

Minutes for ISLHD Board Meeting - 1 March 2021

01/03/2021 | 02:00 PM - 05:00 PM - AEST

Conference Room, District Executive Offices

Attendees (13)

Denis King; Eve Bosak; Roger Downs; Kathy Eagar; Alan Hudson; William Lovegrove; Rod McMahon; William Pratt; John Stubbs; Gerard Sutton; Marisa Mastroianni; Paul Knight; Richard Morris

Agenda

The meeting commenced at 2.05pm.

ITEM 1 - In Camera Discussion (if required)

There was no in camera discussion.

ITEM 2 - Presentation - District's technology and ICT planning (action item 116/20)

The Board received the presentation by the Chief Information Officer (CIO). The Board queried:

- The process for resolving differences of opinion around product selection with Health Infrastructure (HI), to which the CIO noted the District had developed an open relationship with HI and approached them early in redevelopment planning, as well as improved communications between HI and eHealth.
- Whether there had been problems with requirement based funding, to which the CIO advised the District had improved its strategies in prioritisation and advocacy.
- The skills HI hold in product selection and whether they seek it externally, to which the CIO advised HI have one employee with an ICT background and that they have engaged a consultant that had been previously involved in visioning for recent developments.
- If the CIO would consult with hospitals that had used that consultant previously on outcomes, to which he advised he had consulted the Liverpool Hospital program manager for feedback and that they had issues around ICT value management at the end of the project, with the need to layer ICT throughout the redevelopment.
- Whether HI were informed of the District's data storage needs, to which the CIO noted that some elements of data were eHealth delivered and that data had predominantly moved to NSW Government data centres, and that eHealth have capability.

- Mechanics of involving staff and seeking feedback, to which the CIO noted consultations sessions with clinicians, staff and consumers were held during redevelopment planning to gauge user perspective.
- Whether Community Health would be a focus, with most development in the acute inpatient space, to which the Chief Executive advised it was identified in the Health Care Services Plan and would guide progress, in addition to the Community Health review underway.
- Whether communications with general practice would be increased, to which the Chief Executive advised consultations were held with the Primary Health Network (PHN) in strategic alliance meetings and through co-commissioning. The CIO noted the PHN has capable resources.

The Board noted the District appears well placed to deliver on the Digital Health Strategy and reiterated the need for program managers to drive the change.

ITEM 3 - Welcome

3.1 - Acknowledgement of Country

The Chair acknowledged the traditional owners of the land on which the Board met and paid respects to Elders past, present and emerging.

3.2 - Attendance

Others in Attendance:

Ms Margot Mains, Chief Executive

Dr Josh Rijdsdijk, Northern Illawarra Hospital Group Medical Staff Council representative

Ms Angela Tugrul, Executive Support Officer

Mr Peter Shiells, Chief Information Officer present for the presentation at Item 2.

Dr Kia Wallwork, Acting Executive Officer present for Agenda Items 1 through 7.4.

Prof Rod McMahon joined the meeting at 2.40pm.

Ms Eve Bosak joined the meeting at 3.12pm.

Ms Marisa Mastroianni joined the meeting at 4.04pm.

3.3 - Apologies

There were no apologies.

ITEM 4 - Declaration of interests

There were no conflicts of interest declared.

ITEM 5 - Business from the last meeting

5.1 - Minutes of the meeting on 1 February 2021

The Board approved the draft minutes of the meeting held 1 February 2021.

5.2 - Action Items Arising

The Board noted progress and completion of actions and agreed with the change of the presentation of action items.

5.3 - Resolutions Register

Members received the Board resolutions of the previous 12 months and the progress to date.

ITEM 6 - For Approval

6.1 - ISLHD Board Delegations Manual - Part 2

RESOLUTION 2021/46: The Board approved the ISLHD Board Delegations Manual - Part 2.

ITEM 7 - Strategic Matters

7.1 - Action Item 170/20 - Risk Profile - Incorporating Clinical Risk

The Board received the information provided and discuss whether community health risks should be identified due to the flow on affect to inpatient services. The Chief Executive advised that contentious or significant issues were raised, such as those affecting elective surgery or mental health.

7.2 - Quarterly Risk Management Update

The Board received the report provided and the Chief Executive noted the risk profile guides operations and investment.

The Board queried:

- The misalignment between risk tolerance and appetite and the frequency of updates, to which the Chief Executive advised on the plan to revise appetite and frequency.
- If overdue management actions relating to high-level risks would be reviewed or included in the audit plan, which the Chief Executive took on notice to advise.
- Where risk ratings were unchanged long term whether they were reassessed, readdressed or reprioritised if necessary, to which the Chief Executive advised they are reviewed quarterly and discussed monthly, having provided the example of emergency treatment performance, the redeveloped action plan and the disruptions of COVID.
- Whether other risks arose as a result of management action,

The Board requested an annual overview of progress against management actions. The Audit and Risk Committee (ARC) Chair noted the ARC review high risks regularly and noted focus areas would be the impacts of COVID having disrupted management actions and contingency planning. The Chief Executive advised that risks were reported through several Board Committees in addition to quarterly Board reporting. The Board confirmed the annual report would show progress against risks and which Board Committee they were assigned to identify any governance issues.

The Board further noted concern around management actions that had not progressed, such as those around risk appetite and business continuity planning, with the need for reprioritisation within fiscal constraints or revision of the risk level. The Chief Executive advised that high number of management actions arising from audits were an issue discussed regularly with the Director Internal Audit. She added that several were best practice recommendations, but were not able to be prioritised and invested in and that ISLHD accepted the level of risk identified.

The Board discussed that where risks are consistently high they must be questioned by the Board, as raised in the banking royal commission. The expressed comfort that the ARC reviewed high risks regularly. They noted they may occasionally need to go beyond the Board reports and query action officers, with the need to be satisfied with both the process and the results. The Chief Executive noted the difference between enterprise risk and risks arising from audits, with the District having the most management actions of any LHD. The Board noted the need for a documentation trail where accepting risk to ensure only low risks are accepted, and that is was preferred to report all risks even if there were many.

Dr Josh Rijdsijk noted a Medical Imaging review was underway for St George Hospital, who were using the same reviewer the District had and expected challenges around recruitment, to which the Chief Executive agreed.

ACTION: 174/21 - The Chief Executive will report on overdue risks (18 noted) and risk alignment to the May 2021 meeting. (Assignee(s): Margot Mains; Due Date: 03/05/2021)

ACTION: 175/21 - An annual summary report showing progress against management actions and risks including which Board Committee manages each will be provided commencing May 2021. (Assignee(s): Margot Mains; Due Date: 03/05/2021)

7.3 - Selected Performance Indicators by Local Health District & Network (December 2020)

The Board received the report provided and observed the state-wide results had deteriorated further, with the District not the worst performer with some areas of improvement. The Board Chair reiterated the Secretary NSW Health comments that the usual reprieve over Christmas each year no longer existed.

The Board queried whether the Chief Executive had been asked to speak to the Parliamentary Review into rural services. The Chief Executive advised she reviewed submissions weekly and very small number related to the District and were low impact, with most related to Western NSW, Murrumbidgee and Hunter New England LHDs. She noted reported staff concerns regarding making submissions and reprisal.

7.4 - Action Item 169/20 - ISLHDs Climate Change Group provide a proposed plan for moving forward

The Board approved the requested deferral to June 2021. The Chief Executive advised an alternative presentation on climate change would be presented at the Board Planning Day in April 2021.

ACTION: 176/21 - The Chief Executive to table presentation on climate change to the April 2021 Board meeting. (Assignee(s): Margot Mains; Due Date: 12/04/2021)

ITEM 8 - Board Chair Report

The Board Chair noted the Chief Executive and he would attend a Shoalhaven Hospital Advisory Group consultative meeting and will report back at the next meeting. He added that any alternative site would require the move of recent and significant new builds and investment. The Board queried whether local Members of Parliament were advised and would attend, to which the Chair confirmed were aware and supportive but did not plan to attend.

The Board Chair added that new Board Member applications had closed publicly yesterday and he would seek information from the Ministry urgently.

ACTION: 177/21 - The Board Chair and Chief Executive to report at the April 2021 Board meeting on the Shoalhaven Hospital Advisory Group consultative meeting (Assignee(s): Denis King; Due Date: 12/04/2021)

ITEM 9 - Committee Reports (including Annual Reports)

9.1 - Finance and Workforce Performance Committee

The Board received the minutes from the Finance and Workforce Performance Committee meeting held 25 January 2021. The Committee Chair noted discussion points from the meeting held 22 February 2021:

- Improved financial position at \$6.5 million unfavourable.
- The aim to reduce overtime and casual costs which add no extra value at a premium cost.
- The Board to ensure mechanisms to reduce instances of staff working over 108 hours per fortnight, particularly medical officers, through continued reporting to the Committee by the Executive Director Strategic Improvement Programs.
- Reporting was received on electrical incidents over the past 12 months, which were mostly due to deteriorated cords that had been tested and tagged. She added the report found nothing systemic and there had fortunately been no major incidents to date.

9.2 - Health Care Quality and Safety Committee

The Board received the minutes from the Health Care Quality and Safety Committee meeting held 27 January 2021. The Committee Chair noted discussion points from the meeting held 24 February 2021:

- The Single Digital Patient Record program in negotiations, which would exclude some systems such as ERIC and eMaternity. The Chief Executive added that there had been issues with community and primary health access to records especially maternity.
- The planned Powerchart upgrade would fix several issues, with the Single Digital Patient Record program potentially to see a change from provider Cerner.
- Compliments as well as complaints may drive performance.
- Allied health registrations were confirmed as complete.
- Discussions around improving ETP indicated a focus shift to long stay and routine care.

9.3 - Planning and Innovation Committee

The Board received the minutes from the Planning and Innovation Committee meeting held 1 February 2021. The Committee Chair noted:

- The David Berry Hospital (DBH) submission on amended services, crown land and buildings, future options and ongoing District obligations had been endorsed to the Board and had been handed to the District Head of Legal to seek advice from the Crown Solicitor via the Ministry.
- The research report was tabled by Peter Jansen, who had not seemed well briefed on research underway and structures. The Committee requested written reports for ongoing meetings.

The Chief Executive added she would provide an update on the Rural Regional clinical trials application underway during her report.

9.4 - Audit and Risk Committee

The Board received the minutes from the Audit and Risk Committee meeting held 3 December 2020.

The Committee Chair noted:

- Concerns around delays to business continuity planning work, however that it appeared to have progressed in the right direction.
- Risk appetites and ratings had been discussed.
- The NSW Audit Office had advised the District's audit team was very good
- The Research presentation from planned for Bruce Ashford was instead presented by Marianna Milosavljevic. He added research was supposed to be presented to the March 2021 ARC but advised would not present, and he was concerned with research and accountability frameworks having had additional investment following 12 months of ongoing issues.

The Chief Executive noted research had been reported to two separate Committees, with the need to clarify which Committee should receive ongoing updates. Both Committee Chairs noted they have not received regular updates with concerns around oversight, accountability, planning and outcomes. The ARC Chair added the ARC had not received the framework and was unsure if research was achieving the expected outcomes.

ITEM 10 - Chief Executive Report

The Board received the report provided by the Chief Executive. The Chief Executive added that the radiologist position advertisements had been published.

The Board felt that with Prof Steve Andersen as chair of IHMRI confidence had returned to the research relationship with the University of Wollongong. The Chief Executive added the incoming Vice Chancellor of UOW would likely improve the working relationship.

ITEM 11 - For Information

11.1 - 2021 Board Calendar

The Board received the information provided. The Executive Support Officer advised there were date and time errors to be corrected in the calendar.

The Annual Board Conference was noted to be cancelled on 15 March 2021, with the Executive Support Officer to cancel the invitation.

ITEM 12 - Business Without Notice

The Board Chair noted it was Member Marisa Mastroianni's last meeting and drew attention to Marisa's impressive CV and extraordinary contributions, for which the Board and District were grateful. He added she had been a voice of truth and reason, especially for the Finance and Workforce Performance Committee, reporting and governance. Marisa recounted her journey on the Board from its days as a council and thanked the Chair for contributing to the governance of LHD Boards.

ITEM 13 - Meeting Finalisation

ITEM 14 - Closure of General Agenda

The meeting closed at 3.29pm