

The Sydney Children's Hospitals Network (Randwick & Westmead)	
Date	Wednesday, 4 March 2015
Time	8.30am – 11.00am
Location	Prince of Wales Hospital
Membership	<p>SCHN Board members Professor Christine Bennett AO (Chair) Mr Richard Alcock (Deputy Chair) Professor Louise Baur AM Dr Abby Bloom Ms Joanna Capon OAM Mr Jack Ford Professor Adam Jaffe Ms Renata Kaldor AO Mr David Nott Professor Kim Oates AM Dr Robyn Shields AM Associate Professor Donna Waters Mr Jeremy Wright</p> <p>Ex officio invitees Dr Michael Brydon, (Acting Chief Executive, SCHN) Dr Christopher Webber (MSC – SCH representative) Dr Ralph Cohen (MSC – CHW representative) Professor Les White AM (NSW Health Chief Paediatrician) Vacant (Executive Medical Director, SCHN) Vacant (Director of Finance and Corporate Services, SCHN)</p> <p>Attendees Ms Maryanne Lynch (Manager Executive Services, SCHN Board Secretariat)</p>
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Minutes
Sydney Children's Hospitals Network Board Meeting
4 March 2015

ITEM	By Exception *	DESCRIPTION	RESPONSIBILITY	PAGE NO.	TIME	ACTION REQUIRED
1		Administrative Matters			5 min	For noting
		1.1 Welcome and Attendance	Chair	-		
		<p>1.1 Welcome and Attendance Chair</p> <p>The meeting was opened at 8.30am with Deputy Chair Mr Alcock providing apologies on behalf of Chair Professor Bennett who was meeting the Federal Minister of Health in Canberra. Other apologies from Professor Waters and Dr Shields were NOTED.</p> <p>The Board welcomed Professor Ralph Cohen, Medical Staff Council (the Children's Hospital, Westmead) representative. Professor Cohen provided a summary of his clinical experience as well as professional affiliations.</p> <p>The Board also welcomed Ms Maryanne Lynch, Board Secretariat and Manager Executive Services. Ms Lynch provided a summary of experience.</p> <p>Attendance: Mr Richard Alcock (Acting Chair), Dr Michael Brydon (Acting Chief Executive), Professor Louise Baur, Mrs Joanna Capon, Mr Jack Ford, Mrs Renata Kaldor, Mr David Nott, Emeritus Professor Kim Oates, Mr Jeremy Wright, Dr Abby Bloom</p> <p>Ex-Officio Invitees: Professor Les White, Professor Ralph Cohen, Dr Christopher Webber.</p>				
		1.2 Apologies	Chair	-		
		Professor Christine Bennett (Chair), Professor Adam Jaffe, Dr Robyn Shields, Professor Donna Waters				
		1.3 Declaration of Conflicts of Interest	Chair	-		
		No conflicts of interest were declared				
2		Minutes and Action Items				
		2.1 Review of Minutes of meeting held on 4 February 2015	Chair		5 min	For approval
		The minutes of the meeting held on 4 February 2015 were accepted with the amendment.				
		2.2 Matters Arising from Previous Meeting			10 min	For noting
		2.2.1 Review of Action Table	Chair			

			Chair's Report – Assessment of Board and Sub-Committee performance
			A review of the questionnaire was undertaken with Mr Alcock emphasising that all members take time to answer the questions where a response can be written as there is greater value in this particular section.
			Update on Bright Alliance
			Dr Brydon advised that the planning processes for Randwick are underway to address the Bright Alliance implications. A 10-20 year vision post Bright Alliance based on the work of Capital Insight Planning is now being considered. Similarly the way in which the hospital services will be distributed in the SCH footprint in 2018 is a medium term objective guiding immediate space for management decisions. Dr Brydon advised that \$20million from the SCHF has been committed over the next six years however this may limit donor support for other capital works during this phase.
			Charity registration status and fundraising structure at CHW
			Refer item 5.1
			Membership of Audit and Risk Management Committee
			Mr Nott provided an update on the selection of members for the Audit and Risk Management Committee advising that there were approximately 200 people on the pre-qualified list, with 20 of these identified for further review and discussion. Mr Nott provided a brief summary of the key people identified as perhaps being suitable and will discuss further with the Acting Chief Executive. Mr Alcock acknowledged, on behalf of the Board, the excellent work undertaken by Mr Nott and commended him on his efforts.
			Additional Board member to attend the Finance and Performance Committee
			Refer item 4.2
3			Strategic Priority in Focus
		3.1	Strategy Review
			Memory Strategy: Ms Cheryl McCullagh, Director Clinical Integration presented to the Board regarding the 'Memory' Strategy (refer slides). The key features of this presentation were: <ul style="list-style-type: none">- Aim to achieve connectivity within the SCHN- Understanding the 'gaps' in the patient record and how an investment in patient portals aim to deliver a personalised experience for the patient and a lifetime record, owned by patients- Evidence of positive outcomes arising from this strategy such as greater patient satisfaction, improved patient safety, lower readmission rates, better workflow, better

		<p>communication and fewer presentations.</p> <p>Discussion ensued regarding access for those who don't have a smart device. Ms McCullagh advised that evidence suggests that it is likely to be more cost effective in some cases to provide a smart device as part of treatment costs. Skype has also been opened up on the internet (SCHN), with no restrictions.</p> <p>Mr Alcock commented that the project is moving quite fast and queried funding requirements. Ms McCullagh advised that the project need is \$1.5 million per annum, noting that a return on investment won't be realised until most elements are in place. Ms McCullagh further advised that funding gap is being sought through government. If there were philanthropic opportunities; this would likely expedite the outcomes in safety and financially being realised sooner.</p> <p>Mr Alcock suggested that perhaps this project needs to be presented to potential funders. Ms McCullagh advised that there is a view to hold an event in November with Mr Alcock suggesting that hosting this needs to be looked at. Mr Ford suggested some key people who are interested in strategic planning.</p> <p>The general consensus of the Board is that this is very exciting, with general comments around the reduction of errors and cost savings as well as patient engagement, for example, with the Webcam in the neonatal unit, mothers can view babies at any time.</p> <p>Ms McCullagh advised that every bedside device would be enabled with a camera. For those important conversations with families</p> <p>The Board NOTED the presentation and thanked Ms McCullagh for the update and efforts to date.</p>
4		Matters for Decision
	4.1	Internal Audit Review
		<p>Dr Brydon advised that there have been four Expressions of Interest received with further review of these Expressions underway. A further update will be provided as it comes to hand.</p> <p>The Board NOTED this advice.</p>
	4.2	Amended Terms of Reference – Finance and Performance Committee
		<p>The Board NOTED that the Terms of Reference for this committee are being reviewed and for further discussion. Mr Alcock is keen to ensure that the objectives are apparent. The additional non-voting membership by Mr David Nott was supported and appreciated.</p>
	4.3	Endorsement of Paediatric Founders Deed
		<p>Dr Brydon reported that papers (Deed of Agreement) were circulated out of session; thanks to all who provided feedback and endorsement. Dr Brydon reported on a recent research capital announcement that appears to have pre-empted an announcement of this Paediatric agreement. This appears to reinforce the government's commitment to this major collaboration.</p> <p>Professor Baur queried the name 'Paediatric', suggesting that perhaps this is a name that may not resonate with a lot of people. Dr Brydon stated that the branding of this rested with the new entity.</p>

		<p>The Board NOTED this advice.</p> <p>Discussion ensued on how research capital funding priorities had already been established. Dr Brydon advised that he feels comfortable that this has been addressed adequately through the three founding members with the view to continue to develop this as the main entity is actioned. The Audit and Risk Management Committee issues have been addressed to his satisfaction.</p>
5		Matters for Discussion
	5.1	Options for Fundraising structure at The Children’s Hospital Westmead
		<p>Dr Brydon advised the Board that a short extension to maintain the charitable status of the Children’s Hospital at Westmead on the register is likely to be granted.</p> <p>Discussion ensued regarding the broader issues of fundraising and an opportunity to perhaps progress a bolder strategic initiative. A summary around terms that define governance arrangements was provided. It was understood that government would not necessarily be comfortable to move all fundraising to an independent foundation.</p> <p>Dr Brydon commented that the funding raised from donations need to ‘value add’ not just support fundamental services. As the Health expenditure dollar comes under increasing pressure in years ahead internationally it will potentially be more challenging for systems to direct such community support towards those value add purposes.</p> <p>Further discussion continued with it agreed that any approach must be undertaken with absolute due diligence.</p> <p>It was AGREED that a strategy needs to be determined in managing this matter.</p> <p>Action: Dr Brydon to provide an update on progress at the next meeting.</p>
	5.2	Future funding – Paediatric Medical Research Facilities
		<p>See item 4.3 above.</p> <p>A separate query was raised in relation to funding announcements, (p. 26), which would see a relocation of Research offices at SCH Randwick; whether there be an impact on Bright Alliance. Dr Brydon advised of discussions with the Ministry. \$10million is contingent on the current government continuing to hold office but positively reflects their intention to fully bridge the gap in the overall cost of the three floors of Bright Alliance.</p>
	5.3	Randwick Health Campus – Master Planning
		<p>Dr Brydon provided an overview of Randwick Master Planning noting he was of the opinion that the SCHN has not been adequately engaged in the process.</p> <p>Dr Brydon advised that the South East corner of the block (the Community Health Centre) where Ronald McDonald House is also located is of particular concern. Discussions have</p>

		<p>been apparently occurring for about a year but there has been little engagement around this with the Network.</p> <p>Dr Brydon recommended that the Board Chair continues to liaise with her counterpart in SESIAHS to discuss this and he continue to have further discussions with the CE of SESIAHS.</p> <p>Discussion around ownership and such arrangements ensued with members suggesting the Network be more proactive in such matters.</p> <p>The Board NOTED this advice.</p>					
		5.4	Outcome of ACHS Accreditation at The Children’s Hospital Westmead				
			<p>Dr Brydon advised the Board of the outstanding assessment outcome reported by the Surveyors noting that overall, accreditation went very well; with there being no significant or major recommendations. Dr Brydon advised that there were many merit acknowledgements.</p> <p>The Board NOTED this advice.</p>				
6		Matters For Information					
		6.1	BMJ Article – Why Australia needs a Medical Research Fund				
			<p>The Article included in the Business Papers was NOTED by the Board with an expression of appreciation that a great deal of work has gone into putting such papers forward.</p>				
		6.2	Appointment of Medical Staff Council Chair – The Children’s Hospital at Westmead				
			Refer item 1.1.				
7		Standing Reports					
		7.1	Chair’s Report	Chair	-	5 min	For noting
			<p>Mr Alcock advised that there is no Chair’s Report this meeting due to the apologies of the Chair. The Board NOTED this advice.</p>				
		7.2	Chief Executive’s Report	Chief Executive		5 min	For noting
			<p>Dr Brydon provided a verbal update to complement the report circulated as part of the Business Papers. Of note in particular were the following matters:</p> <ul style="list-style-type: none"> - General Paediatric Surgical status: <p>The Industrial Relations Commission has concluded its business; there is no further action to be taken by the IRC at this point. An additional VMO has been appointed. At present this is as a locum until a longer term appointment is made. This is expected to help achieve surgical waiting list targets.</p> <p>Professor Cohen commented on behalf of the Medical Staff Council, that due consideration was required with regard to this matter and hoped that there would be a more collaborative</p>				

approach around the issues under consideration.

Mr Alcock advised members that in relation to operational matters such as this, the Board's role is to be informed of such matters via the CE, giving due respect to normal management processes.

- **Cannabis Trial:**

The number of enquiries from the public has slowed somewhat but this still remains a significantly high profile research proposal.

- **Director Finance and Corporate Services:**

The selection process has almost been completed with negotiations with the preferred applicant underway at present.

- **QSA visit:**

A recent visit from the Clinical Excellence Commission provided some observations around how things could be done differently around patient care with the overall experience being quite positive. No significantly negative issues were raised by the CEC.

- **CETL:**

The first intake of leaders attending the Clinical Leadership Program has gone well with participants reporting that there has been significant realisation of the benefits and excellent interaction across the two sites.

- **Capital Works:**

The amount listed in the CE Report for SCHR should be \$1.6million, not \$106million as reported. The primary body of work at present is The Children's Hospital at Westmead generators.

- **Fundraising Events:**

Discussions ensued around fundraising events with discussion around the Ronald McDonald House Telethon and broadcasting rights. The Board suggested that a clear and well documented relationship be determined with a preferred broadcaster in the future.

Discussion ensued around a number of other topics including:

- **Transformative Care Team:**

Mr Alcock reminded members that it was noted at the last meeting that a few agreed measures would be achieved and that there will be a session in a few months time to see how this is progressing.

- **Quality Meeting:**

In the absence of Professor Waters, it was NOTED that the Quality Plan has progressed well with some more work required on the transformational imperatives as envisaged.

Mr Wright suggested that a patient story be presented each month to help keep the Board focussed and to serve as a reminder of what is important. The Board AGREED and a patient story to be sourced for the April meeting.

		7.3	SCHN Performance Report				
			<p>The performance report was NOTED.</p> <p>Ms Bloom queried whether the matter of creditors was an issue for the Network. Dr Brydon advised that issues around January are isolated and that the Network is currently very comfortable with its position.</p> <p>Dr Brydon advised members that the matter of Pathology services on the Westmead Precinct will require addressing as this will be included in Stage One of the Precinct development noting that the approach to this matter must be collaborative between SCHN and NSW Health Pathology. Professor Baur agreed with this notion, suggesting that clinicians and clinical leaders need to be engaged and involved in the process as being part of this would ensure that any proposals are fit for our purpose, highlighting this as an opportunity</p> <p>A suggestion that a presentation on Capital Works be undertaken was NOTED with Dr Brydon suggesting that this be held once the new Director Finance and Corporate Services has settled into their role. The topics to be covered as part of this presentation were also NOTED.</p>				
8		Board Sub-Committee & Network Committee Minutes					
	*	8.1	Finance and Performance Committee				
			NOTED.				
	*	8.2	Health Care Quality Committee				
			NOTED.				
	*	8.3	Medical and Dental Appointment Advisory Committee				
			<p>NOTED. Dr Webber advised of some errors with the table presented and asked this be presented to the next meeting.</p> <p>There was some discussion around the preferred timing of draft minutes versus the accuracy of endorsed minutes. The Acting Chief Executive was asked to consider how to better meet both objectives.</p>				
9		Details of Next Meeting					
		<p>Date and Location Wednesday, 1 April 2015 Boardroom, Level 4 The Children's Hospital at Westmead</p>		<p>Strategic Focus for Future meetings April 2015 – Partnerships and Networks May 2015 – Audit and Risk Management June 2015 - Financial sustainability</p>			