

SESLHD Board Meeting – Minutes

T24/35801

Date:	Wednesday, 29 May 2024
Time:	4:00pm – 7:00pm
Location:	Conference Room A&B, Executive Unit, Level 3, High Street Building, Prince of Wales Hospital, 320-346 Barker Street, RANDWICK NSW 2031
Present:	Dr Deb Graves (Board Chair) Arthur Diakos Anna Guillan Elli Baker Dr Gregory Levenston Dr Jan Dudley Dr John Estell Helene Orr Liam Harte
Ex Officio Invitees:	Tobi Wilson, Chief Executive (CE) Kim Olesen, Executive Director Operations (EDO) Ian Anderson, Director of Finance (DoF) Dr Jo Karnaghan, Director, Clinical Governance & Medical Services (DCG&MS) (via TEAMS) * Kate Hackett, District Director of Nursing & Midwifery Services (DDoN)
Guests:	Brooke Griffith, Executive Director, Randwick Health and Innovation Precinct (ED RHIP) Sharon Carey, General Manager, Corporate Services (GMCS) Dr Phillip Read, Director, Sexual Health & Blood Borne Viruses Services Dr Anthea Katelaris, A/Director, Public Health Unit Isabel Gordon, Management Trainee OCE (observer)
Apologies:	Allan Spigelman, Board Member Jonathan Doy, Board Member
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 declared that a quorum was present and the meeting opened at 4:45pm.

1.3 Declaration of Interests

Updated Conflict of Interest Declaration Register was tabled. No new conflicts of interests to declare or to be added/removed in the Register at this meeting.

1.4 Guest Presentation – SESLHD Safety Update / RHIP Safer Cities

The Board welcomed Ms Brooke Griffith, ED RHIP and Ms Sharon Carey, GMCS to join the meeting and co-present on the RHIP Safer Cities Program and SESLHD Female Workforce Safety. The presentation provided an overview of the Creative Placemaking Framework, the

RHIP Safer Cities Program funding and aims, community perception survey, identified challenges and the strategies and actions adopted to ensure workplace safety. There were concerns raised around safety in Randwick campus car park, noting the RHIP Hospital Campus Night-time Masterplan has taken this into consideration for improvement. Further funding opportunities are being explored through strong partnership and effective relationship with the key stakeholders, including the local council and NSW Transport.

GMCS advised the learnings from Randwick campus will be shared across all sites, noting female workforce safety has been a focus area for SESLHD. The District has comprehensive workplace policies, a supportive work culture and support from the security services, which are essential for implementing effective safety measures across all sites. Regular safety audits and assessment is in place to identify potential hazards and areas for improvement, along with the training and education for all staff within SESLHD.

The Board noted that Ms Brooke Griffith will be moving on from her position as ED RHIP effective July 5, 2024. On behalf of SESLHD Board and the Executive Team, the Chair and the CE thanked Ms Griffith for her collegiality, support, and strong leadership during her 3.5 years in the role.

Resolution: The Board notes the information provided.

1.5 Guest Presentation – True Colours

The Board welcomed Dr Phillip Read, Director, Sexual Health & Blood Borne Viruses Services to join the meeting and provide an update on True Colours, the Trans Gender Diverse Adolescent and Young Adult Service for 16+ which has now commenced receiving clients. The presentation provides the background, consultation process, the Multidisciplinary Team recruitment update, the Operational Implementation Plan for Phase 1 & 2, the model of care, clinical governance at both Statewide and local levels and Implications of the Cass Review.

It is noted that currently no clear public pathway is in place for gender affirming surgery and surgical referrals may be made to the private sectors. Further advice will be provided by the Ministry of Health (MoH), including connections with the other States.

The board noted there are different sources of referrals for True Colours. While the primary source is Primary Care Provider/GPs, referrals are also received from some Medical Specialists and the affiliate services such as Maple Leaf House and the Sydney Children's Hospitals Network in the current soft launch phase. Recurrent funding from the Health and Social Policy Branch of NSW Health is provided for True Colours.

Resolution: The Board notes the information provided.

1.6 Minutes of Previous Meeting

The minutes of SESLHD Board meeting held on 24 April 2024 were tabled and reviewed by the Board.

Resolution: The Board resolved that the minutes of SESLHD Board meeting held on 24 April 2024 be signed as a true and correct record of the meeting.

1.7 Actions from previous meeting

The action log was tabled in the papers and taken as read. CE advised meeting with Prince of Wales Hospital Foundation (POWF) Chair took place to discuss nomination of SESLHD representative to join POWF Board. Further update with nominee identified will be provided to the Board.

Resolution: The Board notes the information provided.

2 Committees

2.1 Finance and Performance Committee (F&P)

Minutes of the meeting held on 22 April 2024 were tabled in the papers and taken as read. It is noted that SESLHD has received initial budget estimates for the financial years 2024/25 to 2027/28 for General Fund and Restricted Financial Assets from MoH. Summary of the key points of the adjustment of MoH's forward year initial budget estimates, in preparation for the 2024/25 Service Agreement, was provided to the F&P Committee at meeting held 27 May 2024. An overview of the District's efficiency improvement plans (EIPs) for FY2024/25 and the process underway to achieve a balanced net cost of services position was also tabled, noting the preliminary submission of EIPs developed to MoH in alignment with SESLHD's strategic objectives.

Resolution: The Board notes the information provided.

2.2 Quality and Safety Board Committee (QSBC)

Draft minutes of the QSBC meeting held on 9 May 2024 was tabled in the papers and taken as read. The Chair of QSBC acknowledged the importance of the Committee and thanked the Board for support towards the expansion of the QSBC to include people and culture governance, which enables better governance alignment.

Resolution: The Board notes the information provided.

2.3 Audit and Risk Committee (ARC)

Draft minutes of the meeting held on 23 April 2024 were tabled and taken as read. It was noted that the draft SESLHD 2023/24 Financial Statements was discussed at the meeting, with no significant issue identified. The Committee endorsed the submission of the Financial Statements to the Audit Office of NSW and MoH for review. The report on the Observations of Early Close Procures from the Audit Office of NSW was tabled at May 2024 ARC meeting with an overview of key matters provided. Further update on the remaining management letter items from the previous financial year was also provided at the May 2024 meeting.

Resolution: The Board notes the information provided.

2.4 Board Strategic Community Partnerships Committee (BSCPC)

It was noted there were no minutes for this month.

3 Matters for Noting

3.1 Correspondence Register

The correspondence register was tabled and noted, including the memo from the Secretary NSW Health regarding NSW Health and NSW Primary Health Networks joint governance requirement.

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 regarding:

- Commencement of Ms Caroline Curtin to the General Manager, NSW Organ and Tissue Donation Service (OTDS) role on 13 May 2024.
- Quarterly performance meeting with MoH on 22 May 2024.
- SESLHD 2024-25 Service Agreement purchasing discussion with MoH held on 24 May 2024, noting clarification sought from MoH towards capital projects and programs / initiatives with non-recurrent funding allocated.
- Single Digital Patient Record recruitment impact on SESLHD.
- SESLHD CORE Awards ceremony to be held next Monday, 3 June 2024.

Resolution: The Board notes the information provided.

4.2 Board Chair Report

The Board Chair's report was tabled and taken as read, including attending the 30 years celebration event of the Sutherland Hospital Southcare Aged Care Service on 23 May 2024. Attendance of the SESLHD Medical and Dental Appointments Advisory Committee, Medical Staff Executive Council and SESLHD Clinical and Quality Council meetings and meeting with UNSW Vice Chancellor and Provost are also noted.

Resolution: The Board notes the Chair's report.

4.3 Patient Story

The Patient Story provided by St George Hospital was noted.

Resolution: The Board notes the information provided.

4.4 Innovation Story

The Board welcomed Dr Anthea Katelaris to join the meeting and present on Improving Adolescent Vaccination Coverage through the School Vaccination Program, including the background, case for change, innovation and the strategies implemented. The positive outcome in terms of supporting vaccine update, streamlining booking and administration and eliminating over 95% waste in one year was noted and acknowledged by the Board.

Resolution: The Board notes the information provided.

5 New Business

5.1 Paper – Critical Infrastructure Risk Management Program (CIRMP) update

A paper providing CIRMP updates was included, noting this is an action item from April 2024 SESLHD Board meeting to seek further advice from MoH prior to endorsement of the SESLHD CIRMP. A letter, signed by the Board Chair and CE has been sent to MoH requesting advice prior to submission of the annual review due by 28 September 2024. Further update will be provided to the Board when available.

Resolution: The Board notes the information provided.

5.2 Paper – St George Hospital (SGH) Radiology training accreditation update (**Confidential**)

A paper providing an update on SGH training accreditation was tabled for the Board's information. Further updates will be provided to the Board at June meeting.

Resolution: The Board notes the information provided.

ACTION: Further updates on SGH Radiology training accreditation to be provided to the Board at June 2024 meeting.

5.3 Paper – SESLHD Quality Safety Board Committee (QSBC) Charter

A paper regarding the SESLHD QSBC Charter was provided to the Board for approval, noting the Board has previously endorsed expansion of the QSBC to include people and culture governance. The committee will be titled Quality, Safety and Culture Board Committee. The existing committee Charter has been updated to include governance of people and culture functions. The draft Charter has been endorsed by SESLHD QSCBC at 9 May 2024 meeting.

Resolution: The Board resolved to endorse the updated SESLHD QSCBC Charter.

5.4 Paper – Lucy Osburn Nightingale Foundation Trust

A paper regarding Lucy Osburn Nightingale Foundation Trust is tabled. DN&MS advised the Lucy Osburn Nightingale Foundation of Australia was set up in around 2000 as a charitable trust to support the Lucy Osburn-Nightingale Museum. The Foundation's constitution has not been updated since its establishment and the purpose, membership and governance has become increasingly unclear. Legal advice has been initiated to review the constitution and provide options on pathways moving forward. Further works underway to identify potential funding source and administration/management options.

Resolution: The Board notes the information provided.

5.5 Paper – Nursing and Midwifery Safe Staffing Levels Update

A paper regarding Nursing and Midwifery Safe Staffing Levels (SSL) was provided with an update of in-principle agreement on ratio and skill mix positions, and the next steps towards implementation of the SSL policy. DDoN advised that the SSL Taskforce is currently meeting weekly with the focus on the initial roll-out of SSL in the Level 5 and 6 Emergency Departments (EDs) across NSW. Key matters under discussion and yet to be decided include the methodology on how SSL is calculated for the EDs, support roles being within or outside the staffing ratio and the process for NSW Nursing and Midwifery Association and MoH site visits to determine new staffing numbers. SESLHD notes the subsequent risks, including the workforce shortage for the District, with mitigation strategies under development. The flexibility for ED model of care has been flagged with the SSL Taskforce for consideration to ensure clinical safety.

Resolution: The Board notes the information provided.

6 Regular Reporting

6.1 Finance Report

The Finance report was tabled and taken as read.

Resolution: The Board notes the Finance Report.

6.2 Operations Report

The Operations report was tabled and taken as read, including update on SESLHD elective surgery recovery, ED performance including the 2024 winter plan with strategies embedded for all sites across SESLHD, Voluntary Assisted Dying and NSW Telestroke services.

The Board's recommendation to include further commentary and analysis of the District's strategies to meet the Key Performance Indicators (KPIs) within the Service Agreement and progress made is noted. CE indicated the Transfer of Care (TOC) performance has been a focus. A paper will be provided to the Board next month following the deep dive

into the District TOC performance. An implementation plan has been developed following the external review of SGH ED performance, with the goal to shift the ED performance for SGH and SESLHD.

CE advised the draft generic 2024-25 Service Agreement was received from MoH to the District for comments. A paper summarising the changes to KPIs, including the new and updated KPIs and any retired indicator from previous financial years will be provided to the Board when ready.

Resolution: The Board notes the Operations Report.

ACTION: A paper to be provided to the Board at June 2024 meeting following the deep dive into SESLHD TOC performance.

ACTION: A paper summarising the changes to KPIs in draft generic 2024-25 Service Agreement to be provided to the Board when ready.

6.3 Performance Report

Integrated Performance Report for April 2024 and MoH League Table for March 2024 was tabled and noted by the Board.

Resolution: The Board notes the information provided.

6.4 Clinical Governance Report

Clinical Governance report was tabled and taken as read. DCG&MS advised the changes to the reporting of Serious Adverse Event Reviews (SAER) to improve visibility and add comparison to indicate improvement with overdue SAER recommendations. SESLHD Hospital Acquired Complications (HACS) performance had slight deterioration, with works underway to identify drivers for hospital acquired VTE.

Resolution: The Board notes the information provided.

6.5 Capital Works Report

The Capital Works report was tabled and taken as read. GMCS provided a summary of the redevelopment across SESLHD, including Darlinghurst and OTDS relocation. It is noted that the capital projects are on track with no significant risks identified.

Resolution: The Board notes the Capital Works Report.

6.6 SESLHD Health and Safety Wellbeing Board Report Jan - March 2024

SESLHD Health and Safety Wellbeing report for Jan – March 2024 was tabled and taken as read, including updates on Health, Safety and Wellbeing, key initiatives for health and safety across SESLHD, the Work, Health and Safety (WHS) audit, Workers Compensation performance and Health and Safety performance.

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

7 Meeting Finalisation

7.1 Business Without Notice

Nil

7.2 Noting of Confidential Items

Agenda item 5.2 is noted as confidential.

7.3 Next Meeting

It is noted that next SESLHD Board meeting is scheduled on Wednesday, 26 June 2024, which will be held at Sydney/Sydney Eye Hospital.

7.4 Close

The meeting closed at 6:55pm.

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



**Board Chair
Dr Debra Graves**