

# **Board Minutes**

Date: Time: Location:	Wednesday, 29 November 2023 4:00pm – 7:00pm Boardroom, Level 4, James Laws House, St George Hospital
Present:	Dr Deb Graves (Board Chair) Arthur Diakos Anna Guillan Elli Baker (via TEAMS) * Dr Gregory Levenston Dr Jan Dudley Dr John Estell Allan Spigelman Helene Orr Liam Harte * Jonathan Doy
Ex Officio	Tobi Wilson, Chief Executive Kim Olesen, Executive Director Operations
Invitees	Ian Anderson, Director, Finance Dr Jo Karnaghan, Director, Clinical Governance and Medical Services * Kate Hackett, Director, Nursing and Midwifery Services Dr Grant Eruini-Bennett, Chair, Medical Staff Executive Council
Guests:	Donna Garland, General Manager, Royal Hospital for Women * Fiona Fahey, Director, People and Culture Lisa Altman, Director, Strategy, Innovation & Improvement * Sharon Carey, General Manager, Corporate Services * Vicki Weeden, General Manager, The Sutherland Hospital * William de Montemas, 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 declared that a quorum was present and the meeting opened at 5pm.

# **1.3 Declaration of Interests**

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

# 1.4 Minutes of Previous Meeting

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

*Resolution:* The Board resolved that the minutes of the previous meeting held on 25 October 2023 be signed as a true and correct record of the meeting.

#### 1.5 Actions from previous meeting

The action log was tabled in the papers and taken as read.

*Resolution:* The Board notes the information provided.

# 2 Committees

#### 2.1 Finance and Performance Committee

Draft minutes of the meeting held on 23 October 2023 were tabled in the papers and taken as read.

*Resolution:* The Board notes the information provided.

#### 2.2 Quality and Safety Board Committee

It is noted that there are no minutes for this month.

#### 2.3 Audit and Risk Committee

It is noted that there are no minutes for this month.

#### 2.4 Board Strategic Community Partnerships Committee

It is noted that there are no minutes for this month.

# **3** Matters for Noting

#### **3.1 Correspondence Register**

The correspondence register was provided, including:

- NSW Health Council of Board Chairs communique following meeting on 9 October 2023
- SESLHD Quarterly Board Reports for April–June 2023 from the Ministry of Health (MoH), providing updates on the District's key performance indicators.
- NSW Health submission to the Special Commission of Inquiry into Healthcare Funding

*Resolution:* The Board notes the information provided.

# 4 Standing Items

## 4.1 Chief Executive Report

The Chief Executive (CE)'s Report was tabled and taken as read, noting updates on the SESLHD Health Care Services plan, Special Commission of Inquiry were included in the papers. CE highlighted that the Voluntary Assisted Dying becomes a lawful end-of-life option as of 28 November 2023 and work continues across the District around the implementation process. Director, Population and Community Health's secondment and acting arrangement was noted by the Board.

*Resolution:* The Board notes the information provided.

## 4.2 Board Chair Report

The Board Chair's report was tabled and taken as read, including attendance at the Randwick Health Innovation Precinct Council meeting, SESLHD Medical Staff Executive Council meeting, Clinical and Quality Council meeting, meeting with the Chair of St Geroge Hospital Clinical Council and meeting with the CEO of the Royal Australia and New Zealand College of Radiologists to discuss the accreditation of St George Hospital for Clinical Radiology Speciality Training.

Resolution: The	Board notes the Chair's report.
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# 4.3Patient Story

The Patient Story provided by Child Youth and Family Services, Population and Community Health was noted.

Dr Greg Levenston advised that a national apology was offered to thalidomide survivors and their families for pharmaceutical disaster. Recommendation for SESLHD to issue a statement to all staff is noted.

Resolution:	The Board notes the information provided.
Action:	CE to consider SESLHD's statement regarding apology to thalidomide
	survivors and their families for pharmaceutical disaster.

# 4.4Innovation Story

The Board welcomed Ms Donna Garland, General Manager, Royal Hospital for Women (RHW) to join the meeting and present on the Neonatal Hospital in the Home program which commenced in 2021, supported by virtual care technology. The benefits of the program include additional allocation of NWAU, saved cot days through earlier discharge home and positive family feedback. Next steps will include increasing the cohort of DRG's accepted on the program, improve promotion strategies to increase uptake, increase service days and exploring LHD expansion opportunities. It is noted that recruitment for the program has been successful with all permanent vacancies filled. The Board acknowledges RHW's commitment to piloting and implementing innovative models of care and enabling technologies, with multiple innovative projects being undertaken or considered.

*Resolution:* The Board notes the information provided.

# 5 New Business

# 5.1 Paper – People Matter Employee Survey (PMES) 2023

A paper regarding SESLHD PMES 2023 was provided to the Board for information, including a presentation delivered by Ms Fiona Fahey, Director, People and Culture. Following elements were presented and discussed:

- SESLHD engagement and participation rate comparison for the last three years, noting that total SESLHD response rate for the survey increased to a record 44% in 2023, with 5,838 SESLHD employees completing the survey.
- SESLHD participation rates and engagement levels between different Directorate/Facility
- Comparison of response rates and engagement scores across LHDs
- Headline results for key topics, noting some of the areas of most improvement this year have been key action areas from the 2022 survey.
- SESLHD action plan being finalised, with following four focus areas identified:
  - Career Development, noting actions will include identifying critical roles for the purpose of prioritising succession planning and talent identification.
  - Wellbeing/Burnout, noting the District will implement the Employee Mental Health and Wellbeing action plan with a focus on prevention, including implementing district-wide Managing Violence Aggression project.
  - Leadership, noting the actions include increasing the leaders' presence on the floor and opportunities for staff to provide feedback and raise issues.
  - Workplace behaviours, noting the District will endeavour to provide education, training, guidance and support to staff and managers.

Director, People and Culture advised that the Directorate and Facility action plans are being developed, which are due 18 December 2023.

*Resolution:* The Board notes the information provided.

# 5.1.1 Paper – SESLHD Addressing Racism Strategy

A paper detailing the SESLHD Addressing Racism Strategy was tabled for the information of the Board, including a presentation developed by Population and Community Health to provide an overview of the key initiatives of the Strategy and outcomes of the evaluation of the Anti-racism Bystander Intervention staff training module. It is noted the SESLHD Addressing Racism Strategy was developed in response to the PMES results in the previous years and a body of evidence of the prevalence and impact of racism in health care settings. The strategy seeks to reduce the prevalence and impact of racism within SESLHD by raising awareness and providing staff with strategies to respond to racism in the workplace. It is noted that works are underway to develop a refined/tailored Addressing Racism program for Aboriginal and Torres Strait Islander health workers, led by Director, Aboriginal Health and Director, People and Culture. CE indicated addressing racism was discussed at the Senior Executive Forum and the recommendations include a clear statement about racism to be released by the Secretary.

*Resolution:* The Board notes the information provided.

# 5.2Paper – SESLHD Health Care Services Plan (HCSP)

A paper describing the SESLHD HCSP was provided to the Board for endorsement. It is noted that a draft HCSP was circulated in October 2023 and feedback received from SESLHD staff, partners and consumers is reflected in the final version. The Board acknowledges the significant efforts and achievement from SESLHD Strategy, Innovation and Improvement Team in developing the HCSP. Positive engagement and collaboration with neighbour LHDs through the plan development process was noted.

*Resolution:* The Board resolved to endorse SESLHD Health Care Services Plan.

# 5.3Paper – Garrawarra Centre

#### **5.4Paper – Naming St George Hospital Stage 3 Development - Kensington Street Building** A paper proposing the name Kensington Street Building for the St George Hospital Stage 3 Redevelopment was provided to the Board for endorsement. CE advised the naming of any new facility or asset within NSW Health must comply with NSW Health Policy Directive PD2014\_015 Hospital Naming Policy, which requires that the proposed name is considered by LHD and endorsed by the Board for submission to the Minister for Health for final approval.

*Resolution*: The Board resolved to endorse the name Kensington Street Building for the St George Hospital Stage 3 Redevelopment.

# 5.5Paper – Finance - Service Agreement Actions

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*Resolution:* The Board notes the information provided.

# 5.6Paper – SESLHD Annual Financial Statements for the year ending 30 June 2023

A paper regarding the SESLHD Annual Financial Statements for the year ended 30 June 2023 was provided to the Board for endorsement. It is noted that the SESLHD Annual Financial Statements have been prepared in accordance with the relevant accounting standards and legislative requirements and were endorsed by the Audit and Risk Committee.

*Resolution:* The Board resolved to endorse the Annual Financial Statements for the year ending 30 June 2023.

## 5.7 Paper – Adam Fitzpatrick Coroners Matter

*Resolution:* The Board noted the information provided.

# 6 Regular Reporting

## 6.1 Finance Report

The Finance report was tabled and taken as read.

Director of Finance advised the expenditure for SESLHD is \$1.2 million favourable to budget for the month of October 2023. Full year expense forecast remains the same as previous month. SESLHD has sought and implemented efficiency initiatives, but these will take time to

gain traction and that more substantial actions are being developed to address the gap to budget, some of which will require support from the MoH and pillar services to reduce expenditure. The Board shared the positive commentary from St Geroge Hospital for support and guidance provided by the District in identifying and tracking saving initiatives. It is noted that work is underway around the budget build for the Directorates/Facilities.

*Resolution:* The Board notes the Finance Report.

# **6.20**perations Report

The Operations report was tabled and taken as read. Executive Director Operations highlighted the significant works towards the Medical Imaging Project and the challenge for SESLHD to meet 000 by 31 December 2023 for Elective Surgery. Further work is required to improve the District's ED performance across all sites, noting intensive efforts within the ED to improve the timeliness of the patient journey from St George Hospital. Training implementation for VAD commenced across the District, with monthly VAD Governance meeting and weekly touch point meetings in place to track progress.

*Resolution:* The Board notes the Operations Report.

## **6.3Performance Report**

Integrated Performance Report for October 2023 and MoH League Table for September 2023 were tabled and noted by the Board. CE flagged that NSW Health is currently transitioning its data warehouse from Health Information Exchange to Enterprise Data Warehouse for Analysis, Reporting & Decision Support (EDWARD), noting the variation from the reporting has the potential to negatively impact SESLHD's perceived performance against KPIs.

*Resolution:* The Board notes the information provided.

## 6.4Capital Works Report

The Capital Works report was tabled and taken as read. General Manager, Corporate Services provided a summary of the redevelopment across the sites within the District, noting all capital projects are on track with no significant risks identified.

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

## 6.5Safety and Quality report

The Clinical Governance report was tabled and taken as read. Director, Clinical Governance and Medical Services highlighted the redesign project underway to centralise the Serious Adverse Events Review reporting and the District's HAC performance.

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

## 6.6RHIP Report

RHIP Report for October 2023 was tabled and noted by the Board.

Resolution:	The Board notes the information provided.
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## 6.7 Health and Safety Wellbeing Board Report for Quarter 1 FY2023-24

Health, Safety and Wellbeing Report for October 2023 was tabled and noted by the Board.

*Resolution:* The Board notes the information provided.

# 7 Meeting Finalisation

## 7.1 Business Without Notice

Dr Greg Levenston, Chair for SESLHD Quality and Safety Board Committee (QSBC) suggested the risks associated with Royal Hospital for Women Neonatal Hospital in the Home program to be tracked and agreed this to be actioned via QSBC.

# 7.2 Noting of Confidential Items

Confidential items as listed were discussed and noted.

# 7.3Next Meeting

It is noted that SESLHD Annual Public meeting is scheduled on Thursday, 7 December 2023. Next ordinary Board meeting is on Wednesday, 28 February 2024 at Boardroom, Level 1, Admin Building, Sydney/Sydney Eye Hospital.

# 7.4Close

The meeting closed at 7:00pm.

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

Dillenfrond

Board Chair Dr Debra Graves