

Meeting name	Sydney Children's Hospital Network (SCHN) Board
Date	Thursday, 1 July 2021
Time	8:30am – 9:30am SCHN NED Board Meeting 9:30am – 11:30am SCHN Board Meeting
Location	Via Zoom

1 In Camera Session Chair

The Chair led an in-camera session with the SCHN NED Board members and Chief Executive.

2 Administrative matters

2.1 Acknowledgement of Country

Dr Elizabeth McEntyre requested those in attendance to observe a minute's silence in recognition of, and to show respect for, those who have passed.

Dr McEntyre began by acknowledging the Spirits of her Ancestors, the Worimi and Wonnarua First Nations Peoples. SCHN recognises that Aboriginal and Torres Strait Islander Peoples are the oldest continuous living cultural groups in the world. We pay our deepest respects to the Traditional Custodians of the Land and Sea Country where our two hospitals are located, the Burramattagal Peoples from the Darug Nation of Westmead, and the Gadigal and Bidjigal Peoples from the Eora Nation of Randwick. Country that was never ceded, and will always be Aboriginal Lands. We honour their Elders through the thousands of generations, and the thousands of generations to come, and we seek permission for being on their Land and Sea Country and conducting business on Country.

Wherever we are today physically or virtually, SCHN acknowledges the diverse and rich cultures of all Aboriginal and Torres Strait Islander Peoples in NSW, and we are committed to sustaining collaborative relationships with all Aboriginal Communities across this state.

NAIDOC Week is being held between 4-11 July. 'Heal Country' is the theme for NAIDOC 2021. First Nations Peoples willingly share sacred traditional knowledge in land and environmental management to ensure Land and Sea Country is protected, restored and preserved in ways for everyone to enjoy. This knowledge coming from continued and unbroken connections to Land and Sea Country plus western knowledge is essential for healing Country and for us all to thrive.

2.2 Attendance and Apologies Chair

Present:

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, Dr Elizabeth McEntyre, Mr Bruce MacDiarmid, Professor Donna Waters, and Mr Jeremy Wright AM.

Ex officio invitees: Dr Kathryn Carmo (Medical Staff Council CHW Chair)

In attendance: Ms Cathryn Cox PSM (Chief Executive), Dr Mary McCaskill (Director Medical Services and Clinical Governance), Ms Judy Goldman (Director, Communications and Engagement), Bart Cavaletto (Director, Sustainability and Innovation), Mr Sam Galluccio (Director, People and Culture), Dr Joanne Ging (Executive Director Clinical Operations), Mr Tim Hoffmann (Director Planning and Redevelopment), Ms Sally Whalen (Director Nursing & Midwifery and Education) and Mr Sayeed Zia (Director, Finance and Corporate Services);

Apologies: Dr Michael Solomon, Medical Staff Council (Randwick), Dr Matthew O'Meara (NSW Chief Paediatrician), Prof Chris Cowell (Director, Research)

Secretariat: Jane Jennings (Senior Executive Support Officer)

2.3 Declaration of Conflicts of Interest Chair

No new declarations noted.

2.4 Previous Meeting Minutes Chair

The minutes of the June 2021 meeting were accepted as a true record of the meeting.

2.5 Actions Arising Chair

The Board noted the Actions Register.

Ms Crouch requested the action item regarding statewide paediatric training be rescheduled to a future date. The action item regarding Occupational Violence and Aggression was indicated as a priority area for the Board with Ms Cox advising that further detail would be provided at item 5.2.

2.6 Board Chair Report

Ms Crouch noted her attendance at the following key meetings and events on behalf of SCHN:

- Grace Gala
- Vice Chancellor Macquarie University and President of Cochlear regarding areas of co-operation, the development of the Macquarie University Innovation Precinct and their success in bringing partners together
- Randwick Precinct Council
- Bear Cottage coinciding with a visit by Governor Margaret Beazley AC QC
- NSW Minister for Health and Medical Research Brad Hazzard
- Secretary's Briefing on COVID-19, vaccination rollout and Board appointments

Ms Crouch has written to Ms Monica Saunders-Weinberg, Chair, Gold Committee to thank her for her leadership and the success of 2021 Gold Dinner and also to Ms Alina Barlow for her 10 year service and commitment to SCHN as part the Gold Committee.

Ms Crouch has also written to congratulate Mr Jeremy Wright AM, A/Professor Gary Sholler AM, Dr Antoinette Anazodo AM and Dr Karen Zwi OAM, who were recognised in the 2021 Queen's Birthday Honours.

2.7 Chief Executive Report

Chief Executive

Ms Cox noted the intention to show 'The Kinchela Boys' home educational video today but to allow for sufficient time for the Board members to appropriately reflect on this information it was agreed to hold this over to the next meeting.

Ms Cox acknowledged and thanked all staff who have responded so quickly to the recent changes due to the current COVID-19 outbreak including expediting vaccination clinics, managing the change to Pfizer, managing the increased demand from the public and re-opening of testing clinics at Randwick. Redeployment of unvaccinated staff has required staff to adapt and often work in less familiar environments to keep patients, families and themselves safe.

Works have finished in the Heart Centre for Children, Randwick but the space is currently being used for outpatient clinics due to the COVID-19 outbreak so an official opening has been deferred.

Outcomes from the SCHN Board Strategy Day have been drafted and the plan now is to align the priority areas identified with the SCHN 2021-22 Operations Plan, and ensure the seven key areas are reflected in the Executive's performance agreements.

Ms Cox advised the Health and Big Ideas Forum has been deferred and the new Vice Chancellor, UNSW Attila Brungs has been announced.

Ms Cox highlighted the recent NSW Budget announcement of an additional \$50 million for the redevelopment at Randwick. Work will continue towards securing a further \$28 million for the redevelopment at Westmead related to the Lot 3 redevelopment. Ms Crouch thanked Ms Cox for efforts to in securing the \$50 million on behalf of the Network.

Significant work has been required to finalise the Service Agreement 2021-22.

The Board noted the update

3 Matters for Decision

3.1 Risk Appetite Statement

Ms Cox advised that Board approval of the Risk Appetite Statement (RAS) Policy was being sought and follows on from work completed at the Risk Appetite workshop. The outline of the statement was provided at the June Board meeting for information and has now been expanded and developed into a SCHN policy. The agreed statement from the Board workshop has been included in the policy and sessions have been facilitated with the Executive Leadership Team (ELT) to assist implementation of the policy and ensure decision making is aligned with the Board's risk appetite.

Once the RAS Policy is approved this will inform the work required to align the strategic Risk Register and operational processes will also flow from this.

Ms Crouch requested that the health and wellbeing of our people is also included in the risk statement. Prof Waters supported this and added a suggestion to also include the term 'quality' instead of 'effectiveness'.

Mr Nott commended the team on this work and inquired as to circumstances where the Board requires matters to be escalated and how these matters are identified and prioritised for the Board to review and take action as appropriate. Ms Cox noted that the ELT team have been working through various scenarios to inform this process. The 'How is the Risk Appetite Statement used in decision making' section will be expanded to reflect in more detail this escalation process.

Ms Crouch also queried how the RAS Policy will be socialised within the broader Network to ensure it becomes usual operating practice.

Mr Nott noted the need for the Audit and Risk Committee to review as well. Ms Crouch advised that once approved by the Board, the policy should be provided to the Audit and Risk Committee for further independent review and to embed the policy within the ARC processes and oversight.

Ms Crouch noted the significant work to date on the RAS and the importance of it becoming part of the custom and practice within the Network.

Action: Ms Cox to incorporate suggestions into the updated policy document.

Action: Ms Cox to seek final approval from Board out of session and progress to the next Audit and Risk Committee

Action: Consider processes to regularly update on how the RAS is being used either through the CE Board Update and/or Audit and Risk Committee

3.2 Balanced Scorecard

The Balanced Scorecard was presented at the last meeting for feedback prior to seeking Board approval. Ms Cox thanked Dr Bloom for the additional comments prior to the meeting. The purpose is to provide a snapshot for the Board on the key measures for the organisation. SCHN have benchmarked against other Local Health District dashboards and while some measures are still being defined it is recommended that this starts to be used as a regular reporting tool for the Board. Advice will be sought from the Board as to its utility as part of a review towards the end of the year. The People and Culture team are continuing to work on developing the people metrics.

Action: Board endorsed the use of the Balanced Scorecard noting that a review of its implementation will be provided at the December Board meeting

3.3 Asset Management and Capital Planning

Ms Cox advised that changes in NSW Treasury policies in relation to asset management have required changes in how asset management and capital planning is undertaken by Health entities.

Mr Zia presented on the SCHN capital investment proposals and the SCHN Strategic Asset Management Plan (SAMP) and Asset Management Plan (AMP). The new process is guided by the 20-year NSW Health Infrastructure strategy with the SAMP and AMP involving a more rigorous process in identifying fixed costs, recurrent costs and maintenance costs.

The three capital investment proposals include the following:

- CHW Stage 3 redevelopment and Kids Research
- SCH Stage 2 Redevelopment
- NETS Base Redevelopment

Mr Ford confirmed that the Infrastructure Committee and the Finance, Capital Works and Performance Committee have also considered these proposals. Both committees agreed in principle to support the submission of the three projects for future capital investment.

The Board supported submission of the capital investment proposals.

In addition, SCHN is required to submit to NSW Health by 30 June 2021, the SAMP and AMP. This replaces the previous Asset Strategic Plan (ASP). The AMP operationally supports the SAMP. Both plans have been provided to the Board.

As this is the first year of implementation, there will be ongoing implementation and improvements of the plans. Asset register development and implementation of asset facilities management (AFM) online will occur in parallel.

The Board supported submission of the SAMP and AMP to the NSW Ministry of Health.

Ms Crouch emphasised the importance of the environmental, social and governance aspects of these plans, including cyber security aspects so that SCHN is procuring with these aspects in mind. Consideration should also be given to using software tools to optimise the asset spend.

Prof Waters inquired as to the ability to redistribute or repurpose assets. Mr Zia advised that there will be an opportunity to account for this with improved data sets and the asset register.

Ms Crouch also inquired as to whether the AFM tool accounts for total expenditure and how to optimise it over the full asset base.

Action: Mr Zia to follow up with Ministry to regarding functionality in the AFM tool to see if it can optimise expenditure over SCHN's full asset base.

3.4 Service Level Agreement 2021-22

Ms Cox advised that the 2021-22 Service Level Agreement had been issued immediately post the NSW State Budget as part of the annual process. There will be changes to include the 2.5% public sector wage increase announced on Budget day as it is not currently reflected in the proposed Agreement.

Mr Zia provided an update on the end of year position. Noting final adjustments are still to be made, it is expected that Network's underlying position, excluding COVID-19, is stable and forecasted to be in the order of \$29 million unfavourable.

FTE remains our largest area of expenditure and work is ongoing to maintain the improvements in performance in the new financial year.

The recommendation is for the Board to endorse the Service Agreement 2021-22 for signature by the CE and Chair noting:

- Activity targets are low compared to SCHN's projected 113,000 NWAU 21
- Quarterly reviews are required with top up of activity and funding sought as discussed with Finance and System Information and Analytics Branch
- Funding for a number of services is required through budget supplementation
- Revenue targets will remain challenging due to the ongoing reduction in overseas patients due to COVID-19

Dr Bloom inquired as to the progress of annual leave liabilities and whether there have been improvements. Ms Cox advised while COVID-19 has made it difficult to make a significant impact, some improvement has been made. Mr Zia confirmed that compared to Financial Year 2019-2020 there has been an improvement. Mr Galluccio advised that a more structured process is being established. This will include those staff over the maximum threshold for leave taking their annual allocation of leave, plus 25% of the outstanding balance each year to ensure a systemic approach to reducing and maintaining acceptable annual leave balances.

The Board endorsed the Service Agreement 2021-22 with the caveats proposed.

4 Matters for Discussion

4.1 COVID-19 Update **Director, Medical Services and Clinical Governance**

Dr McCaskill provided a verbal update on COVID-19 due to the current outbreak in Sydney's Eastern Suburbs and surrounds. Health facilities across metropolitan Sydney are on red alert (high risk) in relation to community transmission. Work occurring includes:

- Daily Emergency Operations Committees have been re-established.
- The COVID-19 Outpatient Response Team is managing a number of paediatric patients at home.
- Reopening of the Randwick testing clinic and managing the demand from the public that required swabs over a short period of time as well as supporting the POWH clinic.
- Work conducted to support country patients coming to Sydney for treatment.
- Working closely with the Communications and Engagement team to ensure additional information is available for families and staff including daily updates
- Masks are required for everyone over 12 years of age in all our facilities
- Return to single parent / carer, 15 minutes change over when visiting, one hour for families at the beginning and end of admission.
- Identification of staff who are unvaccinated and partially vaccinated and redeploying out of high risk areas including ED, COVID-19 Ward and Clinic as well as the hospital in the home team
- Advice regarding pregnancy has changed in relation to the Pfizer vaccine so staff have been encouraged to seek advice from their General Practitioner
- Staff are overall keen to be vaccinated but there remains some vaccine hesitancy
- Significant demand from public for vaccines is now high noting staff need to be prioritised
- Ongoing support for staff working from home
- Increasing numbers of staff identified as being in hotspot locations due to Eastern Suburbs outbreak in locations
- Personal Protective Equipment availability is good across the state and SCHN
- Accommodation is available for staff isolating from their family to minimise risks for essential and frontline services
- Working with eHealth in relation to the vaccination appointment system
- Review of access to data re QR codes in the event of a COVID-19 breach

Ms Crouch and the Board noted the additional workload on staff due to the current outbreak and thanked them for their efforts.

The Board noted the update.

5 Matters for Discussion / Update

5.1 Quality and Safety Update **Director Medical Services and Clinical Governance**

Dr McCaskill shared a patient story highlighting the importance of the multidisciplinary approach to care provided by our ED team who provided a supportive environment for a parent to feel safe and supported to share information regarding their safety at home. This was an important reminder to the teams of the positive impact they can have on families outside of immediate clinical care.

Dr McCaskill advised the first meeting of the updated Board Quality and Safety Committee was held on 22 June 2021 chaired by Prof Waters and Mr Wright. An Attestation Statement has been approved by Quality and Safety Committee and the Aboriginal Health Strategic Committee and will be provided to the August Board meeting.

Patient and, family engagement remains a focus for this month. The Family and Advisory Council has also been reviewing the snapshots. The Youth Advisory Council has received a grant to develop a video for adolescent preparing for hospitals. Both Councils are working effectively together.

A policy is being developed based on the Ombudsman's work to guide staff to more appropriately in responding to families where unreasonable, persistent or vexatious complaints become a concern. SCHN will also be working with the Health Care Complaints Commission on this policy.

5.2 People and Culture Update

Director People and Culture

Mr Galluccio noted the Board's priority in relation to staff wellbeing and safety and advised that the framework for the Occupational Violence and Aggression (OVA) is almost finalised and focuses on the six pillars of Governance, Prevention, Training, Response, Reporting and Investigation. The Network Workplace Health and Safety Governance Committee will play a key role in monitoring and measuring OVA. Some international standards recently released specifically in relation to psychological health and safety at work will be used as a reference as they have been recognised as international best practice.

Mr Galluccio also noted recent information from the Ministry in relation to the Anderson Review specifically in relation to staff training. The Board sought advice regarding the management of such incidents. Incidents of this nature are managed via a Code Black incident response with security involved as required and where necessary, the NSW Police.

Dr Bloom acknowledged the significant psychological injury that can be associated with aggressive incidents and offered assistance in this area if required.

Action: Mr Galluccio to provide framework for the prevention and management of occupational violence and aggression at the August meeting.

5.3 Clinical Operations Update

Executive Director Clinical Operations

5.3.1 Access to Care Performance Report

Dr Ging acknowledged the significant increase in presentations to both Emergency Departments. In May there was an over 10% increase at Westmead and 14% increase at Randwick which represents the highest presentations since January 2018. This is significant and results in an impact on Emergency Treatment Performance data.

Prof Waters inquired whether COVID-19 presentations have impacted ED performance at Westmead. Dr Ging advised that this is not the case with 30% of patients being admitted and not necessarily COVID-19 related.

Work is continuing on embedding new models of care at Westmead ED. Further detailed information will be provided at the August meeting. Observations and a time and motion study focussing on Triage Categories 2 & 3 has been conducted. Results are being analysed and a project plan is being developed. Short term solutions have been implemented to ensure appropriate clinical care in the interim.

The increase at the ED in Randwick is significant and systems are being reviewed there as well particularly given the small waiting room. The opening of the COVID-19 testing clinic has improved this slightly with 597 swabbed in the clinic.

Did Not Wait (DNW) data has returned to pre COVID-19 levels but it has been identified that a significant number of patients are seen in the waiting area and received satisfactory and appropriate treatment and subsequently chose to leave. These are required to be lodged as DNW as they had not seen a doctor. This will be considered as part of the Westmead ED project to better reflect this data.

As at 30 June 2021, the surgical wait list was 0-0-0 and reflects the significant efforts of staff. SCHN performed 1300 more operations this year which is a testament to the all the staff involved. The Board expressed its appreciation for the extraordinary efforts by staff in achieving this outcome.

5.3.2 Cardiac Services

Dr Ging provided an update on progress of the cardiac services implementation and presented the updated roadmap. SCHN are within phase 2 of this plan and are working across many areas including low complexity surgery areas and ECMO. Work is continuing on education components and nursing care including exchange of staff between the two sites. Further work is required in relation to data systems.

The significant focus remains on leadership, trust and rebuilding relationships.

The tour of the Heart Centre for Children at Randwick will be rescheduled to September.

The Board noted the update.

5.4 Finance Capital Works and Performance Update Director Finance and Corporate Services

Mr Zia noted the broader update provided earlier in Agenda Item 3.4.

The Board noted the update.

5.5 Planning and Development Update Director Planning and Redevelopment

Mr Hoffman noted the media release attached about the Neurosciences Centre funding announcement which is positive news and will maximise the Randwick Stage 1 project.

The Westmead Business Case has been finalised and is provided in the papers for noting.

Mr Hoffman noted the financial impact within the business case. The workforce planning and financial impact statement submitted to the Ministry will be worked through to support the opening of the services in 2025.

The Board noted the update.

5.6 Strategy and Innovation Update Director Strategy and Innovation

Mr Cavalletto noted further work is required in relation to the Health Grade Enterprise Network (HGEN). The cyber security report is being worked through with analysis and recommendations to be submitted for consideration at the September Board meeting. There is a current focus within the Directorate to strengthen governance and develop appropriate work plans. Ms Crouch noted a focus is also required on the interface with eHealth planning for our new developments.

The Board noted the update provided.

5.7 Research Update

Director Research

The Board noted the update in Prof. Cowell's absence.

Ms Cox noted the Research Strategy presentation will be provided at next Board meeting.

Mr Wright noted the Gene Therapy Project was named as the top ranked Ideas Grant for 2020 by National Health and Medical Research Council (NHMRC). The Board noted this major achievement.

Ms Crouch indicated an interest in inviting research staff to a future Board meeting as part of a regular cycle of presentations to the Board.

5.8 Communication and Engagement Update

Director Communications and Engagement

Ms Goldman acknowledged the feedback provided by the Board on the stakeholder engagement plan.

Ms Goldman noted the new proposed LinkedIn strategy, how this would align to specific areas of interest for the Board members and how to continue to promote successes and undertake proactive media activity and communications with partners, donors and our people.

Ms Goldman noted the recent increase in communications due to the COVID-19 outbreak.

The Board noted the update provided.

5.9 Risk Reports

Director Finance and Corporate Services

Mr Zia noted the activity based working environment will impact the operating costs for the new redevelopments and had been noted by the Finance, Capital Works and Performance Committee. This is a long-term risk but needs to be considered and included on the risk register to proactively plan and manage risk.

Ms Crouch inquired as to the regulatory processes for staff utilising their own devices for work given the current environment. Mr Cavalletto took this on notice and will provide an update to the next meeting on how key risks are managed.

Action: Mr Cavalletto to provide advice in relation to the policy for staff using personal devices with respect to data security and privacy.

The Board noted the update provided.

6 Matters for Noting

6.1 Board Committee Minutes

The following reports were noted as read:

6.1.1 Aboriginal Health Strategic Committee

6.1.2 Quality and Safety Committee

6.1.3 Medical and Dental Appointment Advisory Committee

6.1.4 Audit and Risk Committee

6.1.5 People, Strategy and Engagement Committee (unratified)

6.2 Mandatory Training Update

Ms Whalen noted comments provided by Dr Bloom prior to the meeting. Ms Whalen noted modules for child protection training are currently being reviewed by NSW Health and these will be implemented once updated. Anticipated release is by end of 2021 to implementation in early 2022.

Ms Whalen also noted respiratory protection fit testing remains a high priority with the education team. Over 200 fit tests were conducted in the past week and will continue to ensure progress through the priority list.

The Board noted the update.

7 Other Business

Ms Freudenstein raised the escalating issue of Mental Health in our adolescent and young people. Considering the focus of this issue at the Gold Dinner, Ms Freudenstein raised how information can be captured to ensure updates and progress in a priority area such as Mental Health are considered by the Board. Ms Crouch noted this is a priority item for further discussion by the Board. Ms Cox advised that there are plans to develop a process for the Board to provide a regular deep dive into specific and significant health areas.

8 Next Meeting

The next meeting will be scheduled 8:30 – 11:30am on Thursday, 5 August 2021, at Westmead.

The meeting closed at 11:30am