

The Sydney Children's Hospitals Network (Randwick & Westmead)	
Date	Wednesday, 6 th March 2019
Time	NED Session: 8.15am to 10am SCHN Board Meeting: 10am to 11.30am
Location	Boardroom, Level 9, Sydney Children's Hospital, Randwick
Membership	<p>SCHN Board members</p> <p>Professor Christine Bennett AO (Chair) Professor Louise Baur AM Dr Abby Bloom Ms Joanna Capon OAM Mr Jack Ford Ms Jane Freudenstein Ms Elizabeth McEntyre Mr Bruce MacDiarmid Mr David Nott Professor Kim Oates AM Professor Donna Waters Mr Jeremy Wright Professor Les White AM</p> <p>Ex officio invitees</p> <p>Dr Michael Brydon Chief Executive, SCHN Dr Susan Russell (MSC SCH Representative) Dr Kathryn Carmo (MSC CHW Chair) Dr Mary McCaskill (Executive Medical Director, SCHN) Mr Brian Jackson (Director of Finance and Corporate Services, SCHN) Dr Matthew O'Meara (NSW Chief Paediatrician)</p> <p>In attendance</p> <p>Mr Duncan Makeig (Board Chair, Sydney Children's Hospital Foundation) Ms Kate Hurle, Manager Executive Services (Board Secretariat)</p>
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Minutes

Sydney Children's Hospitals Network Board Meeting

6 March 2019

ITEM	By Exception *	DESCRIPTION	RESPONSIBILITY	PAGE NO.	TIME	ACTION REQUIRED
1		Administrative Matters				
		NED Session: 8.15am to 10am				
		SCHN Board Meeting commenced at 10am				
1.1		Welcome and Attendance	Chair	-		For noting
		Present (Members): Christine Bennett (Chair), Louise Baur, Abby Bloom, Jack Ford, Jane Freudenstein, Elizabeth McEntyre, Bruce MacDiarmid, David Nott, Kim Oates, Donna Waters, Jeremy Wright, Les White				
		Present (Ex-officio / Invitees): Michael Brydon, Susan Russell, Kathryn Carmo, Mary McCaskill, Brian Jackson, Matthew O'Meara				
		The Chair welcomed Jane Freudenstein and Elizabeth McEntyre to the SCHN Board.				
1.2		Apologies	Chair	-		
		Apologies (members): Joanna Capon, Kim Oates				
		Apologies (Ex-officios / Invitees): Duncan Makeig				
1.3		Declaration of Conflicts of Interest	Chair	-		
		A Bloom advised of her appointment as Chair of the State Insurance Regulatory Authority; this will be recorded as an addition to the schedule of external Directorships and Interests.				
		L Baur noted her role as the Principal Investigator of the Fast Track clinical trial given complaints received regarding this trial and associated media coverage are included on the agenda for this meeting.				
		No other conflicts of interest were declared.				
		Actions / Decisions:				
		- <i>The Schedule of external Directorships and Interests is to be updated to reflect the appointment of A Bloom as Chair of the State Insurance Regulatory Authority</i>				
1.4		Summary of NED Session (8.15am to 10am)				
		The Chair reported that a Non Executive Directors session was held prior to the commencement of the Board meeting (8.15am to 10am). She reported that in the session, the Board discussed upcoming leave of the Chief Executive and arrangements for coverage.				
		The Chair summarised the other key discussions and outcomes as follows:				
		Shared Services Agreements				
		The shared services arrangements with SESLHD were discussed, noting a need to strengthen and better maintain these.				
		Actions / Decisions:				
		- <i>The Chief Executive, supported by the Director of Clinical Operations and Director of Finance and Corporate Services is working through the agreements with the SESLHD Acting Chief Executive and the Prince of Wales General Manager. Progress will be reported to the Board via the Chief Executive until a satisfactory status is reached.</i>				
		- <i>The Chair and Deputy Chair will meet with the Chair of SESLHD's Board to communicate current challenges.</i>				
		SCHN Response to and Prevention of Bullying				
		Significant discussion occurred regarding this important issue. The information provided by the Director of Workforce (Agenda item 3.3) was noted and the positive measures being undertaken acknowledged.				

Actions / Decisions:

- *A de-identified summary of current open significant workforce matters will be provided to each meeting of the Board.*
- *Management to review the resourcing, skills and systems for performance management to better deal with prevention and response to bullying issues and other workforce matters.*
- *Performance appraisals are to be appropriately resourced to improve completion rates and value.*
- *Feedback will be sought from Medical Staff Councils, Clinical Council and other stakeholders to identify any additional strategies including staff participation in relevant training.*
- *The Chair and Chief Executive will consider inclusion in each Board agenda of an additional section reporting on current material litigations and disputes.*

Clinical Services Development Planning

It was noted that there are two related processes required in regards to the clinical services direction and planning:

- There is an immediate process to be undertaken by management in the next 2-3 months to identify and prioritize current clinical service needs through engagement with the Clinical Program Directors and Heads of Department.

Additionally, the longer term Clinical Services Direction planning in consultation with the Clinical Council, Medical Staff Councils, Clinical Program Directors, Department Heads and consumers will continue in parallel and also inform planning for the capital developments.

The need for additional resources and appropriately skilled staff to undertake these pieces of work was acknowledged. It was noted that these processes and the communication surrounding them are key components in improving culture and engagement across the Network.

Actions / Decisions:

- *The Chief Executive will direct the undertaking of the outlined immediate assessment of organisational needs, including the identification of required resources.*
- *The Board will be advised of progress via the Chief Executive report*

Community Engagement and Communications Subcommittee

The Chair has proposed the formation of a Community Engagement and Communication Subcommittee, this is supported by the Board. This group is proposed to support ongoing engagement with a wide range of internal and external stakeholders, consider matters related to communications, public relations, branding and the media. The group would also advise on communications matters arising from the external review of SCHN Governance review. The Board membership has been proposed as Jane Freudenstein (Chair), Jeremy Wright, Les White, Elizabeth McEntyre and Louise Baur.

Actions / Decisions:

- *The Board endorses the development of draft terms of reference for the Community Engagement Subcommittee and Communications by Ms Freudenstein and the Chief Executive for consideration at the 3 April Board meeting.*

Structure and Content of Board Papers (Agenda, Reports, Minutes and Action Table)

A review of the structure and content of the papers was recommended by the Chair and endorsed Board. This review will be led by Jack Ford and David Nott in conjunction with the Chief Executive and will engage with the AICD for advice.

The need for minutes to provide an appropriate level of detail and record the actions agreed and document decisions was emphasised. Discussion also identified the need to ensure that actions agreed within the NED sessions are appropriately recorded.

Discussion also reflected on the strategic role of the Board and the importance of maintaining the provision of overarching strategic, financial and governance oversight. This also includes the need to ensure that the leadership team is appropriately resourced to undertake the required management functions. It was noted constantly being in a reactive mode can distract the Board from a balanced focus on strategic matters.

Actions / Decisions:

- A review of the current structure and content of Board papers led by J Ford and D Nott in conjunction with the CE with advice from the AICD.
- The minutes of the previous meeting will be reconsidered by the Deputy Chair (who acted as Chair for that meeting) to include a report of key discussions and actions that occurred within the NED session.

Cardiac Services

The report on the current status of cardiac services and the ongoing work of the Cardiac Services Implementation Group were noted. Additional measures such as the mediation process initiated by the Ministry of Health were noted (refer agenda item 5.2) and supported by the Board.

Risk Appetite

Risk Management is an area of ongoing work for SCHN. As part of supporting this, the Audit and Risk Committee have recommended the development of a Risk Appetite Tolerance statement for the organisation. Input and guidance from the Board to management will be required as part of establishing this framework; this then provides parameters of what are acceptable levels of risk in different context to guide decision making.

Actions / Decisions:

- The Audit and Risk Committee in collaboration with the Board will oversee the development of a Risk Appetite Statement for SCHN

2 Minutes and Action Items

2.1	Review of Minutes of meetings held: <ul style="list-style-type: none">- 6 February 2019- 5 December 2018 <p>The minutes of the December 2018 meeting were further reviewed and accepted as a correct record of the meeting.</p> <p>The Minutes of the February 2019 meeting were reviewed. It was determined that amendments were required and it was agreed that these minutes will be <i>resubmitted</i> to the April 2019 meeting.</p> <p>Actions / Decisions:</p> <ul style="list-style-type: none">- <i>The minutes of the December 2018 meeting are approved for publication on the SCHN website.</i>- <i>The minutes of the February 2019 minutes will be revised and re-presented at the April 2019 Board meeting.</i>	Chair	For approval
2.2	Matters Arising from Previous Meeting 2.2.1 Review of Action Table	Chair/ Chief Executive	For noting
	<p>The action table was reviewed and noted. It was requested that the agreed reporting on the status of the SCHN Metabolic service and the monthly report on the Cardiac Services report be recorded as action items. It was also noted that the NED session had identified agreed actions that require documentation in the Board's records.</p> <p>Actions / Decisions:</p> <ul style="list-style-type: none">- <i>The Action Sheet will be amended to reflect that the Board has requested monthly updates on the status of the SCHN Metabolic service and any associated impact on patients. This will continue until a satisfactory level of resolution of issues is reached.</i>- <i>The Action Sheet will be amended to reflect that the monthly report from the Cardiac Implementation Group will be submitted on a monthly basis until a satisfactory resolution of issues is reached.</i>		

Work Health and Safety Reporting

3.1	Safety Pause	Chief Executive	For discussion
	A walk around did not occur prior to the meeting due to the NED session. The benefits of continuing this practice were agreed. It was noted that senior clinical staff are escorting members on these visits. The Chair noted that she and the Minister had observed firsthand the busy Randwick Emergency Department in action and cramped conditions at the visit following the announcement of the Stage 1 Redevelopment.		
3.2	Work Health and Safety (monthly report)	Chief Executive	For discussion
	The WHS report provided was reviewed. Discussion identified several areas where greater detail and analysis in the report would assist the Board's consideration of issues. It was agreed that information regarding bullying allegations, including tracking of resolution time will be integrated into the report. It was also agreed that a further breakdown of the incident categories to increase clarity is required. An example noted was the category "hit by moving object", which does not give context as to the type of event that occurred and therefore identification of trends or issues is limited.		
	Actions / Decisions:		
	- The Chief Executive will facilitate a review of the current report to improve analysis and interpretation and to include ongoing reporting of significant workforce matters and resolution timeframes.		
3.3	SCHN Response to Bullying	Chief Executive	For discussion
	The provided document was noted. It was noted that significant discussion occurred in the NED session prior to the Board meeting regarding this issue and actions agreed.		

Strategic Focus - Planning and Redevelopment

4.1	Patient Story	Chief Executive	For noting
	The patient story reflected the value and benefit of the Comprehensive Children's Cancer Centre and rebuild of the Emergency Department at Sydney Children's Hospital, Randwick. This will be a significant advance in the delivery services at the Randwick Campus.		
4.2	Priority setting for Growth and Enhancement	Chair - Chief Executive	For discussion
	The detailed plan of the proposed methodology and approval process for the 2019 Asset Strategic Plan was considered. The CE noted a correction to the last stage of the endorsement process, being that the final endorsement will occur by the SCHN Board, rather than the Capital Works Subcommittee. It was confirmed that the Capital Works Subcommittee will consider the recommendations prior to submission to the Board.		
	An query was raised as to when the SCH Stage 1 Development would be removed from the Asset Strategic plan given the recent government announcement of funding. This will occur only when the state government budget announcements are released documenting the funding allocation.		
	Actions / Decisions:		
	- The methodology and approval process for the Asset Strategy Plan was endorsed for implementation, subject to modification of the final endorsement to reflect the Board rather than the Capital Works subcommittee. This will be communicated to the Planning and Redevelopment Director by the Chief Executive.		
4.3	Redevelopment Update		For discussion

Randwick Stage 1

Funding from the State and Federal Governments for SCH Stage 1, including the Comprehensive Children's Cancer Centre was announced on 1 March 2019. The project will also be supported by SCHF, Children's Cancer Institute and the University of NSW.

The commitment of the Board members, the SCHN Executive and Redevelopment Teams, the Medical Staff Councils, as well as of the SCHF, CCIA and the University of NSW to reach this outcome was acknowledged and commended.

The Deputy Chair spoke to the hard work, persistence and leadership of the Chair in advocating to reach this exceptional outcome. This commitment provides a clear statement on the future of Sydney Children's Hospital Randwick as a world class children's hospital. It was noted that the SCH MSC have passed a motion thanking all the partners involved for the efforts involved in reaching this outcome.

The Board noted the need to ensure appropriate resourcing is allocated to the Network's redevelopment team to support the significant work that will be required in coming years to deliver the planned outcomes. The resourcing implications will be considered at the next meeting of the SCHN Capital Works Subcommittee, with recommendations to be made to the Board and management as required.

Actions / Decisions:

- *The April Capital Works Subcommittee to consider management, skills and resource requirements now that Stage 1 development for SCH has been confirmed.*

Mitigation of Impact of PoW Acute Services Building on the Ainsworth Building

Members of the SCHN Capital Works Subcommittee met immediately prior to the Board meeting to receive a briefing from representatives of Prince of Wales management and Health Infrastructure, as well as the site architects, regarding the impact of the Acute Services Building on parts of the Ainsworth Building, including the Child and Adolescent Mental Health Unit. Network representatives have previously expressed concern that the building may encroach on the privacy of this vulnerable patient group.

It was noted that while mitigations are planned, SCHN retains a level of concern. The governance for decision making which impacts the shared spaces of the campus was raised; with agreement that the Precinct Council be further consulted on how similar matters will be addressed in the future. SCHN will also continue to advocate for clinician consultation regarding the impact of this building on other parts of the site. It was noted that there is a donor aspect in relation to any impact on or changes to the Ainsworth Building that the Network will need to consider options and communications with the benefactor in collaboration with the Sydney Children's Hospital Foundation.

Actions / Decisions:

- *Mitigation of Impact of PoW Acute Services Building on the Ainsworth Building to be included on the agenda of the April Capital Works Subcommittee*

Westmead

Planning continues in support of the Westmead Stage 2 Redevelopment. The Stage 1 development remains on track.

5

Matters for Discussion / Approval

			For discussion
5.1	External Review of SCHN Governance	Chair / Chief Executive	
	The Terms of Reference and confirmation of the panel members in addition to the proposed Chair (Dr Kathy Alexander) are expected to be finalised and released in the coming weeks. It was noted that draft Terms of Reference have been provided to the Board; it is not expected that these will change significantly. It is anticipated that a cross section of stakeholders and staff will be engaged in the review, including the SCHN Board, Clinical Council, Medical Staff Councils and partner organisations. Board participation in the review and briefing of the panel members will be pursued by the Chair:		
	Actions / Decisions:		
	- <i>Communication to the Board, staff and other stakeholders will occur on release of the Terms of Reference and details of the panel members.</i>		

- Chair to discuss with the Secretary, NSW Ministry of Health regarding the Board's role in guiding the process and engagement with the panel.

5.2 Cardiac Services Mediation Chair / Chief Executive For discussion

The brief was noted. Clarification was sought as to the goal of this process in the context of the existing work of the Cardiac Services Implementation group. The Chair explained that this was a process initiated by the Ministry and is a separate but complementary process, using the skills of an experienced mediator to work with key individuals to identify areas of agreement and a means of moving forward. The mediation participants are clinical leaders involved in the delivery of cardiac services and this process may assist with progress of the Implementation group. It was emphasized that the work of the Cardiac Implementation Group remains the means of working through the challenges to the one site, two service cardiac model and that this continues during this supplementary mediation process.

It was noted that this process has been facilitated by the NSW Ministry of Health; it is anticipated that the Network will receive a report of progress in due course.

Actions / Decisions:

- A brief to the Board on progress of mediation to be provided when information is available

5.3 Restorative Engagement Chief Executive / Chair

The CE advised that planning has commenced to undertake a body of work aimed at addressing the communication and cultural issues that have become evident over recent months. Planning is underway to engage external consultants and establish a steering group to support this work. Discussion identified that this process should support strategic direction of the organisation into the future. It is anticipated that this will commence in late April, with an estimated timeframe of 12 months to completion.

The Chief Executive outlined the following other bodies of work currently being planned or commenced:

- **Executive Team Development**
This is a continuation of the work commenced in late 2018, focused on communication and performance within the Executive Leadership team. The impact of this has been positive to date and is currently focusing on considering performance, priority projects, optimal structures and role delineation within the leadership team.
- **Budget and Priority Setting**
Led by the Director of Finance, with the support of the Director of Clinical Integration, and Director of Clinical Operations, this is a short term high priority project to obtain a clear understanding and plan in relation to immediate priorities and budget allocations. A report to the Board will be provided following recommendations to management. A report to the Executive is planned for May, with finalization by the end of the financial year.
- **Clinical Services Direction**
This process flows on from the Strategic Plan, focusing on Clinical Services development. It was noted that additional resources will be needed to support development of the Clinical Services Direction as there are insufficient planning staff within the Network. It was noted that this process requires a high level of engagement with clinicians and consumers to reach optimal outcomes. It is anticipated that a draft plan will be submitted to the Executive in September 2018.

It was noted that the timing of these projects, particularly in relation to the external Governance Review needs to be monitored to ensure that processes appropriately inform each other.

The required resources to support clinical and capital planning processes are noted as an area requiring further consideration by the Board at a future meeting. The Chief Executive and management will prepare a proposal for the additional resources, skills and experience required.

Actions / Decisions:

- Reporting on each of these items at the next Board following management consideration
- A proposal for clinical and capital planning resources required in the short and long term to be presented at a future Board meeting.

5.4	Board Subcommittees – Representation	Chair / Chief Executive	For Approval
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This item was held over due to time constraints.

Actions / Decisions:

- Review of Board representation on SCHN Committees to be brought forward to the April 2019 agenda.

6 Standing Reports

6.1	Chair's Report	Chair	For noting
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The Chair noted the one off operating budget allocation of \$4.6 million that has been allocated as part of the ongoing negotiations with the NSW Ministry of Health in relation to the Network's activity. Activity across the Network has increased significantly during February as compared with the prior month; February is frequently a high activity month.

It was also reported that the Minister for Health advised the Council of Board Chairs at their recent meeting that Value Based Health Care will be an area of focus; a briefing on the initiatives was requested to be provided to the Board.

Actions / Decisions:

- A briefing on the Value Based Care Initiative is to be provided to the Board.

6.2	Chief Executive's Report	Chief Executive	For noting
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The provided report was noted.

6.3	SCHN Performance Report (January 2019)	Chief Executive	For noting
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The provided report was noted.

6.4	Patient Care Capacity	Chief Executive	For noting
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The provided report was noted.

6.5	Planning and Capital Works		
	<i>Refer Item 4 – Strategic Focus on Planning and Redevelopment</i>		

6.6	Cardiac Services Implementation Update	Executive Medical Director	For noting
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The provided report was noted.

Actions / Decisions:

- The February 2019 report from the Cardiac Services Implementation Group will be submitted to the Ministry of Health

6.7	Foundation Report	Chief Executive/ Chair SCHF	For noting
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The Chief Executive reported that he attended the SCHF Board meeting in the prior week, noting that Foundation is in a very positive position and is currently performing at 3% above the prior year's outcome. This is particularly notable given the issues that have occurred during this period,

7 Reports from Sub-Committees

7.1	Finance & Performance Committee 8.1.1 Director's Report 8.1.2 Endorsed Minutes	Chair Finance and Performance Committee / Director of Finance	For noting
	The provided report was noted.		
7.2	Health Care Quality Committee 8.2.1 Director's Report 8.2.2 Endorsed Minutes	Chair HCQC	For noting
	The provided report was noted.		
7.3	Medical & Dental Appointments Advisory Committee 7.3.1 Director's Report	Chief Executive	For noting
	The provided report was noted.		
7.4	Capital Works Sub Committee 7.4.1 Chair's Report 7.4.2 Endorsed Minutes	Chair CWSC	For noting
	The provided report was noted.		
7.5	Clinical Council 7.5.1 Director's Report	Executive Medical Director	For noting
	The provided report was noted.		
7.6	Audit and Risk Committee	Deputy Chair	For noting
	The provided report was noted.		

Correspondence Received

8.1 CICU Nursing Leadership Group – Email to Board Chair

The correspondence was noted. It Chair noted that it is vital that all clinical groups are effectively engaged in the various development and restorative processes initiated by the Network.

Actions / Decisions:

Chief Executive and management will ensure engagement with nursing leadership and other groups

8.2 CHW Gastroenterology Department – Letter to the Board Chair

The correspondence was noted.

8.3 Concerns from CHW MSC re Management of Bullying Complaints – Letter to the Board Chair and Chief Executive

The correspondence was noted. The CHW MSC Chair acknowledged the response that has been provided by the Chief Executive to this correspondence and the additional investment in resources in this area going forward. The flow on effect of an occurrence of bullying to other staff and patients was reflected. It was noted that the MSC Chairs may have colleagues raise concern in this regard; it was agreed that when this occurs, the Chief Executive will provide an appropriate contact to engage. The Board again emphasised the importance of adequate resources, expertise and responsive processes in taking action on these matters.

Actions / Decisions: - *the Chief Executive will advise the MSC Chairs as to the appropriate contact to whom they can refer matters that may be raised directly with them*

9

For Noting

9.1 Key Management Personnel Declaration – Process for 2019

The provided brief was noted.

10

Next Meeting

The next meeting of the Sydney Children's Hospitals Network Board will be held Wednesday 3rd April 2019 in the Boardroom of The Children's Hospital at Westmead commencing at 8.30am

11

Meeting Close:

The Chair declared the meeting closed at 12.10pm.

It is noted that Dr Abby Bloom left the meeting at 11.30am (the scheduled close time) to attend a pre-existing commitment.