

Meeting name	Sydney Children's Hospital Network (SCHN) Board
Date	Thursday, 3 September 2020
Time(s)	8:30 – 9:30am – SCHN NED Board Meeting 9:30 – 11:30am – SCHN Board Meeting
Location	Bright Alliance L9 Boardroom, CHW L4 Boardroom or join via Zoom https://us02web.zoom.us/j/180901102 Meeting ID: 180 901 102 Password: 503989
Membership	SCHN Board members Ms Elizabeth Crouch AM (Chair), Mr David Nott (Deputy Chair), Professor Louise Baur AM, Dr Abby Bloom, Mr Jack Ford, Ms Jane Freudenstein, Mr Bruce MacDiarmid, Dr Elizabeth McEntyre, Professor Kim Oates AO, Professor Donna Waters, Mr Jeremy Wright, Professor Les White AM. Ex officio invitees Mrs Cathryn Cox PSM (Chief Executive), Dr Mary McCaskill (Executive Medical Director, SCHN and A/Director of Clinical Governance and Medical Administration), Mr Colin Murray (A/Director of Finance and Corporate Services), Dr Matthew O'Meara (NSW Chief Paediatrician), Dr Kathryn Carmo (MSC CHW Chair), Dr Michael Solomon (MSC SCH Chair). In attendance Dr Joanne Ging, A/Director Clinical Operations Mr Michael Dickinson, A/Director of Clinical Integration Mr Ian Fuller, Director of Workforce Mr Tim Hoffmann, Director of Planning and Redevelopment Ms Sally Whalen, A/Director of Nursing & Midwifery, and Education Ms Amanda Walsh, Executive Officer Ms Julia Millen, Executive Assistant to Chief Executive
Secretariat:	Ms Amanda Walsh, Executive Officer, tel: 0429 394 977

Item	Description	Responsibility	Page No.	Time (mins)	Action required
1.0	In Camera Session	Chair		45 min	Discussion
	The Chair presided over an in-camera session with the SCHN Board members and the Chief Executive.				
2.0	Administrative matters	Chair	-	10 min	
2.1	Acknowledgement of Country	Chair			Noting
	Mr David Nott provided the acknowledgement of Country, noting the SCHN acknowledges the traditional custodians of the land where we work and live, the Burramattagal people at Westmead, the Bidjigal and Gadigal people at Randwick, and Cammeraygal people at Manly. We pay homage and respect to the traditional owners, ancestors and custodians of the land, waterways, seas and islands. We pay our respect to elders past and present, and children who are the future leaders and all other aboriginal people who form the oldest continuous living culture expanding over 65,000 years. We will ensure our services for Aboriginal people are designed with Aboriginal people. Our work towards improving health outcomes will be underpinned by leadership, shared decision making, accountability and transparency to ensure services and environment within our network are culturally responsive and inclusive, enabling outcomes for aboriginal children and young people to live their healthiest lives possible.				
2.2	Attendance and Apologies	Chair			
	Present (SCHN Board members): Ms Elizabeth Crouch AM (Chair), Mr David Nott (Deputy Chair), Professor Louise Baur AM, Dr Abby Bloom, Mr Jack Ford, Ms Jane Freudenstein, Mr Bruce MacDiarmid, Dr Elizabeth McEntyre, Professor Kim Oates AO, Professor Donna Waters, Mr Jeremy Wright, and Professor Les White AM.				
	Present (Ex officio invitees): Mrs Cathryn Cox PSM (Chief Executive), Dr Mary McCaskill (Executive Medical Director and A/Director of Clinical Governance and Medical Administration), Mr Colin Murray (A/Director of Finance and Corporate Services, Dr Matthew O'Meara (NSW Chief Paediatrician), Dr Kathryn Carmo (MSC CHW Chair), Dr Michael Solomon (MSC SCH Chair);				
	(Attendees): Mr Michael Dickinson (A/Director Clinical Integration), Mr Ian Fuller (Director of Workforce), Dr Joanne Ging (A/Director Clinical Operations), Mr Tim Hoffmann (A/Director Planning and Redevelopment), Ms Sally Whalen (A/Director Nursing & Midwifery and Education), Ms Amanda Walsh (Executive Officer), Ms Julia Millen (Executive Assistant).				
	Apologies: Prof Chris Cowell (Director of Research).				
2.3	Declaration of Conflicts of Interest	Chair			Declaration
	Nil				
2.4	Review of Minutes of meetings held:	Chair			Approval
	- 6 August 2020				
	The minutes were accepted as a true record of the meeting.				
2.5	Review of Actions Arising	Chair			Discussion
	The Chair noted the action items, commenting most items are on track. No further comments were noted on the action items.				

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2.6	Board Chair report	Chair	-	10 min	Noting

The Chair noted the action item of Board appointments and composition. SCHN is keen to ensure we are progressing appropriately on this item, with appointments linked to the Board skills matrix exercise. The Chair noted the NSW Health Council of Board Chairs are meeting 7 September 2020 and will keep the Board apprised on any conversation on Board appointment processes.

The Chair noted her attendance at meetings including Westmead Medical Staff Council, Sydney Children's Hospitals Foundation, Clinical Council, Stakeholder Engagement Committee meeting. The Chair has also completed the Chief Executive Performance Review and Assessment requirements for the Interim Chief Executive.

The Chair has participated in two briefings with the Secretary NSW Health, largely around COVID-19 updates and noted the key issues of ill-fitting masks and risks for infection by clinicians. A focus on fit testing will be escalated, along with issues resulting from State border closures. The Chair will forward a communique to Board members to provide an update on the briefings, and will endeavour to provide a monthly communique to all staff. Members noted the new CSIRO mask testing centre.

The Chair noted her phone call with the Hon Brad Hazzard on 20 August 2020 and provided an overview of the discussion. The Minister commented on the importance of ensuring the appropriate outreach for the Network, observing the Network's leadership position in research and encouraged the Network to work closely with our partners and engage with key stakeholders in our precincts. The Minister acknowledged there are many good stories around the Network and is keen to hear more.

2.7	Chief Executive Report	Chief Executive	11		Discussion
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The Chief Executive (CE) referred to the report and provided further updates. It was noted that recruitment for the Director of Finance & Corporate Services is progressing with referee checks to be concluded today, and recruitment will be finalised as soon as possible.

The Cultural Assessment work is being concluded by the consultant and a report will be discussed at both the Nominations and People Committee and the Board in due course.

The CE noted several items from the 28 August 2020 Senior Executive Forum including a request provided to Local Health Districts and Specialty Networks to release staff to support SHEOC and PHEOC functions. Cybersecurity focus should be strengthened and included on our risk registers, and cybersecurity strategic risks should be escalated separately to the Secretary, not as part of the monthly risk register updates.

The CE noted NSW Treasury has requested a business case for virtual care documenting milestones, timeframes and achievements to progress virtual care with no additional funding.

Mental Health continues to be a significant focus for Minister Taylor.

The Members noted the Chief Executive's report.

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3.0	Matter for decision				
3.1	Corporate Governance Attestation Statement	Internal Audit Executive	14		Approval

Members noted the Corporate Governance Attestation Statement for the financial year ending 30 June 2020. The Internal Audit Manager commented that the content of the statement is based on a template provided by the Ministry of Health, and it is a requirement under Service Agreement to lodge this statement with the Ministry each year. The Internal Audit Manager noted there are no qualifications needed for this attestation.

Members noted the Compliance Framework and Policy are under development and requested an update on this item. The Internal Audit Manager commented a draft compliance policy and framework was prepared however never assigned to a particular individual. The Interim Chief Executive had agreed to engage an external consultant to lead this work, which should be completed by end of August 2020. The Chair recommended that future repeat issues should be raised for the Chief Executive or Chair for progression.

Members noted no issues with Corporate Governance Attestation Statement.

The Chair noted SCHN has good plans in place to take us forward strongly on audit program.

DECISION: The Corporate Governance Attestation Statement was approved for signature by the Chair and Chief Executive.

3.2	Quality & Safety Attestation Statement	DCG&MA	24		Approval
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Members noted the National Safety and Quality Health Service Standards (NSQHS) Attestation Statement and brief provided by the A/g Director Clinical Governance and Medical Administration (DCG&MA).

The DCG&MA noted the of National Safety and Quality Health Service (NSQHS) Standards accreditation requires the SCHN Board to review and sign an annual Attestation Statement to attest the organisation has achieved the appropriate level of quality and safety. The signed document is required to be submitted to our accrediting agency by 30 September each year.

The DCG&MA noted the brief which outlined quality and clinical governance processes under the NSQHS standards over the past 12 months, and further noted the Safety and Quality Account will be provided to members at the next Board meeting.

DECISION: The National Safety and Quality Health Service Standards Attestation Statement was approved for signature by the Chair and Chief Executive.

4.0	Matters for discussion				
4.1	COVID-19 update	DCG&MA	30		Discussion

The DCG&MA noted the report provided to Members commenting on the current focus on reducing the risk of infection within the workplace. The reports noted SCHN is reviewing options to avoid workplace infections, clarifying the proper use of personal protective equipment (PPE), and reviewing interactions

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of staff when they cannot be physically distant from each other in everyday work. Future work includes reviewing the use of eye protection, and reminding staff about online training covering PPE usage.

There are no inpatients with COVID-19, 3 outpatients are being cared for in the community, and several staff who have been to COVID-19 hotspots are being monitored. DCG&MA also noted the patient from another hospital on the Randwick campus visited campus outlets and checks with outlets in place, with no cross infections identified.

ACTION: The Director for Clinical Integration (DCI) will review the concierge arrangements and signage for the Bright Alliance building to ensure concierge is operating within guidelines.

5.0 Matters for discussion – executive reports

5.1	Quality and Safety	DCG&MA	32	Discussion
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The DCG&MA noted the detailed Quality and Safety Report provided for review.

The Quality and Safety Committee Co-Chair commented on the two patient stories presented at the Quality and Safety Committee at the August 2020 meeting. The patient stories highlighted cooperation between SCHN and international hospitals to find solutions for patients, and the important role of research and education in improving the Network's ability to help children with a disability. The DCG&MA commented that including the patient story on the research PHD project is an example of listening to the voices of children. The Chair suggested the Board would appreciate hearing more patient stories, and asked the DCG&MA to review a way to profile some patient stories at future Board meetings.

The Committee Co-Chair also commented that the combined structure of the Quality Safety Committee is working well.

The DCG&MA commented SCHN accreditation this year focussed on equipment and safety. The Chair queried if we have sufficient visibility of the status of our equipment at any time. DCG&MA noted that the Biomedical Department check new pieces of equipment to ensure safety and appropriateness, and there is a maintenance process for equipment with a corresponding register of items under review.

Members queried the knowledge of, and access to, policies by clinical staff. DCG&MA noted that the policies are easily accessed on the hospital intranet. It was noted that there are Network policies, local and site specific policies, and departmental policies dealing with more local guidelines. The Network also links to State and Commonwealth approaches. The staff orientation program provides detail on policies and where to find them. SCHN have also developed an app for Junior Medical Officers to carry on their phones / devices, which allows access to policies when close to the patient. The app is able to be used as a resource for providing guidelines and help.

The provided report was noted by Members.

5.2	Workplace Health and Safety Report	DOW	37	Discussion
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The Director of Workforce noted the Workplace Health and Safety report commenting that there were no notifiable incidents to NSW SafeWork in July 2020 and no severe assessment incidents. There is one child-related investigation in progress and reported to the Office of the Children's Guardian. In relation to general incidents, there has been an increase in body stressing incidents during July 2020,

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with no specific trend. The Director of Workforce is looking for options for manual handling training and updates.

The provided report was noted by Members.

5.3	Clinical Operations	DCO	40	Discussion
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The Director of Clinical Operations (DCO) noted the report provided, commenting that work ongoing to refine the Whole of Health Program Operational Dashboard demonstrated to the Board at the August 2020 meeting.

Reporting indicates the SCHN has had less presentations, however, a significant increase on previous month, approaching the target of 81%. It was noted that Triage Category 2 is a Premier's Priority, and there is work to be done to better manage this category.

Surgery data indicates there were 162 breaching patients at end of July 2020, in August the number moved to 95 and work continues to focus on this area and reduce the number. The Network continues to conduct collaborative care cases and weekend sessions at Westmead.

The DCO highlighted the patient story on the transplant surgeons at Westmead who successfully performed an Auxiliary Partial Orthotropic Liver Transplantation procedure - an Australian first surgery that has only been successful on one other patient.

The DCO commented on the First 2000 Days initiative and the joint proposal presented to the Department of Education, the Department of Community and Justice, and Ministry of Health over the next few weeks. The DCO referred to the Auditor General's Report on Futures Matter noting we are perfectly poised to put a bid forward for funding with the collaboration between the Western Sydney Primary Health Network, Western Sydney Local Health District, the Departments of Community and Justice, and the Department of Education.

The provided report was noted by Members.

5.4	Finance and Performance	DFCS	56	Discussion
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The A/g Director of Finance and Corporate Services (DFCS) noted SCHN is working to a six month Service Agreement.

At the end of July there was a budget deficit of \$5m. COVID incremental costs account for \$2m of this amount, which is expected to be recouped from the Ministry of Health. The DFCS noted the Network is 4.3% above target in activity for July with higher activity expected in August. Low Annual Leave continues to negatively impact employee-related expenses. The Network has 24% less people taking leave than this time last year and attention is needed to reduce annual leave liability. The DFCS discussed further factors for the deficit position covering goods and services and employee-related costs. The Network is reviewing a range of efficiency roadmaps and strategies to address the negative budget position.

The DCO provided an overview of how the Network is utilising collaborative care during COVID-19 pandemic and the costs associated, supported by NSW Health.

The provided report was noted by Members.

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5.5	Planning and Redevelopment	DOP	60		Discussion

The Chair of the Capital Works Committee noted the reports are taken as read, highlighting the draft Heads of Agreement with Western Sydney has been submitted to WSLHD, and the Service Level Agreements with South Eastern Sydney Local Health District are progressing well. The DCO commented that Service Agreements with WSLHD are also progressing.

The A/g Director of Planning and Redevelopment (DOP) provided an update on the redevelopment programs noting that the CE and Chair hosted a staff forum where the concept plans for both developments were discussed. The Board noted good progress with consumer engagement through the online survey, and that two consumer committees have been formed and will be meeting in September 2020.

Members noted the Innovation Quarter development collaboration between the University of Western Sydney and Charter Hall in Westmead Precinct for commercial and educational facilities.

Members discussed the overview of the concept plans and the principles to assist informing facility planning for SCH Stage 1 / CCCC and CHW Stage 2. The DOP commented on the messaging supporting "transforming kids' health" and will draw out the overarching themes that apply across the Network.

The provided report was noted by Members.

5.6	Clinical Integration & Sustainability	DCI	92		Discussion
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The A/g Director of Clinical Integration (DCI) took as read the report provided. Of note was the decline in reporting errors to the Ministry of Health and the resulting financial liability has decreased in value from \$870K in December 2019 to \$109K in July 2020. This continues the trend of improvements to data quality across the Network over the last three years.

Activity for July 2020 was 4.3% above target and has been raised with the Ministry of Health at the Quarterly Performance meeting on 14 August 2020. Discussions are continuing regarding adjusting the baseline budget to better reflect known activity levels.

The DCI also noted that the Network, in partnership with the Checkley Group, has developed a Digital Strategy to guide and cost SCHN redevelopment projects and provide a foundation for the next 5-10 years. The strategy will be presented at a future Board meeting.

The provided report was noted by Members.

5.7	Research	DOR	94		Discussion
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The provided report was noted by Members.

Members requested further information in relation to the Biobank at a future meeting.

5.8	Communications and Public Relations	DOW	112		Discussion
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The provided report was noted by Members.

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5.9	Risk Reports	DFCS	115		Discussion

An executive summary of SCHN strategic and operational risks was provided for review. The Chair noted the Secretary NSW Health is keen for Districts and Networks to escalate strategic risks to the Ministry.

Members commented the risk register is excellent and thanked the staff member(s) responsible for this document. Members requested the register be improved to indicate trends for the risks as they would like to see when matters improve or worsen.

The provided report was noted by Members.

6.0 Matters for Noting

6.1	Board Committee Minutes	Chair	136		Noting
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The following Committee meeting minutes were provided and noted as read:

6.1.1 Aboriginal Health Strategic Committee – correct minutes – July 2020. Members requested the August meeting minutes be circulated out of session once approved.

6.1.2 Finance and Performance Committee

6.1.3 Quality and Safety Committee

6.1.4 Capital Works – Draft Minutes

6.2	Clinical Council update	DCG&MA	-		Noting
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The Chair noted that there is open invitation to Board members to attend the monthly Clinical Council meetings and Members discussed a roster for Board member attendance.

6.3	Mandatory Training Update	DONM&E	160		Noting
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The A/g Director of Nursing, Midwifery and Education (DONM&E) noted the report provided as read. The DONM&E commented on the organisation's focus to promote mandatory training. COVID-19 adds extra challenges to deliver face-to-face training and the teams are re-working to accommodate virtual attendance where possible. New mandatory training for PPE, is a current focus.

The provided report was noted by Members.

7.0 Any Other Business

Nil.

8.0 Next meeting

The next meeting will be scheduled 8:30 – 11:30am on Thursday, 1 October 2020.

There being no further business, the meeting closed at 11:35am