

Board Meeting	Sydney Children's Hospital Network Board
Date	Wednesday, 4 December 2019
Time(s)	8am to 9am – Meeting with Ms Elizabeth Koff, NSW Health Secretary 9am to 10.15am - NED Discussion 10.15am to 10.30am – Break 10.30am – 12.30pm - SCHN Board Meeting 12.30pm – 1pm - Lunch 1pm – 2.30pm - SCHN Board Meeting 2.30pm – Meeting close
Location	Boardroom, Level 9, Bright Alliance, Sydney Children's Hospital, Randwick
Membership	<p>SCHN Board members Mr David Nott (Acting Chair), Professor Donna Waters (Deputy Chair), Professor Louise Baur AM, Dr Abby Bloom, Ms Joanna Capon OAM, Mr Jack Ford, Ms Jane Freudenstein, Dr Elizabeth McEntyre, Mr Bruce MacDiarmid, Professor Kim Oates AM, Mr Jeremy Wright Professor Les White AM</p> <p>Ex officio invitees Adjunct Associate Prof Cheryl McCullagh, Acting Chief Executive, Dr Susan Russell (MSC SCH Representative), Dr Kathryn Carmo (MSC CHW Chair), Dr Mary McCaskill (Executive Medical Director, SCHN), Mr Colin Murray (Director of Finance and Corporate Services, SCHN), Dr Matthew O'Meara (NSW Chief Paediatrician)</p> <p>In attendance Mr Duncan Makeiq (Board Chair, Sydney Children's Hospital Foundation)</p>
Secretariat:	Network Manager Executive Services Phone: (02) 9845 3637 Mobile 0417 561 273

Item	Description	Responsibility	Page No.	Time (mins)	Action required
1.0	Administrative matters			5mins	

1.1 Acknowledgement of Country

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1.2 Attendance and Apologies

A/Chair

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Present (Members): Mr David Nott (Acting Chair), Professor Donna Waters (Deputy Chair), Dr Abby Bloom, Ms Joanna Capon, Mr Jack Ford, Ms Jane Freudenstein, Dr Elizabeth McEntyre, Mr Bruce MacDiarmid, Professor Kim Oates, Mr Jeremy Wright, Professor Les White, Professor Louise Baur

Present (Invitees): Adjunct Associate Prof Cheryl McCullagh (Chief Executive), Dr Mary McCaskill (Executive Medical Director, SCHN), Mr Colin Murray (Director of Finance and Corporate Services, SCHN)

Item 3.3 - Professor Chris Cowell (Director of Research), Professor Ian Alexander

Item 5.1 - Mr Mick Scarcella (SCHN Aboriginal Health Manager), Ms Christie Breen (Clinical Program Director) and A/Prof Karen Zwi (Clinical Program Director)

Apologies (Invitees): Dr Susan Russell (MSC SCH Representative), Dr Kathryn Carmo (MSC CHW Chair), Mr Duncan Makeig (Board Chair, Sydney Children's Hospital Foundation), Dr Matthew O'Meara (NSW Chief Paediatrician)

1.3	Declaration of Conflicts of Interest	A/Chair			
	No conflicts of interest were raised.				
2.0	Administrative matters				
2.1	Review of Minutes of meetings held:	A/Chair			
	6 November 2019				
	The draft minutes were noted; the review was held over to the next meeting.				
2.2	Matters Arising from Previous Meeting				
	- Review of Action Table	A/Chair / CE			
	The record of action items was noted.				
3.0	SCHN Chair and CE Update				
3.1	Chair's Report	A/Chair			
	<p>The Acting Chair noted the NSW Health Secretary had met with the Board prior to the commencement of the meeting. The discussion covered matters of concern to the Board, including the pending decisions regarding SCHN governance and the delivery of cardiac surgery.</p> <p>The Acting Chair noted that Mrs Joanna Capon's tenure as a Board member ends 31 December 2019. Mrs Capon's outstanding service as a member of the Board of both SCHN and The Children's Hospital at Westmead, as well as a member of other Committees was acknowledged with the thanks and appreciation of the Board. Mrs Capon's extraordinary continuing contribution to the arts program at The Children's Hospital at Westmead was also commended.</p>				
3.2	Chief Executive Report				

	a) Governance Review and Cardiac Services				
	The provided briefing was reviewed and noted. The expected delivery of the review of State-wide Paediatrics Services in late December was noted; it is anticipated that outcomes and recommendations will be communicated early in the new year.				
	b) SCHN Executive Staffing Update				
	The provided briefing was reviewed and noted.				
3.3	Research Presentation – Advanced Therapeutic Centre and Viral Vector Lab	CE / DoR			
	<p>Professors Chris Cowell and Professor Ian Alexander were welcomed to the meeting. A presentation on the opportunities represented by the development of both the advanced Therapeutic Centre and Viral Vector Lab was provided. The future clinical impacts of these developments was highlighted as well as the research and commercial opportunities.</p> <p>Discussion noted the support of the NSW Government in the form of capital investment in reaching this stage of the development and highlighted the importance of developing the governance structures with partner organizations as the project develops. It was noted that the Board will need to be regularly updated on progress.</p>				
4.0	Finance / Infrastructure / Systems & Processes				
4.1	Finance and Performance a) Chair's Report – Finance and Performance Committee (including Revised Terms of Reference for endorsement)	Chair – F&PC / DFCS			
	<p>Performance Report</p> <p>The financial and activity results for October 2019 were reviewed. Activity was 6.6% above target for the period. SCHN remains over budget for expenditure, with Employee Related Expenses continuing as the primary driver.</p> <p>The Acting Director of Finance outlined that the anticipated low activity period (extended from the standard three to six weeks) over December and January is a key opportunity to address some of the expenditure levels. Elective activity will be reduced and a program to maximize leave taken over these weeks has occurred. This reduction in elective surgery numbers follows significant planning to ensure that patient care is maintained. Also, no new staff will commence in this period unless there are exceptional circumstances.</p> <p>Revised Terms of Reference</p> <p>The Terms of Reference for the Finance and Performance Committee have been revised, to correct to the status of Board members on the committee as members rather than the current status as observers.</p> <p>Action / Decision: The proposed amendments to the Terms of Reference were endorsed.</p>				
	b) Service Agreement –Letter issued with qualifications				

The 2019 – 2020 Service Agreement has been signed and issued to the Ministry with qualifications. was noted. A response from the Ministry has not yet been received,

c) MoH Correspondence - Quarter 1 Financial Results and 2019/20 Efficiency Improvement Plan

The received correspondence was noted. The efficiency plans will be monitored by the Executive and through the Finance Committee and will be reported to the Board throughout 2020.

4.2 Infrastructure
a) Chair's Report Capital Works Subcommittee

The next meeting of the Capital Works Subcommittee will be held on 12 December. The operating costs of the opening of the ASB will be included on the agenda.

b) Redevelopment Update – SCH
c) Redevelopment Update – CHW

CE / DFCS / DCO

The Chief Executive advised that recruitment for the team to support the next phase of the redevelopments is well underway, with the expanded team expected to be in place early in 2020. It was noted that the exception to this is the previously discussed Director position, which remains on hold pending decisions regarding Network governance.

Discussion focussed on identifying the reporting requirements to support appropriate Board oversight and direction. Key areas were confirmed as:

1. Commissioning of CHW Stage One, particularly the operating expenses. This will be in conjunction with the oversight provided by the Capital Works Committee and Finance and Performance Committee
2. The wider precinct planning and engagement on both campuses.
3. Strategies to ensure that sustainability is integrated into all stages of the planning and build.

It was noted that the Capital Works Subcommittee may need to meet more frequently as the opening of Stage One approaches.

The positive engagement in the redevelopment planning meetings with Health Infrastructure as well as the Master planning workshops was noted. It was requested that the outcomes of the Master planning workshops be presented to the Board as this develops.

Action / Decision:

- **The reporting framework for the Redevelopment program will be developed over coming months to ensure appropriate governance is supported.**
- **The outcomes of the Master planning process will be presented to a future meeting**

4.3 Risk Management

Noting

- a) SCHN Operational Risks
- b) SCHN Strategic Risks

CE / DFCS

The provided risk reports were considered. The recent support of the SCH Foundation for the purchase of equipment will remove several of the equipment-related risks from the register once purchases are finalised, however there remains a significant amount of equipment that is at or near the end of use.

The current uncertainty regarding governance models and service delivery were acknowledged to be exacerbating many current risks, however there are mitigation strategies in place. It was noted that the "Residual" rating is the status post mitigation and the current level of the risk.

The Chief Executive reported that recent feedback obtained through the SCH Foundation's reputation assessment process has identified little to no impact on the reputation of SCHN facilities in the wider community from the media attention over the past twelve months and that high levels of trust have been retained. Further information from this review will be provided to a future Board meeting.

Governance and reporting structures and reporting in the areas of governance, compliance and risk management was acknowledged as requiring review as part of any restructure that may arise from the NSW Health decisions regarding SCHN.

Action / Decision:

- **Presentation / Report on SCHN public reputation to be provided to an upcoming meeting**
- **Governance and reporting structures in the areas of governance, compliance and risk management to be reviewed as part of any restructure that may arise from the NSW Health decisions regarding SCHN.**

5.0 Strategic Focus - Aboriginal Health

5.1 Implementation of "Over Our Track" – SCHN Aboriginal Health Strategic Plan

CE/ DCO

Mr Mick Sarcellas (SCHN Aboriginal Health Manager), Ms Christie Breen (Clinical Program Director) and A/Prof Karen Zwi (Clinical Program Director) were welcomed to the meeting.

The current health outcomes of the Aboriginal people were outlined; with an emphasis on the importance of early interventions to change long term outcomes. The negative health indicators for Aboriginal people are identifiable in current SCHN statistics, which show a higher rate of preventable admissions (which are often more acute) and higher rates of families leaving against medical advice.

There is evidence to support that the interventions which work are based around investment in early childhood, a holistic approach to care and engagement with that community in the areas of values, culture and beliefs. An environment where all staff have a strong desire to support Aboriginal families underpins the provision of empathic care to all families.

The SCHN Aboriginal Health plan "Over our Tracks" includes strategies in the areas of :

- People and Culture
- Aboriginal I workplace
- Health outcomes

Measures have been developed to support an increased focus on indicators that drive health outcomes and a dashboard will be launched soon to make this data readily available so as it can better inform actions and decisions.

There has been some good progress to date which was noted to include:

- Creation of an Aboriginal health Unit
- Creation of the Aboriginal Health manager position
- Working with SCHN researchers to further develop meaningful KPI's
- Significant engagement in the SCHN redevelopments aim at creating culturally appropriate spaces
- A Community Advisory Committee has been formed, commencing at CHW and will expand to SCH

The development of recruitment strategies to better attract and retain Aboriginal staff to SCHN is a significant focus in the next stage of the plan. This will be coupled with improved support for existing Aboriginal staff, such as via the Aboriginal Health Support Network which was established this year. A communication strategy for the strategic plan is also under development.

Discussion noted the importance of resourcing to enable this strategy to be achieved; some discussions have occurred already with the SCH Foundation in this regard.

The Acting Chair emphasised the commitment of the Board to supporting SCHN to effectively implement the strategic plan. Updates of progress across the coming year were requested to be provided.

Action: Monitoring of the implementation of the SCHN Aboriginal Health strategic plan to be reported regularly to the SCHN Board

Domain Updates

6.0 Safe, excellent child and family centred care

6.1 Patient Story

CE

The historical role of the Hospitals in the poor treatment of Aboriginal families and the importance of current actions to address this was highlighted by a story recently reported in the media.

The role the children's hospitals had in the removal of Aboriginal children was discussed and the impact that this continues to have on community perception acknowledged. The Chief Executive noted that CHW has a written apology displayed and this is also being arranged for SCH.

6.2 KPI's against Service Agreement

CE

The performance results were noted, with comments on some of the categories being:

- The "Did not Wait" category in the Emergency Department results were highlighted as an area of focus for the Network. It was noted that the rate has remained steady despite an increase in activity.
- It was noted that the data reflecting that hospital acquired medication complications are increasing may be inaccurate due to some coding errors; this is under review and clarification will be provided. ACTION ITEM needed
- The "process" focussed nature of the KPI's reported was raised; with discussion querying whether more quality driven measures are available or under consideration. The reported KPI's are those that form the basis of the Service Agreement; it was noted that at a department level there is a higher focus on more subjective quality measures.
- Incremental improvement in the completion of performance appraisals was reflected in the results. Strategies implemented have increased flexibility in the means of undertaking appraisals and additional support provided to managers to have the skills to undertake the discussions. The increased importance of the appraisal discussion and feedback for staff in the current climate of organisational uncertainty was emphasised. Discussion reflected continuing concern that despite the targets and monitoring, there has not been a significant shift in compliance and considered whether there is a need to take a fresh look at the fundamentals of the process to identify the barriers. The means of setting expectations and holding managers (and indeed the staff themselves) accountable for their responsibilities to staff in areas such as this needs to further development and mechanisms to increase engagement.

6.3	Chair's Report - Health Care Quality Committee	Co-Chairs – HCQC			
	<p>A proposal was considered to trial the merging of the Health Care Quality Committee with the Safety, Quality and Incident Committee due to the significant duplication between these committees. A trial period of six months was agreed. It was noted that Prof Waters and Mr Wright will continue to co-chair the merged committee.</p> <p>Action / decision: The proposal to trial merging the Health Care Quality Committee and the Safety, Quality and Incident committee was supported.</p>				
6.4	Clinical Operations Report	CE			
	<p>The Director of Clinical Operations reported that despite increased activity KPI's have remained fairly stable; however some impact in performance indicators is expected to be evident in the November data.</p> <p>Patients leaving the Emergency Department without receiving care continues occur at an undesirable rate. It was queried whether there is evidence of risk of harm for these patients. A study previously undertaken indicated that the risk was low; however an adverse outcome is always a possibility in this circumstance. Further work in this area is needed to develop the appropriate strategy to address.</p>				
6.5	Clinical Services Direction	CE			
	<p>The provided report was noted. This ongoing body of work is progressing well and will continue through into 2020. Participants are being challenged to think about future innovations rather than basing planning on an expansion of current services.</p>				
6.6	Clinical Integration and Information Services Update	CE / DCI			
	<p>Electronic Medication Management (EMM) implementation at Sydney Children's Hospital is nearing completion. The program has proceeded well, with a strong implementation and support model. It was noted that the Memory strategy is nearing completion, which is a significant achievement for the Network.</p>				
6.7	Clinical Council – Chair's Report	Chair – CC			
	<p>The provided report was noted. Mrs. Capon advised that she had attended the last meeting of the Council and strongly recommended that other members attend as it was an excellent opportunity to engage with clinicians and increase mutual understanding. Rotational attendance by members was recommended to allow all members to attend a session. It was noted that this is addition to the previously agreed addition of Prof White as a member of the Clinical Council in 2020.</p> <p>Action: The 2020 Clinical Council to be distributed to members and attendance when available encouraged.</p>				
7.0	People and Culture / Education				
7.1	Work Health and Safety Monthly Report	CE / DoW			
	<p>A reduction in the reported instances of bullying numbers was noted.</p> <p>There is an increase in the reporting of mental health stressors; this data is the number of incidents rather than the rate, and therefore is impacted by increases in the number of staff. The percentage of these that move to claims remains relatively low. Discussion highlighted that these data would be more meaningful as an incident rate based on the proportion of staff would be more meaningful than the current reporting format.</p> <p>Action: Reporting to be reviewed to provide the incident rate rather than the number reported.</p>				
7.2	Appraisal Compliance Report	CE / DoW			

	The provided report was noted.				
7.3	Director's Report – Medical and Dental Appointments Committee	CE / DCG			
	The provided report of approved appointments of senior medical and dental staff was noted.				
7.4	International Year of the Nurse and Midwife	CE / DoNME			
	2020 is the International Year of the Nurse; this is the first time that a health profession has been recognised in this way. It was noted also that it will be the 25 th anniversary of the opening of The Children's Hospital at Westmead.				
7.5	Safety Pause	CE	-		
	NA for the December meeting.				
8.0	Partnerships and Networks				
8.1	Chair's Report – Stakeholder Engagement and Communications Committee	Chair – SECC / CE			
	The SECC Chair reported that the Terms of Reference have been revised to better reflect internal stakeholders in the membership and to account for the need for flexibility in the Committee's scope.				
8.2	Communications Update	CE			
	The provided report was noted.				
8.3	Schedule of Upcoming SCHN Events	CE			
	The scheduled of upcoming events was noted with members invited to attend as available.				
9.0	Research				
9.1	Research Update	CE			
	The provided report was reviewed and noted. Significant recent successes in the securing of grants was noted. The Board commended the consistent high performance of SCHN's research directorate under the leadership of Prof Cowell.				
10.	Correspondence for Received				
10.1	Letter to SCHN Board Chair - Advocacy for Juvenile Arthritis		-		
	The received correspondence was noted and the advice of the Chief Executive requested. Discussions on this matter are occurring with NSW Health in the context of the range of clinical priorities for SCHN. Action / decision: A letter of response is to be prepared for signature by the Acting Board Chair.				
10.2	Letter to SCHN Board Chair – Mr John Dunlop, Chair – MDAAC		-		
	The Board endorsed the continuance of Mr Dunlop as the non- medical appointee and Chair of the Medical and Dental Appointment Advisory Committee as well as the renewal of the appointment of Professor Adam Jaffe as the Board's medical appointee on the Committee. The service of Mr Dunlop as the long servicing Chair of the MDAAC was acknowledged with appreciation .				

Action / Decision: *The continuation of Mr Dunlop as the Board-appointed chair of the MDAAC and Prof Adam Jaffe as the Board appointment medical member was endorsed. Letter confirming these appointments are to be prepared for signature by the Acting Board Chair.*

11.0 For Noting

11.1 Subcommittee Minutes

The Minutes of Subcommittees of the Board were noted.

12.0 Business without notice

No business without notice was raised.

13.0 Next meeting

The next meeting of the Sydney Children's Hospitals Network Board will be held Wednesday 5th February 2020, Bright Alliance Boardroom, Level 9, Sydney Children's Hospital, Randwick

There being no further business, the meeting closed.