

Wednesday 30 March 2016 at 4.30pm | Worrall Theatre, Sydney/Sydney Eye Hospital

SESLHD Board Minutes

Board Members:

- Mr Michael Still (Chair)
- Ms Patricia Azarias (*via teleconference*)
- Ms Deborah Cansdell
- Mr Jonathan Doy
- A/Prof Robert Farnsworth
- A/Prof Peter Gonski
- Dr Debra Graves
- Dr Harry Harinath
- Janet McDonald
- Prof Jeanette Ward (*via teleconference*)

In Attendance:

- Mr Gerry Marr – Chief Executive
- Ms Karen Foldi – Director of Finance
- Mr Mark Shepherd – Director of Programs and Performance
- Ms Kim Olesen – Director of Nursing and Midwifery Services
- Dr James Mackie - Medical Executive Director
- Dr Theresa Jacques – Chair, Medical Staff Executive Council
- Mr Todd Davies – Chair, Audit and Risk Management Committee (*6.30pm – 6.40pm only, via teleconference*)

Apologies:

- Ms Kate Munnings
- A/Prof Peter Smerdely
- Ms Kristin Stubbins (Advisor)

Secretariat:

- Ms Nicole McGregor – A/Executive Officer to the Chief Executive

STANDING ITEMS

1.1. Minutes of the SESLHD Board meeting held Wednesday 24 February 2016

The Board resolved to approve the minutes of the SESLHD Board meeting held Wednesday 24 February 2016 as an accurate record of proceedings.

Resolution 301

“That the Board resolves to approve the minutes of the SESLHD Board meeting held on Wednesday 24 February 2016 as an accurate record of proceedings.”

Moved: Janet McDonald Seconded: Dr Harry Harinath Carried

1.2. Minutes of Finance and Performance Committee meeting held Monday 22 February 2016

The minutes of the meeting of the Finance and Performance Committee held on Monday 22 February 2016 were noted.

1.3. Minutes of Health Care Quality Committee meeting held Monday 29 February 2016

The minutes of the Health Care Quality Committee meeting held on Monday 29 February 2016 were noted.

1.4. Minutes of the Community Partnerships Committee meeting held Monday 7 March 2016

The minutes of the Community Partnerships Committee meeting held Monday 7 March 2016 were noted.

1.5. Actions

The Board reviewed and updated the Action Log.

The District's winter plan will be presented to the Board at its May meeting. Significant results are being seen at St George Hospital from the Lightfoot work on predictive analytics, and this progress was recently presented to the Secretary for Health.

1.6. Correspondence Register

The Board noted the correspondence received to Wednesday 23 March 2016.

1.7. Teaching and Research

It was noted that the Academic Health Science Partnership Shadow Board Meeting is to be held on Thursday 31 March 2016.

FOCUS**2.1. Presentation**

Invited guest: Professor David Currow, Chief Executive Officer, Cancer Institute NSW

Professor David Currow attended the start of the Board meeting to present on the work of the Cancer Institute NSW and in particular, on variations in cancer outcomes in New South Wales.

The following key points were noted:

- A new cancer plan for the state is in development, with wide consultation being undertaken.
- In some cancers, there are key hospital-level procedural volume/outcome relationships for mortality. International and local data was presented.
- The presentation focused on cancers of the oesophagus, pancreas and ovaries.
- Data was presented on the mortality for oesophagectomies and pancreatectomies against average hospital procedure volume

The Board discussed the presentation and the data presented. The Board had concerns that SESLHD facilities were not accurately represented in the data.

2.2. Presentation

Invited guests: Professor Michael Farrell, National Drug and Alcohol Research Centre

Associate Professor Nicholas Lintzeris, Director, Drug and Alcohol Services, SESLHD

Professor Michael Farrell and Professor Nicholas Lintzeris attended the start of the Board meeting to present on the work of the National Drug and Alcohol Research Centre (NDARC) and the SESLHD Drug and Alcohol Services.

The following key points were noted:

- NDARC is partially funded by the federal government and is now ranked in the top five global drug and alcohol research centres.
- Mindgardens is a broad collaboration between universities, Local Health Districts, medical research institutes to enable, strengthen the base of current research and clinical activity. It is focused on integrated mental health services.
- An overview of the SESLHD Drug and Alcohol Service was provided. The service is District-wide and is focused on alcohol, pharmaceutical and illicit drug use.
- NDARC and the SESLHD Drug and Alcohol Service see benefits in co-locating some services on the Randwick campus.

STANDING ITEMS

3.1 Board Chair Report

The Board Chair provided a verbal update to the Board. The following key points were raised:

- There has been no announcement as yet on the recruitment for the Secretary for Health.
- The Council of Australian Governments (COAG) meets next on Thursday 31 March 2016 and is expected to have a focus on reducing the costs of healthcare.

3.2 Chief Executive Report

The Chief Executive provided a verbal update to the Board. The following key points were raised:

- Activity negotiations for the 2016/17 financial year are underway with the Ministry of Health.
- Recruitment for the Director of Internal Audit is being finalised, with the preferred applicant verbally accepting the offer of the position.
- A resolution has been reached in relation to the agreements with the Nelune Foundation and the Bright Alliance.
- The recent event for The Inspiring Ideas Challenge (TIIC) was successful, with a range of innovative projects being presented, including a number of projects with the potential to make a large difference for a small amount of financial investment.

3.3 Finance and Performance Update

The Director of Finance provided an update on the District's financial position year-to-date and results for February, as detailed in the Director of Finance Report provided. The financial results remain in line with the forecast and on track to meet the projected end of

year position. The major change this month has been the shift in the position of revenue and expenditure, in line with the agreement reached with the Ministry of Health for self-funded projects.

Revenue, and in particular, patient fee revenue, remains the most critical issue. The Board discussed plans for negotiation of budgets for the next financial year, and its concerns with unachievable revenue budgets. A detailed report on SESLHD's revenue environment and position is being undertaken to aid in negotiations.

The Board discussed clinical coding; an external coding audit is planned to review three months' worth of activity data to determine whether there are issues with coding. It was noted that there is a difference in funding between overnight cases and day cases with the same diagnostic related group (DRG). In addition, there are opportunities to increase education and work with clinicians to ensure coding practice is understood.

3.4 Key Performance Indicators (KPIs)

The Board noted the report provided in the meeting papers. An overview of KPI performance was provided.

Elective surgery access performance

Effort continues to be focused on reducing overdue elective surgical cases. Prince of Wales Hospital has minor issues with cardiothoracic surgery and neurosurgery that are being addressed. St George Hospital has a larger number of overdue cases, but work continues to be done to reduce this number.

Winter planning symposium

A second winter planning symposium was held in March, attended by approximately 90 staff. The symposium involved each facility presenting on their initiatives and strategies, as well as facilitated sessions to provide support to progress the initiatives.

ACTION: Winter plans and progress on Lightfoot work to be presented at the May Board meeting.

Peritonectomy

The Board discussed the impact that peritonectomy surgery has had on surgical capacity and intensive care unit capacity. The Chief Executive advised he has a brief of the surgical capacity impact of peritonectomy surgeries that he will bring to the next Board meeting.

ACTION: Brief of impact of peritonectomy surgery on surgical capacity at St George Hospital to be provided to the Board.

3.5 Program Management Office (PMO) Report

The Board noted the PMO Report provided in the meeting papers.

The Board discussed 2016/17 planning for savings initiatives. Expense reduction and revenue improvement targets for 2016/17 are currently in discussion, ahead of a six-week planning phase for strategies and initiatives before the start of the new financial year.

A revenue workshop for District staff is planned for April to look at opportunities to increase revenue and develop a plan for 2016/17.

NEW ITEMS

4.1 Report on the Review of Care in the Community

The Board noted the report received. This review has taken a year to complete, but has strong support from clinical councils and key stakeholders.

Progress on the implementation of the recommendations in the report will be presented quarterly.

4.2 Membership of Mental and Dental Appointments Advisory Committee (MADAAC)

The Board was asked to reconsider the recommendation previously provided for a non-medical representative for MADAAC.

The Medical Executive Director provided information on the background of the current Director of Clinical Governance, and how her experience in culture and leadership will be of benefit to the MADAAC.

The Board resolved to approve the recommendation in the brief for the Director of Clinical Governance to be the non-medical Board appointee to MADAAC.

4.3 Quality and Safety Training for Board Members

The Board noted the information provided and agreed to implement the recommendations on quality and safety training for Board members.

A deadline of the end September 2016 for completion of the online training modules was agreed.

The Board Secretary will circulate the necessary information to allow Board members to complete these tasks.

In addition, Board members were reminded of the need to undertake Aboriginal cultural awareness training.

4.4 Audit and Risk Management Committee Annual Report

Mr Todd Davies, Chair and independent member of the SESLHD Audit and Risk Management Committee (ARMC), joined the meeting via teleconference at 6.30pm to discuss Items 4.4 and 4.5

An overview of the process for following up on recommendations from internal audits was provided. The Board was advised that a closed-loop process exists and that management is held accountable for ensuring issues identified during internal audits are addressed in a timely manner.

The Board discussed the upcoming Board Risk Workshop, scheduled for May. Board members were encouraged to propose items that should be addressed at the workshop.

The Board was advised that ‘deep dive’ investigations have been carried out for the top three risks identified at the previous Risk Workshop, being information technology, patient data and community health outcomes.

Mr Davies acknowledged the contribution of Ms Azarias and Professor Farnsworth to the ARMC.

Mr Davies departed the meeting at 6.40pm.

4.5 Audit and Risk Management Committee Charter

The Board approved the Audit and Risk Management Committee Charter.

4.6 Randwick Redevelopment Update

The Board noted the update provided. A workshop with a wide range of stakeholders will be held in the coming months to discuss long-term planning for the Randwick campus.

CLOSE

5. Business without notice

Nil items raised.

6. Noting of Confidential Items

Nil confidential items.

7. Date of next meeting:

Wednesday 27 April 2016

4pm – 7pm

Worrall Theatre, Level 1, Worrall Block

Sydney/Sydney Eye Hospital

Presentation:

Meeting closed at 7.16pm.



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Signature

Michael Still

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Name

27 April 2016

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Date