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I certify that the foregoing is a true and correct copy of the minutes approved by Members of the Board



**Michael Still**  
**Board Chair**